

Appendix B. Survey instrument

OMB No. 0584-0665

*Survey of Supplemental Nutrition Assistance Program (SNAP)
Employment and Training (E&T) Case Management*

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SURVEY OF SNAP E&T CASE MANAGEMENT

SNAP Agency Survey

April 2020

Public Burden Statement

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Introduction: Program overview and section assignments

Welcome to the SNAP E&T case management survey! This survey focuses on State or territory policy, guidance, and experiences with SNAP Employment and Training (E&T) case management. The goal of the survey is to collect information about the policies and guidance your agency provides at the State- or territory-level. Although we will ask you some questions about how SNAP E&T is implemented at the local-level in general, the aim is not to capture the full depth and breadth of how case management is implemented across your State or territory.

This survey is part of an exploratory study sponsored by the Food and Nutrition Service (FNS) to better understand how States and territories have implemented the new case management requirement. This survey is not part of any monitoring or auditing activities by FNS. The results of the survey will be used for research purposes only. Most information collected about each State in the survey will be publicly reported. However, information will not be attributed to survey respondents, and information about the respondents will not be made public.

It will take approximately 45 minutes to respond to this survey; this includes the time it will take to read instructions, gather resources and search existing data sources. The survey includes an introductory section that will take about 6 minutes to complete and three main sections that will take about 13 minutes each to complete: (1) case management, (2) assessments, and (3) participant reimbursements and support services.

You may complete all three main survey sections yourself or assign other agency staff to complete sections 1, 2, or 3. In the introductory section, you will be able to provide contact information for the person within your agency who is best able to complete each of the other sections. We will send notifications to those people to ask them to complete their assigned sections.

Personally identifiable information (PII) will not be used to retrieve survey records or data.

For more information

If you have any questions or concerns about the survey, please contact the Mathematica study team at [fill study email address] or the FNS project officer, Kristen Corey, at Kristen.Corey@usda.gov.

Thank you in advance for your assistance in completing this survey.

First, please answer three background questions about your agency's SNAP E&T program.

ALL

i1. Which of the following populations does your SNAP E&T program target?

PROGRAMMER: CODE ONE PER ROW

Select one per row

Population	Targeted State- or territory-wide	Targeted in some counties or by some providers	Served but not targeted	Not served
a. Work registrants	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
b. Able-bodied adults without dependents (ABAWDs)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
c. Any SNAP participant	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
d. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">(STRING 100)</div>				

ALL

i2. Which SNAP E&T components do you currently offer in your State or territory?

Select all that apply

- ☐ Supervised job search.....1
- ☐ Job search training2
- ☐ Education programs (includes basic/foundational skills instruction; career/technical education programs or other vocational training; English language acquisition; integrated education and training/bridge programs; and work readiness training)3
- ☐ Self-employment training4
- ☐ Work-based learning (includes internship; on-the-job training; subsidized employment; and apprenticeships)5
- ☐ Work experience6
- ☐ Workfare.....7
- ☐ Job retention.....8
- ☐ Other (specify).....99

Specify (STRING 250)

ALL

i3. Which entities currently provide SNAP E&T components in your State or territory?

Select all that apply

- ☐ Local SNAP office.....1
- ☐ Community college.....2
- ☐ Workforce Innovation & Opportunity Act (WIOA) agency or other
Department of Labor–funded workforce programs.....3
- ☐ Community-based organization.....4
- ☐ Adult Basic Education (ABE) provider.....5
- ☐ Other (specify).....99

Specify (STRING 250)

ALL

- i4. Next, please review the topics covered in each of the three SNAP E&T case management survey sections in the table below and indicate who will respond to each section. You can indicate that you will respond to the questions in the section yourself or designate someone else to respond to these sections.

You may designate only one person per section, so please select the person who is best suited to answer questions related to each section's topics. Section respondents may ask other SNAP agency staff to assist them with answering questions, if needed.

Please designate only State-level or territory-level SNAP staff to complete survey sections.
Please do not designate local office or provider staff; we are seeking a State-level perspective.

	Topics covered	Staff who might be able to respond	Select if you want to respond to this section	Select if you want to designate someone else to respond to this section
a. Section 1: Case management	<ul style="list-style-type: none"> • Policy and guidance on case management for SNAP E&T participants • Entities and staff responsible • Case management frequency, format, mode, services, and techniques • Caseload size • Number served • Implementation and response to 2018 Farm Bill case management requirement • Please note: In this section, you will be asked to provide data on caseload size and the number of E&T participants who attended a case management meeting in FY 2020. 	<ul style="list-style-type: none"> • SNAP director • SNAP E&T director • SNAP policy staff 	1 <input type="radio"/>	2 <input type="radio"/>
b. Section 2: Assessments	<ul style="list-style-type: none"> • Policy and guidance on assessments for SNAP E&T participants • Types of assessments • Entities and staff responsible • Expected assessment timing and length • Assessment tool(s) used • Selection and use of assessments 	<ul style="list-style-type: none"> • SNAP director • SNAP E&T director • SNAP policy staff 	1 <input type="radio"/>	2 <input type="radio"/>
c. Section 3: Participant reimbursements and support services	<ul style="list-style-type: none"> • Policy and guidance on participant reimbursements and support services • Types of available participant reimbursements and support services • How participants are informed of reimbursements and other supports • Caps and qualifications • Share of participants receiving reimbursements • Please note: In this section, you will be asked to provide data on the total amount paid in participant reimbursements and the total number of participants receiving reimbursements 	<ul style="list-style-type: none"> • SNAP director • SNAP E&T director • SNAP policy staff • SNAP financial staff 	1 <input type="radio"/>	2 <input type="radio"/>

PROGRAMMER

DISPLAY I5/I6/I7 IF RESPONDENT INDICATED SOMEONE ELSE
WOULD ANSWER THOSE SECTIONS IN I4

SECTION 1: CASE MANAGEMENT

I4A=2

- i5. **Please provide contact information for the person within your agency best suited to complete Section 1 on case management.**

First Name: (STRING 100)

Last Name: (STRING 100)

Agency: (STRING 100)

Title: (STRING 100)

Email address: (STRING 100)

Telephone number: (STRING 100)

Additional telephone number: (STRING 100)

SECTION 2: ASSESSMENTS

I4B=2

- i6. **Please provide contact information for the person within your agency best suited to complete Section 2 on assessments.**

First Name: (STRING 100)

Last Name: (STRING 100)

Agency: (STRING 100)

Title: (STRING 100)

Email address: (STRING 100)

Telephone number: (STRING 100)

Additional telephone number: (STRING 100)

SECTION 3: PARTICIPANT REIMBURSEMENTS AND SUPPORT SERVICES

I4C=2

- i7. Please provide contact information for the person within your agency best suited to complete Section 3 on participants reimbursements and support services.**

First Name: (STRING 100)

Last Name: (STRING 100)

Agency: (STRING 100)

Title: (STRING 100)

Email address: (STRING 100)

Telephone number: (STRING 100)

Additional telephone number: (STRING 100)

SECTION 1: CASE MANAGEMENT

This section of the survey asks general questions about your State or territory's approach to case management for SNAP E&T participants. You also will be asked to provide data on caseload size and the number of E&T participants who attended a case management meeting in FY2020.

If you are unsure about any of your answers, please consult with other SNAP staff as necessary. For questions that ask about how policy is implemented by local offices or providers, please answer to the best of your understanding.

What do we mean by case management? Case management might look different across different agencies. By case management, we mean those services and supports provided directly to SNAP E&T participants by a case manager or other direct-service staff person after participants are referred to E&T. This does not include providing activities—such as workshop instruction, education or training, or supervised job search or job placement assistance. Case management activities often include:

- Assessing participants
- Creating individualized services, employment, or development plans
- Linking participants to participant reimbursements or other support services
- Monitoring progress and program requirements
- Coordinating with service providers

“Case manager” is a general name and might include staff with other titles such as counselors, coaches, or navigators.

ALL

A1. What entities are currently responsible for providing SNAP E&T case management services in your State or territory?

Select all that apply

- ☐ Local SNAP office.....1
- ☐ Community college.....2
- ☐ Workforce Innovation & Opportunity Act (WIOA) agency or other
Department of Labor–funded workforce programs.....3
- ☐ Community-based organization.....4
- ☐ Adult Basic Education (ABE) provider.....5
- ☐ Other (specify).....99

Specify (STRING 100)

CASE MANAGEMENT FREQUENCY, MEETING STRUCTURE, AND MODE

The next questions ask about whether your agency provides either policy or guidance to local SNAP offices or E&T providers on how to provide case management to SNAP E&T participants.

By policy, we mean your agency's written rules on how to properly execute the SNAP E&T program that are shared with local SNAP offices or E&T providers via policy directives or contracts.

By guidance, we mean supplemental, non-binding information your agency provides to local SNAP offices or E&T providers in writing or verbally to help them implement the SNAP E&T program.

ALL

A2. Does your agency provide policy or guidance on how frequently case managers must communicate with SNAP E&T participants?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A2 = YES (1, 2, 3)

IF A2=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT FREQUENCIES"

A2a. How frequently does policy or guidance specify that case managers should communicate with SNAP E&T participants?

Select one only

- ☐ Multiple times per week.....1
- ☐ Weekly.....2
- ☐ Monthly.....3
- ☐ Quarterly.....4
- ☐ As needed.....5
- ☐ Other frequency (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding how frequently case managers should communicate with SNAP E&T participants.....6
- ☐ [DISPLAY IF A2=3: Policy and guidance specify different frequencies].....7

IF A2A=7 ("POLICY AND GUIDANCE SPECIFY DIFFERENT FREQUENCIES")

A2b. How do policy and guidance on how frequently case managers should communicate with SNAP E&T participants differ from one another?

(STRING 250)

ALL

A3. Does your agency provide policy or guidance on the meeting structure for case management meetings (for example, one-on-one sessions, group sessions, team meetings) with SNAP E&T participants?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A3 = YES (1, 2, 3)

IF A3=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT MEETING STRUCTURES"

A3a. Which meeting structure does policy or guidance specify for case management meetings?

Select all that apply

- ☐ One-on-one sessions.....1
- ☐ Group sessions with multiple participants.....2
- ☐ Team meetings with single participant, case manager, and other professionals.....3
- ☐ Other structure(s) (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in the structure for case management meetings4
- ☐ [DISPLAY IF A3=3: Policy and guidance specify different meeting structures]5

IF A3A=5 ("POLICY AND GUIDANCE SPECIFY DIFFERENT MEETING STRUCTURES")

A3b. How do policy and guidance on case management meeting structure differ from one another?

(STRING 250)

ALL

A4. Does your agency provide policy or guidance on the modes of communication case managers use to conduct case management (for example, in-person or telephone meetings) with SNAP E&T participants?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A4 = YES (1, 2, 3, 4)

IF A4=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT MODES OF COMMUNICATION TO CONDUCT CASE MANAGEMENT"

A4a. Which mode or modes of communication does policy or guidance specify case managers use to conduct case management with SNAP E&T participants?

Select all that apply

- ☐ In-person meetings in the case manager's office.....1
- ☐ In-person meetings in the participant's home.....2
- ☐ In-person meeting in a community location.....3
- ☐ Telephone.....4
- ☐ Videoconferencing.....5
- ☐ Text messages.....6
- ☐ Online chat software.....7
- ☐ Email.....8
- ☐ Other mode(s) (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in the modes of communication case managers use to conduct case management.....9
- ☐ [DISPLAY IF A4=3: Policy and guidance specify different modes of communication to conduct case management].....10

IF A4A=10 ("POLICY AND GUIDANCE SPECIFY DIFFERENT MODES OF COMMUNICATION TO CONDUCT CASE MANAGEMENT")

A4b. How do policy and guidance about the modes of communication case managers use to conduct case management differ from one another?

(STRING 250)

ALL

A5. Does your agency provide policy or guidance on the maximum number of SNAP E&T participants assigned (maximum caseload size) to each case manager?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A5 = YES (1, 2, 3)

IF A5=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE INDICATE DIFFERENT MAXIMUM CASELOAD SIZES"

A5a. What is the maximum caseload size indicated by policy or guidance?

MAXIMUM CASELOAD SIZE

(RANGE 1-1000)

- ☐ [DISPLAY IF A5=3: Policy and guidance indicate different maximum caseload sizes] 1

IF A5A=1 ("POLICY AND GUIDANCE INDICATE DIFFERENT MAXIMUM CASELOAD SIZES")

A5b. How do policy and guidance about maximum caseload sizes differ from one another?

(STRING 250)

ALL

A6. Does your agency provide policy or guidance on whether SNAP E&T participants work with just one case manager or with multiple case managers simultaneously?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A6 = YES (1, 2, 3)

IF A6=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE DIFFER ON WHETHER SNAP E&T PARTICIPANTS WORK WITH JUST ONE OR MULTIPLE CASE MANAGERS"

A6a. What is the policy or guidance on whether SNAP E&T participants work with just one or multiple case managers?

Select all that apply

- ☐ Participants work with one case manager at a time who is assigned to them.....1
- ☐ Participants work with one case manager at a time but do not have an assigned case manager (for example, they meet with any case manager who is available when they need case management).....2
- ☐ Participants work with multiple case managers who fill different functions at the same time (for example, a teaming case management approach).....3
- ☐ Other arrangement (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding whether SNAP E&T participants are assigned to or work with just one or multiple case managers.....4
- ☐ [DISPLAY IF A6=3: Policy and guidance differ on whether SNAP E&T participants work with just one or multiple case managers].....5

IF A6A=5 ("POLICY AND GUIDANCE DIFFER ON WHETHER SNAP E&T PARTICIPANTS WORK WITH JUST ONE OR MULTIPLE CASE MANAGERS")

A6b. How do policy and guidance on whether SNAP E&T participants work with just one or multiple case managers differ from one another?

(STRING 250)

IMPLEMENTATION OF SNAP E&T CASE MANAGEMENT SERVICES AND ACTIVITIES

The next questions ask about the extent to which case management services and activities are currently offered to SNAP E&T participants in your State or territory.

[DEFINITION OF “CASE MANAGEMENT” WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

ALL

A7. For each of the following case management services and activities, please indicate the extent to which the service or activity is currently offered in your State or territory’s SNAP E&T program.

PROGRAMMER: RANDOMIZE ORDER OF RESPONSE OPTIONS A-M; OTHER SPECIFY SHOULD ALWAYS BE LAST

Select one per row

	No current plans to offer	Offered in the past, but not currently offering	Plan to offer in the next two years	Currently offered by some providers	Currently offered by all providers
a. Comprehensive intake assessments or initial assessments <i>[Hover over text: Comprehensive intake assessments or initial assessments might include assessments of participants’ needs, barriers, and work readiness]</i>	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. Subsequent participant assessments <i>[Hover over text: Subsequent participant assessments include mental and physical ability tests, aptitude/abilities assessments, work interest measures, work and personal values measures, and personality inventories]</i>	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. Developing individualized plans (for example, individual employment plans, individual services plans, individual development plans)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. Monitoring and assuring participants meet SNAP E&T program requirements	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. Tracking and monitoring participant progress and outcomes	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. Coordination with services providers	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
g. Providing participant reimbursements or other support services (for example, transportation or child and dependent care)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
h. Providing referrals to other support services (for example, mental or behavioral health services)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
i. Providing referrals to other employment or training programs	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
j. Coaching and goal setting	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
k. Motivating or supporting participants to engage in the program (for example, contacting clients to check on progress, reminding clients of appointments, accompanying clients to appointments)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
l. Follow-up and job retention services (as a part of case management; not as an E&T component)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
m. Crisis management (for example, assessing if participant is in immediate crisis, linking participant to services to address crisis)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
n. Other case management service(s) (specify)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

No current plans to offer	Offered in the past, but not currently offering	Plan to offer in the next two years	Currently offered by some providers	Currently offered by all providers
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(STRING 250)

ALL

A8. When did your agency start offering the following case management services and activities in your SNAP E&T program?

PROGRAMMER: CODE ONE PER ROW

[PROGRAMMER: DISPLAY ONLY SERVICES AND ACTIVITIES INDICATED AS "CURRENTLY OFFERED BY SOME PROVIDERS" AND "CURRENTLY OFFERED BY ALL PROVIDERS" IN QA7; DISPLAY IN SAME ORDER AS QA7]

Select one per row

	Before December 2018	Between December 2018 and October 2019	After October 2019
a. Comprehensive intake assessments or initial assessments <i>[Hover over text: Comprehensive intake assessments or initial assessments might include assessments of participants' needs, barriers, and work readiness]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Subsequent participant assessments <i>[Hover over text: Subsequent participant assessments include mental and physical ability tests, aptitude/abilities assessments, work interest measures, work and personal values measures, and personality inventories]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. Developing individualized plans (for example, individual employment plans, individual services plans, individual development plans)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
d. Monitoring and assuring participants meet SNAP E&T program requirements	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
e. Tracking and monitoring participant progress and outcomes	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
f. Coordination with services providers	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
g. Providing participant reimbursements or other support services (for example, transportation or child and dependent care)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
h. Providing referrals to other support services (for example, mental or behavioral health services)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
i. Providing referrals to other employment or training programs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
j. Coaching and goal setting	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
k. Motivating or supporting participants to engage in the program (for example, contacting clients to check on progress, reminding clients of appointments, accompanying clients to appointments)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
l. Follow-up and job retention services (as a part of case management; not as an E&T component)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
m. Crisis management (for example, assessing if participant is in immediate crisis, linking participant to services to address crisis)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
n. Other case management service(s) (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

(STRING 250)

POLICY AND GUIDANCE ON SNAP E&T CASE MANAGEMENT SERVICES, ACTIVITIES, AND APPROACHES

The next questions ask about whether your agency provides either policy or guidance to local SNAP offices or E&T providers on case management services, activities, and approaches for SNAP E&T participants.

[DEFINITIONS OF “POLICY” AND “GUIDANCE” WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

ALL

A9. Does your agency provide policy or guidance on which case management services and activities must be provided to SNAP E&T participants?

[DEFINITIONS OF “POLICY” AND “GUIDANCE” WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A9 = YES (1, 2, 3)

IF A9=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT CASE MANAGEMENT SERVICES AND ACTIVITIES"

A9a. What SNAP E&T case management services and activities does your policy or guidance include?

Select all that apply

[PROGRAMMER: DISPLAY ONLY SERVICES AND ACTIVITIES INDICATED "CURRENTLY OFFERED BY SOME PROVIDERS" AND "CURRENTLY OFFERED BY ALL PROVIDERS" IN QA7; DISPLAY IN SAME ORDER AS QA7]

- ☐ Comprehensive intake assessments or initial assessments [*Hover over text: Comprehensive intake assessments or initial assessments might include assessments of participants' needs, barriers, and work readiness*].....1
- ☐ Subsequent participant assessments [*Hover over text: Subsequent participant assessments include mental and physical ability tests, aptitude/abilities assessments, interest measures, work and personal values measures, and personality inventories*].....2
- ☐ Developing individualized plans (for example, individual employment plans, individual services plans, individual development plans).....3
- ☐ Monitoring and assuring participants meet SNAP E&T program requirements....4
- ☐ Tracking and monitoring participant progress and outcomes.....5
- ☐ Coordination with services providers.....6
- ☐ Providing participant reimbursements or other support services (for example, transportation or child and dependent care).....7
- ☐ Providing referrals to other support services (for example, mental or behavioral health services).....8
- ☐ Providing referrals to other training or employment programs.....9
- ☐ Coaching and goal setting.....10
- ☐ Motivating or supporting participants to engage in the program (for example, contacting clients to check on progress, reminding clients of appointments, accompanying clients to appointments).....11
- ☐ Follow-up and job retention services (as a part of case management; not an E&T component).....12
- ☐ Crisis management (for example, assessing if participant is in immediate crisis, linking participant to services to address crisis).....13
- ☐ Other case management service(s) (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding what specific case management services and activities to offer.....14
- ☐ [DISPLAY IF A9=3: Policy and guidance specify different case management services and activities].....15

IF A9A=15 ("POLICY AND GUIDANCE SPECIFY DIFFERENT TYPES OF CASE MANAGEMENT SERVICES AND ACTIVITIES")

A9b. How do policy and guidance on SNAP E&T case management services and activities differ from one another?

(STRING 250)

ALL

A10. In a complex program like SNAP E&T, how the program is implemented in practice might sometimes differ from what is specified by policy or guidance.

To the best of your understanding, in practice, roughly what share of local SNAP offices or E&T providers offer the following types of case management services and activities to SNAP E&T participants?

PROGRAMMER: [DISPLAY RESPONSE OPTIONS IN SAME ORDER AS QA7; DISPLAY ALL RESPONSE OPTIONS REGARDLESS OF RESPONSE TO QA7]

Select one per row

	1-24%	25-49%	50-74%	75-100%	Not currently offered	Don't know
a. Comprehensive intake assessments or initial assessments <i>[Hover over text: Comprehensive intake assessments or initial assessments might include assessments of participants' needs, barriers, and work readiness]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
b. Subsequent participant assessments <i>[Hover over text: Subsequent participant assessments include mental and physical ability tests, aptitude/abilities assessments, work interest measures, work and personal values measures, and personality inventories]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
c. Developing individualized plans (for example, individual employment plans, individual services plans, individual development plans)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
d. Monitoring and assuring participants meet SNAP E&T program requirements	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
e. Tracking and monitoring participant progress and outcomes	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
f. Coordination with services providers	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
g. Providing participant reimbursements or other support services (for example, transportation or child and dependent care)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
h. Providing referrals to other support services (for example, mental or behavioral health services)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
i. Providing referrals to other employment or training programs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
j. Coaching and goal setting	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>

	1-24%	25-49%	50-74%	75-100%	Not currently offered	Don't know
k. Motivating or supporting participants to engage in the program (for example, contacting clients to check on progress, reminding clients of appointments, accompanying clients to appointments)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
l. Follow-up and job retention services (as a part of case management; not as an E&T component)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
m. Crisis management (for example, assessing if participant is in crisis, linking participant to services to address crisis)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
n. Other case management service(s) (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
<div style="border: 1px solid black; padding: 5px; width: fit-content;">(STRING 250)</div>						

ALL

A11. Does your agency provide policy or guidance on specific case management approaches or techniques (for example, motivational interviewing, trauma-informed case management) to use with SNAP E&T participants?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF A11 = YES (1, 2, 3)
IF A11=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT CASE MANAGEMENT APPROACHES OR TECHNIQUES"

A11a. What SNAP E&T case management approaches or techniques does your policy or guidance include?

Select all that apply

- ☐ Trauma-informed case management [*Hover over text: Trauma-informed case management techniques include recognizing the effects of trauma on participants, addressing trauma with participants, and offering strategies to overcome the effects of trauma and move toward goals.*].....1
- ☐ Employment coaching [*Hover over text: Employment coaching involves partnering with participants to define and move toward their employment goals, including goal setting, developing plans to achieve goals, and supporting and motivating participants to work toward goals.*].....2
- ☐ Teaming or case coordination [*Hover over text: Teaming or case coordination involves bringing together professionals working with the participant or family in different domains (for example, mental health,*

- employment) and/or systems (for example, income maintenance, workforce) to discuss services strategies and coordinate services.].....3*
- ☐ *Motivational interviewing [Hover over text: Motivational interviewing is a specific technique that uses conversational tactics like open-ended questions, reflective listening, empathy, affirmations, and reinforcements to help clients resolve ambivalent feelings and generate motivation to change.].....4*
- ☐ *Other case management approaches or technique(s) (specify).....99*
- Specify (STRING 250)
- ☐ *Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding which case management approaches or techniques to use.....5*
- ☐ *[DISPLAY IF A11=3: Policy and guidance specify different case management approaches or techniques].....6*

IF A11A=6 ("POLICY AND GUIDANCE SPECIFY DIFFERENT CASE MANAGEMENT APPROACHES OR TECHNIQUES")

A11b. How do policy and guidance about SNAP E&T case management approaches or techniques differ from one another?

(STRING 250)

ALL

A12. In a complex program like SNAP E&T, how the program is implemented in practice might sometimes differ from what is specified by policy or guidance.

To the best of your understanding, in practice, roughly what share of local SNAP offices or E&T providers use the following case management approaches or techniques with SNAP E&T participants?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	1-24%	25-49%	50-74%	75-100%	Not currently offered	Don't know
a. Trauma-informed case management <i>[Hover over text: Trauma-informed case management techniques include recognizing the effects of trauma on participants, addressing trauma with participants, and offering strategies to overcome the effects of trauma and move towards goals.]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
b. Employment coaching <i>[Hover over text: Employment coaching involves partnering with participants to define and move toward their employment goals, including goal setting, developing plans to achieve goals, and supporting and motivating participants to work toward goals.]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
c. Teaming or case coordination <i>[Hover over text: Teaming or case coordination involves bringing together professionals working with the participant or family in different domains (for example, mental health, employment) and/or systems (for example, income maintenance, workforce) to discuss services strategies and coordinate services.]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
d. Motivational interviewing <i>[Hover over text: Motivational interviewing is a specific technique that uses conversational tactics like open-ended questions, reflective listening, empathy, affirmations, and reinforcements to help clients resolve ambivalent feelings and generate motivation to change.]</i>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
e. Other case management approaches or technique(s) (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
<input type="text"/> (STRING 250)						

THE 2018 FARM BILL CASE MANAGEMENT REQUIREMENT

The Agricultural Improvement Act of 2018 (2018 Farm Bill) (enacted December 2018) added a requirement that SNAP E&T programs provide case management to all E&T participants. The case management requirement went into effect in October 2019. The next questions ask about your agency's experiences with this requirement.

ALL

A13. How has case management for SNAP E&T participants in your E&T program changed since the 2018 Farm Bill case management requirement went into effect in October 2019?

Select all that apply

- ☐ No change [IF SELECTED, DO NOT ALLOW ANY OTHER RESPONSE
OPTIONS TO BE SELECTED].....0 GO TO A15
 - ☐ Offering case management for the first time.....1
 - ☐ Expanding existing case management to be available to more SNAP E&T
participants.....2
 - ☐ Expanding menu of available case management services.....3
 - ☐ Adopting new case management approach(es) or technique(s).....4
 - ☐ Offering new assessments.....5
 - ☐ Offering new participant reimbursements or other support services.....6
 - ☐ Other change(s) (specify).....99
- Specify (STRING 250)

A13=1, 2, 3, 4, 5, 6, 99 (SKIP IF A13=0 "NO CHANGE")

A14. What motivated these changes?

Select all that apply

- ☐ Passage of the 2018 Farm Bill.....1
 - ☐ Direction from FNS to implement case management requirement in the
2018 Farm Bill.....2
 - ☐ State government legislation or directive.....3
 - ☐ Review of best practices or research.....4
 - ☐ Other motivation(s) (specify).....99
- Specify (STRING 250)

ALL

A15. In response the 2018 Farm Bill, what, if any, additional resources has your State or territory already invested—or plans to invest—in case management for SNAP E&T participants?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	Already invested	Already invested and more planned	Investment planned	No additional or new investment made or planned
a. Add SNAP agency staff	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
b. Increase SNAP agency staff hours devoted to implementing case management	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
c. Add new or expand existing facilities	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
d. Add new E&T provider agencies	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
e. Expand existing E&T provider contracts to add or expand case management	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
f. Provide new training for SNAP agency staff	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>
g. Provide new training for E&T provider agency staff	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	0 <input type="radio"/>

CASE MANAGEMENT DATA

ALL

A16. Does your agency collect data on the following?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	YES	NO
a. Whether an individual receives case management?	1 <input type="radio"/>	0 <input type="radio"/>
b. Which case management services an individual receives?	1 <input type="radio"/>	0 <input type="radio"/>
c. How frequently an individual receives case management services?	1 <input type="radio"/>	0 <input type="radio"/>

A16A=1

A17. How many SNAP E&T participants attended at least one SNAP E&T case management meeting in fiscal year (FY) 2020?

ABAWD <i>[Hover over text: Able bodied adult without dependents]</i>		
	Non-ABAWD	Total
SNAP E&T participants	SNAP E&T participants	SNAP E&T participants

a. Number attended at least one SNAP E&T case management meeting in FY 2020

A16A=1 AND [A16B=1 OR A16C=1]

A18. Does your agency track SNAP E&T participant outcomes associated with the type or intensity of case management SNAP E&T participants receive?

For this question, we are interested in learning about outcomes that are associated with case management, separate from outcomes associated with receiving SNAP E&T components.

- ☐ Yes.....1
- ☐ No.....0

IF A18 = 1

A18a. Which participant outcomes associated with the type or intensity of case management does your agency track?

Select all that apply

- ☐ Number of credentials obtained.....1
- ☐ Number of jobs obtained.....2
- ☐ Number of participants exiting SNAP.....3
- ☐ Other outcome(s) (specify).....99

Specify (STRING 250)

ALL

A19. Does your agency conduct research or evaluation to assess the effects of the type or intensity of case management on SNAP E&T participant outcomes?

- ☐ Yes.....1
- ☐ No.....0

IF A19 = 1

A19a. Which participant outcomes associated with the type or intensity of case management are measured through research or evaluation?

Select all that apply

- ☐ Number of credentials obtained.....1
- ☐ Number of jobs obtained.....2
- ☐ Number of participants exiting SNAP.....3
- ☐ Other outcome(s) (specify).....99

Specify (STRING 250)

ALL

A20. Is there anything about how your agency provides case management to SNAP E&T participants that you would like to highlight as innovative or unique (for example, a particular case management technique, staffing structure, use of evidence-based practice)?

- ☐ Yes.....1
- ☐ No.....0

IF A19 = 1

A20a. Please describe what you would like to highlight as innovative or unique in the way your agency provides case management.

(STRING 1000)

ALL

A_END. Thank you for completing this survey section. If you have additional information you would like to share about case management for SNAP E&T participants in your State or territory, please share it in the box below.

(STRING 1000)

SECTION 2: ASSESSMENTS

Assessments are often a component of case management. This section asks about the policies or guidance your State or territory provides to local offices or providers about assessing SNAP E&T participants.

If you are unsure about any of your answers, please consult with other SNAP staff as necessary. For questions that ask about how policy is implemented by local offices or providers, please answer to the best of your understanding.

INITIAL ASSESSMENT

The next questions ask about whether your agency provides either policy or guidance to local SNAP offices or E&T providers on how to assess SNAP E&T participants after they are referred to E&T.

By policy, we mean your agency's written rules on how to properly execute the SNAP E&T program that are shared with local SNAP offices or E&T providers via policy directives or contracts.

By guidance, we mean supplemental, non-binding information your agency provides to local SNAP offices or E&T providers in writing or verbally to help them implement the SNAP E&T program.

ALL

B1. Does your agency provide policy or guidance that specifies that SNAP E&T participants must be given an initial assessment after referral to E&T?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

By initial assessment, we mean the first assessment of SNAP E&T participants who have already been determined to be eligible or required to participate in the E&T program (that is, referred to SNAP E&T). Initial assessments might include assessments of participants' backgrounds, needs, barriers, and work readiness.

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF B1 = YES (1, 2, 3)

B2. Does policy or guidance specify that local SNAP offices or E&T providers use a particular assessment tool or tools for initial assessments of SNAP E&T participants?

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF B2 = YES (1, 2, 3)

IF B2=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT ASSESSMENT TOOLS"

B2a. Which initial assessment tool or tools are specified by policy or guidance?

Select all that apply

[RANDOMIZE ORDER OF RESPONSE OPTIONS 3-24; OTHER SPECIFY AND RESPONSE OPTIONS 25 AND 26 ALWAYS APPEAR LAST]

- ☐ Participant background assessment tool developed by or for the State, territory, or provider.....1
- ☐ Needs and barrier assessment tool developed by or for the State, territory or provider.....2
- ☐ Acuplacer.....3
- ☐ Career Orientation Inventory (COI).....4
- ☐ CareerScope.....5
- ☐ Campbell Interest and Skills Survey.....6
- ☐ Candidate Physical Ability Test.....7
- ☐ Comprehensive Adult Student Assessment System (CASAS).....8
- ☐ COPSsystem.....9
- ☐ Holland Self-Assessment Interest Survey.....10
- ☐ Human Metrics.....11
- ☐ JobFit.....12
- ☐ Keirsey Temperament Sorter.....13
- ☐ My Next Move.....14
- ☐ Myers-Briggs Type Indicator.....15
- ☐ O*NET Ability Profiler.....16
- ☐ O*NET Interest Profiler.....17
- ☐ Provelt!.....18
- ☐ Self-Directed Search (SDS).....19
- ☐ Skillscan.....20
- ☐ Test for Adult Basic Education (TABE).....21
- ☐ When I Grow Up.....22
- ☐ World of Work Inventory (WOWI).....23
- ☐ WorkKeys.....24
- ☐ Other tool or tools (specify all that apply).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding which assessment tool or tools to use for initial assessments of SNAP E&T participants.....25

☐ [DISPLAY IF B2=3: Policy and guidance specify different assessment tools].....26

B2A=1

B2b. What is the name of the participant background assessment tool developed by or for the State, territory, or provider?

(STRING 250)

B2A=2

B2c. What is the name of the needs and barrier assessment tool developed by or for the State, territory, or provider?

(STRING 250)

B2A=26 ("POLICY AND GUIDANCE SPECIFY DIFFERENT ASSESSMENT TOOLS")

B2d. How do the policy and guidance about initial assessment tools differ from one another?

(STRING 250)

ALL

B3. In a complex program like SNAP E&T, how the program is implemented in practice might sometimes differ from what is specified in policy or guidance or from provider to provider.

To the best of your understanding, in practice, roughly what share of local SNAP offices or E&T providers are using the following assessment tools for initial assessments?

PROGRAMMER: CODE ONE PER ROW

PROGRAMMER: [USE SAME RESPONSE OPTION ORDER AS QB2A]

Select one per row

	1-24%	25-49%	50-74%	75-100%	Not currently offered	Don't know
a. Participant background assessment tool developed by or for the State or territory	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
b. Needs and barrier assessment tool developed by or for the State or territory	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
c. Acuplacer	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
d. Career Orientation Inventory (COI)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
e. CareerScope	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
f. Campbell Interest and Skills Survey	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
g. Candidate Physical Ability Test	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
h. Comprehensive Adult Student Assessment System (CASAS)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
i. COPSsystem	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
j. Holland Self-Assessment Interest Survey	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
k. Human Metrics	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
l. JobFit	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
m. Keirseley Temperament Sorter	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
n. My Next Move	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
o. Myers-Briggs Type Indicator	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
p. O*NET Ability Profiler	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
q. O*NET Interest Profiler	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
r. Provelt!	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
s. Self-Directed Search (SDS)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
t. Skillscan	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
u. Test for Adult Basic Education (TABE)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
v. When I Grow Up	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
w. World of Work Inventory (WOWI)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
x. WorkKeys	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
y. Other tool (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
	<input type="text" value="(STRING 250)"/>					
z. Other tool (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
	<input type="text" value="(STRING 250)"/>					
aa. Other tool (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	0 <input type="radio"/>	d <input type="radio"/>
	<input type="text" value="(STRING 250)"/>					

ALL

B4. Which entities are responsible for conducting initial assessments of SNAP E&T participants?

Select all that apply

- ☐ Local SNAP office.....1
- ☐ Community college.....2
- ☐ Workforce Innovation & Opportunity Act (WIOA) agency or other
Department of Labor–funded workforce programs.....3
- ☐ Community-based organization.....4
- ☐ Adult Basic Education (ABE) provider.....5
- ☐ Other (specify).....99

Specify (STRING 250)

☐ Not applicablena

ALL

B5. Among most local SNAP offices or E&T providers, which types of staff conduct initial assessments of SNAP E&T participants?

Select all that apply

- ☐ SNAP agency eligibility worker.....1
- ☐ SNAP agency E&T worker.....2
- ☐ Provider staff who provide case management to only SNAP E&T
participants.....3
- ☐ Provider staff who provide case management to participants from multiple
programs.....4
- ☐ Trainers or facilitators who are not also case managers5
- ☐ Certified professionals (for example, certified to provide the Myers-Briggs
assessment).....6
- ☐ Other staff (specify).....99

Specify (STRING 250)

☐ Not applicable.....na

ALL

B6. Among most local SNAP offices or E&T providers, what is the expected timing of initial assessments of SNAP E&T participants?

Select all that apply

- ☐ During eligibility interview after client is determined eligible for or referable to SNAP E&T.....1
- ☐ During first meeting with an E&T case manager at a local SNAP office or E&T provider.....2
- ☐ During another meeting with an E&T case manager that is not the first meeting.....3
- ☐ During SNAP E&T orientation held at local SNAP office.....4
- ☐ During SNAP E&T orientation held at SNAP E&T provider.....5
- ☐ Other timing (specify).....99
- Specify (STRING 250)
- ☐ Not applicable.....na

ADDITIONAL ASSESSMENT(S)

The next questions ask about whether your agency provides either policy or guidance to local SNAP offices or E&T providers on how to assess SNAP E&T participants—beyond the initial assessment.

By policy, we mean your agency's written rules on how to properly execute the SNAP E&T program that are shared with local SNAP offices or E&T providers via policy directives or contracts.

By guidance, we mean supplemental, non-binding information your agency provides to local SNAP offices or E&T providers in writing or verbally to help them implement the SNAP E&T program.

ALL

B7. Does your agency provide policy or guidance that specifies that SNAP E&T participants be given additional assessments—beyond the initial assessment?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Additional assessments might include mental and physical ability tests, aptitude/abilities assessments, interest measures, work and personal values measures, and personality inventories.

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF B7 = YES (1, 2, 3)

B8. Does your agency's policy or guidance indicate the types of additional assessments that should be given or the specific assessment tools local SNAP offices or providers should use?

Select one only

- ☐ Yes, policy or guidance indicates the types of additional assessments to be given.....1
- ☐ Yes, policy or guidance indicates specific assessment tools to be used.....2
- ☐ Yes, policy or guidance indicates both the types of additional assessments to be given and the specific assessment tools to be used.....3
- ☐ No, policy or guidance does not indicate the types of additional assessments to be given or the specific assessment tools to be used.....0

IF B8 = YES (1, 3)

IF B7=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT TYPES OF ADDITIONAL ASSESSMENTS"

B8a. Which types of additional assessments are indicated by policy or guidance?

Select all that apply

- ☐ Needs and barrier assessments.....1
 - ☐ Mental and physical ability tests (for example, Candidate Physical Ability Test).....2
 - ☐ Aptitude/abilities assessments (for example, O*NET Ability Profiler, Test for Adult Basic Education (TABE), Skillscan, WorkKeys).....3
 - ☐ Interest measures (for example, Campbell Interest and Skills Survey, Holland Self-Assessment Interest Survey, O*NET Interest Profiler, My Next Move).....4
 - ☐ Work and personal values measures (for example, COPSsystem, CareerScope).....5
 - ☐ Personality inventories (for example, Human Metrics, Keirsey Temperament Sorter, Myers-Briggs Type Indicator).....6
 - ☐ Occupation-specific assessments (for example, Provelt!, JobFit).....7
 - ☐ Other type(s) of additional assessment (specify).....99
- Specify (STRING 250)
- ☐ [DISPLAY IF B7=4: Policy and guidance specify different types of additional assessments].....8

IF B8a=8 ("POLICY AND GUIDANCE SPECIFY DIFFERENT TYPES OF ADDITIONAL ASSESSMENTS")

B8b. How do the policy and guidance about the types of assessments differ from one another?

(STRING 250)

IF B8 = YES (2, 3)

IF B7=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE SPECIFY DIFFERENT ASSESSMENT TOOLS"

B8c. Which assessment tool or tools are specified by policy or guidance?

Select all that apply

PROGRAMMER: [USE SAME RESPONSE OPTION ORDER AS QB2A]

- ☐ Participant background assessment tool developed by or for the State, territory, or provider.....1
- ☐ Needs and barrier assessment tool developed by or for the State, territory, or provider.....2
- ☐ Acuplacer.....3
- ☐ Career Orientation Inventory (COI).....4
- ☐ CareerScope.....5
- ☐ Campbell Interest and Skills Survey.....6
- ☐ Candidate Physical Ability Test.....7
- ☐ Comprehensive Adult Student Assessment System (CASAS).....8
- ☐ COPSsystem.....9
- ☐ Holland Self-Assessment Interest Survey.....10
- ☐ Human Metrics.....11
- ☐ JobFit.....12
- ☐ Keirsey Temperament Sorter.....13
- ☐ My Next Move.....14
- ☐ Myers-Briggs Type Indicator.....15
- ☐ O*NET Ability Profiler.....16
- ☐ O*NET Interest Profiler.....17
- ☐ Provelt!.....18
- ☐ Self-Directed Search (SDS).....19
- ☐ Skillscan.....20
- ☐ Test for Adult Basic Education (TABE).....21
- ☐ When I Grow Up.....22
- ☐ World of Work Inventory (WOWI).....23
- ☐ WorkKeys.....24
- ☐ Other tool or tools (specify all that apply).....99

Specify (STRING 250)

☐ [DISPLAY IF B7=3: Policy and guidance specify different assessment tools]..... 25

IF B8C=25 ("POLICY AND GUIDANCE SPECIFY DIFFERENT ASSESSMENT TOOLS")

B8d. How do the policy and guidance about which assessment tools to use differ from one another?

(STRING 250)

ALL

B9. In a complex program like SNAP E&T, how the program is implemented in practice might sometimes differ from what is specified in policy and guidance or from provider to provider.

To the best of your understanding, in practice, roughly what share of local SNAP offices or E&T providers is using the following tools for additional assessments?

PROGRAMMER: [USE SAME RESPONSE OPTION ORDER AS QB2A]

Select one per row

	1-24%	24-49%	50-74%	75-100%	Not currently offered	Don't know
a. Participant background assessment tool developed by or for the State or territory	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
b. Needs and barrier assessment tool developed by or for the State or territory	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
c. Acuplacer	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
d. CareerScope	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
e. Career Orientation Inventory (COI)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
f. Campbell Interest and Skills Survey	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
g. Candidate Physical Ability Test	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
h. Comprehensive Adult Student Assessment System (CASAS)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
i. COPSsystem	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
j. Holland Self-Assessment Interest Survey	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
k. Human Metrics	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
l. JobFit	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
m. Keirsey Temperament Sorter	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
n. My Next Move	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
o. Myers-Briggs Type Indicator	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
p. O*NET Ability Profiler	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
q. O*NET Interest Profiler	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
r. Provelt!	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
s. Self-Directed Search (SDS)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
t. Skillscan	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
u. Test for Adult Basic Education (TABE)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
v. When I Grow Up	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
w. World of Work Inventory (WOWI)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	<input type="radio"/> d
x. WorkKeys	1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 0	d

		Select one per row					
		1-24%	24-49%	50-74%	75-100%	Not currently offered	Don't know
y.	Other tool (specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text" value="(STRING 250)"/>						
z.	Other tool (specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text" value="(STRING 250)"/>						
aa.	Other tool (specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text" value="(STRING 250)"/>						

ALL

B10. What entities are responsible for conducting additional assessments of SNAP E&T participants?

Select all that apply

- ☐ Local SNAP office.....1
 - ☐ Community college.....2
 - ☐ Workforce Innovation & Opportunity Act (WIOA) agency or other Department of Labor–funded workforce programs.....3
 - ☐ Community-based organization.....4
 - ☐ Adult Basic Education (ABE) provider.....5
 - ☐ Other (specify).....99
- Specify (STRING 250)
- ☐ No entities.....0

ALL

B11. Among most local SNAP offices or E&T providers, which types of staff conduct additional assessments of SNAP E&T participants?

Select all that apply

- ☐ SNAP agency eligibility worker.....1
- ☐ SNAP agency E&T worker.....2
- ☐ Provider staff who provide case management to only SNAP E&T participants.....3
- ☐ Provider staff who provide case management to participants from multiple programs.....4
- ☐ Trainers or facilitators who are not also case managers5
- ☐ Certified professionals (for example, certified to provide the Myers-Briggs assessment).....6

- ☐ Other staff (specify).....99
Specify (STRING 250)
☐ Not applicablena

ALL

B12. Among most local SNAP offices or E&T providers, what is the expected timing of additional assessments of SNAP E&T participants?

Select all that apply

- ☐ During eligibility interview after client is determined eligible for or referable to SNAP E&T.....1
 - ☐ During first meeting with an E&T case manager at a SNAP E&T provider.....2
 - ☐ During another meeting with an E&T case manager that is not the first meeting.....3
 - ☐ During SNAP E&T orientation held at a local SNAP office.....4
 - ☐ During SNAP E&T orientation held at SNAP E&T provider.....5
 - ☐ On a regular basis, for example monthly or quarterly.....6
 - ☐ Before being referred to a service component.....7
 - ☐ After completing a service component.....8
 - ☐ At the discretion of the case manager.....9
 - ☐ Other timing (specify).....99
- Specify (STRING 250)
- ☐ Not applicable.....na

SELECTION AND USE OF ASSESSMENTS

The next questions ask about whether your agency provides either policy or guidance to local SNAP offices or E&T providers on how to select and use assessments with SNAP E&T participants.

By policy, we mean your agency's written rules on how to properly execute the SNAP E&T program that are shared with local SNAP offices or E&T providers via policy directives or contracts.

By guidance, we mean supplemental, non-binding information your agency provides to local SNAP offices or E&T providers in writing or verbally to help them implement the SNAP E&T program.

ALL

B13. If multiple assessment tools are available to case managers, does your agency provide policy or guidance that specifies how case managers should select among these tools to identify the most appropriate one for each SNAP E&T participant?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0
- ☐ Multiple assessment tools are not available.....4

IF B13 = YES (1, 2, 3)

IF B13=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE DIFFER ON HOW CASE MANAGERS SHOULD SELECT AMONG MULTIPLE ASSESSMENT TOOLS"

B14a. How does policy or guidance specify case managers select among multiple assessment tools?

Select all that apply

- ☐ Personal case manager preference or discretion.....1
- ☐ Based on participant interest areas, barriers, and so on.....2
- ☐ Using guidance provided by the provider.....3
- ☐ Based on assessment required by the program or component the participant is interested in.....4
- ☐ Other method (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding how case managers select among multiple assessment tools.....5
- ☐ [DISPLAY IF B13=3: Policy and guidance differ on how case managers should select among multiple assessment tools].....6

IF B14A=6 ("POLICY AND GUIDANCE DIFFER ON HOW CASE MANAGERS SHOULD SELECT AMONG MULTIPLE ASSESSMENT TOOLS")

B14b. How do policy and guidance differ from one another on how case managers select among multiple assessment tools to identify the most appropriate one for each SNAP E&T participant?

(STRING 250)

ALL

B15. Does policy or guidance specify that SNAP E&T participants complete or pass an assessment before beginning the following E&T components?

[DEFINITIONS OF “POLICY” AND “GUIDANCE” WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

PROGRAMMER: CODE ONE PER ROW

[PROGRAMMER: DISPLAY COMPONENTS SELECTED IN i2; DISPLAY IN SAME ORDER AS i2.]

Select one per row

	Yes, participants must <u>complete</u> an assessment	Yes, participants must <u>pass</u> an assessment	Policy or guidance gives the office or provider discretion to decide if participants must complete or pass an assessment	No, neither policy nor guidance require an assessment	Don't know
a. Supervised job search	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
b. Job search training	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
c. Education programs (includes basic/foundational skills instruction; career/technical education programs or other vocational training; English language acquisition; integrated education and training/bridge programs; and work readiness training)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
d. Self-employment training	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
e. Work-based learning (includes internship; on-the-job training; subsidized employment; and apprenticeships)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
f. Work experience	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
g. Workfare	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
h. Job retention	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
i. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
<div>(STRING 250)</div>					

IF B15A-B17H = (1, 2, 3) (“YES, COMPLETE AN ASSESSMENT,” “YES, PASS AN ASSESSMENT,” OR “AT OFFICE OR PROVIDER DISCRETION PER POLICY OR GUIDANCE” INDICATED FOR ANY COMPONENT IN B15)

B15a. If policy and guidance differ from one another on whether SNAP E&T participants complete or pass an assessment before beginning any of the E&T components, please specify how.

(STRING 250)

ALL

B16. Does your agency provide policy or guidance on how case managers or other staff should use the results of assessments to match SNAP E&T participants to activities, components, and participant reimbursements or other support services?

[DEFINITIONS OF "POLICY" AND "GUIDANCE" WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF B16 = YES (1, 2, 3)

IF B16=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE DIFFER ON HOW CASE MANAGERS USE THE RESULTS OF ASSESSMENTS"

B16a. How does policy or guidance direct case managers or other staff to use the results of assessments?

Select all that apply

- ☐ Use to inform the development of an individualized plan (for example, individualized services plan or individualized employment plan).....1
- ☐ Use in a discussion between the case manager or other staff and participant about service interests and needs.....2
- ☐ Use to identify the programs or components for which a participant is eligible or qualified3
- ☐ Use to identify participant reimbursements or support services needs or qualification.....4
- ☐ Other uses (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in how case managers or other staff use the results of assessments.....5
- ☐ [DISPLAY IF B16=3: Policy and guidance differ on how case managers use the results of assessments].....6

IF B16A=6 ("POLICY AND GUIDANCE DIFFER ON HOW CASE MANAGERS USE THE RESULTS OF ASSESSMENTS")

B16b. How do policy and guidance differ from one another on how case managers or other staff use the results of assessments to match SNAP E&T participants to activities, components, and participant reimbursements?

(STRING 250)

ALL

B17. Is there anything about your agency's approach to assessment for SNAP E&T participants that you would like to highlight as innovative or unique (for example, assessment tool, use of evidence-based practice)?

- ☐ Yes.....1
- ☐ No.....0

IF B17 = 1

B17a. Please describe what about your agency's approach to assessment for SNAP E&T participants that you would like to highlight as innovative or unique.

(STRING 1000)

ALL

B_END. In addition to your responses to this survey section, please submit one initial assessment tool by email. See instructions below. We will also email you these instructions.

To better understand the types of assessment that are being provided in SNAP E&T programs, we are collecting assessment tools that States and territories use. Please email us one initial assessment tool commonly used in [State name] to assess SNAP E&T participants' needs and/or work readiness after they are referred to the program. We understand that you might need to reach out to an E&T provider for a copy of an assessment tool. The tool you select should:

- **Be an initial assessment tool that assesses participants' needs, work readiness, or both.** This would be the first assessment the participant would take after being referred to E&T. It might assess educational attainment, work experience, basic skills, barriers to employment, or service needs.
- **Be the most commonly used initial assessment tool in your State or territory**, either by the number of local SNAP offices or E&T providers that use it or the number of participants who take it.
- **NOT be a purchased, propriety aptitude or interest inventory assessment** like CASAS or ACT WorkKeys.

Please email a PDF or Microsoft Word version of your assessment tool to [fill study email address] within one week. In your email, please include a brief explanation of (1) how the assessment is used, (2) who administers it, and (3) when in the process it is administered.

ALL

B_END. Thank you for completing this survey section. If you have additional information you would like to share about assessments of SNAP E&T participants in your State or territory, please share it in the box below.

(STRING 1000)

SECTION 3: PARTICIPANT REIMBURSEMENTS AND SUPPORT SERVICES

This section of the survey asks about the policies or guidance your State or territory provides to local offices or providers about participant reimbursements and support services for SNAP E&T participants. You will also be asked to provide data on the total amount paid in participant reimbursements and the total number of participants receiving reimbursements.

If you are unsure about any of your answers, please consult with other SNAP staff as necessary. For questions that ask about how policy is implemented by local offices or providers, please answer to the best of your understanding.

PARTICIPANT REIMBURSEMENTS

ALL

C1. What participant reimbursements are available to SNAP E&T participants in your State or territory?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	Available to ALL participants who qualify	Available to SOME participants who qualify	Not available
a. Child care vouchers or funds	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
c. Other dependent care (for example, elder care)	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
e. Auto repair	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
f. Books or other supplies for classes	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
g. Course tuition/fees	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
k. Personal hygiene or grooming supplies	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
l. Health, dental, or eye care	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
m. Rent/housing assistance	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
o. Legal services	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
p. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	0 <input type="radio"/>
<div style="border: 1px solid black; padding: 5px; display: inline-block;">(STRING 250)</div>			

ALL

C2. What entities are responsible for providing participant reimbursements to SNAP E&T participants?

Select all that apply

- ☐ Local SNAP office.....1
- ☐ Community college.....2
- ☐ Workforce Innovation & Opportunity Act (WIOA) agency or other
Department of Labor–funded workforce program.....3
- ☐ Community-based organization.....4
- ☐ Adult Basic Education (ABE) provider.....5
- ☐ Other (specify).....99

Specify (STRING 250)

ALL

C3. Does your agency provide policy or guidance on how SNAP E&T participants are informed of available participant reimbursements (for example, who does the informing and at what point after referral to E&T)?

[DEFINITIONS OF “POLICY” AND “GUIDANCE” WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF C3 = YES (1, 2, 3)

IF C3=3, DISPLAY RESPONSE OPTION "POLICY AND GUIDANCE DIFFER ON HOW PARTICIPANTS ARE INFORMED OF AVAILABLE PARTICIPANT REIMBURSEMENTS"

C4. Which staff are directed by policy or guidance to inform SNAP E&T participants of available reimbursements?

Select all that apply

- ☐ SNAP eligibility worker.....1
- ☐ Local SNAP office staff (other than eligibility worker).....2
- ☐ Case manager3
- ☐ SNAP E&T provider staff (other than case manager)4
- ☐ Other staff (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding which staff inform participants of available participant reimbursements.....5
- ☐ [DISPLAY IF C3=3: Policy and guidance differ on which staff inform participants of available participant reimbursements].....6

IF C3 = YES (1, 2, 3)

PROGRAMMER NOTE: DISPLAY COLUMNS ASSOCIATED WITH RESPONSES TO C4. IF C4=1, DISPLAY COLUMN 1. IF C4=2, DISPLAY COLUMN 2, ETC. ALWAYS DISPLAY DOES NOT APPLY COLUMN. IF C4=5 OR IF C4=6, DISPLAY ALL COLUMNS.

C5. When does policy or guidance direct those staff to inform SNAP E&T participants of available participant reimbursements?

- 9 ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding when staff inform participants of available reimbursements
- 10 ☐ Policy and guidance differ on when participants are informed of available participant reimbursements [PROGRAMMER NOTE: GO TO C5A]

PROGRAMMER: CODE ALL THAT APPLY

Select all that apply per row

	SNAP eligibility worker	Local SNAP office staff (other than eligibility worker)	Case manager	SNAP E&T provider staff (other than case manager)	Other staff	Does not apply
a. During the certification or referral process	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
b. During SNAP E&T orientation	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
c. At intake (after referral to E&T)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
d. When staff person or assessment uncovers a need or barrier	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
e. When participant expresses a need or barrier	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
f. When participant provides evidence of a need or barrier (for example, documenting that the participant lives X miles from the provider or employer)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
g. Other (specify)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
<div><input type="text"/> • (STRING 250)</div>						

IF C4=6 OR IF C5=10 ("POLICY AND GUIDANCE DIFFER")

C5a. How do policy and guidance differ from one another on how staff (which staff and when) inform SNAP E&T participants of available participant reimbursements?

(STRING 250)

ALL

C6. In a complex program like SNAP E&T, how the program is implemented in practice might sometimes differ from what is specified by policy or guidance.

To the best of your understanding, in practice, which staff inform most SNAP E&T participants of available participant reimbursements?

Select all that apply

- ☐ SNAP eligibility worker.....1
- ☐ Local SNAP office staff (other than eligibility worker).....2
- ☐ Case manager.....3
- ☐ SNAP E&T provider staff (other than case manager).....4
- ☐ Other staff (specify).....99

Specify (STRING 250)

ALL

PROGRAMMER NOTE: DISPLAY COLUMNS ASSOCIATED WITH RESPONSES TO C6. IF C6=1, DISPLAY COLUMN 1. IF C6=2, DISPLAY COLUMN 2, ETC. ALWAYS DISPLAY "MOST PARTICIPANTS NOT INFORMED" COLUMN.

C7. To the best of your understanding, in practice, when do those staff inform most SNAP E&T participants of available participant reimbursements?

PROGRAMMER: CODE ALL THAT APPLY

Select all that apply per row

	SNAP eligibility worker	Local SNAP office staff (other than eligibility worker)	Case manager	SNAP E&T provider staff (other than case manager)	Other staff	Most participants not informed at this time
a. During the certification or referral process	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
b. During SNAP E&T orientation	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
c. At intake (after referral to E&T)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
d. When staff person or assessment uncovers a need or barrier	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
e. When participant expresses a need or barrier	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
f. When participant provides evidence of a need or barrier (for example, documenting that the participant lives X miles from the provider or employer)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
g. Other (specify)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
<input type="text"/> • (STRING 250)						

ALL

C8. Does your agency provide policy or guidance that specifies a method for participant reimbursements to SNAP E&T participants? (For example, vouchers or in-kind assistance.)

[DEFINITIONS OF “POLICY” AND “GUIDANCE” WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERMS]

Select one only

- ☐ Yes, policy only.....1
- ☐ Yes, guidance only.....2
- ☐ Yes, policy and guidance.....3
- ☐ No, neither policy nor guidance.....0

IF C8 = YES (1, 2, 3)

IF C8=3, DISPLAY RESPONSE OPTION “POLICY AND GUIDANCE SPECIFY DIFFERENT METHODS FOR PARTICIPANT REIMBURSEMENTS”

C8a. Which method does policy or guidance specify for participant reimbursements?

Select all that apply

- ☐ Cash.....1
- ☐ Voucher(s) (for example, child care voucher or gas card).....2
- ☐ Reimbursement (for example, check to participant) for expenses paid by participant.....3
- ☐ In-kind assistance (for example, work clothing or supplies directly provided).....4
- ☐ Varies by type of participant reimbursement5
- ☐ Other format (specify).....99

Specify (STRING 250)

- ☐ Policy or guidance gives local SNAP offices or E&T providers flexibility in deciding the format for participant reimbursements6
- ☐ [DISPLAY IF C8=3: Policy and guidance specify different methods for participant reimbursements].....7

IF C8A=7 ("POLICY AND GUIDANCE SPECIFY DIFFERENT METHODS FOR PARTICIPANT REIMBURSEMENTS")

C8b. How do policy and guidance about the methods for participant reimbursements differ from one another?

(STRING 250)

ALL

C9. Does your agency provide participants information about participant reimbursements in writing?

Select all that apply

- ☐ Yes, in a notice sent to participants.....1
- ☐ Yes, in an E&T brochure or flyer.....2
- ☐ Yes, on a website.....3
- ☐ Yes, on a poster.....4
- ☐ Yes, in another written format (specify).....5
Specify (STRING 250)
- ☐ No.....0
- ☐ Local SNAP offices or E&T providers have discretion to provide this information to participants in writing.....6

ALL

C10. Does your agency set a cap on the value of any single participant reimbursement a SNAP E&T participant can receive? A cap is the maximum value of reimbursements a participant can receive within a certain time frame or by type of service.

For example, a program may cap the reimbursement for a single car repair at \$500, but may allow a participant to receive that reimbursement more than once.

- ☐ Yes.....1
- ☐ No.....0

C10 = 1

C10a. Please indicate any caps on any single reimbursement.

PROGRAMMER: [FILL WITH PARTICIPANT REIMBURSEMENTS AVAILABLE TO SOME OR ALL PARTICIPANTS, AS INDICATED IN C1, C1A-C1P = (1, 2), ALWAYS DISPLAY "COMBINED CAP FOR ALL PARTICIPANT REIMBURSEMENTS"]

CODE ONE PER ROW

Select one per row

Individual caps for each participant reimbursement	Under \$50	\$50–\$100	\$101–\$250	\$251–\$500	\$501–\$1,000	Over \$1,000	Other cap (specify)	No cap or limit
a. Child care vouchers or funds	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
c. Other dependent care (for example, elder care)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
e. Auto repair	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
f. Books or other supplies for classes	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
g. Course tuition/fees	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
k. Personal hygiene or grooming supplies	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
l. Health, dental, or eye care	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
m. Rent/housing assistance	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
o. Legal services	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
p. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>

(STRING 250)

ALL

C11. Does your agency set a monthly cap on the value of any participant reimbursement a SNAP E&T participant can receive? A cap is the maximum value of reimbursements a participant can receive within a certain time frame or by type of service.

- ☐ Yes..... 1
- ☐ No..... 0

IF C11 = 1

C11a. Please indicate any monthly caps.

PROGRAMMER: [FILL WITH PARTICIPANT REIMBURSEMENTS AVAILABLE TO SOME OR ALL PARTICIPANTS, AS INDICATED IN C1, C1A-C1P = (1, 2), ALWAYS DISPLAY "COMBINED CAP FOR ALL PARTICIPANT REIMBURSEMENTS"]

CODE ONE PER ROW

Select one per row

Individual caps for each participant reimbursement	Under \$50	\$50–\$100	\$101–\$250	\$251–\$500	\$501–\$1,000	Over \$1,000	Other cap (specify)	No cap or limit
a. Child care vouchers or funds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
c. Other dependent care (for example, elder care)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
e. Auto repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
f. Books or other supplies for classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
g. Course tuition/fees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
k. Personal hygiene or grooming supplies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
l. Health, dental, or eye care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
m. Rent/housing assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
o. Legal services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>
p. Other (specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="radio"/>

(STRING 250)

Individual caps for each participant reimbursement	Under \$50	\$50–\$100	\$101–\$250	\$251–500	\$501–\$1,000	Over \$1,000	Other cap (specify)	No cap or limit
q. Combined cap for all participant reimbursements	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>

ALL

C12. Does your agency set an annual cap on the value of any participant reimbursement a SNAP E&T participant can receive? A cap is the maximum value of reimbursements a participant can receive within a certain time frame or by type of service.

- ☐ Yes.....1
- ☐ No.....0

IF C12 = 1

C12a. Please indicate any annual caps.

PROGRAMMER: [FILL WITH PARTICIPANT REIMBURSEMENTS AVAILABLE TO SOME OR ALL PARTICIPANTS, AS INDICATED IN C1, C1A-C1P = (1, 2), ALWAYS DISPLAY "COMBINED CAP FOR ALL PARTICIPANT REIMBURSEMENTS"]

CODE ONE PER ROW

Select one per row

Individual caps for each participant reimbursement	Under \$50	\$50 – \$100	\$101 – \$250	\$251 – \$500	\$501 – \$1,000	Over \$1,000	Other cap (specify)	No cap or limit
a. Child care vouchers or funds	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
c. Other dependent care (for example, elder care)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
e. Auto repair	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
f. Books or other supplies for classes	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
g. Course tuition/fees	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
k. Personal hygiene or grooming supplies	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
l. Health, dental, or eye care	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
m. Rent/housing assistance	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
o. Legal services	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
p. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>

(STRING 250)

Individual caps for each participant reimbursement	Under \$50	\$50 – \$100	\$101 – \$250	\$251 – \$500	\$501 – \$1,000	Over \$1,000	Other cap (specify)	No cap or limit
q. Combined cap for all participant reimbursements	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>

ALL

C13. Does your agency set a lifetime cap on the value of any participant reimbursement a SNAP E&T participant can receive? A cap is the maximum value of reimbursements a participant can receive within a certain time frame or by type of service.

- ☐ Yes..... 1
- ☐ No..... 0

C13 = 1

C13a. Please indicate any lifetime caps.

PROGRAMMER: [FILL WITH PARTICIPANT REIMBURSEMENTS AVAILABLE TO SOME OR ALL PARTICIPANTS, AS INDICATED IN C1, C1A-C1P = (1, 2), ALWAYS DISPLAY “COMBINED CAP FOR ALL PARTICIPANT REIMBURSEMENTS”]

CODE ONE PER ROW

Select one per row

Individual caps for each participant reimbursement	Under \$50	\$50– \$100	\$101– \$250	\$251– 500	\$501– \$1,000	Over \$1,000	Other cap (specify)	No cap or limit
a. Child care vouchers or funds	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
c. Other dependent care (for example, elder care)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
e. Auto repair	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
f. Books or other supplies for classes	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
g. Course tuition/fees	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
k. Personal hygiene or grooming supplies	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
l. Health, dental, or eye care	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
m. Rent/housing assistance	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>

Individual caps for each participant reimbursement	Under \$50	\$50–\$100	\$101–\$250	\$251–500	\$501–\$1,000	Over \$1,000	Other cap (specify)	No cap or limit
o. Legal services	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
p. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>
<div><input type="text"/> (STRING 250)</div>								
q. Combined cap for all participant reimbursements	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	<input type="text"/>	0 <input type="radio"/>

ALL

C14. What qualifications, if any, does your agency place on the following participant reimbursements?

PROGRAMMER: [FILL WITH PARTICIPANT REIMBURSEMENTS AVAILABLE TO SOME OR ALL PARTICIPANTS, AS INDICATED IN C1, C1A-C1P = (1, 2)]

SELECT ALL THAT APPLY

Select all that apply per row

	Participant must be employed	Participant must meet attendance requirement(s)	Participant must be in compliance with other SNAP E&T program requirements	Participant reimbursement must not be available to participant through another program or source	Other qualification (specify)	No qualifications
a. Child care vouchers or funds	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
c. Other dependent care (for example, elder care)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
e. Auto repair	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
f. Books or other supplies for classes	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
g. Course tuition/fees	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
k. Personal hygiene or grooming supplies	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
l. Health, dental, or eye care	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>

	Participant must be employed	Participant must meet attendance requirement(s)	Participant must be in compliance with other SNAP E&T program requirements	Participant reimbursement must not be available to participant through another program or source	Other qualification (specify)	No qualifications
m. Rent/housing assistance	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
o. Legal services	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
p. Other (specify)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="text"/>	0 <input type="radio"/>
<input type="text" value="(STRING 250)"/>						

ALL

C15. In FY 2020, roughly what share of SNAP E&T participants received each of the following participant reimbursements?

PROGRAMMER: FILL WITH PARTICIPANT REIMBURSEMENTS AVAILABLE TO SOME OR ALL PARTICIPANTS, AS INDICATED IN C1, C1A-C1P = (1, 2)

FOR NONE: *[Hover over text: Select if participant reimbursement is available but no participants received this reimbursement in FY 2020]*

FOR NA: *[Hover over text: Select if participant reimbursement not available in FY 2020]*

Select one per row

	None	1-24%	25-49%	50-74%	75-100%	Don't know
a. Child care vouchers or funds	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
c. Other dependent care (for example, elder care)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
e. Auto repair	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
f. Books or other supplies for classes	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
g. Course tuition/fees	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
i. Uniforms, work or interview clothing, tools, or other work equipment	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
j. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
k. Personal hygiene or grooming supplies	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
l. Health, dental, or eye care	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>

	None	1-24%	25-49%	50-74%	75-100%	Don't know
m. Rent/housing assistance	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
n. Expenses associated with obtaining ID or other documentation	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
o. Legal services	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
p. Other (specify)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
<div>(STRING 250)</div>						

ALL

C16. In FY 2020, what was the total amount your agency paid in participant reimbursements to SNAP E&T participants?

DOLLARS

(RANGE 0-10,000,000)

ALL

C17. In FY 2020, how many SNAP E&T participants received at least one participant reimbursement?

NUMBER SNAP E&T PARTICIPANTS

(RANGE 0-300,000)

ALL

C18. In FY 2020, approximately what share of work registrants were exempted from participating in SNAP E&T because your agency was unable to provide them the necessary participant reimbursements?

Select one only

- ☐ None.....0
- ☐ 1-24%.....1
- ☐ 25-49%.....2
- ☐ 50-74%.....3
- ☐ 75-100%.....4
- ☐ Not applicable.....na
- ☐ Don't knowd

SUPPORT SERVICES

In addition to participant reimbursements, case managers might provide or refer participants to other support services. The next questions ask about these additional support services.

ALL

C19. Roughly what share of local SNAP offices or E&T providers offer the following additional support services (including referrals) to SNAP E&T participants?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	None	1-24%	25-49%	50-74%	75-100%	Don't know
a. Child care vouchers or funds	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
b. Other child care assistance (for example, referrals to child care agency)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
c. Other dependent care (for example, elder care)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
d. Transportation assistance (for example, bus passes, gas cards)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
e. Auto repair	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
f. Books or other supplies for classes	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
g. Course tuition/fees	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
h. Fees associated with tests, licensing, or credentialing	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
i. Tutoring	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
j. Uniforms, work or interview clothing, tools, or other work equipment	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
k. Other work-related expenses (for example, union dues, drug testing, background checks, fingerprinting)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
l. Health, dental, or eye care	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
m. Mental health, substance abuse, or domestic violence services	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
n. Rent/housing assistance	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
o. Assistance applying for other government benefits	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
p. Expenses associated with obtaining ID or other documentation	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
q. Legal services	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
r. Services for participants' children or other family members (for example, services to address child behavior issues)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
s. Other (specify)	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	d <input type="radio"/>
<div style="border: 1px solid black; padding: 5px; display: inline-block; width: 300px;">(STRING 250)</div>						

ALL

C20. To the best of your understanding, among most local SNAP offices or E&T providers, which staff inform SNAP E&T participants of available additional support services?

Select all that apply

- 1 ☐ SNAP eligibility worker
- 2 ☐ Local SNAP office staff (other than eligibility worker)
- 3 ☐ Case manager
- 4 ☐ SNAP E&T provider staff (other than case manager)
- 99 ☐ OTHER STAFF (specify)

Specify (STRING 250)

ALL

PROGRAMMER NOTE: DISPLAY COLUMNS ASSOCIATED WITH RESPONSES TO C20. IF C20=1, DISPLAY COLUMN 1. IF C20=2, DISPLAY COLUMN 2, ETC. ALWAYS DISPLAY "MOST PARTICIPANTS NOT INFORMED" COLUMN.

C21. Among most local SNAP offices or E&T providers, when do those staff inform SNAP E&T participants of available additional support services?

PROGRAMMER: CODE ALL THAT APPLY

Select all that apply per row

	SNAP eligibility worker	Local SNAP office staff (other than eligibility worker)	Case manager	SNAP E&T provider staff (other than case manager)	Other staff	Most participants not informed at this time
a. During the certification or referral process	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
b. During SNAP E&T orientation	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
c. At intake (after referral to E&T)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
d. When staff person or assessment uncovers a need or barrier	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
e. When participant expresses a need or barrier	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
f. When participant provides evidence of a need or barrier (for example, documenting that the participant lives X miles from the provider or employer)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
g. Other (specify)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	0 <input type="radio"/>
<input type="text"/> • (STRING 250)						

ALL

C22. Is there anything about your agency's approach to providing participant reimbursements or other support services for SNAP E&T participants that you would like to highlight as innovative or unique (for example, services provided, use of evidence-based practice)?

- ☐ Yes..... 1
☐ No..... 0

IF C22 = 1

C22a. Please describe what about your agency's approach to providing participant reimbursements or other support services for SNAP E&T participants that you would like to highlight as innovative or unique.

(STRING 1000)

ALL

C_END. Thank you for completing this survey section. If you have additional information you would like to share about participant reimbursements or other support services for SNAP E&T participants in your State or territory, please share it in the box below.

(STRING 1000)

Privacy Act Statement

Authority: Section 17 of the Food and Nutrition Act of 2008, as amended through the Agricultural Improvement Act of 2018 (2018), P.L. 115-334, 7 U.S.C. 2026 (a) (1), authorizes collection of the information on this application.

Purpose: Information will be used to help identify lessons learned and best practices that FNS can share with States to implement robust SNAP E&T programs and fulfill the new case management requirement.

Routine Use: Information may be disclosed for any of the routine uses listed in the System of Record notice titled FNS-8 USDA/FNS Studies and Reports published in the Federal Register on April 25, 1991, Volume 56, Number 80 (pages 19078-19080).

Disclosure: Furnishing the information on this form is voluntary. There are no penalties for nonresponse.