

# Attachment C. Web-Based Survey Instrument

## Welcome to the SNAP Work Requirements and E&T Data Survey

Westat is conducting the *Supplemental Nutrition Assistance Program (SNAP) Work Requirements and Employment and Training (E&T) Data* study for the U.S. Department of Agriculture's Food and Nutrition Service (FNS). This study aims to develop a framework for data that FNS can use to monitor and assess State agencies' progress toward equity in the future.

Your responses to this survey will provide a valuable picture of the administration of work requirements and SNAP E&T across State agencies, including areas such as hiring, case management, and participant reimbursements. This survey also asks about SNAP eligibility and SNAP E&T data.

The survey takes 75 minutes to complete. It contains the following six main sections that may be assigned to other agency staff with relevant expertise:

- About Your State's SNAP E&T Program
- Screening for Work Requirements
- Case Management, Initial Assessment, and Participant Reimbursements
- SNAP E&T Service Providers and Components
- SNAP E&T Data Use and Decision Making
- Participant Outcomes
- SNAP Eligibility and E&T Data
- State Agency Hiring Practices

Your responses will be kept private, except as otherwise required by law. We will not share the information you provide with anyone outside the study team. Although participation is strongly encouraged, there are no penalties if you choose not to participate.

If you have questions about the survey, please contact the Westat study team at [study email TBD] or the FNS project officer, Kristen Corey, at [Kristen.Corey@usda.gov](mailto:Kristen.Corey@usda.gov).

### Public Burden Statement

This information is being collected to assist the Food and Nutrition Service in examining equity in SNAP work requirements and SNAP Employment and Training. This is a voluntary data collection, and FNS will use the information to understand what data are needed to assess equitable program access and outcomes in SNAP and SNAP Employment and Training. This collection does not request any personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXX. The time required to complete this information collection is estimated to average 75 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the following address: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, Alexandria, VA 22314, ATTN: PRA (0584-XXXX). Do not return the completed form to this address.

## About Your State's SNAP E&T Program

These first questions provide background information on your State agency's SNAP E&T program.

1. **At which level is your State agency's E&T program administered?**
  - a. State administered
  - b. County administered
  
1. **Is your State agency's E&T program mandatory or voluntary?**
  - r. Mandatory
  - s. Voluntary
  - t. Combination of mandatory and voluntary
  
2. **[If 2c selected] Approximately what percentage of the counties in your State operate a mandatory E&T program?**  
 \_\_\_\_\_%
  
3. **[If 2a is selected] How much of a priority are the following factors when your State agency develops its list of geographical-based exemptions from SNAP E&T?**

	High Priority	Medium Priority	Low Priority	Not Considered
a. Lack of in-demand occupations	i	i	i	i
b. Lack of high-growth occupations	i	i	i	i
c. Lack of access to transportation	i	i	i	i
d. Area (e.g., county) unemployment rates	i	i	i	i
e. Median household incomes	i	i	i	i
f. Area demographics (e.g., race and/or ethnicity)	i	i	i	i

Thank you for completing these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about your State's E&T program.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

## Screening for Work Requirements

This section includes questions about the SNAP eligibility interview process for determining whether an applicant is subject to work requirements. *Someone familiar with the eligibility interview process should complete this section or be consulted before completing this section.*

The next set of questions asks about the SNAP eligibility interview. For this survey, the eligibility interview is the process that takes place when participants apply for SNAP, and an eligibility interview determines whether that person is subject to the work requirement, an able-bodied adult without dependents (ABAWD) subject to time limits, or both.

- 4. How does your State agency conduct eligibility interviews? Select all that apply.**
  - a. In person
  - b. By telephone
  - c. By video call
  - d. By instant message or text
  - e. Other, specify
- 5. How does your State screen potential work registrants when determining whether an applicant may be subject to the SNAP work requirements?**
  - r. We use the State Eligibility System to help screen potential work registrants.
  - s. We use a script or checklist to help eligibility workers screen potential work registrants during the course of the interview.
  - t. We use a combination of our Eligibility System and a script or checklist to help screen potential work registrants.
  - u. We do not use our Eligibility System or a script or checklist to screen potential work registrants.
- 6a1. [If 6b or 6c selected] Is the eligibility worker required to use a script or checklist when determining whether an applicant is subject to the SNAP work requirements?**
  - a. Yes, we have a script or checklist that the eligibility worker is required to follow strictly in the interview
  - b. Yes, we have a script or checklist that the eligibility worker can use, but we allow the eligibility worker some discretion in structuring the interview.
- 6. How does your State determine whether a work registrant is subject to ABAWD time limits?**
  - a. We use the State Eligibility System to help identify work registrants who may be subject to ABAWD time limits.
  - b. We use a script or checklist to help eligibility workers identify work registrants who may be subject to ABAWD time limits during the course of the interview.
  - c. We use a combination of our Eligibility System and a script or checklist to help identify work registrants who may be subject to ABAWD time limits.
  - d. We do not use our Eligibility System or a script or checklist to identify work registrants who may be subject to ABAWD time limits.

**7a1. [if 7b or 7c] Is the eligibility worker required to use a script or checklist when determining whether a work registrant is subject to ABAWD time limits?**

- a. Yes, we have a script or checklist that the eligibility worker is required to follow strictly in the interview.
- b. Yes, we have a script or checklist that the eligibility worker can use, but we allow the eligibility worker some discretion in structuring the interview.

**7. Which of the following does your State agency consider when deciding who should be referred to E&T? Select all that apply.**

- a. Education or prior work experience
- b. Current employment status
- c. ABAWD status
- d. Work registration status
- e. Age
- f. County of residence
- g. Housing status
- h. Criminal record
- i. Health status
- j. Citizenship status
- k. Disability status

**8. How do you decide when to require work registrants to provide verification to establish that they are unfit for work?**

- a. We always require verification
- b. We follow a script or set guidelines to decide when verification is needed
- c. Eligibility workers can use their discretion to decide when verification is needed
- d. Other; specify \_\_\_\_\_

**9. Are the verification requirements to establish unfitness for work different for people subject to the ABAWD time limit than for people who are only subject to general work requirements?**

- a. Yes
- b. No

**10a1. [if 10a selected]: How do the verification requirements for establishing unfitness for work differ for people subject to the ABAWD time limit?**

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**10a2. [If 10a selected] Is the eligibility worker making the unfit-for-work determination for ABAWDs required to file documentation supporting their decision?**

- a. Yes
- b. No

**10. Which of the following steps do eligibility workers take to determine if a person has good cause for not meeting the general work requirements before applying disqualification from SNAP? Select all that apply.**

- a. Discuss the situation with the client
- b. Ask the employer or a collateral contact to verify the information
- c. Consult with other State agency staff before making a determination
- d. Other; specify \_\_\_\_\_
- e. None of the above

**11. How does your State agency inform individuals they have been referred to the SNAP E&T program? Select all that apply.**

- a. In person
- b. Email
- c. Mail
- d. Phone call
- e. Text message
- f. Other; specify: \_\_\_\_\_

**12. How many contact attempts does your State agency's policy require in order to inform individuals they have been referred to the SNAP E&T program?**

\_\_\_\_\_

The following questions are about waivers, exemptions, and policies related to ABAWDs.

- 1. Does your State agency currently have an ABAWD waiver?**
  - r. Yes
  - s. No
- 2. [If 14a selected] Where does the waiver apply?**
  - a. State/territory-wide
  - b. Specific counties or Tribal areas
- 3. [If 14a selected] Which of the following criteria is the waiver based on?**
  - a. An unemployment rate of over 10 percent
  - b. Insufficient jobs in the area
- 4. [If 14b selected] Is your State agency currently using ABAWD discretionary exemptions?**

- a. Yes
- b. No

**5. [If 17a selected] Which of the following ABAWD discretionary exemptions are currently used in your State? Select all that apply.**

- a. Lack of employment opportunities in a given area
- b. Persons leaving incarceration
- c. Rural residents with no transportation
- d. Individuals with addiction on waiting lists for treatment
- e. Other; specify: \_\_\_\_\_
- f. None of the above

**6. [If 17a selected] How are your State agency's ABAWD discretionary exemptions distributed?**

- a. First-come, first-served basis
- b. Categorically; we reserve a specific number of exemptions for specific, need-based categories
- c. Geographically (e.g., county); we reserve a specific number of exemptions for specific areas
- d. Other; specify: \_\_\_\_\_

Thank you for answering these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about case management, initial assessments, and reimbursements.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

### Case Management and Initial Assessment

These next questions ask about case management for SNAP E&T participants. For this survey, case management includes 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. Someone with case management experience should complete this section or be consulted before completing this section.*

**7. Which entities in your State provide E&T case management? Select all that apply.**

- a. Local SNAP office
- b. Community college
- c. Workforce Innovation and Opportunity Act (WIOA) agency or other workforce programs funded by Department of Labor (DOL)
- d. Community-based organization
- e. Adult basic education provider
- f. Other; specify: \_\_\_\_\_

**8. What factors are used to assign E&T participants to case managers? Select all that apply.**

- a. Case managers' caseload/availability
- b. Location of case manager and participant
- c. Case manager area of expertise
- d. Similar characteristics between case manager and participant
- e. Other; specify: \_\_\_\_\_

**9. How are participants assigned to case managers?**

- a. Computer assigned
- b. Manually assigned
- c. Computer assigned, but assignments can be manually changed

**10. Which of the following do case managers in your State perform? Select all that apply.**

- a. Initial assessments
- b. Additional assessments
- c. Development of individual plans
- d. Referral coordination
- e. Participant reimbursement determinations
- f. Ongoing support (such as coaching, motivational interviewing, or trauma-informed case management)

**11. Are career navigators available to participants through either the State or E&T service provider agencies?**

*Career navigators are sometimes called advisors or coaches and may or may not be the same individuals as case managers.*

- a. Yes, all participants are assigned a career navigator
- b. Yes, participants are assigned a career navigator as needed
- c. Case managers provide career navigation
- d. No, career navigators are not available

**12. What kinds of needs or barriers assessment tools are identified in policy and/or guidance for your State agency? Select all that apply.**

- a. Needs or barriers assessment tool, developed by or for the State agency, territory, or provider
- b. Standardized assessment tool, completed by participant on their own
- c. Standardized assessment tool, administered by State agency or provider staff
- d. Informal assessment tools, completed by participant on their own
- e. Informal assessment tools, administered by State agency or provider staff

- f. Other; specify: \_\_\_\_\_
- g. No policy or guidance for needs or barriers assessment tools

**Participant Reimbursements**

These next questions ask about participant reimbursements (sometimes referred to as support services) for SNAP E&T participants.

**13. How are SNAP E&T participants informed of participant reimbursements or support services available to them? Select all that apply**

- a. This information is provided at the orientation meeting
- b. This information is emailed to the participant
- c. This information is provided verbally by their case manager or E&T service provider
- d. This information is provided in writing by their case manager or E&T service provider

**14. How does your State agency track reimbursements or support services at the participant level? Select all that apply.**

- a. Tracked in SNAP eligibility management information system
- b. Tracked in State agency’s E&T data system
- c. Our State agency does not track this, but each E&T service provider tracks its own reimbursements
- d. Other; specify: \_\_\_\_\_
- e. Not tracked at the participant level

**15. What type of reimbursement cap does your State agency have? Select all that apply.**

- a. Individual expense type (e.g., auto repairs, supplies, legal services)
- b. Monthly cap
- c. Annual cap
- d. Lifetime cap
- e. Other; specify: \_\_\_\_\_
- f. Does not apply—no reimbursement caps

**16. SNAP E&T guidelines state that participant reimbursements must be covered for support services that are “reasonable and necessary.” Does your State agency’s reimbursement policy define “reasonable and necessary” for the following?**

	Yes	No
a. Transportation assistance	i	i
b. Uniforms, work, or interview clothing	i	i
c. Tools or other work equipment	i	i



d. Fees associated with testing, licensing, or credentialing	i	i
e. Tuition	i	i
f. Books or other supplies for classes	i	i
g. Technology (e.g., computers, hotspots)	i	i
h. Childcare assistance	i	i
i. Temporary housing (up to 2 months)	i	i
j. Other participant reimbursements	i	i

**29a1. [If 29j 'yes' is selected] Please list other participant reimbursements that your state defines as "reasonable and necessary"?**

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**17. Does your State agency have a formal process for SNAP E&T participants to appeal reimbursement decisions that do not fully meet their needs?**

- a. Yes, there is a formal review process
- b. No, but participants can request a review of their reimbursement based on demonstrated need
- c. No, reimbursement decisions are not subject to review

**18. [If 30a or 30b selected] How are participants notified that a review of their reimbursement is available to them? Select all that apply.**

- a. This information is included in the SNAP E&T orientation materials
- b. This information is available to participants through the State agency's website
- c. This information is provided by case managers
- d. Other; specify: \_\_\_\_\_

**19. Does your State agency offer assistance to participants who need to submit documentation for participant reimbursements? Select all that apply.**

- a. Yes, one-on-one assistance in person
- b. Yes, group assistance in person
- c. Yes, virtually through video call
- d. Yes, through phone calls
- e. Yes, through email or text
- f. No, formal assistance is not provided

**20. Does your State agency's reimbursement policy for transportation account for participant location?**

- a. Yes, for all participants

- b. Yes, in certain areas
- c. No, this is not part of our reimbursement policy

**21. How do SNAP E&T participants receive their reimbursements or support services? Select all that apply.**

- a. Cash
- b. Vouchers
- c. Check or direct deposit
- d. In-kind assistance (e.g., directly provide uniforms or supplies)
- e. Other; specify: \_\_\_\_\_

**22. [If 34c selected] How do you accommodate persons without a bank account?**

- a. We can provide alternative forms of reimbursement, such as gift cards or other cash equivalents, that do not require a bank account
- b. We cannot provide alternative forms of reimbursement

Thank you for answering these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about case management, initial assessments, and reimbursements.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

## SNAP E&T Service Providers and Components

This section is about SNAP E&T service providers and the E&T components available in your State. *Someone familiar with the E&T service providers in your State should complete this section or be consulted before completing this section.*

**23. Which of the following provide E&T services in your State? Select all that apply.**

- a. Local SNAP office
- b. Community college or university
- c. WIOA agency or other DOL-funded workforce programs
- d. Community-based organization
- e. Adult basic education provider
- f. Other; specify: \_\_\_\_\_

**24. Which SNAP E&T components does your State agency offer? Select all that apply.**

- a. Supervised job search
- b. Job search training
- c. Job retention

- d. Education programs (e.g., English language learners, GED, vocational education/training)
- e. Self-employment training
- f. Work-based learning
- g. Work experience (e.g., apprenticeship, preapprenticeship)
- h. Workfare
- i. Other; specify: \_\_\_\_\_

**25. How much of a priority were the following factors when your State agency chose its current E&T service providers?**

Factor	Required	High Priority but Not Required	Medium Priority	Low Priority	Not Considered
a. Includes training for in-demand or high-growth occupations	i	i	i	i	i
b. Located in areas with in-demand or high-growth occupations	i	i	i	i	i
c. Located in neighborhoods with historically underserved groups <small>Historically underserved groups are people who have historically experienced discrimination or encountered barriers (e.g., racial/ethnic, sex and gender identity and expression, sexual orientation, economic, cultural, and/or linguistic) to services.</small>	i	i	i	i	i
d. Convenience to State agency (e.g., easy to work with, co-located, existing agreements)	i	i	i	i	i
e. Located near public transportation or offers transportation services	i	i	i	i	i
f. Provides services based on participant feedback	i	i	i	i	i
g. Provides services at a competitive cost	i	i	i	i	i
h. Has a record of engaging historically underserved groups <small>Historically underserved groups: people who have historically experienced discrimination or encounter barriers (e.g., racial/ethnic, sex and gender identity and expression, sexual orientation, economic, cultural,</small>	i	i	i	i	i

Factor	Required	High Priority but Not Required	Medium Priority	Low Priority	Not Considered
and/or linguistic) to services.					
i. Successfully worked together in the past	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Engages in culturally responsive hiring and training practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Employs staff with similar lived experience as participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Uses evidence-based practices when delivering services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**39a1.** This question asks about both external and internal data sources you may use to help inform your E&T program. Does your State agency use any of the following data sources to tailor the **types of E&T services** offered to meet the needs of participants?

	Types of Service
a. U.S. DOL data	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Census Bureau data	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. State DOL data	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Data from other State agencies (e.g., Department of Human Services)	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Commercial data on careers growth or local labor market indicators	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. E&T participant surveys	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Other participant feedback	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Public transit or other transportation resource data	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. Other data source	<input type="checkbox"/> Yes <input type="checkbox"/> No

**39a2.** [If 39a1i 'yes' is selected] Please list any other data sources your State agency uses to tailor the types of E&T services offered to meet the needs of participants?

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**39b1.** This question asks about both external and internal data sources you may use to help inform your E&T program. Does your State agency use any of the following data sources to tailor the **locations of E&T services** offered to meet the needs of participants?

	Location of Service
a. U.S. DOL data	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Census Bureau data	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. State DOL data	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Data from other State agencies (e.g., Department of Human Services)	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Commercial data on careers growth or local labor market indicators	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. E&T participant surveys	<input type="checkbox"/> Yes <input type="checkbox"/> No

g. Other participant feedback	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Public transit or other transportation resource data	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. Other data source	<input type="checkbox"/> Yes <input type="checkbox"/> No

**39b2.** [If 39b1i 'yes' is selected] Please list the other data source your State agency uses to tailor the locations of E&T services offered to meet the needs of participants.

\_\_\_\_\_

1. How does your State agency determine which components will be assigned to each SNAP E&T participant? Select all that apply.
  - a. Based on skills or barriers assessment
  - b. Based on case manager assessment of participant need
  - c. Local/regional availability
  - d. Other; specify: \_\_\_\_\_

Thank you for answering these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about E&T service providers and E&T components

Role: \_\_\_\_\_

Years in current role: \_\_\_\_\_

**SNAP E&T Data Use and Decision Making**

These questions ask about how your State agency uses SNAP E&T data to make decisions about the program. *Someone involved in program planning or making decisions that affect the E&T program should complete this section or be consulted before completing this section.*

**2. Does your State agency examine differences by race and/or ethnicity in—**

	Yes	No, but These Data Are Available	No, and These Data Are Not Available
a. Rates of exemptions from the general work requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Rates of state exemptions from mandatory E&T	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Rates of exemptions from the ABAWD work requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Rates of discretionary exemptions	i	i	i
e. E&T component assignments	i	i	i
f. Use of sanctions	i	i	i

**3. Does your State agency examine differences by gender in—**

	Yes	No, but These Data Are Available	No, and These Data Are Not Available
a. Rates of exemptions from the general work requirements	i	i	i
b. Rates of state exemptions from mandatory E&T	i	i	i
c. Rates of exemptions from the ABAWD work requirement	i	i	i
d. Rates of discretionary exemptions	i	i	i
e. E&T component assignments	i	i	i
f. Use of sanctions	i	i	i

**4. [If any “yes” to 41 or 42 is selected] Has your State agency developed policy or guidance based on any of the data your State agency examined?**

- a. Yes
- b. No

**5. [If 43a selected] What policies, guidance, or practices has your State agency developed or revised?**

\_\_\_\_\_

**6. [If any “yes” to 41 or 42 is selected] How [else] has your State agency used the findings from the analyses?**

\_\_\_\_\_

Thank you for completing these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about SNAP E&T data and decision making.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

**Participant Outcomes**

These next questions ask about participant outcomes and participant feedback. *Someone who works with your State’s SNAP eligibility data system (e.g., data manager, data analyst) should complete this section or be consulted before completing this section.*

**7. Are the following participant outcomes tracked, by your State agency or E&T service providers?**

Outcome	Tracked in Aggregate (by Provider or County)	Tracked at the Individual Participant Level	Not Tracked
a. Overall completion	i	i	i
b. Graduation or credential (e.g., certification) completion	i	i	i
c. Skill gains	i	i	i
d. Job placement	i	i	i
e. Job retention	i	i	i
f. Participant salary or wages	i	i	i
g. Participation in SNAP after E&T completion	i	i	i

**8. [IF ‘NO’ TO ALL IN TRACKED AT INDIVIDUAL LEVEL IN Q46] Although outcomes are not actively tracked at an individual level, would your State agency be able to pull reports on outcomes by participant characteristics?**

- a. Yes
- b. No

**9. Where do data on participant outcomes come from? Select all that apply.**

Outcome [do not show those “Not Tracked” in 46]	Collected by SNAP E&T Service Providers	Collected by the SNAP Agency	Collected by Other State Agencies
a. Overall completion	i	i	i
b. Graduation or credential (e.g., certification) completion	i	i	i
c. Skill gains	i	i	i
d. Job placement	i	i	i
e. Job retention	i	i	i
f. Participant salary or wages	i	i	i
g. Participation in SNAP after E&T completion	i	i	i

**10. [Repeat for each outcome tracked in Q46] How frequently does your State agency receive updated data on [fill outcome from Q46]?**

- a. Weekly
- b. Monthly
- c. Quarterly

- d. Annually
- e. Other; specify: \_\_\_\_\_

**11.** How does your State agency receive participant feedback on access to the SNAP E&T program? This feedback could come directly through the agency or be gathered by providers and received by the agency.

Access means ease of ability to participate in SNAP E&T (e.g., location, technology, language).

- a. Feedback is requested from all participants
- b. Participants can provide feedback, but it is not requested
- c. We have no way to receive feedback from participants

**12.** Does your State agency receive feedback on participant satisfaction (e.g., quality, relevance) with SNAP E&T services and service providers? This feedback could come directly through the agency or be gathered by providers and received by the agency.

Quality or relevance is the perceived benefit, feels like SNAP E&T experience was helpful, E&T experience matched existing or desired skills.

- a. Feedback is requested from all participants
- b. Participants can provide feedback, but it is not requested
- c. We have no way to receive feedback from participants

Thank you for completing these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about participant outcomes.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

### SNAP Eligibility and E&T Data

The questions in this section ask about your State's SNAP eligibility system (sometimes called the management information system, or MIS), your State's E&T program data, and data sharing. *Someone who works with your State's SNAP eligibility data (e.g., data manager, data analyst) should complete this section or be consulted before completing this section.*

**13.** Which of the following best describes the association between your State's SNAP eligibility system and SNAP E&T databases that capture information on participants and activities?

- a. One integrated system or database
- b. Multiple systems or databases

**14.** [If 52b selected] How are SNAP E&T data stored? Select all that apply.

- a. Stored at the State agency level outside the SNAP eligibility system
- b. Stored and maintained by county offices



- c. Stored and maintained at the E&T service provider level
- d. Other; specify \_\_\_\_\_

**15. [if 52b selected] Which of the following best describes how users access and maintain SNAP eligibility data and SNAP E&T data?**

- a. State agency maintains a SNAP eligibility system that SNAP E&T service providers can view, but they cannot enter E&T data
- b. State agency maintains a SNAP eligibility system that SNAP E&T service providers can view and enter E&T data
- c. State agency maintains a SNAP eligibility system that is not available to SNAP E&T service providers
- d. Other; specify: \_\_\_\_\_

**16. Which of the following SNAP participant data elements does your State’s SNAP eligibility system capture? For each data element, indicate if it is required, collected but not required, or not collected.**

Data Element	Required by System	Collected (but Not Required)	Not collected
a. Race and/or ethnicity	i	i	i
b. Age	i	i	i
c. Gender	i	i	i
d. Education	i	i	i
e. Criminal record	i	i	i
f. Citizenship status	i	i	i
g. Housing status	i	i	i
h. Preferred language	i	i	i
i. Disability status	i	i	i
j. Address	i	i	i

**17. [If 55a = Yes to either column] Do the data allow for a participant to be associated with multiple racial/ethnic categories?**

- a. Yes
- b. No

**18. [If 55a = Yes to either column] Is ethnicity a separate data element from race?**

- a. Yes
- b. No

**19. [If 55b = Yes to either column] How is participant age stored in the data system?**

- a. Date of birth
- b. Individual age

c. Age range

**20. [If 55c = Yes to either column] Which of the following are options for gender in the data? Select all that apply.**

- a. Male
- b. Female
- c. Transgender
- d. Nonbinary
- e. Other; specify: \_\_\_\_\_

**21. [If 55e = Yes to either column] Are any of the following included in the criminal record data? Select all that apply.**

- a. Specific crime committed (i.e., theft, fraud, assault)
- b. Type of conviction (i.e., misdemeanor versus felony)
- c. Date of most recent conviction
- d. Other; specify: \_\_\_\_\_

**22. [If 55h = Yes] How are the data on preferred language stored in the data system?**

- a. Binary variable indicating English versus non-English
- b. Participant’s specific preferred language (i.e., includes specific languages other than English or Spanish)
- c. Other; specify: \_\_\_\_\_

**23. How are the following data elements collected? Select all that apply.**

Data Element [Only display elements endorsed in 55]	Directly From Participant, Verbally	Directly From Participant, Written	Another Way
a. Race and/or ethnicity	..	..	..
b. Age	..	..	..
c. Gender	..	..	..
d. Education	..	..	..
e. Criminal record	..	..	..
f. Citizenship status	..	..	..
g. Housing status	..	..	..
h. Preferred language	..	..	..
i. Disability status	..	..	..

j. Address	..	..	..
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**24. At what points are these data elements collected from individuals? Select all that apply.**

- a. Screening
- b. Initial assessment
- c. During first meeting with E&T case manager
- d. During subsequent meetings with E&T case manager
- e. During E&T orientation
- f. Periodically (e.g., monthly, quarterly)
- g. Other; specify: \_\_\_\_\_

**25. Does your State have data on which E&T components individuals are assigned?**

- a. Yes
- b. No, but we could obtain the data
- c. No, and we could not obtain the data

**26. Does your SNAP State office have access to the following data elements at the individual level?**

Data Element	Yes, in the SNAP Eligibility System	Yes, in SNAP E&T Data Systems	We Do Not Have Access to the Data Element at the Individual Level
a. Are subject to general work requirements	..	..	..
b. Are exempt from general work requirements	..	..	..
c. Lost eligibility because of failure to comply with general work requirements	..	..	..
d. Determined to have good cause from the general work requirements	..	..	..
e. Are referred to E&T	..	..	..
f. [DISPLAY IF 2a OR 2b SELECTED] Are exempt from mandatory E&T	..	..	..
g. Experience E&T sanctions	..	..	..
h. Completed E&T training, educational or work experience, or an on-the-job training component	..	..	..
i. Are employed after E&T	..	..	..
j. Are ABAWDs	..	..	..
k. Are ABAWDs living in waived area	..	..	..
l. Are at-risk ABAWDs	..	..	..

m. Lost eligibility because of ABAWD time limit	..	..	..
n. Are exempt from ABAWD requirements	..	..	..
o. Determined to have good cause from the ABAWD work requirement	..	..	..
p. Are referred to fraud detection	..	..	..
q. Are sent to claims collection	..	..	..
r. Did not receive timely case processing	..	..	..
s. Are denied benefits at eligibility [do not allow a response in E&T column]	..	..	..

**27. Does your SNAP State office track the reasons for exemption from—**

	Yes, in the SNAP Eligibility System	Yes, in SNAP E&T Data Systems	We Do Not Track This Information
a. General work requirements	..	..	..
b. ABAWD requirements	..	..	..
c. [If 2a or 2c] Mandatory E&T	..	..	..

These next questions ask about SNAP eligibility data analysis.

**28. Does your State agency analyze differences in E&T participation or outcomes based on any of the following?**

Data Element [only display those selected in 55]	Yes, Participation	Yes, Outcomes	No, Neither
a. Race and/or ethnicity	..	..	..
b. Age	..	..	..
c. Gender	..	..	..
d. Education	..	..	..
e. Criminal record	..	..	..
f. Citizenship status	..	..	..
g. Housing status	..	..	..
h. Preferred language	..	..	..
i. Disability status	..	..	..

**29. [IF 55a is collected] Does your State agency analyze differences by race and/or ethnicity in any of the following? Select all that apply.**

- a. Referral to E&T
- b. Timely case processing

- c. Denial of benefits
- d. Work requirements
- e. Fraud detection
- f. Claims collection
- g. None of the above

**30. Does your State agency experience any of the following barriers to analyzing SNAP eligibility data? Select all that apply.**

- a. We do not have staff trained to conduct these analyses
- b. Staff who are trained do not have enough time
- c. Not enough funding
- d. Not a priority area for analysis
- e. Other; specify: \_\_\_\_\_
- f. None of the above

These next questions ask about data sharing and other sources of data on SNAP E&T participants.

**31. Do any of the following sources maintain or own data on SNAP E&T service participants outside your State agency?**

- a. SNAP E&T providers
- b. Other partner organizations
- c. Other; specify: \_\_\_\_\_
- d. None of the above

**32. [If 70d not selected] Are these data available to your State agency?**

- a. Yes, through a formal data use agreement or a memorandum of understanding
- b. Yes, through informal agreements
- c. No

**33. [If 70d not selected, display data elements not selected in 55] What data do other entities maintain that *are not included* in the SNAP eligibility system or State E&T data system? Select all that apply.**

- a. Race and/or ethnicity
- b. Age
- c. Gender
- d. Education
- e. Criminal record
- f. Citizenship status

- g. Housing status
- h. Preferred language
- i. Disability status
- j. Address

**34. [If 70d not selected] Can individual participants be identified using these data? For example, is Personally Identifiable Information included, or are any of the data specific enough so that someone could identify the individual tied to a record?**

- a. Yes
- b. No

**35. Does your agency have data-sharing agreements with other State agencies (e.g., State DOL, other Health and Human Services agencies) regarding E&T participants?**

- a. Yes
- b. No

**36. [If 74a selected] Can individual participants be identified using these data? For example, is Personally Identifiable Information included, or are any of the data specific enough so that someone could identify the individual tied to a record?**

- a. Yes
- b. No

Thank you for completing these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about SNAP eligibility data and data sharing.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

### State Agency Hiring Practices

This section asks about hiring practices for the SNAP eligibility and SNAP E&T workforce in your State agency. In your responses, please consider all staff members responsible for directly reviewing SNAP participant cases and making referrals to E&T components and service providers. *Someone who is directly involved in making hiring decisions should complete this section or be consulted prior to completing this section.*

**37.** Assume that two very similar people are applying for as a SNAP eligibility worker position in your State and rank the following candidate factors in terms of their importance in making a hiring decision. You can check one box in each column.

Candidate factors	1 <sup>st</sup> (most important)	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup> (least important)
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				)
a. Years of formal education	..	..	..	..
b. Prior experience working for a state agency	..	..	..	..
c. Experience working with people from lower income households	..	..	..	..
d. Experience as a lower income person or living in a lower income community	..	..	..	..

**38. Does your State agency use criminal background checks to make hiring decisions for the SNAP eligibility and SNAP E&T workforce?**

- a. Yes, as a blanket policy across all State agencies
- b. Yes, as a blanket policy within the SNAP State office
- c. Yes, on a case-by-case basis
- d. We do not conduct criminal background checks

**39. Does your State agency have a policy that addresses workforce diversity among the SNAP eligibility and SNAP E&T staff that affects hiring practices?**

Policy means the formalized requirements or standards for operation.

- a. Yes, and specific groups are named in the policy
- b. Yes, and specific groups *are not* named in the policy
- c. No policy

**40. [If 78a selected] Which of the following groups are specifically named in the policy? Select all that apply.**

- a. Racial/ethnic groups (e.g., American Indian or Alaska Native, Asian, Black or African American, Hispanic or Latino)
- b. Persons with disabilities
- c. Women
- d. LGBTQIA+ persons
- e. Former SNAP recipients
- f. Other; specify: \_\_\_\_\_

**41. How does your State agency choose who is on the hiring panel? Select all that apply.**

- a. There is policy or guidance dictating diversity in demographics of the hiring panel
- b. There is policy or guidance dictating diversity in the type of staff on the hiring panel
- c. There is other policy or guidance dictating who is on the hiring panel
- d. None of the above

e. Does not apply; we do not use a hiring panel

**42. Does your State agency have a [policy](#) regarding the promotion of historically underrepresented groups into leadership roles (e.g., supervisors, directors, managers) among the SNAP eligibility and SNAP E&T staff?**

Policy means the formalized requirements or standards for operation.

- a. Yes, and specific groups *are* named in the policy
- b. Yes, and specific groups *are not* named in the policy
- c. No policy

**43. [If 81a selected] Which of the following demographic groups are specifically named in the policy regarding promotion of underrepresented groups? Select all that apply.**

- a. Racial/ethnic groups (e.g., American Indian or Alaska Native, Asian, Black or African American, Hispanic or Latino)
- b. Persons with disabilities
- c. Women
- d. LGBTQIA+ persons
- e. Former SNAP recipients
- f. Other; specify: \_\_\_\_\_

**44. Which of the following best describes what your State agency is currently doing to address the role that unconscious biases may play in eligibility workers' decisions when they interview SNAP applicants and participants from racialized or underrepresented groups?**

- a. We have mandatory training that addresses unconscious bias for eligibility workers
- b. We offer optional training that addresses unconscious bias for eligibility workers
- c. We are planning or have proposed training that addresses unconscious bias but have not begun implementing the training program
- d. We have no training that addresses unconscious bias and no plans to implement training

Thank you for completing these questions. Below, please provide your role and the number of years you have been in your current position. If more than one person contributed, please list the role of the person most knowledgeable about State agency hiring and service providers.

Role: \_\_\_\_\_

Years in current position: \_\_\_\_\_

Thank you for completing the survey. Your responses have been recorded.

Click next to return to the survey home page.