



Housing and Employment Navigator Client Follow-Up Survey Guidelines

Due Date

Please complete this survey 3 months after a client stopped receiving Navigator services.

Procedure

In order to complete the survey you will need to interview the client. To conduct the interview you may wish to use the [printable version of the survey](#) to ensure you collect all necessary information.

After you conduct the interview, enter the information provided by the client into the online SurveyMonkey (link below). You will need a password in order to access the survey. If you do not have that password, please contact Margaret Hennings (contact info below).

After you click the "Done" button on the last page of the survey, you will be taken to a "thank you" page. Your survey has not been submitted until you see this page.

Errors

Until you click the "Done" button on the last page of the survey you may go back and correct any previous mistakes in the data entry. If you realize that there is an error in the survey after you have submitted it, please contact Margaret Hennings (contact info below).

Questions

For questions, please contact Margaret Hennings, Performance Measurement Specialist, at Building Changes: Margaret.Hennings@BuildingChanges.org or 206-805-6163.

Housing and Employment Navigator Client Follow-Up Survey

This survey is approximately 15 questions long and covers basic information about the client. Most of the questions align with information collected by HMIS and is about basic demographic information, employment, and income and benefits.

The follow-up survey can be found at this address: <https://www.surveymonkey.com/s/SL3T368>

The remainder of this guide walks through the survey, section by section, to provide detailed instructions.

Navigator Identification

1. Who is entering the data into this survey?
 - This should be the name of the Navigator, NOT the name of the client
 - This name will let us know who to contact if we have a question about the information in the survey
2. In which Washington Families Fund or Sound Families project is, or was, this client enrolled?
 - Select the housing program in which the client is enrolled
 - If client's housing program is not listed, please check other and enter the housing program name

Client Identification

1. Client Initials:
 - This will help us match each client's intake, exit and follow-up surveys
2. What is the client's date of birth?
 - Enter the date of birth in the month/day/year format
 - You will need to use all 4 digits in the year
3. On what date did the client stop receiving YWCA Housing and Employment Navigator services?
 - You will need to use all 4 digits in the year

Education and Employment

1. What is the highest level of school completed by the client?
2. Is the client currently in school?
 - Indicate "yes" if the client is enrolled in high school, community college, or university courses
3. Is the client currently enrolled in a job training or job search program?
 - Indicate "yes" if the client is enrolled in a program specifically-related to job training or search
4. Is the client currently employed?

Currently Employed

- *If the client is not working, please do not answer any of the questions and skip directly to the next page.*
 - *Answer these questions only if the client is currently employed.*
 - *If they are working more than one job, answer all questions for the job at which they work the most hours.*
1. If the client is currently employed, what type of job is it?

2. If the client is currently employed, what is their monthly income from working?
 - If the client's income changes from month to month, please enter the amount they made in the most recent month
3. If the client is currently employed, do they receive any health insurance coverage from their job?
4. If the client is currently employed, do they receive any other benefits (transportation, childcare, sick time, short- or long-term disability insurance, life insurance, etc) from their job?
 - If client is unsure, leave blank

Income and Benefits

1. Does the client have any income? If so, how much do they receive each month from each source?
 - These sources of income should be directly related to the client being served by the Navigator, not other members of the household
 - Please fill in the total amount of income for each source in the corresponding box
 - Do not use the \$ symbol in entering the amounts, the boxes will only recognize numerical digits
 - If there is income from another source, simply fill in the dollar amount, but it is not necessary to indicate what the source of the funds is
2. Is the client receiving any state or federal benefits? If so, which ones?
 - Select all that apply
 - These benefits should be directly related to the client being served by the Navigator, not other members of the household
 - A client may receive benefits from multiple sources
 - If the client receives benefits not listed here, please check the "Other" box and describe the benefit received

Savings

1. Does the client have a savings account?
 - The account may be located at a financial institution, or within a program of your agency, but must be part of some formal savings program, rather than an informal collection in the home (jar, under the mattress, etc)
2. If yes, is there a regular contribution to this savings account?
 - If the client answers no to the first question, leave this question blank
 - Indicate "Yes" for this question if there is a regular contribution to the savings account
 - Regular could be considered monthly, bi-monthly or on some other consistent basis