KEENE HOUSING RESIDENT SURVEY

If you need assistance in completing this survey, or you have a question, please contact Julie Davenson at 352 6161
Please return the survey in the enclosed envelope or drop it off at the Main Office, 105 Castle Street, Keene, NH by XXXXXXXXXXXXX

NEIGHBORHOOD & HOUSEHOLD
(Neighborhood = kha property)

1 N. Which property do you live at:

- ○ Harper Acres
- ○ Central Square Terrace
- ○ Bennett Block
- ○ North & Gilsum
- ○ Harmony Lane
- ○ Riverbend
- ○ Meadow Road

2 N. My unit is an:

- ○ Efficiency
- ○ One Bedroom
- ○ Two Bedroom
- ○ Three Bedroom
- ○ Four Bedroom

3 N. How long have you lived at this residence?

○ less than 1 year ○ 1 - 3 years ○ 4 - 9 years ○ 10 -14 years ○ 15 or more years

4 N. Do you use the community facility at your property?

○ Yes ○ No

5 N. If no facility is available, would you use a community space?

○ Yes ○ No

6 N. Number of adults (age 18 and over) in your household:

○ 1 ○ 2 ○ 3 ○ 4 ○ 5

7 N. Rate the appearance of your neighborhood

Unattractive ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Attractive

8 N. What three (3) things would you suggest to improve the appearance of your neighborhood?

1.

2.

3.

SAFETY
(neighborhood = KHA property)

1 S. Overall how would you rate the safety of your neighborhood?

Not safe ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very Safe

2 S. If you do not feel safe, please identify the areas that could be improved to make you feel safe.

3 S. Have you been a victim of a crime in your neighborhood?

○ Yes ○ No

3S-1 If yes, how many times?

○ 1 ○ 2 ○ 3 ○ 4 ○ 5 or more

3S – 2 Did you report this to the Police?

○ Yes ○ No

3S – 3 Did you report this to KHA?

○ Yes ○ No

4 S. In the past year, have you had to call the Police for assistance in your neighborhood?

○ Yes ○ No

4S - 1 If yes, how many times?

○ 1 ○ 2 ○ 3 ○ 4 ○ 5 or more

5 S. Do you feel safe in your unit?

Not safe ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very Safe

5S - 1 If you do not feel safe, please identify the areas that could be improved to make you feel safe.

WORK ORDERS

In the past year how many work orders have you called in?

○ 0 ○ 1 -2 ○ 3-4 ○ 5 - 9 ○ more than 10

How easy was it to submit a work order?

Not easy ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 very easy

How pleasant was the person taking the work order?

Unpleasant ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very pleasant

How pleasant was the person completing the work order?

Unpleasant ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very pleasant

Over the past year have you had problems with...

Heat	○ Yes	○ No
Electricity	○ Yes	○ No
Stove	○ Yes	○ No
Refrigerator	○ Yes	○ No
Water/Plumbing	○ Yes	○ No

Smoke Detectors ○ Yes ○ No

What one item would you repair/replace/improve in your unit?

What one item would you repair/replace/improve in your development for the betterment of your community?

COMMUNICATION

Does the KHA provide you with information about your property?

Too little information ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Informative

Is KHA management responsive to your questions and concerns?

Not responsive ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very responsive

Do you understand the terms of your lease?

Do not understand ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Understand

Compared to one year ago, how would you rate KHA?

Worse ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Better

What three things would you suggest KHA review to make your development/unit a better place to live?

1.

2.

3.

FAMILY HOUSING

Number of adults (age 18 and over) in your household:

○ 1 ○ 2 ○ 3 ○ 4 ○ 5

Number of children age 14 - 17

○ 1 ○ 2 ○ 3 ○ 4 ○ 5 or more

Number of children age 5 - 13

○ 1 ○ 2 ○ 3 ○ 4 ○ 5 or more

Number of children age 3 - 5

○ 1 ○ 2 ○ 3 ○ 4 ○ 5 or more

Number of children age 0 - 2

○ 1 ○ 2 ○ 3 ○ 4 ○ 5 or more

Are you a participant in the Resident Self Reliance Program (RSR)?

○ Yes ○ No

Would you like to participate in the Resident Self Reliance Program?

○ Yes ○ No

Do you understand the terms of your RSR contract?

Do not understand ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Understand

How often do you meet with your Resident Service Coordinator?

○ Once a week

○ Once a month

○ Once every 4 months

○ Less often

Do you have ....

Personal goals	○ Yes	○ No
Educational goals	○ Yes	○ No
Career goals	○ Yes	○ No
Other goals	○ Yes	○ No

How helpful was your RSC in developing your goals for the year?

Not helpful ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very helpful

How would you rate your efforts to meet your goals and complete activities on your ISTPs?

Little effort ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Worked hard

How helpful was the RSR staff in connecting you to community resources?

Not helpful ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 Very helpful

Have you used the Safety Net Program in the past year?

○ Yes ○ No

Do your children participate in programs at the Youth Safe Haven?

○ Yes ○ No