

Housing Services

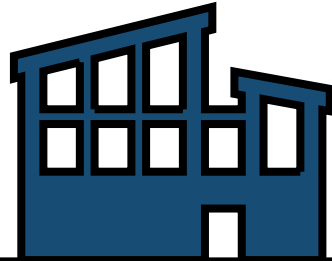


Housing Services – *Overview*

- Designed to promote and achieve self-sufficiency and stable living
 - Personal Supports
 - Employment and Education Supports
 - Social and Community Supports
- Based on basic principles
 - Voluntary Participation
 - Universal Availability
 - Resident Input

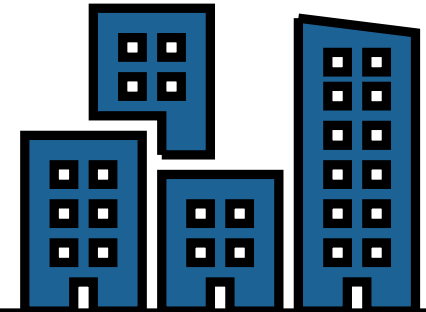
Housing Services — *Models of Service Delivery*

**In
House
Service
Provider**



Management Agent directly hires staff to coordinate and provide services.

**Community
Based
Service
Provider**



Management Agent contracts CBO to hire staff to coordinate and provide services.

Staffing Expectations — *Position Titles*

**Supports
Coordinator**

**Resident
Services
Coordinator**

**Tenant
Relations
Specialist**

**Tenant
Service
Coordinator**

**Community
Outreach
Coordinator**

**Resident
Initiatives
Coordinator**

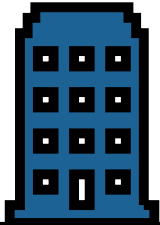
**Community
Impact
Coordinator**

**Social
Service
Coordinator**

Staffing Expectations – *Overview*

- Based on basic ratio
 - 1 hour on site per week for every 5 units (on-site)
- **Must** be identified in whole numbers
 - Employ the rounding rule (**ONLY ROUNDING UP**)
 - Outlined in Supportive Services Questionnaire and Memorandum of Understanding
- **Special Cases**: Properties with less than 10 hours (<10) identified
 - Explanation **must** be clearly identified and justifiable

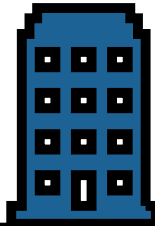
Staffing Expectations — *Determining Staffing Ratio*



46 UNITS ON-SITE



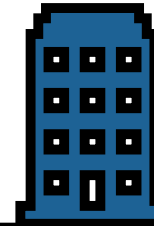
**9.2 → 10.0
HOURS PER WEEK**



90 UNITS ON-SITE



**18.0
HOURS PER WEEK**

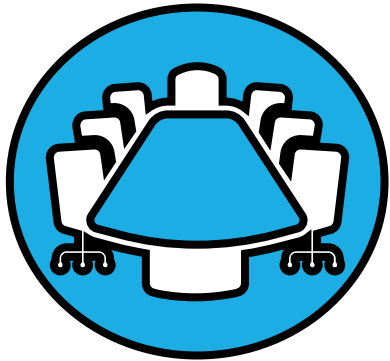


134 UNITS ON-SITE



**26.8 → 27.0
HOURS PER WEEK**

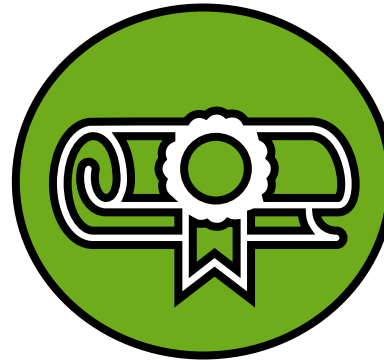
Staffing Expectations — *Continued Training*



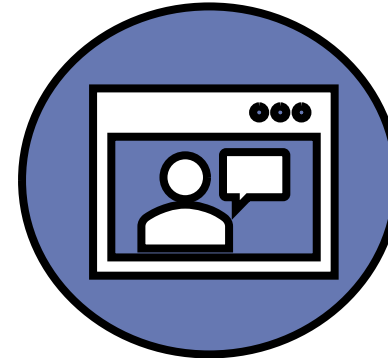
**LOCAL
COUNCILS**



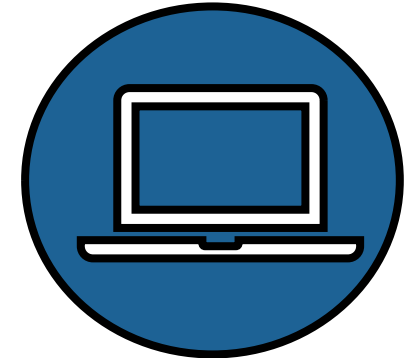
CONFERENCES



**CERTIFICATE
PROGRAMS**



**REGIONAL
ORGANIZATIONS**



WEBINARS

Plan of Services — *Overview*

Often referred to as a “3-Year Plan”

- Initial plan is submitted with PHFA application
 - A copy *should* be available to on-site staff
- Serves as a guide for on-site program
 - Identifies anticipated resident need(s) and program goals
 - Clarifies implementation of proposed services, programs and activities
 - Provides evidence of coordination with community resources
 - Outlines specific budget (*including staff salary and supplies*)

Service Provider Questionnaire

LIHTC Application Original
Submission Format

**Tab #11 SERVICE PROVIDER QUESTIONNAIRE
NARRATIVE FOR**

GENERAL INFORMATION

1. Summarize the service provider's mission and goals for the current fiscal year.

The [REDACTED] strategic goals regarding service provision are to promote individual and family self-sufficiency and asset development and engage other institutions to leverage resources and promote supportive services for [REDACTED] residents. The mission of the [REDACTED], which is the party primarily responsible for service provision to the [REDACTED], is to enrich [REDACTED] residents' lives by providing methods, through public and private partnerships, for them to gain valuable skills to support a self-sufficient lifestyle. The purpose of [REDACTED] self-sufficiency programs is to advance educational, economic, and social service opportunities for residents and families.

The above community and supportive service goals will apply to the [REDACTED] project. [REDACTED] supportive service goals are consistent with [REDACTED] overall mission to create change from the inside out by improving management systems and buildings, using the best property management principles, and forming partnerships with the greater community to increase available resources.

2. How many years has the service provider been active in delivering social services?

[REDACTED] has been providing resident services for [REDACTED] years to public and assisted housing residents. In addition to its many programs and services for youth, adults and seniors, [REDACTED] has procured and provided services through well-established businesses and service providers to assist residents in meeting their self-sufficiency objectives. [REDACTED] participation in the [REDACTED] program has allowed the authority to contract with a comprehensive network of employment, training, life skills, and social service organizations that utilize best practice models to support resident employment and self-sufficiency outcomes.

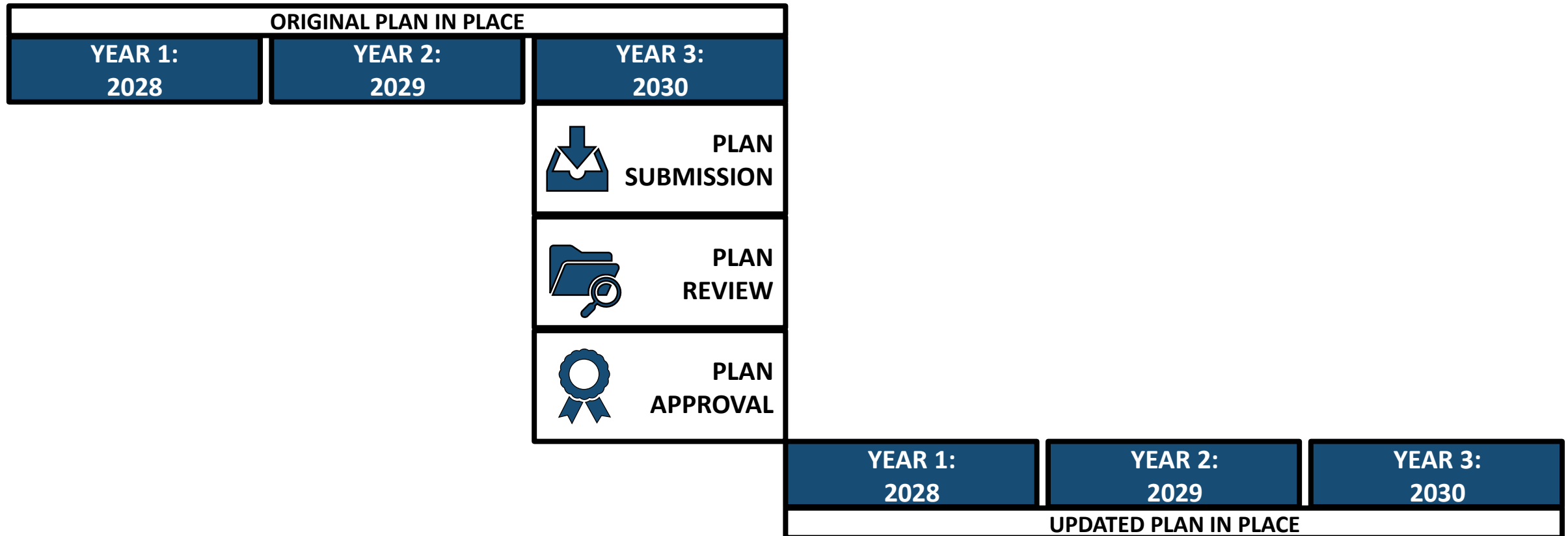
3. Is the service provider currently involved in service-enriched housing programs? If yes, summarize experience in providing supportive services on-site for residents. Include name of housing development(s), property management company, and type of services provided. If no, please describe methods that will be used to increase your company's knowledge and understanding of providing service-enriched housing.

[REDACTED] manages [REDACTED] housing units throughout [REDACTED], which house nearly [REDACTED] residents as of [REDACTED]

Plan of Services — *Updated Submissions (3-Year Cycle)*

- Plan **must** include **official** PHFA Name and PHFA number
- New services and activities **do not** need prior PHFA approval
 - Be sure to add these to next updated plan
- Annual resident survey *can* be included
 - Designed to gather feedback
 - Identify Areas of Improvement
 - Measure Resident Satisfaction

Plan of Services Timeline – *Submission Cycle*



Submission cycle will repeat on a 3-year basis for entirety of compliance period.

Plan of Services

Updated Submission Format

**PHFA
Housing Services Department
Plan of Services**

For the three year period of _____ to _____

Plan begins January 1st and ends December 31st of the 3 year period

This plan of services template can be used for an existing housing development.

For a proposed development refer to the Supportive Service Plan Outline in the PennHOMES and Low Income Housing Tax Credit Program Requirements.

Site Name & No.:	No. of Units:
Plan prepared by:	Date:
Site Manager:	Phone: Email:
Service Provider/SC:	Phone: Email:
Service Coordinator's Supervisor:	Phone: Email:

1. Description of Population and resident need identified in survey

a.) Population

Describe the existing population in terms of age, frailty, use of existing services and other pertinent factors. If using AASC or Family Metrics extract information from resident statics.

b.) Resident Survey

Date when survey was completed:

How was survey delivered?

Were accommodations made?

Response rate (# of responses divided by # of residents)

Plan of Service — *Reminders*



REQUIRED:

Info from at least **ONE YEAR'S** annual resident survey (*to help guide services planning*)



REQUIRED:

Various Health, Wellness, Education & Social Events, Activities, or Programs **PER YEAR**



ENCOURAGED:

TWO NEW Health, Wellness, Education & Social Events, Activities, or Programs **PER 3-YEAR PERIOD**

Homeownership Election – *Overview*

- **Must** be elected at the time of Tax Credit Application submission
 - Eligible properties: General Occupancy
- All residents **must** be made aware of opportunity
- Assigned HSR will assist via various meetings during compliance period
 - Creation of resident packet
 - Coordination of annual resident meeting
 - Completion of additionally required reporting

Site Visits — *Overview*

- Site visits will occur periodically during the compliance period
- Potential Site Visit Triggers
 - Upcoming 3-Year Plan submission
 - New Housing Services staff (on-site and/or PHFA)
 - Assessing quality of program performance
 - Elongated lapse since last on-site monitoring
 - Non-compliance with program requirements

Site Visits — *Regional Territory Map*

Western Region

Keona Hutson

Allegheny County

Tamara Diggs

Central Western Region

Lisa Scott

Central Region

Lisa Scott

Eastern Region

Alicia Spencer

Southeastern Region

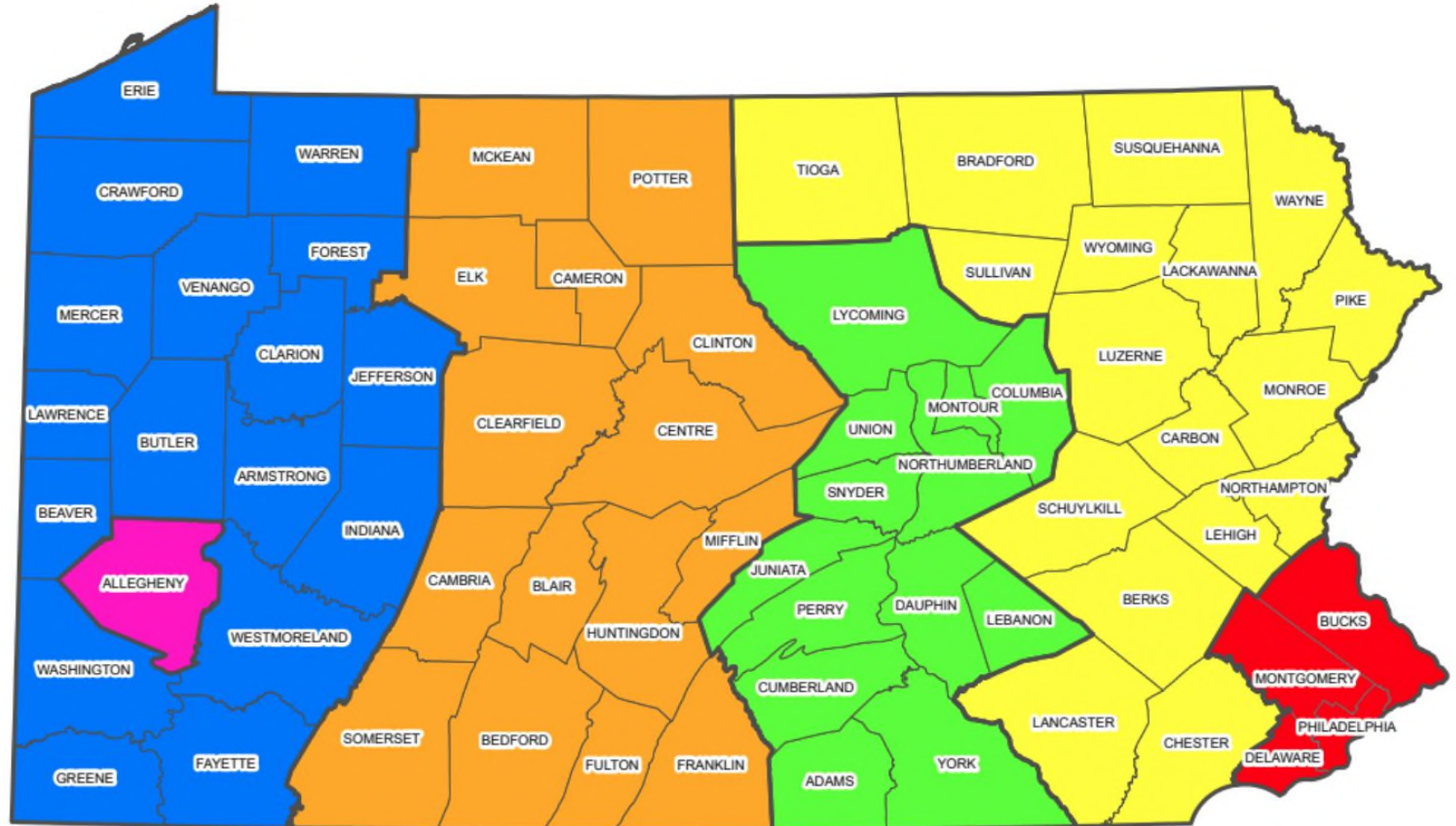
(Senior Properties ONLY in Philadelphia)

Amanda Stengel

Philadelphia County

(General Occupancy Properties ONLY)

Tylin Colston





Annual Report – *Overview*

- Tax Form 8609 issuance is required for portal access
- Serves as annual recap of on-site program
 - *Should* be reflective of Plan of Services/3-Year Plan
- Submission deadline is January 31st of each year
 - IE: 2025 Annual Reports ***must*** be submitted 01/31/2026
- Submission deadline extensions can be requested
 - ***Must*** be submitted in writing to assigned HSR
 - Approval is granted on a case-by-case basis

Service Provider Changes – *Overview*

- Request **must** be submitted in writing to assigned HSR
 - Explanation for provider change
 - Name of new service provider
 - Expectation of budget maintenance
 - Original source of budget funds **must** be maintained
 - Confirmed commitment to original contractual obligation(s)
- Notification of change **must** be provided to assigned HSR **and** residents

Questions?

