# CONTENTS

Chapter 1. Introduction to the Resource Guide

A. Service Coordinator in Multifamily Housing Program

B. Purpose of the Resource Guide

C. Organization of this Guide

Chapter 2. Doing the Job of Service Coordination

A. The Enhanced Service Coordination Model

B. Proactive Engagement and Outreach

C. Conducting Supportive Services Assessments

D. Establishing Partnerships with Community-Based Service Providers

E. Making Supportive Services Referrals

F. Educating and Advocating for Residents

G. Interfacing with Other Property Staff

Chapter 3. Hiring and Training Service Coordinators

A. Recommended Minimum Qualifications for Service Coordinators

B. Service Coordinator Training Requirements

C. Training in Service Coordination for Other Property Staff

Chapter 4. Confidentiality and Conflicts of Interest

A. Confidentiality of Resident Information

B. Professional Boundaries and Conflicts of Interest

Chapter 5. Files and Records Management

A. The Resident File

B. The Service Coordinator’s Program File

C. Files and Records Maintenance and Retention

Chapter 6: Service Coordinator Funding, Reporting, and Program Monitoring

A. One Program with Two Funding Sources

B. Program Reporting

C. Service Coordinator Program Monitoring by HUD Staff

D. Service Coordinator Program Non-Compliance

Chapter 7. Quality Assurance in Service Coordination

A. Requirements for a Third Party QA Professional

B. Sources of Funding for Quality Assurance

C. Quality Assurance Tasks and Activities

D. Quality Assurance Reporting

Appendix A: Resources for Service Coordinators

Appendix B. HUD Reviews of Local Service Coordinator Programs
Chapter 1. Introduction to the Resource Guide

A. Service Coordinator in Multifamily Housing Program

HUD’s Service Coordinator in Multifamily Housing program provides funding for service coordinators to assist elderly individuals and persons with disabilities in obtaining the supportive services they need to continue to live independently in their homes. Service coordinators can serve both the residents living in a federally assisted multifamily housing development and individuals living in the surrounding area of the property.

HUD makes funds available to fund service coordinator programs through grants and by approving owners’ requests to use certain classes of project funds for these purposes. Regardless of funding type, eligible expenses of the Service Coordinator in Multifamily Housing program are the cost of the service coordinator positions (salaries and fringe benefits) and related program expenses, which include training and related travel, quality assurance, supplies, and associated administrative expenses.

The Service Coordinator in Multifamily Housing program is voluntary for residents. The service coordinator may not require any elderly individual or person with a disability to accept any specific supportive service(s).

The service coordinator profession has grown significantly since its inception in the 1980s. The service coordinator program began as a foundation-funded demonstration in 1985. Congress created HUD’s Service Coordinator in Multifamily Housing Program through the National Affordable Housing Act, Section 808 (Public Law 101-625), and HUD has been funding the program since 1992. As of 2017, there are over 4,000 multifamily assisted housing properties with service coordinators.

One Program with Two Funding Sources

There are two main funding sources for the Service Coordinator in Multifamily Housing program: operating funding (funding the program through the property’s operating budget or other eligible project resources) or grants awarded through annual notices of funding availability issued by HUD. Eligible operating funding can include Section 8 operating funds, Project Rental Assistance Contract (PRAC) funds, Section 236 Excess Income, Residual Receipts, and Debt Service Savings. Regardless of the source of funding, HUD expects all service coordinator programs to adhere to the same program standards.
CHAPTER 1. INTRODUCTION TO THE RESOURCE MANUAL

Additional information about the sources of funding for the service coordinator program is found in Chapter 6 (Program Budgeting, Reporting, and Monitoring) of this resource guide and in HUD's Multifamily Financial Toolkit.

B. Purpose of the Resource Guide

The purpose of this Service Coordinator Resource Guide is to provide guidance on how to operate an effective service coordination program in HUD Multifamily Housing programs. This guide outlines the program standards that HUD expects of all multifamily service coordinator programs. These standards are based on best practices and practitioner input on the level of service provided by the typical service coordinator in 2017.

This guide is designed for new and experienced service coordinators who serve residents of HUD-assisted multifamily properties that are designed or designated for sole occupancy by elderly persons (aged 62 and older) and/or younger people with disabilities (aged 18 to 61). This guide is also an important resource for owners and managers of HUD-assisted multifamily housing, quality assurance professionals, and HUD staff.

The guidance and standards specified in this guide apply only to the Service Coordinator in Multifamily Housing program, as authorized under sections 671, 672, 674, 676, and 677 of the Housing and Community Development Act of 1992, Public Law 102-550), as amended by section 851 of the American Homeownership and Economic Opportunity Act of 2000 (Public Law 106-569).

HUD’s Management Agent Handbook (Number 4381.5) is the primary guide for operating a Service Coordinator in Multifamily Housing Program. Chapter 8 of the Handbook provides the procedures for requesting funding for service coordinator programs, the statutorily mandated training and ongoing education requirements, and procedures for operating the program. This guide is a supplement to the Management Handbook and represents the most current guidance on administering the Service Coordinator in Multifamily Housing program. Whenever conflicts exist between the guidance, the guidance in this guide prevails.

C. Organization of this Guide

The remaining chapters of this Resource Guide are organized as follows:

- Chapter 2: Doing the Job of Service Coordination
- Chapter 3: Hiring and Training Service Coordinators
- Chapter 4: Confidentiality and Conflicts of Interest
- Chapter 5: Files and Records Management
- Chapter 6: Service Coordinator Funding, Reporting, and Program Monitoring
- Chapter 7: Quality Assurance in Service Coordination
- Appendix A: Resources for Service Coordinators
- Appendix B: HUD Reviews of Local Service Coordinator Programs
Chapter 2. Doing the Job of Service Coordination

The service coordinator’s role is complex and far-reaching. Many elderly individuals and people with disabilities living in assisted housing have unmet needs and require services and assistance that property owners or managers cannot identify or effectively coordinate. Service coordinators help to coordinate the provision of supportive services to help all residents continue to maintain their independence and delay or avoid the need for higher levels care (e.g., an assisted living facility or skilled nursing facility). Service coordinators manage and provide access to necessary supportive services in the community, provide case management services as needed and requested, and develop programs and resources that support wellness for the entire resident population.

Exhibit 1 summarizes the main role of service coordinators in multifamily housing.

Exhibit 1: Role of Service Coordinators

<table>
<thead>
<tr>
<th>Service coordinators ARE</th>
<th>Service coordinators ARE NOT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocates on behalf of their residents</td>
<td>Direct service providers</td>
</tr>
<tr>
<td>Resources for residents on available community-based services, and can answer any questions</td>
<td>Recreation or activities directors</td>
</tr>
<tr>
<td>Facilitators of wellness, and other educational programs for residents</td>
<td>Duplicators of existing community services</td>
</tr>
<tr>
<td>Motivators who empower residents to be as independent as possible</td>
<td>Distributors of medical aids, medications, or medical advice</td>
</tr>
<tr>
<td>Monitors who follow up with services provided to residents</td>
<td>Handlers of residents’ funds</td>
</tr>
<tr>
<td>Champions who encourage residents to adhere to a healthy lifestyle</td>
<td>Managers or leasing agents</td>
</tr>
<tr>
<td>Educators who provide trainings and assistance to residents and other property staff</td>
<td>Drivers of residents</td>
</tr>
<tr>
<td>Advisors who can assist residents with building support networks and consult with tenant organizations and resident management</td>
<td>Organizers or leaders of resident associations or councils</td>
</tr>
<tr>
<td>Referral agents who connect residents to service providers who can meet their needs</td>
<td></td>
</tr>
<tr>
<td>Community Partners to assist residents with accessing community-based services</td>
<td></td>
</tr>
</tbody>
</table>

This chapter provides an overview of the enhanced service coordination model that HUD expects service coordinators in multifamily housing to follow. This model represents a proactive approach to service coordination in which the service coordinator reaches out to and engages residents, conducts non-clinical assessments of resident interests and needs, and makes referrals to service providers in the community as necessary and appropriate.

A. The Enhanced Service Coordination Model

The service coordinator’s role in HUD-assisted multifamily housing has evolved over time. In the past, many service coordinators understood their role as providing those residents who sought their assistance with basic information and referrals for services. With the growing and more complex needs of today’s older adults, the role of the service coordinator has evolved to a more proactive level of coordination, assistance, and case management.
services. This **enhanced service coordination model** reflects the evolving level of service that HUD expects all service coordinator programs to provide to residents.

Exhibit 2 shows some of the key ways that service coordinators assist residents through the enhanced service coordinator model.

**Exhibit 2. Holistic Assistance Provided by Multifamily Service Coordinators**

---

**Core Functions** that all service coordinators should provide include:

- Conducting comprehensive, non-clinical assessments of residents for wellness and social needs;
- Helping residents to identify, access, and coordinate services (such as personal care services), including monitoring of services provided and follow-up communication with service providers;
- Monitoring the receipt and follow through of services, including encouraging and motivating residents to engage with providers and participate in their own care/services management;
- Proactively developing and arranging wellness and other educational programs and services for residents;
- Sustaining and developing existing partnerships with community-based supportive service providers and other community stakeholders; and
- Maintain an up-to-date resource directory with all local service providers.
Well-established service coordinator programs may also include additional Enhanced Functions under the enhanced service coordinator model. These functions require working actively with other organizations in your community, as well as organizational buy-in from the property’s leadership and stakeholders. Service coordinators may incorporate these functions once they have successfully implemented all Core Functions.

- Actively creating and sustaining new partnerships with community-based supportive service providers, and other community stakeholders;
- Establishing Memorandums of Understanding (MOUs) between your organization and community-based supportive service providers and other stakeholders; and
- Serving as a member of an interdisciplinary team.

B. Proactive Engagement and Outreach

It is important that service coordinators introduce themselves to all residents and provide information about the assistance and services that are available to them. After these introductions, service coordinators should seek to establish ongoing relationships with residents through proactive outreach and formal and informal interactions with residents.

New Resident Engagement

Service coordinators should introduce themselves to residents within the first two weeks of the service coordinator’s hiring or the new resident moving into the property, if not sooner. Service coordinators can send a formal letter to all residents with information about the assistance they provide and their office hours and contact information. This letter can be included in the “new resident” packet of information that the property manager typically provides to each new resident to the property.

Service coordinators should follow up any written introductions with a personal visit to each resident, preferably in the resident’s apartment. These visits provide the service coordinator with the opportunity to start developing a relationship with each resident. In-person meetings also provide opportunities for the service coordinator to be better able to recognize changes in residents’ wellness, socialization status, and capabilities.

When possible, property managers should introduce new residents to the service coordinator during the initial move-in meeting. When new service coordinators begin at a property, managers are encouraged to host a property-wide gathering to introduce all residents to the new service coordinator.

Establishing Ongoing Relationships with Residents

After the initial introduction, service coordinators are encouraged to develop ongoing relationships with residents. Frequent interactions with residents in both a formal and
informal manner can help build and support a trusting relationship between service coordinators and residents. The frequency of engagement with residents may change based on their needs. For example, service coordinators may want to visit a resident who has recently had a hospitalization within thirty days of returning.

Although engagement is not required for any residents, some organizations create engagement goals for staff, such as attempting to outreach with 80 percent of residents on a monthly basis. Many organizations encourage service coordinators to have at least one monthly community engagement event each month. Service coordinators often combine these events with an educational or social event such as bingo.

Refusal of Services

As the service coordinator program is voluntary, some residents may choose not to work with the service coordinator. The service coordinator should record the resident’s refusal of services and/or assistance in his/her file, and can follow up with the resident periodically during the year to determine whether the resident’s interest in the program may have changed.

C. Conducting Supportive Services Assessments

To provide assistance and make referrals for appropriate supports or services, service coordinators will need to learn about residents’ wants, needs, interests, and abilities. Service coordinators can use assessments to develop individual case management plans for residents. While some residents may receive case management or service coordination services from other organizations, service coordinators may provide case management for residents who do not receive these services from other providers.

**Service coordinators are not clinicians and are prohibited from attempting to make any medical, physical, behavioral, or psychological diagnoses or clinical conclusions as a result of the information gained from assessments or screenings.** Where their initial observations suggest there may be an issue that requires diagnosis and treatment, service coordinators should consult a nurse, doctor or other trained clinician to make more a specialized assessment.

**Conducting Resident Assessments**

Service coordinators should try to conduct an initial assessment of each resident’s abilities, functioning, social status, wants, and any other additional needs. The coordinator should update the assessment on a yearly basis. By assessing residents annually, the service coordinator is able to track a resident’s status over time and is better able to empower the resident to live as independently as possible with appropriate supportive services.

Generally, initial and annual assessments should include information on:

- Demographic information of the resident
- Financial resources (earnings, benefits, support from family)
- Sources of formal and informal supports
- Resident interests and hobbies
- Existing social supports and networks
- Resident reported physical, cognitive, and mental health conditions*
Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) functioning*,

Unmet needs for supportive services and areas of vulnerability.*

* As noted above, service coordinators’ assessments are non-clinical. Referrals for formal clinical assessments should be made where the service coordinator feels there may be an issue requiring follow-up.

Service coordinators should assess residents in a manner that conveys genuineness and acceptance, encouragement and approval, empathy, responsiveness, and sensitivity. Service coordinators should conduct assessments, screenings, and surveys in partnership with the resident. The service coordinator’s role is to amplify the residents’ capabilities to assist themselves. By focusing on the resident’s capacities, rather than deficits, service coordinators can help empower residents to maximize their independence.

**Using Assessments to Develop Supportive Services Management Plans**

After completing an assessment of each resident, service coordinators should develop a supportive services management plan with the resident based on their needs and interests. This plan will be the service coordinator’s “roadmap” for making referrals, applying for public benefits, and assisting the resident in obtaining services and supports.

At a minimum, the case or services management plan should include for each support need or desire:

- Identification of the resident’s needs and desires;
- Proposed method for addressing (e.g., makes a referral to a specific service provider; make application for a benefit, etc.);
- The date the activities will be completed;
- How the service coordinator will monitor and follow-up, including frequency and strategies for measuring the resident’s satisfaction with the services provided or benefit(s) received; and
- How information will be shared with and from service providers with appropriate signed Consents to Release Information on file.

**Developing a Property-Wide Profile**

Regular assessments of residents at the property will provide the service coordinator with aggregate property-wide data to create a building-wide profile of the residents. Service coordinators can use profile to develop appropriate educational, wellness, and other programs for the residents based on their stated needs and interests. A property-wide profile helps service coordinators be more proactive in initiating preventative interventions. Service coordinators can also use aggregate resident data captured in the profile to provide information about resident needs to the property management and to providers and other community-based organizations when outreaching to potential service partners.

---

1 The term “Activities of Daily Living” refers to the basic set of common tasks of everyday life such as eating, bathing, dressing, toileting, etc., the performance of which are required for personal self-care and independent living.
CHAPTER 3. HIRING AND TRAINING SERVICE COORDINATORS

D. Establishing Partnerships with Community-Based Service Providers

Creating and maintaining a robust resource network of local supportive services is an important component of the enhanced service coordinator role. A well-established resource network helps the service coordinator develop a resource directory and provide needed solutions and service options for residents. A Core Function of the service coordinator role is to sustain and develop existing partnerships that your organization has already established with service providers and other community organizations. All service coordinators should also maintain an up-to-date resource directory.

Once a service coordinator has successfully implemented all the Core Functions of the role, service coordinators may wish to expand their resource network by forging new partnerships in the community. This requires organizational buy-in from your property’s leadership. Effective partnerships with service providers and community stakeholders are not just a matter of an individual service coordinator developing a good working relationship with staff at a local service provider. A strong, sustainable partnership means working together at an organizational level for the benefit of the residents.

Maintaining a Resource Directory

Service coordinators should maintain a resource directory with all local service providers as required by Chapter 8 of Management Agent Handbook 4381.5. The resource directory can be a hard copy or electronic file but HUD expects service coordinators to make a version of their resource directory available in a common area so residents can access basic information when the service coordinator is unavailable.

In addition to basic information on the services offered, some service coordinators also provide information on the quality and professionalism of the services provided based on previous residents’ experiences. Service coordinators should routinely review and update the resource directory as services, service providers, and contact persons change and as they identify new services or new providers. Updating the resource directory is an opportunity for the service coordinator to maintain their relationships with providers, and to remain current on the resources that are available in the community.

Identifying and Building New Relationships with Service Providers

When arriving at a new site, service coordinators should introduce themselves to service providers in the community of the property, including those that provide traditional services as well as those that provide non-traditional services. Some owners and service coordinator agencies may already have a strong network of service providers but additional research might be necessary to assemble a diverse partnership network.

There are many ways to identify potential service partners. Service coordinators can identify potential partners by contacting existing service provider networks in the community and by attending meetings and events where service providers will be present. Often city or county government agencies will have a committee or standing meetings of organizations that serve elderly individuals and persons with disabilities. Nonprofit organizations such as Goodwill or United Way may have advisory committees or regular community meetings with...
service providers. Online directories of service providers are also available in some locations. For example, www.211.org is a national initiative to provide a centralized resource for people to learn about available supportive services in their community. Other online resources include www.auntbertha.com, a directory of government assistance and supportive service programs searchable by zip code.

Service coordinators should also think creatively about non-traditional partners that may not be included in these directories or lists. Representatives from the community farmer’s market may be willing to provide fresh produce to participants. The local bookstore may make available books at no cost. Resident assessment data can help spark additional ideas about potential partnerships in the community.

The types of organizations that provide supportive services for elderly persons and persons with disabilities and their interest and willingness to partner will vary substantially from community to community. In many cases, service providers willing to partner with service coordinators will be nonprofit community-based organizations that serve seniors such as councils on aging, local senior centers, home health providers, hospices or nursing homes; service providers and advocacy groups for people with disabilities, and local governmental agencies and social services agencies that serve low-income people.

The resource list in Appendix A lists the websites on resources to build service provider networks.

Making Contact with Community Partners

When reaching out to service providers and community partners via telephone or email, service coordinators should give a brief overview of their role and then set up an in-person meeting in order to go into more detail as to why the service coordinator is contacting the service provider and how the service provider can help residents. Meeting in person provides the service coordinator with an opportunity to assess the quality of services provided and their potential benefit for residents. At the introductory meeting, service coordinators should leave informational materials and contact information.

Many veteran service coordinators have found it to be a good practice to develop Memorandums of Understanding (MOUs) with community partners that spell out how referrals for services will be made, what information will be shared, and procedures for following up on the referral. MOUs are most important for the partners to which service coordinators frequently refer residents.

E. Making Supportive Services Referrals

As service coordinators work with residents through their service management plans, they may want to refer residents to a community partner who can provide a support that that the resident may want or need. When possible, the service coordinator may call the service provider with the resident present to make an introduction. This can help build a direct relationship and will encourage the resident to follow through with the referral. Having service providers help with or lead educational events at the property can also help residents feel more comfortable with service providers. Service coordinators should speak with the service providers before any such programs to ensure they will not try to “sell” their services to residents at these events.

After the service coordinator refers a resident to a community partner, the service coordinator should track whether participants have followed up on referrals. Service coordinators should follow up with the resident about whether they are receiving the
services and whether they are gaining what they hoped to gain from the services. If the resident agrees, the service coordinator may also follow up with the service provider to ask about ongoing service provision.

Service coordinators should obtain written consent for all referrals to community partners. The written consent form should include the specific information about the resident that will be shared with the service provider, as well as the specific information the service provider will provide to the service coordinator about the resident.

**Referrals to Emergency Medical Services**

The service coordinator may make referrals for emergency medical services and other non-emergency services as appropriate. In order to prepare for emergencies, service coordinators should have contact information for emergency services readily available, as well as information regarding where to locate a resident’s health and medication information.

When referrals to emergency medical services are made, the service coordinator should pass this information along to the medical professional via signed Consents to Release Information, ensuring that the resident’s health information is safeguarded in accordance with Health Insurance Portability and Accountability Act of 1996 (HIPAA; Pub.L. 104–191, 110 Stat. 1936, enacted August 21, 1996) guidelines. After the incident, if possible, service coordinators should follow-up with the resident regularly.

**Cases of Abuse or Neglect**

If the service coordinator finds that the resident is being neglected or abused, the service coordinator should report the issue regardless of whether the resident gives consent. This could include physical abuse, sexual abuse, neglect, exploitation, or emotional abuse, abandonment, or self-neglect. If the service coordinator suspects abuse, he or she should report the issue to the appropriate authorities (e.g., Adult Protective Services or the local police) in extreme or urgent situations. The service coordinator may also inform his or her supervisor of less urgent or extreme issues; the supervisor will help the service coordinator decide the next course of action.

Licensed social workers and other persons may be mandatory reporters of abuse or neglect. Laws vary from state to state. Service coordinators as well as property owners and management staff should educate themselves on the mandated reporter laws in their states.

**F. Educating and Advocating for Residents**

As part of their role, service coordinators educate residents in many ways. Service coordinators organize educational events with community-based and/or other relevant partners, advocate for residents, and teach residents how to advocate for themselves. Beyond their work with residents, service coordinators should work collaboratively with other property staff and provide information and education to them where appropriate.

**Advocacy for Residents**

One of the primary goals of the service coordinator program is to empower and encourage residents to be able to do as much for themselves as possible. Service coordinators should help residents advocate for themselves when needed. As part of this goal, service coordinators should teach residents to be more proactive in advocating for themselves. An example of this is helping residents advocate for themselves to property management for reasonable accommodation requests or to make repairs or changes to the property. Service coordinators may choose to help residents with self-advocacy through group
education programs at the property, assistance with letter writing, or role playing with an individual resident. Often, support and encouragement from the service coordinator can lead residents to begin to advocate for themselves.

If a service coordinator is advocating for a resident, the resident needs to give the service coordinator permission to advocate on their behalf. This is usually accomplished by way of a signed Consent to Release Information that protects the service coordinator and the resident. However, there does not need to be a signed consent when advocating for the residents of the property as a whole. For example, if a service coordinator is advocating for a bus stop closer to the property or other transportation services within the community, the service coordinator does not need to obtain signed consents as individual resident information is not being shared.

**Educating Residents through Events**

Service coordinators should organize educational events, wellness programs, and other appropriate programs that address identified areas of need for the property as a whole, often in partnership with community service providers. The service coordinator can also develop programs and presentations for residents about changes in benefits programs, money management skills and budgeting, personal safety and preventative measures, property-wide safety and crime prevention, and other topics. Many organizations require or encourage service coordinators to hold at least one educational event each month.

**Assistance to Resident Councils**

Service coordinators may provide assistance and information to resident councils as requested by the council. If the property does not have an established resident council and residents express a desire to establish one at the property, the service coordinator can provide information on HUD regulations (CFR 24 part 245) regarding the establishment of a council, information on electing officers, conducting council meetings, and resources available in the community. The service coordinator is prohibited from establishing the resident council, holding an elected position on the council, and regularly attending council meetings. The service coordinator can participate in council meetings only at the invitation of the resident council.

**G. Interfacing with Other Property Staff**

It is critical that the service coordinator be an active and full member of the property’s management team. Teamwork implies an active collaboration where all team members are recognized for their particular area of expertise, respect another’s views, and actively listen and learn from each other. The property manager, service coordinator, janitorial staff, and other relevant property staff should meet on a regular basis to jointly consider issues that arise that may affect residents or discuss any changes in the resident selection plan or facility rules. All staff who interacts with residents should receive relevant written materials, memos, lease violation and eviction notices, and facility updates on a periodic basis.

The service coordinator will need to balance the needs of residents and the expectations of employees by the property’s owner or management company. Since one of the major functions of the service coordinator is advocacy on behalf of residents, it is important that other members of the property management team are sensitive to this role, even though such advocacy efforts may appear to conflict with the immediate expectations of the management company.
The service coordinator must recognize that issues surrounding occupancy and maintenance are the responsibility of the property owner and manager. The service coordinator is obligated to direct residents to management when management issues such as damage to property or failure to pay rent arise.
Chapter 3. Hiring and Training Service Coordinators

Hiring qualified professionals is critical to the success of the service coordination program. This chapter reviews the recommendations and requirements regarding the minimum qualifications for a service coordinator and their training.

A. Recommended Minimum Qualifications for Service Coordinators

As specified in Chapter 8 of the Management Agent Handbook 4381.5, the minimum requirements for a HUD multifamily housing service coordinator are a bachelor’s degree, knowledge of and training in elderly and disability services, knowledge of referral processes, and two or three years of social service delivery experience. It is preferable for service coordinators to have direct experience working with elderly people or people with disabilities. Training in cultural competency and bilingual skills are also assets for many service coordination positions.

While not required, some agencies require service coordinators to have a degree in social work or social work certification because social workers receive training in working with people with a variety of challenges. Licensed social workers must also renew their license every three years, which requires ongoing training and learning so they are able to stay up to date on issues facing their residents.

Aides, Interns, and Volunteers Working with a Service Coordinator

Some service coordinator programs may wish to include aides to assist service coordinators in carrying out their functions. Aides should have appropriate education or experience working with elderly people and/or people with disabilities. College students working towards a degree in social work may look to gain hands-on experience, and may be able to receive academic credit for an internship or work-study program.

In addition to interns, volunteers may have more time to coordinate events, find service providers, or complete other tasks that the service coordinator may not have as much time to do, which enhance service coordination at the organization. It is important to note that volunteers do not have the same role as service coordinators, and should not be given sensitive or information without resident consent. It is not recommended to use residents as volunteers as it may give the appearance of favoritism.

Caseloads

The number of residents that a service coordinator can effectively serve will depend on the share of residents that are frail and the level of experience of the coordinator. In general, a ratio of one full-time service coordinator to 85 to 100 residents is a good ratio to use as an initial benchmark. In properties with large numbers of residents with mental health conditions, a smaller ratio of 50 to 85 residents per coordinator may be appropriate.

B. Service Coordinator Training Requirements

Training and associated travel costs for service coordinators qualifies as an eligible project expense if the training enhances the service coordinator's knowledge and skills in the identified subject areas. The following guidelines offer a general framework for developing training programs to meet the needs of service coordinators; they allow flexibility in training design and delivery by a variety of vendors.

Statutorily Required Training Areas for New Hires

As specified in Chapter 8 of the Management Agent Handbook, all service coordinators must have met a minimum of 36 training hours of classroom/seminar time before hiring, OR must
CHAPTER 3. HIRING AND TRAINING SERVICE COORDINATORS

complete these minimum training requirements within 12 months of initial hiring, on age-related and disability issues. The statutory authority for training guidelines for service coordinators serving projects for older adults or people with disabilities is found in Sections 671 and 672 of the Housing and Community Development Act Amendments of 1992 (HCDA) (41 USC 8011), and requires training on seven topics within the first year for all service coordinators.

Required Ongoing Training Areas

Continuing education is also necessary in order to be an effective professional. After the initial training requirements at hiring, HUD also specifies in Chapter 8 of the Management Agent Handbook that service coordinators should receive 12 hours of continuing education each year. 11 training topics should be covered with service coordinators during the first year of hire or as part of the ongoing annual training requirements. At a minimum, service coordinators must remain current on changing statutes at all levels and current practices in aging and/or disability issues. Exhibit 2 lists the statutorily required training areas as well as additional recommended training topics for service coordinators.

Exhibit 2: Required and Recommended Training Areas for Service Coordinators

<table>
<thead>
<tr>
<th>Statutorily Required Training Areas for New Hires</th>
<th>Statutorily Required Ongoing Training Areas</th>
<th>Additional Recommended Training Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The Aging Process</td>
<td>• Outcomes and Program Evaluation</td>
<td>• Identifying and assessing capabilities and needs</td>
</tr>
<tr>
<td>• Federal and applicable State Programs and Eligibility</td>
<td>• Mental Health and Aging</td>
<td>• Monitoring and evaluating services</td>
</tr>
<tr>
<td>• Elder Services</td>
<td>• Healthy Aging</td>
<td>• Effective advocacy</td>
</tr>
<tr>
<td>• Disability Services</td>
<td>• Medications and Older Adults</td>
<td>• Crisis prevention and intervention</td>
</tr>
<tr>
<td>• Legal Liability Relating to Service Coordination</td>
<td></td>
<td>• Working with other members of the property management team</td>
</tr>
<tr>
<td>• Drug and Alcohol Use/Abuse by Elders</td>
<td></td>
<td>• Cultural competency</td>
</tr>
<tr>
<td>• Mental Health Issues</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statutorily Required Ongoing Training Areas</th>
<th>Additional Recommended Training Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The Role of the Service Coordinator</td>
<td>• Chronic diseases of the elderly</td>
</tr>
<tr>
<td>• Ethics in Service Coordination</td>
<td>• Dealing with cognitive impairments</td>
</tr>
<tr>
<td>• Networking in the Community &amp; Identifying Resources</td>
<td>• Sensuality/sexuality and older adults</td>
</tr>
<tr>
<td>• Basics of Documentation</td>
<td>• Mediation and conflict resolution</td>
</tr>
<tr>
<td>• Outcomes and Program Evaluation</td>
<td>• End of life issues</td>
</tr>
<tr>
<td>• Mental Health and Aging</td>
<td>• Isolation and older adults</td>
</tr>
<tr>
<td>• Healthy Aging</td>
<td>• Effective communication</td>
</tr>
<tr>
<td>• Medications and Older Adults</td>
<td></td>
</tr>
<tr>
<td>• Communication Strategies in working with Older Adults</td>
<td>• Supportive service needs of people with disabilities</td>
</tr>
<tr>
<td>• Fair Housing and Reasonable Accommodations</td>
<td>• Current trends in affordable housing and healthy aging</td>
</tr>
<tr>
<td>• Professional Boundaries</td>
<td>• Disease prevention</td>
</tr>
<tr>
<td></td>
<td>• Hoarding</td>
</tr>
<tr>
<td></td>
<td>• Bullying</td>
</tr>
<tr>
<td></td>
<td>• Creating and sustaining successful partnership models</td>
</tr>
</tbody>
</table>
CHAPTER 3. HIRING AND TRAINING SERVICE COORDINATORS

Training Documentation

Service coordinators, quality assurance professionals, and/or project managers must document compliance with the required training requirements by providing certificates of participation and training, certificates showing any continuing education units the service coordinator received, the length of the full course in hours, who administered the training (including the organizational affiliation), the dates of the trainings, and the total cost. HUD staff should be able to access this information from the service coordinator’s program file during a remote or on-site visit of the service coordination program or as part of management reviews of the property, when requested. Some organizations may have a centralized resource location for service coordinators to record their trainings so that other service coordinators can access the list at any time.

Sources of Training for Service Coordinators

Organizations differ on how they provide training for their service coordinators. Many organizations host regular formal trainings for all service coordinators they employ – either quarterly, semi-annually, or annually. Training is conducted both in person and online, and some organizations may choose to hold an annual full-staff training to build relationships, train on common areas of interest, and update staff on policy changes. There are many appropriate sources of external training available for service coordinators.

There are also many appropriate sources of external training available for service coordinators. Listed below are some of the sources service coordinators may wish to review when seeking to complete the required training. See Appendix A: Service Coordinator Resources for additional resources for training service coordinator staff.

• Councils on aging, local senior centers, home health providers, hospices or nursing homes
• National housing organizations and trade associations
• Local hospitals offer education on a wide variety of topics, such as minimizing outbreaks of communicable diseases (e.g., influenza, etc.) and sanitary practices to minimize the spread of germs and bacteria.
• Colleges and universities that have gerontology, social work, and rehabilitation counseling departments as well as those that cover social sciences, nursing and medicine
• Disease specific organizations such as those addressing AIDS, heart disease, diabetes, Alzheimer’s, alcohol abuse, and mental illness

C. Training in Service Coordination for Other Property Staff

HUD encourages the involvement of other members of the property management team in service coordinator training as appropriate. The more service coordinators and other members of the property’s management team understand each other’s roles, functions, and responsibilities, the smoother the operation of the project. It may also prove beneficial for properties that have contract management staff to receive training on the role, responsibilities, and constraints on the service coordinator, especially as they relate to confidentiality and access to the service coordinator’s resident files.
### Recommended Training Areas for Other Property Staff

<table>
<thead>
<tr>
<th>Understanding the aging process</th>
<th>Ethical behaviors</th>
<th>Recognizing signs of abuse, neglect, and exploitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aging and social isolation</td>
<td>Professional boundaries when working with residents</td>
<td>Recognizing the signs of hoarding</td>
</tr>
<tr>
<td>Mental Health Issues</td>
<td></td>
<td>Bullying and older adults</td>
</tr>
</tbody>
</table>
Chapter 4. Confidentiality and Conflicts of Interest

In the course of their work, multifamily service coordinators regularly hold discussions with residents about their supportive service needs, finances, and other personal matters. Because of the sensitivity of these topics, it is critical that the service coordinator maintain the privacy of residents and the confidentiality of any information shared. It is also important that service coordinators set up appropriate professional boundaries and avoid conflicts of interest that could affect their service provision.

The confidentiality responsibilities of service coordinators are grounded in the 1974 Privacy Act, and for grant-funded programs, the provisions of their grant agreement. Regardless of funding source, the confidentiality and conflict of interest guidance in this chapter should be followed by all service coordinator programs.

A. Confidentiality of Resident Information

Service coordinators must keep all resident information confidential unless the resident gives them explicit permission to share the information with others. Service coordinators may only share information with property management staff, service providers, and other parties if the resident has signed a Consent to Release of Information form for the specific documents or information being shared. Current social work practice recommends that resident consents for the release of information be time-limited and expire within 30 or 60 days.

A release of information form must clearly indicate:

- With whom the information is to be shared
- What specific information will be shared
- The reason for sharing the information
- A deadline upon which the consent will expire

HUD grant agreements provide some exceptions to these guidelines for consent. Under certain exceptions, service coordinators may share resident information with property management staff if withholding the information could lead to negative consequences including self-harm or harming others, activities that break the law, or violations of the lease agreement. When deciding whether to share confidential resident information, the service coordinator should use his or her best judgement to determine whether the information he or she has received would have safety and security implications for the individual, for other residents, or for management staff.

Service Coordinators are prohibited from accessing a tenant’s Enterprise Income Verification (EIV) documents contained in the property management files, even if the resident has given consent to do so. The EIV is a HUD-sponsored system used to verify residents’ incomes in connection with setting the rent.

Sharing Information with Service Providers

Service coordinators should only make referrals to service providers with permission from or at the request of the resident. Service coordinators should only share information with service providers that is necessary for making referrals, monitoring and/or following up on services provided, or communicating a change in a resident’s needs or situation. Information about residents may only be shared with service providers with a signed consent form from
CHAPTER 4. CONFIDENTIALITY AND CONFLICTS OF INTEREST

the resident. Residents must likewise give consent for service providers to share resident information with the service coordinator.

Under no circumstances, can a coordinator share information about one resident with other residents.

B. Professional Boundaries and Conflicts of Interest

The ability to set and maintain professional boundaries is critical to an effective service coordination program. The boundary between the service coordinator’s job and the service coordinator personal life is of particular importance. Service coordinators make judgments regarding these boundaries on a daily basis, and these decisions affect not only their own well-being but also that of their residents and other management staff. At its most extreme, failure to maintain boundaries can lead to issues of neglect and abuse of residents.

Service coordinators, as well as other property staff, are responsible for anticipating, establishing, delineating, communicating, monitoring, guarding, maintaining and managing the professional boundaries between staff and residents. Going beyond the parameters of one’s role creates an unfair expectation that other property management staff will do the same. Inconsistent professional boundaries within teams and organizations may serve to confuse residents and erode confidence in the service coordination program and housing management. Failure to maintain professional boundaries can lead to conflicts of interest. For example, if a service coordinator stands to gain financially from a resident, he or she may treat the resident differently or break the terms of his or her contract.

The following guidelines can help to prevent service coordinators from crossing professional boundaries:

- **Always provide a professional work email, phone number, and office location for residents to use.** Service coordinators should not give residents permission to contact them at all hours nor should they give residents a personal cell phone number, email address, or home address as it may lead to an unprofessional dynamic.

- **Refrain from discussing the service coordinator’s personal life.** Residents benefit more from service coordinators’ professional expertise than personal life experiences.

- **Avoid use of profanity, even if residents speak this way.** Service coordinators should make sure their language is always appropriate so residents know that they are trustworthy and professional.

- **Establish clear physical boundaries.** One of the most effective ways to establish clear professional boundaries is for service coordinators to let their behavior set the standard for meetings with residents. It is important that service coordinators not touch residents in any inappropriate way. This may include hugging, caressing, or holding residents’ hands. While service coordinators may intend these gestures as ways to demonstrate compassion or care, they could make residents feel uncomfortable.

- **Maintain professional boundaries in social settings.** Service coordinators in small communities may encounter residents in other contexts, such as church, school, or in another social setting. They should try to limit social contact with residents in these situations. The more time service coordinators spend with their residents outside of a professional environment, the greater the opportunity for a breach of professional boundaries.
• **Set up separate, professional social media accounts.** The proportion of older adults using social media has risen dramatically in the past decade with older adults being one of the fastest-growing groups of social media users. Any comments you make on social media have the potential to reach an enormous audience and can reach unintended audiences. Social media has the potential to allow professional and personal lives to intersect like never before. Therefore, it is imperative that the service coordinator maintain a professional distance when using social media (e.g., Facebook, Snapchat, Twitter, Instagram, etc.).

**Financial Conflicts of Interest**

Service coordinators are prohibited from accepting tips, cash, or any other monetary gifts from residents or their families, including bequests from residents’ wills. It is inappropriate for any member of the property staff to solicit gifts from residents or residents’ families as a condition of admission or acceptance to a facility, or for any other purpose. A good rule of thumb is that no money should be exchanged between residents and workers.
Chapter 5. Files and Records Management

Creating and maintaining records that document the service coordinator’s work is an important part of the service coordinator’s job. Effective management of both resident files and program files enhances the ability of service coordinators to efficiently and effectively serve their residents and community. These files not only allow a service coordinator to follow up on past interactions with residents, but also provide confirmation to management and quality assurance professionals that a service coordinator is performing his or her job effectively.

This section provides recommendations on what service coordinators should include in their resident files and program files and guidance on file retention and maintenance.

A. The Resident File

Service coordinators must maintain well-organized, regularly updated files on each of their residents. Service coordinators must be able to immediately access information and emergency contacts in case an emergency situation arises. In addition, effective records management helps service coordinators to follow up with residents on previously discussed issues and referrals.

Contents of Resident Files

The service coordinator’s resident files should each contain the following information:

1. **Intake form**: This form provides basic demographic information on the resident and should include gender, date of birth, contact information, move-in date, marital status, emergency contact information, family contact information, information regarding the resident’s benefits, income, health care options (e.g., Medicare, Medicaid, third-party insurance, etc.), primary care physician and any other medical provider(s).

   *The intake form should be updated at least annually, preferably when conducting the annual Activities of Daily Living assessment.*

2. **Case management/service(s) management plan**: This form is used to document the case management/service(s) management plan for each resident. This form allows the service coordinator to identify the resident’s services needs and wants, document referrals planned or made on behalf of the resident and the goal(s) associated with the referrals. A recommended “best practice” is that this should be updated at a minimum of annually when the service coordinator updates/completes the Activities of Daily Living assessment.

3. **Monitoring and follow-up plan**: Service coordinators use this form to outline follow up and monitoring activities for referrals and/or services provided to a resident. The form should include the service coordinator’s timetable for monitoring and following up on the referrals made and services provided to the resident.

   *Service coordinators may choose to combine the monitoring plan with the case management/service(s) management plan to reduce paperwork and more easily track referrals, services and any monitoring or follow-up done.*

4. **Case/progress notes**: Case and progress notes are a written account of resident and service coordinator interactions. Case/progress notes should include documentation of meetings with the resident, their family members, service providers, and members of the management team regarding the individual resident. It is good practice to document
interactions sequentially and objectively. Service coordinators should record only what
they see and hear and describe relevant actions, behaviors, and events in a non-
subjective manner. Service coordinators should not label actions, events, and
behaviors, omit personal remarks and opinions, and use direct quotes when possible.

5. **Activities of Daily Living/regular capacity/skills assessment:** Assessments are
instrumental to providing assistance and making referrals to appropriate public benefits,
services, or skills training. The capacity/skills assessment is designed for use to assess
the resident's current functioning in terms of their Activities of Daily Living and can be
used to identify any deficits in these areas. The ADL form is to not a formal diagnostic
tool, but simply a tool to assist in identifying needs for making appropriate referrals.

*While ADL forms do not need to be updated with any specified frequency, it is good
practice for service coordinators to conduct assessments of all residents at least
annually to update records, track changes in residents’ abilities and needs over time.*

6. **Copies of service referrals:** This form is used to document referrals for services made
on behalf of a resident. The form documents the service provider to which the resident
was referred, the reason for the referral, the expected outcomes from the referral, and
any additional actions/activities related to this referral. A referral form should be
completed for each service provider to which the resident has been referred.

7. **Copies of signed Consents to Release Information:** A Consent to Release
Information must be signed by the resident every time any of his or her information will
be shared with property management staff, service providers, and other parties. The
Consent is not a blanket consent to cover any and all situations. The Consent must
state the information to be released, the entity to which the information will be released
to, the reason for releasing the information, and the expiration date of the Consent
(usually within 30 or 60 days).

*A signed Consent to Release Information is not required in connection with the file
reviews conducted by Quality Assurance and HUD audits.*

8. **Emergency contact information:** Service coordinators should always maintain a
listing of each resident's emergency contacts. In the event the resident has no
emergency contacts, this should be noted on the form and kept in the file.

*While there is no required frequency for updating this form, it is good practice for
service coordinators to review and if necessary update this information at least
annually.*

9. **Reports or records on abuse:** If the resident brings up any claims of being abused in
any way, including physically, mentally, or financially, records must be kept of these
allegations, even if they are found to be unwarranted. Records should also be kept of
any violations of the resident's property.

10. **Refusals to participate:** The service coordinator must document a resident's refusal to
participate in the overall service coordinator program.

**B. The Service Coordinator’s Program File**

In addition to maintaining resident files, service coordinators (or other members of the staff)
should keep detailed records of service coordinator program activities and expenses. These
documents serve as resources for use by service coordinators and property owners, but are
also important in case of a HUD audit.
The program file should include, at a minimum:

1. **Proof of outside training received in compliance with training requirements**, as outlined in Chapter 3: Hiring, Training Service Coordinators. Proof can be in the form of Certificates of Participation and/or Continuing Education Units (CEUs) certificates.

2. **Copies of all reports submitted to HUD** (e.g., Semi-Annual Performance Reports, Quality Assurance reports, if applicable).

3. **Correspondence with outside service providers** that does not pertain to a specific resident.

4. **Documentation of programs, trainings, and other educational offerings** developed and provided for the residents of the property.

5. **Official service coordinator program documents**, which may include the grant agreement, the original Notice of Funding Availability for the grant, the grant or operations-based program budget, and records of draw-downs.

6. **Information and/or other relevant documents from HUD**, as applicable.

**C. Files and Records Maintenance and Retention**

Service coordinators should begin keeping files on residents from the time of move-in (or the start of the provision of assistance from the service coordinator), and must keep these files for a minimum of three years after move-out, resident death, or cessation of assistance. Once the time period for file maintenance has elapsed, service coordinators must dispose of all files and records in a manner that will prevent any unauthorized access to personal information (such as shredding or pulverizing).

**Electronic versus Paper Records**

HUD recommends using electronic records whenever possible. Case management software programs allow service coordinators and quality assurance providers to be more efficient in their work and to notify service coordinators if files are missing or incomplete. Electronic files should be protected with a password. To ensure program continuity, access to electronic files must be made available for newly hired service coordinators.

Paper files should be kept in a filing cabinet that remains locked at all times unless the service coordinator is actively using it to remove or replace files. As files grow larger, service coordinators may move older paper records in active files to secure cabinets in off-site locations; however, the files must be made available for review upon request by HUD or a quality assurance professional.

**Access to Resident Files**

Service coordinators should be the only people with access to paper and electronic resident files. Service coordinators’ files are the property of the housing property where they work; as is stipulated in the HUD grant agreement, service coordinators must maintain their files at the housing site and ensure they are available to new service coordinators when they leave. This does not mean that property management and/or housing organization staff have access to these files. Service coordinator’s resident files can be used in court proceedings only if subpoenaed. More information on who can access files can be found in Chapter 5: Confidentiality and Conflicts of Interest.
Chapter 6: Service Coordinator Funding, Reporting, and Program Monitoring

A. One Program with Two Funding Sources

There are two main funding sources for the Service Coordinator in Multifamily Housing program: **operating funding** (funding the program through the property’s operating budget or other eligible project resources) or **grants provided by HUD** through the Service Coordinator in Multifamily Housing grant program. Eligible operating funding can include Section 8 operating funds, Project Rental Assistance Contract (PRAC) funds, Section 236 Excess Income, Residual Receipts, and Debt Service Savings. Regardless of the source of funding, all service coordinator programs are expected to adhere to the same standard requirements as outlined in this guide.

Eligible project expenses for the service coordinator program are the same regardless of the source of funding and include the cost of the service coordinator position (salary and benefits) and related program expenses (training and related travel and a portion of the property’s administrative costs that can be attributed to the program).

**Funding through the Operating Budget**

Including service coordinator expenses in the project’s operating budget is the preferred method to secure ongoing funding for the service coordinator program. Under this approach, the service coordinator becomes a permanent part of the management team and the cost of the service coordinator program becomes a standard budget expense.

The salary and benefits of the service coordinator position and related program costs are eligible operating expenses according to Section 8 of the 1937 Act (42 U.S.C. 1437f), and Project Rental Assistance Contracts, pursuant to section 802 of NAHA (42 U.S.C. 8011). Owners must obtain HUD approval to add a service coordinator program to any property’s budget, regardless of whether or not an increase in rental rates is proposed.

Owners of Section 202 PRAC projects can include a service coordinator program in their operating budget at any time after the project is fully occupied. (See Chapter 1, paragraph 1-8.C of Handbook 4571.3 REV-1, Section 202 Supportive Housing for the Elderly.)

In addition to including the cost of the service coordinator program in a property’s operating budget, owners of HUD Multifamily Housing may also use other eligible project resources to fund the program with approval from HUD. HUD may approve the use of **resident receipts** to fund some or all of a property’s service coordinator program. Owners of applicable properties are required to deposit any surplus cash into a Residual Receipts account semi-annually or annually as required by their Regulatory Agreement. Surplus cash is the cash remaining after all necessary and reasonable expenses of the project have been paid or funds have been set aside for such payment.

Owners with funds in their residual receipts accounts must use all available residual receipts prior to receiving any service coordinator grant funds. Section 202 properties may only use residual receipts that have accumulated funds in excess of $500 per unit, to be consistent with the intent of Section 202(j)(6) of the Housing Act of 1959 as amended in 1992.

Owners with properties insured under Section 236 may request authorization to retain excess income to fund a service coordinator program.

Owners with debt service savings can use
Funding through HUD Service Coordinator Grants

Assuming funds are included by Congress in annual appropriations, HUD makes grants available each year through the Service Coordinators in Multifamily Housing Notice of Funding Availability (NOFA). The NOFA describes the application eligibility criteria, eligible program activities, and the method of application preparation and submission. HUD awards service coordinator grant funds only to owners of eligible subsidized multifamily projects that are designed or designated for elderly individuals or for non-elderly persons with disabilities.

HUD awards service coordinator grants for an initial three-year term. Annual extensions are subject to the yearly appropriations set by Congress, and therefore extension funding is not guaranteed. Sections 202 and 811 Project Rental Assistance Contract (PRAC) properties, conventional public housing, and housing units funded with project-based Housing Choice Vouchers are not eligible to receive grants for service coordinators.

Combining Sources of Funding

Residual receipts and rent increases may be used alone, or in conjunction with one another, as funding mechanisms for a Service Coordinator program. For example if the residual receipts are not sufficient to cover the entire cost of a Service Coordinator, the owner may request a rent increase in addition to using the remaining residual receipts. However, residual receipts must be exhausted prior to requesting a rent increase.

Owners who have grant-funded service coordinator programs can change the source of program funding by including the expenses in the property’s operating budget and obtaining the requisite HUD approval. Typically, owners do not change funding sources until the end of a grant term. Once budget-based rents that include the service coordinator expenses become effective, HUD will terminate the service coordinator grant and de-obligate any remaining grant funds.

HUD urges housing owners and managing agents to use budget-based funding sources to fund a Service Coordinator program, whenever possible. These funding streams are more stable and consistent over time. Grants, by their nature, are temporary sources of assistance and the future availability of such funds is never certain.

B. Program Reporting

Service Coordinators must closely track their program's performance to ensure they are working as effectively as possible and meeting the needs of the residents they serve. HUD’s Multifamily Housing Service Coordinator Semi-Annual Performance Report (form HUD-92456) is designed to facilitate this process.

This report gathers data on the number of residents served, resident demographics, and the range of services provided. It also documents the service coordinator’s efficiency in providing coordination by reporting the number of hours worked, the amount of time spent doing administrative tasks, the types of professional training attended, and examples of problems encountered throughout the course of their work.

Service coordinators whose positions are paid by the following funding sources are required to submit the HUD-92456, Semi-Annual Performance Report:

- Service Coordinator in Multifamily Housing Grant Program funds
- Section 8 funds
- Project Rental Assistance Contract (PRAC) funds
• Section 236 Excess Income
• Debt service savings; and/or
• Residual Receipts

All service coordinators, unless a reasonable accommodation request is made, MUST submit their HUD-92456 electronically. Furthermore, the form downloaded from the HUD website should maintain its fillable features. To limit the amount of submissions, service coordinators should download the latest file. Do not sign and scan; the form will lose its fillable features if this is done. Service coordinators should type their names in and save the file before submitting to the HUD Regional/Satellite office that oversees their property.

**Reporting Periods and Submission Dates**

Starting in Calendar Year 2017, the HUD-92456, Semi-Annual Performance Report is to be submitted to the applicable HUD Regional/Satellite office no later than 30 days after the end of each reporting period. The two reporting periods are January 1- June 30 and July 1- December 31.

**C. Service Coordinator Program Monitoring by HUD Staff**

HUD conducts regular monitoring reviews of service coordinator programs to ensure that grant funds are used for their intended purpose. HUD is responsible for ensuring monitoring reviews are scheduled and conducted. HUD Regional/Satellite Office staff will determine how often they will conduct on-site reviews. The frequency of reviews will depend on the nature of a project’s day-to-day operations and service coordinator program activities. To the extent possible, the on-site reviews will be combined with other reviews of the project to optimize the use of staff and travel resources.

HUD staff may periodically perform a desk or “remote” off-site review of the program, in lieu of an on-site assessment. This review will include examining financial information and reports, the Semi-Annual Performance Report, other program activities, and compliance with training and Quality Assurance (QA) requirements.

Appendix B provides a detailed overview of the review process.

**D. Service Coordinator Program Non-Compliance**

If, during the review process, or at any other time, HUD determines that a property is in non-compliance, corrective action may be required. The following is a brief description of what constitutes non-compliance and the process to be followed in the event that evidence of non-compliance is found.

**What Constitutes Non-compliance**

Owners may be in noncompliance with program requirements if they meet any of the situations listed below:

1. Any use of grant or project funds for a purpose other than as authorized by HUD;
2. Breach of or noncompliance with relevant laws, regulations, administrative program policies, grant agreements, or other documents approving the use of project funds; or
3. Any misrepresentation in a funding request that, if known to HUD, would have resulted in these funds not being provided.
Corrective Action

If it is determined preliminarily that an owner is in noncompliance as described above, the owner will be given notice of this determination and the corrective or remedial action proposed by HUD. The owner shall have the opportunity to demonstrate, within the time prescribed by HUD (not to exceed 30 calendar days from the date of the notice), and on the basis of facts and data, that it is indeed in compliance, or that the proposed corrective or remedial action is inappropriate, before the corrective or remedial action is implemented.

Where it is determined that corrective or remedial actions by the owner have not been undertaken as instructed, or will not be effective to correct the noncompliance and to prevent further problems, the following additional corrective and remedial actions may be taken:

- HUD may suspend or terminate, in part or in whole, the grant or approval to use project funds;
- Demand repayment of all grant or project funds amounts disbursed;
- Take any other remedial action legally available;
- HUD may place conditions on the award of grants or approvals of one or more classes of project funds so that the deficiency can be remedied and that adequate steps be taken to prevent future deficiencies.
- HUD may also impose other sanctions authorized by law or regulation and/or
- Initiate litigation or other legal proceedings designed to require compliance with relevant laws, regulations, Grant Agreements, or other pertinent authorities.

Grant Termination

HUD may terminate an award for (a) non-compliance or (b) if a grant has been inactive for more than 180 days and the grantee fails to provide a justification.

**Note:** If a grant is terminated due to poor performance, not reporting and/or in violation of other Terms and Conditions set forth in the Grant Agreement, in accordance with 2 CFR 200, the HUD Official must report the termination to the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS).

Upon the determination that the grant is to be terminated or closed out, the closeout process must commence.
CHAPTER 7. QUALITY ASSURANCE IN SERVICE COORDINATION

Chapter 7. Quality Assurance in Service Coordination

While not required, HUD strongly recommends that all multifamily properties with service coordinators include a Quality Assurance (QA) component. To this end, QA is an allowable program expense. HUD expects that all owners of multifamily properties with service coordinators will ensure that the service coordinator program is effectively implemented and monitored. A QA component is a valuable approach for doing so.

QA is an impartial evaluation by a third-party professional that provides checks and balances to ensure that a consistent and competent service coordinator program is effectively implemented and sustained. A service coordinator QA program provides regular, systematic monitoring and evaluation of specific aspects of the activities conducted by a service coordinator to ensure that standards of quality are being met and maintained. This practice helps to verify that service coordinators are in compliance with the terms and conditions of the award, the governing statutes and regulations as well as fulfilling reasonable expectations of the residents they serve, the management agent or property owner that employs them, and all regulatory or accrediting bodies.

Among other things, QA professionals provide technical assistance and trainings to new service coordinators and service coordinators in need of additional skills or information. QA providers also assist service coordinator in developing a supportive services plan for the residents of the property as a whole.

A. Requirements for a Third-Party Quality Assurance Professional

The QA professional should have extensive knowledge of the organization and its systems, and can play a direct role in setting up system guidance for the service coordinator. For example, the QA provider can help decide on the best case management software and/or paper file systems to ensure effective and efficient documentation and case management and set guidelines for record management. In a large organization, the QA professional can also ensure that service coordinators are meeting organizational requirements.

Recommended Qualifications of a Quality Assurance Professional

QA professionals provide both quality assurance and technical assistance for service coordinators. HUD recommends the following qualifications of QA providers:

- Bachelor’s degree in Social Work, Gerontology, Psychology, Counseling, or a related health care field, although any other bachelor’s degree is acceptable with relevant social service experience; Master’s degree is preferred
- Training in the aging process, elder services, disability services, and other issues specific to understanding the population that the service coordinator position serves
- Two to three years’ experience in social service delivery
- Demonstrated working knowledge of supportive services and other resources in the area served by the project
- Demonstrated ability to advocate, organize, develop outcomes and appropriate outcomes measures, problem solve, and provide results
CHAPTER 7. QUALITY ASSURANCE IN SERVICE COORDINATION

Many third-party organizations that provide QA services may have additional requirements or preferences for QA professionals that they hire.

**QA Providers**

Individuals who may perform QA include:

1. A third-party contractor (such as staff of an Area Agency on Aging); or
2. Staff of an owner or management agent who works in a central or regional office and who does not perform activities routinely assigned to the management agent. Often, QA services are provided by individuals who are part of the same organization as the service coordinators but serve in a separate branch. In addition to providing QA services to service coordinators within their organization, many organizations with QA providers also serve as third-party contractors for service coordinators in other organizations.

**Staff of a Property Management Organization versus Third-Party Contractor**

Regardless of whether an organization hires a third-party contractor or has internal staff dedicated to QA oversight, it is important to ensure the independence of QA professionals. QA professionals should not serve as direct supervisors for service coordinators. Management Agent staff who serve on site may not be considered as QA providers, nor can the QA function be used to justify an increase in the salary of staff already working with the organization.

**B. Sources of Funding for Quality Assurance**

As noted above, QA is an allowable administrative expense under the Service Coordinator in Multifamily Housing Program. A service coordinator program may propose an expense of up to 10 percent of the service coordinator’s salary to provide QA monitoring, technical assistance, review of participant files, and other QA duties.

If the original grant budget did not factor in a QA component, owners or management agents must provide a written justification for the QA component along with the budget for the service coordinator program. Operations- or budget-funded service coordinator programs can use the property’s operations budget funds to cover the costs of a QA component to their service coordination program.

**C. Quality Assurance Tasks and Activities**

QA professionals monitor the activities and files of service coordinators to ensure the service coordinators are providing the assistance that residents require. QA professionals also provide important training and technical assistance to service coordinators. Finally, QA professionals help service coordinators evaluate the performance of their program and set goals to improve outcomes.

Expectations and promising practices regarding each of the following QA functions are provided below:

- Monitoring service coordinators’ activities
- Reviewing service coordinators’ files
- Providing technical assistance and training
- Setting goals and completing program evaluations
CHAPTER 7. QUALITY ASSURANCE IN SERVICE COORDINATION

- Reviewing the supportive services plan
- Helping the service coordinator establish and sustain partnerships
- HIPPA and privacy

**Monitoring Service Coordinators’ Activities**

A core function of QA professionals is to monitor whether service coordinators fulfill the requirements of their contract and provide residents with the services they need. The QA professional should monitor how service coordinators carry out their work and ensure that service coordinators provide regular, appropriate resident outreach and education events that meet the needs of the population they serve. In addition, QA providers should check that service coordinators follow up with residents on any issues they have faced within an appropriate time period.

The QA professional should also check that the service coordinator does not provide direct services to residents or perform administrative or management tasks outside of the confines of the position, including property management duties or recreational activity planning/participation for residents. Finally, the QA provider should check to ensure the service coordinator is submitting accurate and timely reports according to HUD guidelines.

Organizations that use a portion of their service coordinator budget for QA must conduct QA activities at least once annually, and most organizations conduct QA activities twice a year. In addition, some organizations review service coordinators’ monthly reports for any discrepancies and follow-up with questions.

**Onsite Monitoring versus Remote Monitoring**

Onsite monitoring and resident visits can be part of the QA professional’s monitoring activities. Onsite evaluations allow QA providers to meet residents and gain a better understanding of their needs, to observe conditions in the service coordinator’s physical office space, and to compare paper and electronic files. Site visits should serve to enhance quality assurance in ways that remote monitoring will not adequately address.

Some organizations may find that onsite monitoring is cost-prohibitive due to the travel involved. In the event that onsite monitoring is not feasible, alternative arrangements should be made to conduct remote service coordinator file reviews, speak with residents and management, and/or survey residents on the performance of the service coordinator.

The following are some of the ways that QA providers conduct remote monitoring:

- **Conducting online file reviews.** Many service coordinators use online systems to store and update files, including most or all forms as well as progress notes. Files can be reviewed through the online portal during a remote review session.

- **Surveying residents through the mail.** Asking residents to complete surveys, and providing return postage, allows QA professionals to collect anonymous feedback about the service coordinator.

- **Holding phone calls with the service coordinator** to ask questions, including follow-up questions on any files as well as questions about regular progress.

Some QA professionals combine onsite monitoring and remote monitoring. In some organizations, this means having one annual onsite visit and one remote monitoring review per year.
CHAPTER 7. QUALITY ASSURANCE IN SERVICE COORDINATION

Reviewing Service Coordinators’ Files

The QA professional should routinely review a sample of the service coordinator’s active and inactive files to ensure compliance with HUD standards. The QA provider’s file review is patterned after a HUD audit of the service coordination program, which is described in Appendix B.

Most QA professionals review a sample of the service coordinator’s files on residents at least twice per year. During file reviews, QA providers generally select between four and ten files to review for each service coordinator. Some organizations select files that represent complex cases, such as a file for a resident who was hospitalized. Most organizations randomly select at least some of the files that they review. Some organizations also allow service coordinators to select some files to be reviewed because of outstanding questions.

File review should include examination of:

- **The frequency of updates to files.** Many forms should be updated annually or semi-annually, or when there are changes in circumstances.

- **The timeliness of follow-up visits with residents**, based on organization standards. This can include mandatory updates after hospital visits or progress notes on previous issues.

- **Whether particular incidents were dealt with and catalogued correctly.**

- **Whether all files are complete.**

HUD recommends that service coordinators to use online file systems whenever possible. Such systems have flags that indicate incomplete files and folders and will allow QA providers to quickly identify errors and needed follow-up.

Providing Technical Assistance and Training

QA professionals should provide ongoing technical assistance and remedial training to service coordinators. In some locations, QA providers’ also lead onboarding trainings to ensure new service coordinators are able to meet the requirements of the program in an effective and sustainable manner. In addition, QA providers help service coordinators to set goals and evaluate the service coordinator’s performance.

Remedial Training

QA professionals should arrange or provide training for service coordinators who have deficient resident files or ineffective practices in service provision, case management, or providing assistance to residents. QA providers should also provide necessary training to service coordinators regarding incorrect documentation or inaccurate reporting practices.

This training may be conducted in person or remotely, and followed up with additional site visits or file reviews when possible.

Onboarding Trainings

QA professionals often conduct additional quality assurance oversight and training for new service coordinators. Where feasible, the QA professional should conduct additional onsite site visits and/or file reviews for new service coordinators.
CHAPTER 7. QUALITY ASSURANCE IN SERVICE COORDINATION

Setting Goals and Completing Program Evaluations

Program evaluation is an integral part of any successful service coordination program. Since residents’ needs, ability to execute daily functions, and wellness status generally change over time, properties’ service coordination programs need to be regularly evaluated and updated to ensure they remain relevant and effective for the current residents. This is why it is important for the service coordinator to assess each resident’s supportive services needs at least once per year; as residents’ circumstances change, the service coordinator should update the property-wide profile that guides the service coordinator in developing and bringing educational and informational programs and services to the property.

Reviewing the Property’s Supportive Services Plan

The property’s supportive services plan describes the types of services the coordinator proposes be provided for residents, as well as how the services will be funded and provided. Applicants for Service Coordinator in Multifamily Housing Programs must submit this plan with their application. Quality assurance providers should review these plans and ensure that (a) the plan accurately reflects the needs of residents and (b) service coordinators are fulfilling the plan.

Helping Service Coordinators Establish and Sustain Partnerships

QA providers should ensure service coordinators are creating strong relationships with appropriate partners by reviewing files on referrals as well as their book of available resources. In addition, at some organizations, the QA professional works with the service coordinator to set goals regarding the number and nature of referrals to be made by the coordinator.

HIPAA and Privacy

The QA professional should ensure the service coordinator is protecting the privacy of residents. In particular, it is important to ensure that any medical information is protected (whether in paper or electronic copy) and is never disclosed without permission of the resident. Some QA providers only receive files from service coordinators that have names blacked out. In addition, many QA providers pay careful attention to the maintenance and security of files and folders during their audits or visits to ensure that private information is being stored effectively. Some quality assurance providers go as far as checking the sound proofing of the service coordinator’s office to ensure that privacy is well taken care of.

D. Quality Assurance Reporting

If the service coordination program has a quality assurance component, the third-party QA professional must report their activities and the results of their QA reviews to HUD on an annual basis. All QA reports should be submitted to HUD with the last Semi-Annual Performance Report of the year.

A copy of the reports must also be provided to service coordinators and property managers. The text box describes the topics to be covered in a QA report.
The Following Topics Must be Covered in a Quality Assurance Report:

- **The service coordinator’s accessibility to the residents**, including the presence of a visible sign indicating the location of the service coordinator’s office, contact information, and office hours, as well as an office location and hours that meet the needs of residents considered to be “at-risk.”

- **Whether file storage is effective and secure**, including a secure filing cabinet for the service coordinator’s hard-copy resident files and password protection for electronic files.

- **Resident file contents and organization**. The service coordinator’s files should be organized with the requisite intake forms, assessments, appropriate signed Consents for Release of Information, current and ongoing services/case management plans with corresponding case/progress notes documentation and follow up and documentation of the disposition/termination of the case, as appropriate.

- **Whether references to community-based providers and other resources are kept in an organized fashion** with contact information that can be provided to residents and others upon request.

- **Appropriate documentation of requisite training topics** and hours for the service coordinator.

- **Any additional information/documentation regarding outreach efforts** and wellness activities conducted or arranged by the service coordinator.

- **Narrative of any situations where the QA professional provided remedial training and/or technical assistance** with difficult or unique resident situations.

- **Results of surveys of management and/or residents** regarding the service coordination program.

- Review of **supportive services partnerships** developed in the community

- **Adherence to HIPAA and privacy rules**
## Appendix A: Resources for Service Coordinators

<table>
<thead>
<tr>
<th><strong>HUD Resources</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Multifamily Service Coordinator Program Website</td>
<td>HUD’s Multifamily Service Coordinator Program Website</td>
</tr>
<tr>
<td>Most recent Service Coordinator NOFA</td>
<td>Notice of Funding Availability</td>
</tr>
<tr>
<td>Chapter 8 of HUD’s Management Agent Handbook 4381.5</td>
<td>Chapter 8 of HUD’s Management Agent Handbook 4381.5</td>
</tr>
<tr>
<td>outlines the role of service providers</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Other Federal Agency Resources</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration on Aging</td>
<td><a href="http://www.aoa.gov">www.aoa.gov</a></td>
</tr>
<tr>
<td>Centers for Medicare and Medicaid</td>
<td><a href="https://www.cms.gov/">https://www.cms.gov/</a></td>
</tr>
<tr>
<td>Administration on Community Living</td>
<td><a href="https://acl.gov/">https://acl.gov/</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Training Resources</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>The American Association of Service Coordinators (AASC)</td>
<td><a href="http://www.servicecoordinator.org">www.servicecoordinator.org</a>.</td>
</tr>
<tr>
<td>Local Councils on aging</td>
<td>Find your local council at <a href="http://www.eldercare.gov">www.eldercare.gov</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>National housing organizations</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>National Low Income Housing Coalition (NLICH)</td>
<td><a href="http://www.nlihc.org">www.nlihc.org</a></td>
</tr>
<tr>
<td>National Association of Housing and Redevelopment</td>
<td><a href="http://www.nahro.org">www.nahro.org</a></td>
</tr>
<tr>
<td>Officials (NAHRO)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State and local area agencies on aging</th>
<th><a href="https://aoa.acl.gov/AoA_Programs/OAA/How_To_Find/Agencies/find_agencies.aspx">https://aoa.acl.gov/AoA_Programs/OAA/How_To_Find/Agencies/find_agencies.aspx</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>National Association of Area Agencies on Aging (n4a)</td>
<td><a href="http://www.n4a.org">www.n4a.org</a></td>
</tr>
</tbody>
</table>

| **National Association of Social Workers (NASW) and any of its state affiliates** |                                                                                      |
| American Society on Aging                               | www.asa.org                                                                           |


Appendix B. HUD Reviews of Local Service Coordinator Programs

The following is a summary of the monitoring that HUD Regional/Satellite office staff will conduct of multifamily service coordinator programs. Such reviews may be on-site or remote.

On-site Reviews Monitoring Preparation

Prior to conducting an on-site review, HUD staff will conduct the following steps, at a minimum, to prepare for the review:

1. Review all available information regarding program performance;
2. Prepare a list of questions to be asked relative to the program’s activities and performance;
3. Review the grant application or the request for use of project funds and any accompanying comments or analysis;
4. Check information available from LOCCS reports and queries made regarding drawdowns, complaints, and any additional sources of information on factors affecting program implementation; and,
5. Review the approved proposal, budget, and funds drawdowns.

Notification of Review

Owners shall be given at least a two-week notice, in writing, of a review. The letter should include the areas to be covered, the names of the HUD participants, the date(s) of the visit, and a list of the files to be reviewed. Just prior to any visit, HUD Regional/Satellite office staff should confirm the specific dates and time for any meetings or interviews with the owner, local officials, residents, residents’ groups, etc.

Conducting the On-Site Review

During the onsite review, HUD Regional/Satellite office staff will do the following:

1. Meet with the owner to discuss the scope of the review; solicit questions, and discuss any problems already identified by the owner, residents, or the Regional/Satellite office.
2. Review any appropriate material generated by the owner that provides more detailed information on the performance of the SC, budget, and fund draw downs, the vouchers supporting draw downs, records confirming disbursement of funds, LOCCS/VRS access, etc.
3. Review pertinent program files for required documentation and verify the accuracy of information provided to HUD.
4. Discuss/evaluate the hiring process for the SC, the SC’s qualifications, experience, duties, and his/her relationships with residents, other management staff, and community or local government service agencies.
5. Interview program staff, residents, resident groups, and others, as appropriate, to discuss program performance.
6. Review all program costs.
APPENDIX B: HUD REVIEWS OF LOCAL SERVICE COORDINATOR PROGRAMS

To the greatest extent possible, HUD Regional/Satellite office staff should offer technical assistance to the owner to provide help in correcting errors and solving problems. The point of the review is to improve program performance and assure that the program’s expenses are being carried out in the best interests of the project, residents, and HUD.

Close-out Meeting

At the end of the review, HUD Regional/Satellite office staff will meet with the lead person responsible for administering the program. This meeting should cover problems identified in the review, suggestions to improve owner performance, feedback from residents, the effectiveness of the program to date, etc. The owner should be permitted to comment on any problems identified and to offer suggestions for performance improvement.

Preparing and Issuing the Report

HUD staff shall advise the owner that a written report will be issued based on the review. The report should accomplish the following:

- verify compliance with statutes and performance related to accountability;
- provide the owner with findings stemming from the review;
- provide suggestions for improvement; and
- provide a schedule of target dates for the owner's submission or implementation of corrective action(s) to address any findings(s).

HUD staff will complete and submit the report to the Grant Officer (or designee), owner, and any others designated to receive such reports, within 30 calendar days following the on-site review.

The report shall contain but not be limited to:

- Identification of the staff performing the review and the date(s) of the visit;
- Summary of the approved program activities and performance, including both assessment of the owner’s administration of the program and the SC’s job performance to date;
- List of persons interviewed and the results of those interviews;
- Monitoring conclusions, including findings of non-performance, with specifics, backing the conclusions and recommendations for improvement as appropriate;
- Recommendation for each finding reported and, if appropriate, corrective actions that must be taken by the owner with a timetable for completion; and
- Other pertinent comments regarding program performance, acceptance of the activities by the residents and resident groups, and quality of the service coordination provided.

Off-Site Monitoring

In addition to on-site reviews, remote off-site monitoring of service coordinator programs shall be conducted by designated HUD staff. The staff will conduct remote monitoring reviews in consultation with appropriate staff as set forth by the Multifamily Hub or Program Center Director.

HUD Regional/Satellite office staff shall use documented remote monitoring techniques such as telephone calls, financial, performance, and narrative reports, LOCCS account
information and payment vouchers, First-Time Funding Request, One-Year Budget, Funds Authorizations, and other information available at the HUD office to monitor owner performance.

In carrying out remote monitoring reviews, HUD staff must prepare a written assessment of the program’s overall performance, as indicated by the sources mentioned above. The written report should be retained in the appropriate project file at the Regional/Satellite office.

The most significant part of any review (whether on- or off-site) is to ensure that the owner is complying with the terms and conditions set forth in the Grant Agreement/amendment or approved proposal to use project funds. HUD staff must take appropriate action if the owner breaches any of these terms and conditions, or if any problems exist with LOCCS or with obtaining drawdowns.

At a minimum, HUD staff will review and assess the following:

1. Previous monitoring reports;
2. The hiring process for the SC, the SC’s duties, and the SC’s with residents, other management staff, and community relationships or local government service agencies (to the extent known);
3. Obligations and disbursements for consistency with the proposal and requested budget amounts;
4. Any requested changes to the proposed program or budget and approval or disapproval of these;
5. Program Performance and Financial Status reports;
6. LOCCS edits stopping drawdown of funds to owner;
7. Audit reports; and
8. Any other information deemed pertinent to the review.