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CHAPTER 7   **SITUATIONAL LEADERSHIP**

KNOWLEDGE CHECKS

KNOWLEDGE CHECK ANSWERS

IMPROVING TEST-TAKING SKILLS

Introduction

ONLINE RESOURCES

Resources and references relevant to this course are available for download at HCVExecMgmtResources.nanmckay.com. The materials may be accessed and downloaded as often as needed.

Additional HUD references can be also found on the NMA References Site, available at: http://nmareferences.com.

LEARNING OUTCOMES

The HCV Executive Management seminar is designed to assist executive managers in developing and mastering the required knowledge and skills for accomplishing agency objectives, motivating staff, and leading effectively. Upon completion of this seminar, you should be able to:

Upon completion of this seminar, you should be able to:

- Recognize the general structure of a PHA and the legal and regulatory framework in which it exists
- Design a strategy map for your agency's HCV program
- Write and implement goals for your agency's HCV department
- Discuss the implementation of a leadership system with your director or the board
- Select the most effective staffing model and caseload for your agency
- Implement a system to track HCV program funding and fees
- Design, manage, and improve work systems and processes to deliver customer value and achieve organizational success
- Write clear and effective policy and procedures
- Create and implement a quality control program

- Tie performance measurement to performance standards
- Develop a problem response strategy and an implementation plan
- Learn how to flex your leadership style to the development level of the employee
- Provide the appropriate amount of direction and support to employees to improve performance

THE BALDRIGE PROGRAM

The Baldrige Program is a national public-private program designed to improve the performance of U.S. organizations by educating organizations in performance excellence and management. For this reason, we have patterned this course after the Baldrige criteria for performance excellence in order to allow your agency to cultivate an HCV program that exemplifies high levels of performance based on these national standards of performance excellence.

Baldrige

There are several references to be reviewed in the Master Book throughout the course.

- Worksheet for at-home after course completion (Master Book page i-6)
- Baldrige Definitions (Master Book page i-8)

Baldrige Model

Throughout this seminar, we will cover the seven categories of the Baldrige Model, which include:

- Leadership

- Strategic Planning

- Customer Focus

- Measurement, Analysis and Knowledge Management

- Workforce Focus

- Operations Focus

- Results

Mission   Vision   Strategy

Leadership System

Goals and Objectives   Customers   Human Resources   Work Systems

HCV Performance Results

Measurements   Analysis   Knowledge Management

Intro-4
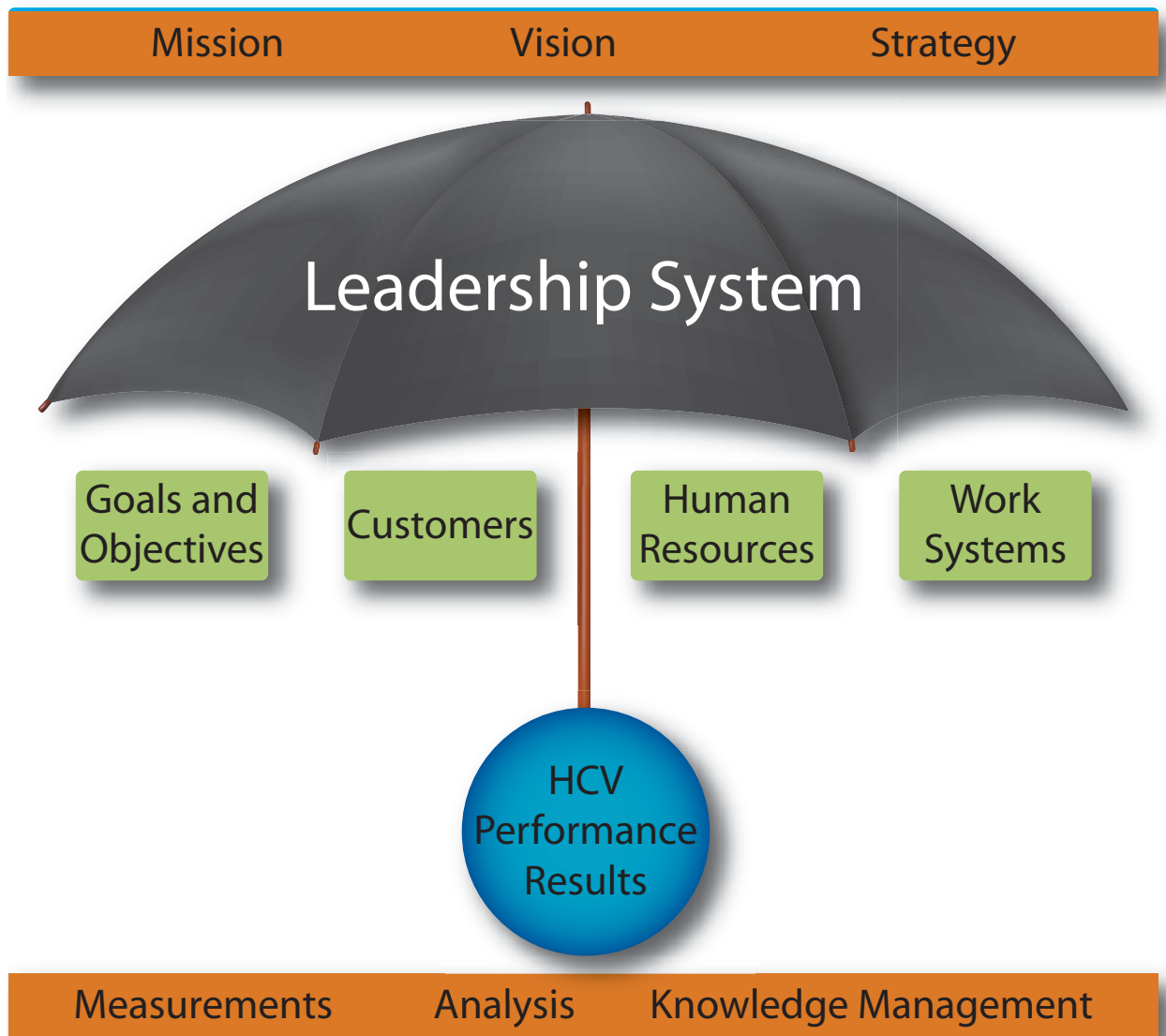
COURSE VISION

The purpose of this course is to provide a high-level overview of the management of the housing choice voucher (HCV) program. The course is designed for Executive Directors, Commissioners, Finance Directors, and Senior Leadership Team staff. HCV Managers will also benefit from this course. This course will assist you in achieving and maintaining your HCV program to a high-caliber standard using private sector techniques. In addition, attendees will explore new ways of thinking for successful program implementation.

The HCV Program Management course focuses more specifically on what HCV managers, directors, and team leaders need to know to directly manage a successful HCV program. CEOs/EDs, and finance managers should also attend. Learning outcomes for each topic covered include:

- What Success Looks Like

- Knowledge for Success

- Monitoring for Success

The HCV Program Management course provides in-depth how-to training on HUD Systems, a program assessment checklist, and Knowledge Checks for each program function.

It focuses on problem areas and provides management guidance and tools including portability tracking, SEMAP and file reviews.

Whether you head an HCV-only agency, administer both PH and HCV, serve as the executive director, director of the HCV program, or manage within the program:

- The principles of leadership are the same

- The high caliber standard is the same

This course has been designed to help you manage the HCV program strategically. This means tying your goals, decisions, and management operations into the mission, vision, and strategies of the organization.

In this regard, note that this course is NOT a regulations course. For program regulations, a housing specialist course would be more suitable.

ACTION PLAN NOTES

Throughout this course you will be presented with many different strategies that you may wish to apply to your agency. The pages that follow are provided for you to write your thoughts as the course progresses, allowing you to have a list of strategies ready to be implemented upon your return. You will be provided a few minutes throughout the training to capture your thoughts, so remove a few pages now so that you are prepared when the time comes.

Action Plan Notes

Tasks	Staff	Start Date	End Date
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Tasks	Staff	Start Date	End Date
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Tasks	Staff	Start Date	End Date
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Tasks	Staff	Start Date	End Date
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Tasks	Staff	Start Date	End Date
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Tasks	Staff	Start Date	End Date
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75.			

PLANNING NEXT STEPS

Part I. Action Plan Notes

The purpose of this exercise is to help you to maximize the benefits of this training and to translate knowledge into action. During this week you have made numerous Action Plan notes. You have probably identified issues you want to address and initiatives you want to implement when you return to your agency. You may have even identified new goals and objectives for your program. Remember that you cannot do everything at once, so now is the time to start making your plan of action.

You will need to apply critical thinking and strategic planning to implement your ideas. There may be obstacles or limitations that you cannot control, so it is important that you are fully prepared and that the solutions you propose are S.M.A.R.T. goals. This activity will help you to identify your most important goals and objectives and the actions needed to achieve them.

Step 1: Review your action plan notes and identify the five most important objectives you want to accomplish, issues you want to address, or initiatives you want to implement. After you list them assign an order of priority with the numbers 1 to 5, with 1 being the first priority. Do they tie into your mission and vision?

Item, Issue, or Initiative	Priority

Step 2: Focus on the most important items as Priority 1. Describe it in detail, and then answer the questions that follow. Continue through to the next important items and include them as Priority 2, Priority 3, and Priority 4, answering each of the questions. This will give you a good start on your strategic plan for improving your program's HCV performance.

Priority 1:

Description: Write a clear and complete statement of your objective or goal for this priority.

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1. Given your stated objective or goal, what steps will you take to **prepare** before you actually start?

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2. What steps, actions, or tasks will be necessary to accomplish your objective or goal? (How will you do it? Be as detailed as possible.)

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3. What resources will be required to achieve this goal or objective?

   a. List any management or team members who would be involved and explain their roles.

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   _____

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   b. Describe the financial resources that would be required, if any.

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4. What time frame will you set to achieve your objective/goal? (If there are milestones or multiple steps over time, estimate a date of completion for each.)

Goal/Step or Milestone	Projected Date

5. How does this tie in with the agency mission and goals?

   _____

   _____

6. What are the key points you will use in discussing this with the Executive Director?

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Priority 2:

Description: Write a clear and complete statement of your objective or goal for this priority.

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1. Given your stated objective or goal, what steps will you take to **prepare** before you actually start?

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2. What steps, actions, or tasks will be necessary to accomplish your objective or goal? (How will you do it? Be as detailed as possible.)

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3. What resources will be required to achieve this goal or objective?

    a. List any management or team members who would be involved and explain their roles.

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    b. Describe the financial resources that would be required, if any.

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4. What time frame will you set to achieve your objective/goal? (If there are milestones or multiple steps over time, estimate a date of completion for each.)

Goal/Step or Milestone	Projected Date

5. How does this tie in with the agency mission and goals?

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_____

6. What are the key points you will use in discussing this with the Executive Director or Board?

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Priority 3:

Description: Write a clear and complete statement of your objective or goal for this priority.

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1. Given your stated objective or goal, what steps will you take to **prepare** before you actually start?

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2. What steps, actions, or tasks will be necessary to accomplish your objective or goal? (How will you do it? Be as detailed as possible.)

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3. What resources will be required to achieve this goal or objective?

    a. List any management or team members who would be involved and explain their roles.

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    b. Describe the financial resources that would be required, if any.

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4. What time frame will you set to achieve your objective/goal? (If there are milestones or multiple steps over time, estimate a date of completion for each.)

Goal/Step or Milestone	Projected Date

5. How does this tie in with the agency mission and goals?

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6. What are the key points you will use in discussing this with the Executive Director or Board?

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Priority 4:

Description: Write a clear and complete statement of your objective or goal for this priority.

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1. Given your stated objective or goal, what steps will you take to **prepare** before you actually start?

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2. What steps, actions, or tasks will be necessary to accomplish your objective or goal? (How will you do it? Be as detailed as possible.)

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3. What resources will be required to achieve this goal or objective?

   a. List any management or team members who would be involved and explain their roles.

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   b. Describe the financial resources that would be required, if any.

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4. What time frame will you set to achieve your objective/goal? (If there are milestones or multiple steps over time, estimate a date of completion for each.)

Goal/Step or Milestone	Projected Date

5. How does this tie in with the agency mission and goals?

_____

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6. What are the key points you will use in discussing this with the Executive Director or Board?

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Priority 5:

Description: Write a clear and complete statement of your objective or goal for this priority.

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1. Given your stated objective or goal, what steps will you take to **prepare** before you actually start?

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2. What steps, actions, or tasks will be necessary to accomplish your objective or goal? (How will you do it? Be as detailed as possible.)

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3. What resources will be required to achieve this goal or objective?

    a. List any management or team members who would be involved and explain their roles.

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    b. Describe the financial resources that would be required, if any.

    _____

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4. What time frame will you set to achieve your objective/goal? (If there are milestones or multiple steps over time, estimate a date of completion for each.)

Goal/Step or Milestone	Projected Date

5. How does this tie in with the agency mission and goals?

    _____

    _____

6. What are the key points you will use in discussing this with the Executive Director or Board?

    _____

    _____

Part II: Guidelines for Presenting Your Ideas to the Executive Director or Board

At this point you have identified what you would like to do. Some of your decisions or goals may be one-dimensional or within the scope of your authority to implement without upper management approval. Some of your ideas, however, will require approval. For the purpose of this discussion, let's assume the person from whom you are seeking approval is the Executive Director. These guidelines will help you to prepare for your meeting with the Executive Director and to present those ideas or goals that do require approval or involve other aspects (departments, resources) of your organization.

Start with a Simple "Thank You."

When you return from this training you may want to touch base with the Executive Director, thank them for the training opportunity, and provide a quick debriefing on the training. This is the time to suggest or request a future meeting to discuss your ideas more specifically.

Pre-Meeting Activities

Review the data from Part I of the Planning Next Steps learning activity and create an action plan for the goals or ideas that you want to present. Be sure to have these available for your meeting.

Do Your Homework

Gather the data to support your ideas. How will your idea improve performance, efficiency, accuracy, cost savings, customer service, or any other outcome? If there is data to support your conclusion, be prepared to present it.

Brainstorm your Ideas

If possible, discuss your ideas with a trusted associated before meeting with the Executive Director. Brainstorm the pros and cons of your ideas so that you are prepared to answer questions. Try to imagine the types of questions the Executive Director might ask. If you cannot answer them, you may need to adjust your plan.

Prepare a Proposal Document

Prepare a one- or two-page briefing document on your idea. Have your Action Plan ready and available as a back-up resource in the event they are needed at the meeting. In preparing your document, analyze the organizational implications of your idea. It may be tempting (or simple) to present your idea from a single person or department perspective, but the Executive Director is looking through a broader lens—from the perspective of the entire organization. Keep in mind that even ideas that involve a minimal outlay can have big organizational implications (e.g., workflow, disruption, time, etc.), and you must carefully consider whether the benefits of your proposal are worth the potential impacts.

Schedule the Meeting

In scheduling the meeting, pick a time when the Executive Director is available, but not between meetings. While having conviction is good, do not be over-zealous in presenting your idea. You should be prepared to:

- List opportunities for improvement from your idea

- Explain how your idea ties into the mission and vision of the agency

- Present a step-by-step implementation plan (your Action Plan)

- Present fully developed ideas and data points as needed

- Provide a cost analysis on how the recommended changes will impact the PHA budget

- Answer any related questions

In short, present the problems that currently exist, the approach you plan to take, and the benefits likely to result. Keep your initial presentation short. More time will be spent answering questions than presenting your idea.

Notes

Chapter 1   Organizational Overview

Section 1: Organizational Profile:
          Organizational Environment

LEARNING OUTCOMES

Upon completion of this chapter, you should be able to:

- Recognize the general structure of a PHA and the legal and regulatory framework in which it exists

- Identify the roles and responsibilities of the external stakeholders

- Identify the roles and responsibilities of the board and the executive staff

- Explain mission, vision, culture, and the organizational chart, including how they relate to the agency's everyday work activities

- Design a strategy map for your HCV program

- Write and implement goals for the HCV department, tying in systems and measurements

- Describe the positive effects of a clear organizational leadership system and the negative effects of an unstated or unclear leadership system

- Describe the role of senior leaders and ethics in implementing effective leadership systems

- List and describe the organizational relationships your agency must cultivate for performance excellence

- Design data gathering tools and listening methods to capture the needs of the customers you serve and achieve customer engagement to assist in program compliance

- Design a customer service momentum strategy

ORGANIZATIONAL PROFILE

The organizational profile is a snapshot of your organization, the key influences on how you operate and the challenges you face.

The profile would include:

- Mission statement

- Services offered

- Organizational structure

- Community engagement and partnerships

- Strategic goals

- Key influences on operations

- Key challenges

- Performance and accountability

- Contact information

We will cover two primary sections of the Organizational Profile:

- Organizational Environment

- Organizational Relationships

Organizational Environment

This section discusses the overall environment in which a PHA operates, including:

- Service Offerings

- Regulatory Requirements

- PHA Role and Structure

- Mission, Vision and Culture

- Strategy Map

Organizational Relationships

This section encompasses the organizational relationships of the PHA, such as the PHA's relationship with:

- HUD
- Local government
- Community-based stakeholders
- Families
- Owners

ORGANIZATIONAL ENVIRONMENT

Most of the factors that impact the organizational environment are the result of actions and decisions made by the organization's leaders!

Service offerings

The PHA administers the Housing Choice Voucher Program in a specific jurisdictional area under a HUD contract.

Housing choice vouchers allow very low-income families to choose and lease or purchase safe, decent, and affordable privately-owned rental housing.

PHAs may administer special types of vouchers such as:

- Veterans Affairs for Supportive Housing (VASH)
- Family Unification Program (FUP)
- Non-Elderly Disabled (NED)
- Enhanced and Tenant-Protection Vouchers

Rental Assistance Demonstration Program (RAD)

RAD is a demonstration program that was created to give public housing authorities (PHAs) a powerful tool to preserve and improve public housing properties and address the $26 billion dollar nationwide backlog of deferred maintenance. RAD also gives owners of three HUD "legacy" programs (Rent Supplement, Rental Assistance Payment, and Section 8 Moderate Rehabilitation) the opportunity to enter into long-term contracts that facilitate the financing of improvements.

RAD allows PHAs to leverage public and private debt and equity in order to reinvest in the public housing stock.

In RAD, units move to a Section 8 platform with a long-term renewable contract to ensure that the units remain permanently affordable to low-income households.

Residents continue to pay 30 percent of their income toward rent and maintain the same basic rights as they had in their former public housing unit.

RAD maintains the public stewardship of the converted property through clear rules on ongoing ownership and use agreements.

The RAD program is cost-neutral and does not increase HUD's budget.

Project-Based Voucher Program (PBV)

The Project-Based Voucher (PBV) program is a discretionary program that allows a PHA to attach up to 20 percent of its existing Housing Choice Vouchers to a unit. The voucher is then considered "project-based" verses "tenant-based." The PHA enters into a Housing Assistance Payments (HAP) contract with an owner for units in existing housing or in newly constructed or rehabilitated housing. In the case of newly constructed or rehabilitated housing, the housing is developed under an Agreement to Enter into a HAP contract (AHAP) between the owner and the PHA. In the Agreement, the PHA agrees to execute a HAP contract after the owner completes the construction or rehabilitation of the units.

Once the HAP contract is executed and during the term of the HAP contract (one to 20 years), the PHA makes housing assistance payments to the owner for units leased and occupied by eligible families. If a PHA decides to operate a PBV program, in most cases the PHA will be required to issue a Request for Proposals (RFP) unless the development was already awarded funding under a state or local competitive process.

Establishing a PBV program may be a great solution for increasing utilization in a tight housing market. Regulations on establishing a PBV program can be found at 24 CFR Part 983 and is considered a significant amendment to the PHA plan. For more information on PBV, we suggest you attend our Developing and Managing Project-Based Vouchers course.

Moving To Work Demonstration Program (MTW)

Authorized by Congress as a demonstration program for certain PHAs through a competitive process that allows the agency flexibility to design and test innovative approaches to providing housing assistance by:

- Allowing exemptions from certain HUD program rules

- Allowing for fungibility of program funding

PHAs may operate other programs using vouchers such as family self-sufficiency and homeownership.

PHAs may administer other affordable housing programs such as:

- Low Income Public Housing (PIH)

- Section 8 Moderate Rehabilitation Program (MOD REHAB)

- Low Income Housing Tax Credits (LIHTC)

- Project-Based Contract Administrator for Multi-family housing (PBCA)

REGULATORY ENVIRONMENT

Congress's Legislative Impact

The role of Congress includes:

- Passing authorizing legislation & appropriation bills
- Making rules
- Establishing HUD's budget
- Congressional inquiries

State Government

PHAs are created under state enabling legislation stipulating:

- The number of commissioners and procedures for appointment or election
- The jurisdiction of PHA
- By-laws
  - Time, place for meetings
  - Authority delegated to Executive Director

Local Government

Appoints or elects commissioners

May be county, city, state or other

Working with local government is key to getting the job done

Political environment frequently changing so flexibility and communication is important

State and Local Laws

Most states and localities have landlord-tenant laws

The PHA should seek legal counsel where HUD requirements conflict with local or state law

HUD

PHAs operate primarily on federal funds under a contract with the U.S. Department of Housing and Urban Development (HUD).

HUD Regional/Field Offices

HUD is organized in 10 regions. Each region is managed by a regional administrator, who also oversees the Regional Office.

Each Field Office within a region is managed by a field office director, who reports to the regional administrator.

HUD's Regulatory Impact

HUD Headquarters

- Writes and publishes regulations

- Allocates funds

- Performs audits

State and Field Offices

- Monitor program compliance

- Monitor performance with systems

- Engage in more direct communication with PHAs - primary relationship for PHAs to develop

Sustainability

The agency's sustainability measures are adjusted as Congress and HUD make programmatic and budget changes.

- For your reference, highlight and review the definition of *sustainability* from the Baldrige definitions specified in the introduction of this workbook.

Staying Current

The PHA needs to stay current on:

- New laws, regulations, notices and forms

- HUD guidance

    - Enterprise Income Verification (EIV) Notices

    - Voucher Management System (VMS) Updates

    - Portability changes

Section 1: Organizational Profile: Organizational Environment

Compliance and Performance

HUD's Financial Management Center (FMC) is responsible for:

- Financial analysis and review (VMS)

- Quality control and monitoring

- Assisting headquarters staff in developing program policies and procedures affecting financial operations

HUD's Real Estate Assessment Center (REAC) monitors:

- The Financial Assessment Subsystem (FASS)

- Year-end financial reporting for HCV

   - Including audited and unaudited financial submissions

HUD Regulations

- HUD Regulations: 24 CFR (References)
   - Part 1: Basic Civil Rights
   - Part 5: Combined PH & S8 (income, SSN, non-citizens)
   - Part 8: Nondiscrimination
   - Part 100: Fair Housing
   - Part 900: PHA Plans
   - Part 960: Public Housing
   - Part 982: Housing Choice Vouchers
   - Part 983: Project-Based Vouchers
   - Part 984: Family Self-Sufficiency
   - Part 985: SEMAP
   - Part 882: Moderate Rehabilitation

NOTE: Links to the above can be found at http://nmareferences.com

How HUD Communicates

- HUD's Home Page:
    - https://www.hud.gov

- HCV Page:
    - https://hud.gov/hcv

- Newsletter HVC Connect (under Communications with PHAs)
    - https://www.hud.gov/program_offices/public_indian_housing/programs/hcv/guidance_and_notices

- PIH One Stop Tool:
    - https://www.hud.gov/program_offices/public_indian_housing/post

HUD Audits: Compliance

Various levels of HUD and its contractors perform audits of PHA program operations and adherence to rules, regulations, and PHA policy.

Other HUD Audits and Compliance Reviews

Specific HUD audits could be scheduled for your PHA, including:

- Rental Integrity monitoring (RIM) reviews

- Rent Reasonableness

- FSS

- File reviews

- Finance/VMS

- EIV security

- Housing quality standards (HQS)

HUD's Office of Inspector General (OIG): Compliance

The role of HUD's Office of Inspector General (OIG) is to:

- Conduct and supervise independent audits and investigations relating to programs and operations

- Prevent and detect fraud and abuse in programs and operations and seek sanctions and prosecution where needed

OIG publishes reports on the web and to Congress on their findings.

They are Congress's barometer to the operation of the programs.

OIG also produces audit findings and recommends repayment of HUD funds.

OIG reports can be found at www.hudoig.gov.

Section 1: Organizational Profile: Organizational Environment

Learning Activity 1-1:   Operational Obstacles

- Break into groups. Individually read Facilitator Role; one person volunteer to be the facilitator and practice the role. Have group member list responses on the Flip Chart. Concisely describe the biggest problem you are facing in operating the HCV program.

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REGULATORY ENVIRONMENT: FAIR HOUSING COMPLIANCE

HUD's Requirement

Every PHA has an affirmative duty to comply with fair housing laws. In doing so, it is important for PHAs to be vigilant and proactive.

The PHA must sign certification of its intention to comply with the following fair housing laws:

- Fair Housing Act and Amendments

- Title VI of Civil Rights Act of 1964

- Age Discrimination Act of 1975

- Executive Orders 11063 and 13988

- Section 504 of the Rehabilitation Act of 1975

- Title II of the Americans with Disabilities Act (ADA)

Notice of Nondiscrimination and Record Keeping for HUD

HUD requires PHAs to maintain records on applicants and tenants for at least three years to provide HUD with racial, ethnic, gender and disability status.

Every PHA office must have a posted policy on non-discrimination visible to the public.

Fair Housing

Read regulations, notices and OGC guidance on:

- Discriminatory Effects Rule

- OGC: Disparate Impact

- Equal Access Rule

- Limited English Proficiency (LEP)

- VAWA

Attend NMA Fair Housing class

ROLE AND STRUCTURE OF THE PHA

PHA Role

The role of the PHA in the HCV program is to:

- Enter into a contractual relationship with HUD

- Apply for and implement programs established by Congress and regulated by HUD

- Ensure compliance with HUD contract and regulations

- Administer funding HUD provides

- Issue vouchers to eligible families within funding constraints

- Execute housing assistance payments (HAP) contracts with owners to provide housing assistance payments on behalf of families

- Establish policies in all areas of program operations and administration which incorporate definitions, procedures, and administrative practices governing the PHA's operation

PHAs may elect to contract out to private contractors some or all of their functions, such as:

- Inspections and/or rent reasonableness/owner services

- Call Center

- Intake

- Reexaminations and interims

- Portability

- Quality Control

The PHA role may be contract administrator to oversee the contractor instead of doing the actual work for a particular function, but the PHA retains accountability to HUD.

When contracting out, the PHA should retain overall control by:

- Managing the contractors

- Setting agency policy

- Managing the financial aspects

- Quality controlling the work of the contractors

General Structure of a PHA

PHA Structure: Board

The board of commissioners is a team of community leaders.

Some board members may be elected officials or appointed by the mayor and/or governing body and may also be residents of public housing or Section 8.

Appointment requirements are in state law and the by-laws of the agency.

The board team is responsible for leading the housing authority so that it can best serve families and the community.

- The board must speak with one voice.

- The chair is usually elected by the board.

Board responsibilities are:

- Set direction and policy including mission and vision

- Govern PHA resources

- Ensure the viability of the agency

- Monitor bottom-line results

The primary responsibility for board performance rests with the members of the board. The board is responsible for members' professional development, the board's job design and discipline, and the board's capability to envision the future.

Board decision making should be proactive, rather than reactive. The board should look to the future—not the past or present—in setting the agency's mission, goals and objectives.

Executive Director/CEO and the Board

The board hires the Executive Director (ED)/CEO and delegates the day-to-day management responsibility to:

- Carry out the mission and vision of the board

- Implement policies, plans, and budgets approved by the board

- Represent PHA in negotiations, public relations, and events

- Hire, direct, educate, and discipline staff

- Anticipate future opportunities, challenges, needs, and resources

The ED/CEO must give equal respect to all board members

- Avoid taking actions that may divide the board and undermine the PHA mission

The board chair and the ED/CEO need a strong, ongoing, working relationship

The ED/CEO's words and actions must communicate to the board willingness to:

- Perform with high competence

- Take initiatives and risk without being overly risky

- Make informed decisions

- Accept responsibility for actions

The ED/CEO is more than just an employee of the board. He or she:

- Should sit at the board table at all meetings

- Should make well-supported recommendations

- Supplies options/alternatives in challenging situations

- Informs board what he or she is doing

- Reports accurately and completely

- Educates the board regarding PHA policies, HUD regulations, and state and local laws affecting the PHA

- The board should keep the line between the board's policy-setting role and the Executive Director/CEO's administrative role clearly drawn.

- For example, boards approve budgets for salaries; the Executive Director/CEO determines the salary for individual staff members.

PHA Structure: Senior Leaders

The senior leadership team is the most important group in the housing authority because its members directly manage the day-to-day performance of the staff. Senior leaders are the direct link between the executive team and staff.

Senior leaders are typically comprised of:

- Program directors (including the HCV Manager)

- Finance

- Operations

- IT (in large agencies)

These staff should:

- Communicate effectively, lead, and manage

- Respect program rules

- Possess foresight, be accessible to staff and community, and be committed to the PHA mission

- Possess integrity, be results oriented, resist mediocrity, and value the team

Review and highlight *Senior Leaders* in the Baldrige definitions listed in the introduction of this book.

Most of the factors that impact the organizational environment are the result of actions and decisions made by the leadership team.

Learning Activity 1-2:   Leadership Assessment

1. I consistently project optimism.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

2. I demonstrate how to move forward in the face of obstacles.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

3. I connect my team to an inspiring vision of the future.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

4. I celebrate the progress made by teams and individuals.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

5. I build cooperation and enthusiasm to get tough jobs done.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

6. I communicate my thoughts openly and honestly.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

7. I balance the needs of all stakeholders involved in a problem.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

8. I ask the tough questions that need to be asked.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

9. I actively encourage honest feedback and input from others

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

10. I am non-competitive in my dealings with colleagues.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

11. I encourage people to rely on their strengths and talents to accomplish goals.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

12. I recognize and reward exceptional performance.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

13. I coach others to develop skills and solve problems.

    ❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

Section 1: Organizational Profile: Organizational Environment

14. I address performance problems quickly and constructively.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

15. I remove barriers to positive team performance.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

16. I paint a clear picture of desired, measurable results.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

17. I keep my team clearly focused on high priority goals and objectives

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

18. I skillfully plan and execute assignments.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

19. I hold others accountable for results.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

20. I adapt resiliently to changing priorities.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

21. I do the right thing even when it is difficult.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

22. I assume people have good intentions.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

23. I follow through on promises and commitments.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

24. I stay focused and balanced in challenging situations.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

25. I admit that I don't have all the answers.

❑ 1. Never   ❑ 2. Rarely   ❑ 3. Sometimes   ❑ 4. Usually   ❑ 5. Always

Section 1: Organizational Profile: Organizational Environment

Enter the points for each question. For each group of five questions (i.e. questions 1-5, 6-10, and so on), total the points and calculate the average group score by dividing the total group points by five. Leave the group and group rank columns blank.

Question	Points	Total Points	Average Points	Group	Group Rank
1.					
2.					
3.					
4.					
5.				A.	
6.					
7.					
8.					
9.					
10.				B.	
11.					
12.					
13.					
14.					
15.				C.	
16.					
17.					
18.					
19.					
20.				D.	
21.					
22.					
23.					
24.					
25.				E.	

Organizational Changes

Organizational changes involve ways in which the organizational structure or culture could make the PHA more effective

Organization Chart

The organizational chart:

- Delineates organizational departments

- Establishes reporting and responsibility relationships

HUD does not mandate the organizational structure of PHAs.

Agency size and programs are primary factors in structure differences

In implementing the organizational structure, the HCV manager should:

- Clearly identify who reports to whom

- Recommend changes when the organizational chart becomes obsolete

- Consider political ramifications when recommending change in the structure

The PHA's organizational structure can change with management and political changes, or to accomplish new organizational objectives.

Review the Master Book for organization chart examples and a thorough review of several organizational structures.

MISSION, VISION, GOALS, CULTURE AND STRATEGIC PLANNING

Overall Purpose

The overall purpose of mission, vision, culture, and strategic planning is to:

- Explore how the mission of an organization, the vision of its leaders, and its organizational culture can contribute to performance excellence.

- Explain how organizational goal setting with strategic planning ties to the mission and vision of the agency.

Mission Statement

A mission statement is a statement of the agency's purpose. It explains why the organization exists. The mission statement should guide the actions of the organization, spell out its overall goal, provide a sense of direction, and guide decision-making. It provides "the framework or context within which the company's strategies are formulated." A mission statement should address who you serve, what you provide, and how you provide it.

Mission statements help put into words what the board and management would like to see the agency accomplish. However, a mission statement does not include how the agency will look in the future.

- You can find a worksheet for developing a Mission Statement in the Master Book, page 1.2-30.

Vision Statement

A vision statement is a vivid idealized description of a desired outcome that inspires, energizes, and helps you create a mental picture of what you want your organization to be.

A vision statement defines the way an organization will look in the future.

A vision statement tells what you want to be, but not how you are going to get there.

Mission and Vision

Mission and vision are driving factors that relate to everything in the organization, including leadership systems.

Every meeting should discuss how the topics in the meeting relate to the mission and vision.

All decisions should relate back to the mission and vision.

GOALS

Communication should emanate from senior leaders so that each person has a clear, consistent organizational-goal message.

With goal-management, every employee understands how their efforts contribute to success because individual goals are aligned with agency objectives.

Goal setting serves as an effective tool for making progress by ensuring that participants have a clear awareness of what they must do to achieve or help achieve an objective.

- Review and highlight *goals* in the Baldrige definitions listed in the introduction of this book.

Setting a goal is how we move from an idea to a reality. Goals must be aligned with the mission, vision, and values of the organization.

A clear definition of a *goal* is "a written statement that clearly describes certain actions or tasks with a measurable end result." Clear goals will eliminate misunderstandings between you and the members of your team.

A measurable goal is quantifiable. It is described in such a way that the actual result cannot be disputed. If you cannot measure it, chances are you cannot effectively manage it.

S.M.A.R.T Goal Model

S.M.A.R.T. characteristics of meaningful goals are defined as:

- Specific – clear, understandable language

- Measurable - quantifiable, amounts, numbers, percents

- Attainable – perhaps difficult, but not impossible

- Relevant – supports next high level goals and mission

- Time-bound – includes a start time, progress milestones, and end dates

For example, a goal for HCV Housing Specialists might be:

- 90 percent of housing specialists who perform annual reexaminations will achieve a 95 percent accuracy rate on reexamination file reviews within six months

Other examples of goals could include:

- Increase program utilization from 95 to 98 percent within six months

- Increase accuracy from 85 to 95 percent for 90 percent of families within three months (a longer term goal would go to 100 percent)

- Improve customer service ratings from an average score of 6 to an average score of at least 8 within 3 months.

Action plans are used to track goal implementation. Action plans include tasks, responsibilities and deadlines for completion.

- See sample Action Plan format in the Master Book on page 1.2-53. You can include who will complete what tasks and by when.

Organizational Culture

What is culture?

- "Personality" of the organization

Who defines it?

- Senior leaders of the organization

What influences culture?

- Location

- Business necessities: anything that will make you lose your customer, money, or funding

- Generational preferences: anything that is not a business necessity

Good cultures are supportive of excellence, teamwork, honesty, customer service orientation, and pride in one's work.

TRUST
Keeping our Promises

HONESTY
talking straight, being genuine and ethical

COURAGE
taking accountability for results, being up front about mistakes and taking considered risks

CARING
Listening carefully to others, working together to achieve shared goals

RESPECT
treating individuals with dignity

FAIRNESS
Treating people justly and equitably

Sample Culture Statement

- **Integrity**
  - Our relationships, work, and decisions are guided by honesty and a commitment to strong moral character. We're transparent in our actions and hold ourselves to the highest ethical standards.

- **Collaboration**
  - We are one team, passionate about our company and the work that we do. We believe that diversity is our strength and work together to achieve goals for our customers and ourselves.

- **Leadership**
  - Our reputation for excellence is built on a foundation of experience and expert knowledge. We value innovation and learning, leveraging both to deliver excellence to our clients while remaining at the forefront of our industry.

- **Trust**
  - Strong relationships are the core of our business. We are reliable, dependable, and objective in our interactions with customers, partners, and team members.

- **Quality**
  - A job well done is our greatest reward, and we funnel our passion into every project. Through tenacity and a commitment to excellence we deliver a product to be proud of, every time.

Generational differences drive workplace culture.
Management and senior leaders create and drive culture.

Who's at the top?

- Traditionalist (born before 1946)

- Baby Boomer (born 1946-1964)

- Generation X (born 1965-1980)

- Millennial (born 1981-1996)

- Post Millennial (Gen Z) (born 1997 and later)

Which generation are your senior leaders in?

Which generation are the rest of your staff in?

Balance of staff?

Generational Work Styles

	Baby Boomers	**Gen X**	**Millennials**
Work and Lifestyle			
Communications	In person	Direct, immediate	Email, voicemail
Work Ethic	Workaholic	Only work as hard as needed	Work hard for cause
Loyalty	Value company commitment and loyalty	Loyal to people, not company	Loyal when dedicated to cause, idea or product
Work/Life Balance	Sacrificed personal life for work	Value work/life balance	Value work/life balance
Attitude toward authority	May be uncomfortable with authority figures	Not impressed with authority or titles	Respect must be earned
Technology	May be technically challenged	Multitask, strong technical skills, result focused	Multitasking all the time, tech savvy

Generations in the Workplace

Workforce Percentage by Generation

2010
- 4%
- 25%
- 38%
- 33%

2020
- 10%
- 15%
- 50%
- 25%

2040
- 16%
- 19%
- 65%

Legend:
- Traditionalist
- Boomers
- Gen X
- Millenials
- Gen Z
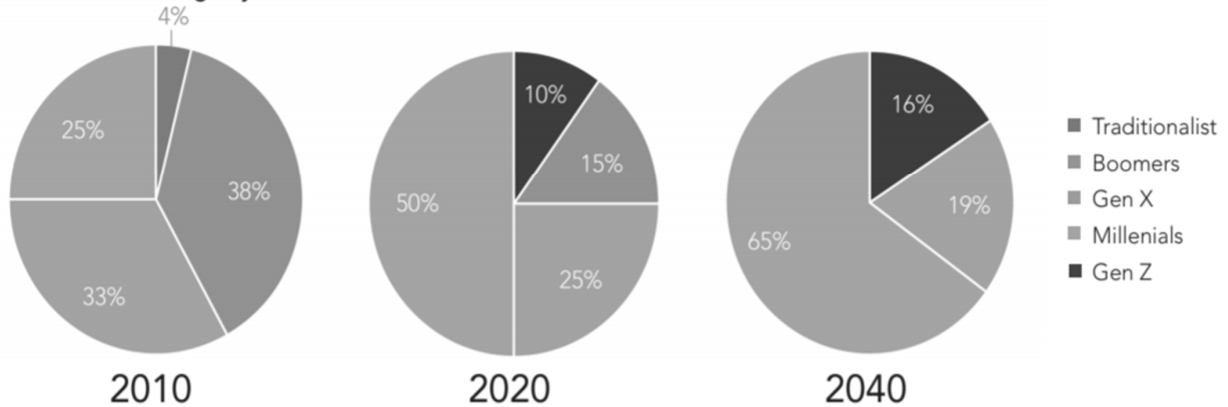
Generational Events

What has shaped each generation?

- Historical events or signpostds

- "If you don't experience an event and just hear or read about it, it doesn't have the same meaning."

Baby Boomers

- Born 1946-1964

- Age 55-73 in 2019

- No cell phones, computers introduced in workplace not home

- TV in its infancy - begin exposure to national and world news

- Vietnam, Woodstock and Watergate

- Civil Rights Act, Assassinations: John and Robert Kennedy and Martin Luther King, Vietnam War

- More women in workplace

- Sexual revolution

Baby Boomer Workstyle

- Prefer more formal work style with communication

- Value expertise, responsibility, social contribution, loyalty, and institutional knowledge

- 10,000 baby boomers are reaching retirement every day!

Gen X

- Born 1965-1980

- Age 39-54 in 2019

- Cell phones available to public (1984)

- Personal computers more affordable, MTV, computer games

- Challenger disaster, Iran hostage crisis, AIDS

- The Pill and Women's Movement, latchkey kids

- Corporate downsizing and layoffs, worldwide competition

- Grew up with rising divorce rates, marriage rate declined

GenX Workstyle

- Prefer face-to-face communication that is clear and direct

- Like a fast pace, work/life harmony, security

- More independent work style

- Multitask

Gen Y/Millennials

- Born 1981-1996

- Age 23-38 in 2019

- Cellphones, texting, laptops, tablets

- Globalization explodes

- OK City & World Trade Center bombings, Columbine, Iraq and Afghanistan

- Technology, less social interaction

- Higher priority on helping people in need than having a high paying career

- Leave home later, later and fewer marriages

Millennials Work Style

- Face-to-face, email or text

- Tech dependent

- Like strategy, vision, purpose

- Like empowerment, creativity and innovation, high connectivity, teamwork

- Meaning work with a purpose

- LOTS of feedback, especially praise

Gen Z

- Born after 1997

- Age 22 or younger in 2019

- Will enter workforce in large numbers in 2020

- Digital natives and grew up with social media

- 9/11, War on Terror, school shootings, global warming

- Will want a high degree of technology and information sharing at work

- Worst economic downturn since depression

- Scooters, internet, video games, headphones

- College costs high, student loans to repay

Gen Z Workstyle

- Use You Tube instead of Google to research and learn new skills

- Learn through story telling

- Like face-to-face communication including phone (Facetime), working with people with the same goal, meaningful work

- Most diverse in history – they don't see it unless it's absent

Gen Z Characteristics

- Grown up in tougher times but with more smart technology

- Socially awkward – need interpersonal skills and emotional intelligence

- Timid about taking the reins – lack of experience – speak words of hope and belief to them

- More entrepreneurial

- Lack of attention span – 8 seconds!

- Experienced lots of change growing up and love mobility in projects

- Tougher to stick with a task – need to break tasks down into smaller bites and prepare them for non-glitzy jobs

Balancing Generational Interests
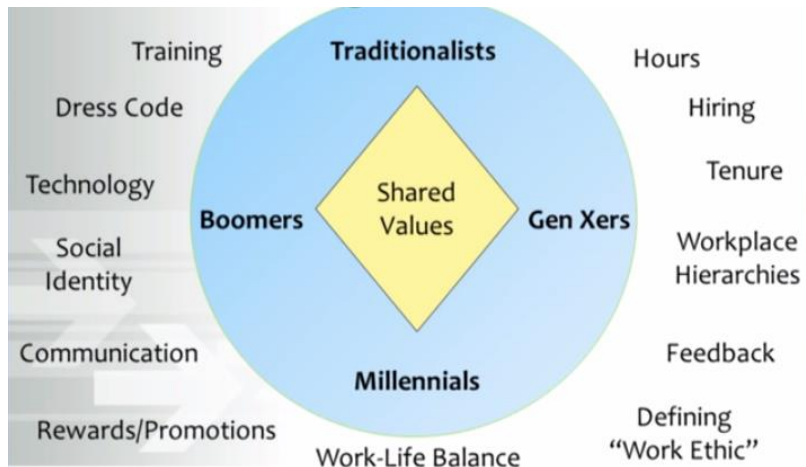
How will employers be affected?

- Retirees will take with them skill, knowledge, wisdom, institutional memory, relationships, and the old-fashioned work ethic.

- The young workforce will bring new set of expectations and behavior that takes for granted the short-term, transactional nature of employment.

- The retention challenge – the more you train and develop employees, the more power the employee has to change jobs or get more money.

- There will be higher turnover and constant staffing shortages.

- More career paths are needed – flexible work conditions, coaching-style leadership, knowledge management.

Five-Step Process to Resolve Differences

1. Acknowledge

    -   Talk about generational differences

2. Appreciate

    -   Focus on the "why," not the "what," and common needs

3. Flex

    -   Agree on how to accommodate different approaches

4. Leverage

    -   Maximize the strengths of each generation

5. Resolve

    -   Determine which option will yield the best results when flexing isn't enough

More resources:

-   The Great Generational Shift: Update 2017 by Bruce Tulgan

    -   EXCELLENT white paper!

-   www.rainmakerthinking.com

-   Other reference material on portal

-   Book: Sticking Points

Learning Activity 1-3:   Organizational Culture Assessment

Instructions	
Please rate each of the following statements based on your experience within the organization in the "Rate (number)" box provided next to each statement, using the following scale: **1** = Strongly Disagree, **2** = Disagree, **3** = Neutral, **4** = Agree, **5** = Strongly Agree	
Rate (number)	**Statement**
Learning and Growth Opportunities	
	The organization promotes professional development and learning.
	Resources and support are accessible for growth opportunities.
	Recognition is given for personal and professional achievements.
	Average for Learning and Growth Opportunities
Work-Life Balance	
	The organization supports flexible work arrangements.
	I can effectively manage work responsibilities and personal life.
	Taking time off to prevent burnout is encouraged.
	Average for Work-Life Balance
Purposeful Work	
	My work aligns with and contributes to the organization's goals.
	The impact of my work on the organization's success is clear.
	Organizational goals are communicated effectively.
	Average for Purposeful Work
Collaborative and Inclusive Environment	
	Collaboration is fostered among diverse team members.
	I feel valued and included, irrespective of my background.
	Policies promote inclusivity and everyday practice.
	Average for Collaborative and Inclusive Environment

Section 1: Organizational Profile: Organizational Environment

Rate (number)	Statement
Instructions Please rate each of the following statements based on your experience within the organization in the "Rate (number)" box provided next to each statement, using the following scale: **1** = Strongly Disagree, **2** = Disagree, **3** = Neutral, **4** = Agree, **5** = Strongly Agree	
Feedback	
	I regularly receive constructive feedback.
	There are accessible channels for providing feedback to management.
	Feedback is used constructively for development.
	Average for Feedback
Generational Differences	
	The organization addresses the needs of different generations.
	Effective communication is maintained across age groups.
	The strengths of a diverse age group are utilized effectively.
	Average for Generational Differences
Accountability	
	Accountability is clear and maintained at all levels.
	Issues of accountability are addressed transparently.
	All employees, including management, are held to the same standards.
	Average for Accountability
Healthy Environment	
	The environment supports physical and emotional well-being.
	The organization actively works to prevent a toxic environment.
	I feel safe and supported at work.
	Average for Healthy Environment
Effective Management	
	Management communicates clearly and provides direction effectively.
	Decision-making processes are efficient and include input from relevant stakeholders.
	Managers are competent and contribute positively to the team dynamics.
	Average for Effective Management

Instructions
Please rate each of the following statements based on your experience within the organization in the "Rate (number)" box provided next to each statement, using the following scale: **1** = Strongly Disagree, **2** = Disagree, **3** = Neutral, **4** = Agree, **5** = Strongly Agree

Rate (number)	Statement
Authenticity	
	Leaders in the organization act and communicate transparently.
	I feel encouraged to express my true thoughts and opinions without fear of repercussions.
	The organization promotes honesty and integrity in its dealings with employees.
	Average for Authenticity
Overall Average Score	
Calculate the overall average score of all the sections to get a holistic view of the organizational culture's health.	
	Overall Average Score

Interpretation of Scores

Range of Overall Scores and Organizational Culture Health	
4.5 - 5.0: Excellent	This range indicates an exceptionally healthy organizational culture where employees feel highly valued, engaged, and satisfied.
3.5 - 4.4: Good	Scores in this range suggest a generally positive culture with some areas for improvement. The organization supports its employees well, but specific aspects could be enhanced.
2.5 - 3.4: Fair	This range indicates a neutral or average perception of the organizational culture. Some areas function adequately, but significant improvements are necessary to foster a more positive environment.
1.5 - 2.4: Poor	Scores within this range reflect a culture with numerous challenges that negatively impact employee morale and engagement. Immediate attention and intervention are required.
1.0 - 1.4: Very Poor	This range indicates a highly problematic organizational culture with critical issues that need urgent and comprehensive action.

Completing the Assessment for the Organization

Once the assessment is completed, collect, and analyze the ratings to gauge the health of the organizational culture across different dimensions.

Analyzing the Ratings

Average Rating Calculation: For each category (e.g., Learning and Growth Opportunities, Work-Life Balance, etc.), calculate the average rating based on responses. This will show how well the organization performs in specific areas.

Overall Culture Health: Calculate the overall average of all the ratings to understand the organizational culture's health.

Strengths and Areas for Improvement: Identify categories with the highest and lowest average ratings. High-rated categories are strengths, while those with lower ratings indicate areas for improvement.

Detailed Analysis: For more detailed insights, examine individual item ratings within each category. This can help uncover specific issues even within generally strong areas.

Reporting the Results

Create a report summarizing the findings from the assessment, highlighting key strengths, areas for improvement, and recommendations for action.

Include:

- **Executive Summary:** Overview of the assessment's outcomes.

- **Detailed Findings:** Breakdown of ratings by category with analysis.

- **Recommendations:** Based on the assessment's findings, suggest actionable steps to address areas needing improvement and reinforce strengths.

This structured approach measures and aids in continually enhancing organizational culture, fostering a workplace that values learning, balance, purpose, inclusivity, feedback, generational diversity, accountability, a healthy environment, effective management, and authenticity.

STRATEGIC PLANNING

Many PHAs spend most of their time "fighting fires." In other words, they are being reactive rather than proactive.

One of the major differences between a reactive organization and a strategic organization is the skill to see the broad perspective and take the long view.

- It is the role of the senior leadership team to determine the strategic objectives of the agency.

- See Baldrige definition

Strategic thinking refers to the application of creativity, analysis, and problem solving in planning and decision making.

Public Housing Agency (PHA) Plans

The PHA Plan is a comprehensive guide to PHA policies, programs, operations and strategies for meeting local housing needs and goals.

Additional Material (Take Home)

There are two parts to the PHA Plan: the 5-Year Plan, which each PHA submits to HUD once every fifth PHA fiscal year, and the Annual Plan which is submitted to HUD every year by non-qualified agencies. The goals for both the housing choice voucher program and the public housing programs are included in the PHA plan and are a part of the strategic planning process.

Qualified PHA

Has a combined unit total of 550 or less public housing units and section 8 vouchers

Is not designated troubled under the Public Housing Assessment System (PHAS), as a troubled public housing agency during the prior 12 months

Does not have a failing score under SEMAP during the prior 12 months

Non-Qualified PHA

PHAs that do not meet the definition of a qualified PHA are required to fully comply with all provisions of the PHA Plan, including the submission of a 5-year plan and annual plan.

PHA Plan Submission Requirements

The 5-Year Plan and annual plan (if required) are due 75 days prior to the PHA's Fiscal Year Beginning (FYB). HUD has made available PHA plan templates to be used when submitting the 5-Year and Annual Plans with attachments (for example: the HCV Administrative Plan and the Admissions and Continued Occupancy Plan (ACOP)).

The HUD local field office must review and approve or disapprove each PHA Plan as well as any significant amendments or modifications to a plan within 75 days of receipt of the plan. The HUD field office is responsible for reviewing the PHA Plan based on the three statutory standards:

- Completeness

- Consistency

- Compliance

PHAs should utilize a strategic planning process to ensure the plan is compliant and meeting the housing needs and goals of the PHA.

What Strategic Planning Does

Strategic planning:

- Defines purpose and mission of the PHA, with realistic goals

- Communicates these goals to staff and clients

- Ensures effective use is made of resources by focusing on the key priorities

- Provides a base from which to measure progress

- Brings together the organization's collective efforts

The strategic plan acts as a roadmap and provides direction for your organization's future goals. The strategy is deployed on a daily basis throughout the organization.

Its greatest value comes from the thinking, discussion, debate, analyses, insights, and commitments to actions that result during the process. It is a continuous process.

Strategy Map

It is useful to visualize strategic planning through a strategy map. A strategy map is a diagram that is used to document the primary strategic goals being pursued by an organization or management team.

The strategy map makes it easy for supervisors to determine whether their decisions are falling within the strategic plan.

Strategy Map for the HCV Program

Strategy maps for the HCV program should include a perspective on:

- Financial Management and objectives

- Customer satisfaction

- Internal processes including management and supervisory skills

- Employee satisfaction

Strategy Map Example

- You may add, change, or delete items to make it applicable to your program.

Strategic Objectives and Strategy Map

Vision: To Become the Premiere Provider of Quality Affordable Housing.

Our Mission:

To Improve Lives by Providing Quality, Affordable Housing Options and Promoting Education and Economic Self-Sufficiency

Our Financial Objectives Are:

100% Utilization
of HUD Funds

To Achieve Our Financial Objectives, We Must Focus on Our Customers:

Improve Customer Experience
Charge Proper Rents to Families
Provide Safe & Quality Housing to Families
Provide Accurate & Improved Reports to HUD
Provide Accurate and Improved Reports to the Board
Monitor and Adjust Lease-up to Achieve Full Utilization

To Satisfy Our Customers, We Must Excel at These Internal Business Processes:

Process Moves Timely
Process Interims Timely
Improve Inspection Times & Quality
Improve Quality of Software Data Entry
Calculate Proper Rent - Improve Quality of Files
Implement Performance Improvement Strategy
Complete Certifications & Recertifications On-time

To Achieve Our Goals, We Must Develop and Expand These Internal Organizational Areas:

Improve Employee Satisfaction - Improve Supervisor & Management Skills
Implement Employee Incentive Plan - Improve Employee Program Knowledge - Fill and Retain Strategic Positions

Strategic Objectives and Strategy Map

Vision:

Our Mission:

Our Financial Objectives Are:

To Achieve Our Financial Objectives, We Must Focus on Our Customers:

To Satisfy Our Customers, We Must Excel at These Internal Business Processes:

To Achieve Our Goals, We Must Develop and Expand These Internal Organizational Areas:
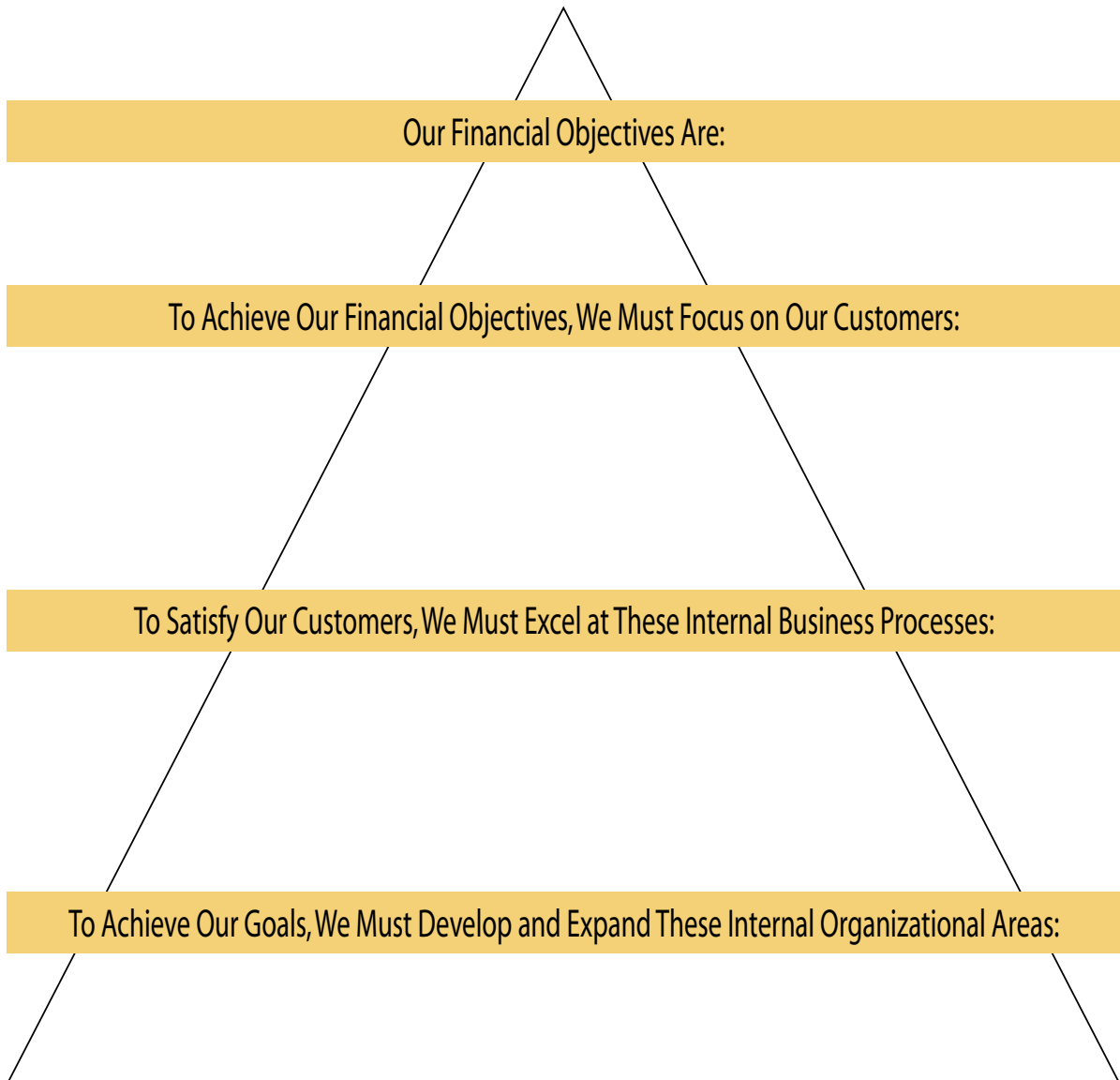
- You can use this map to help you to create a new strategy map when you return to your PHA.

LEADERSHIP PERFORMANCE SYSTEM

The leadership performance system is the framework within which management and the entire organization operates.

The leadership system refers to how leadership is exercised, formally and informally, throughout the organization. It is both the basis for, and the way that key decisions are made, communicated and carried out.

- Review and highlight Leadership System on Baldrige Definitions handout.

It includes structures and mechanisms for decision making, two-way communication, selection and development of leaders and managers. It also includes reinforcement of values, ethical behavior, directions, and performance expectations.

Our leadership systems include our communication protocol, our expectations and our tracking mechanisms between our internal work processes and our external resources necessary for us to plan and deliver our services to our customers.

- The following are all part of your leadership system:
- Strategy maps and goals
- Organizational chart
- Performance standards
- Work systems
- Work processes and tools
- Quality control measurements

Leadership systems provide consistency so that a new manager can take on all of their responsibilities and understand the way the department works very quickly. This is because all supervisors are expected to work within the established leadership system.

Fact-Based Decision Making

Without leadership systems in place, you may be making decisions based on perception or opinion instead of facts.

- "I feel we need more staff."

- "I think we can lease more units."

- "In my opinion, we can increase the caseloads."

Ethics

Ethics refers to a system of moral principles or values, the rules or standards governing the conduct of the members of a profession, or the accepted principles of right and wrong. In simple terms, it means doing what's right, fair, honest and legal.

The actions we take, the decisions we make, and the daily behaviors we exhibit will all ultimately determine how we and our organizations are judged. When it comes to ethics, we are all responsible, not just the staff who work with clients.

Conflict of Interest

Conflicts of interest arise when officials or staff stand to benefit–either directly or indirectly–through business partners or relatives.

When conflicts arise, PHAs must identify, disclose, and manage them in compliance with rules and regulations.

According to 24 CFR 982.161:

- Neither the PHA nor any of its contractors or subcontractors may enter into any contract or arrangement in connection with the tenant-based programs in which any of the classes of persons has any interest, direct or indirect, during tenure or for one year thereafter.

Classes of persons include:

- Any present or former member or officer of the PHA (except a participant commissioner);

- Any employee of the PHA or any contractor, subcontractor or agent of the PHA, who formulates policy or who influences decisions with respect to the programs

- Any public official, member of a governing body, or State or local legislator, who exercises functions or responsibilities with respect to the program

- Any member of Congress of the United States

Any member of these classes must disclose their interest or prospective interest to the PHA and HUD.

The conflict of interest provision may be waived by the HUD Field Office for good cause.

Section 1: Organizational Profile: Organizational Environment

Learning Activity 1-4:   Leadership Performance System Analysis

Rate your PHA from 1–4 for each category on the list that follows (4 is the highest).

	Ensuring all parts of a leadership system is in place
	Making fact-based decisions
	Making ethical decisions
	Ensuring no conflicts of interest
	Measuring leadership effectiveness
	Utilizing consistent standards
	Modeling leadership behavior throughout the organization
	Recognizing good leaders
	Emphasizing leadership with the front-line supervisors
	Defining tasks and behavioral expectations at the management, department, team, and personal levels
	Communicating quality measurements, expectations, and results
	Developing the skill levels necessary for performance excellence
	Adhering to OIG Tips on Conflicts of Interest

Office of Inspector General (OIG) Tips on Conflicts of Interest

Integrity Bulletin
U.S. Department of Housing and Urban Development
Office of Inspector General

Summer 2016
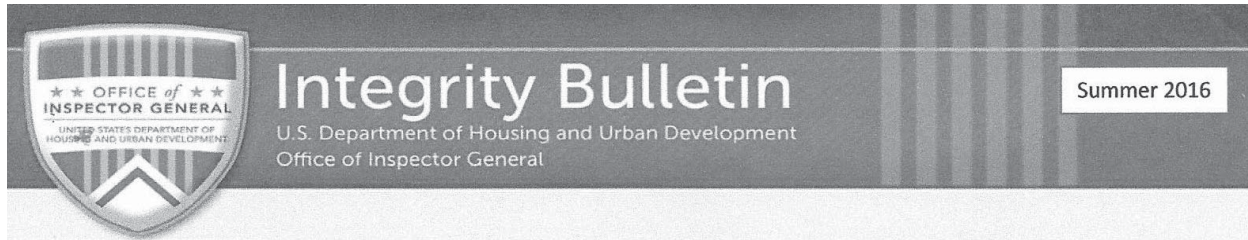
7 Keys to Handling Conflicts of Interest

Conflicts of interest arise when officials or staff stand to benefit--either directly themselves or indirectly through business partners or relatives--from the awarding or contracting of grant funds. Grantees are encouraged to avoid conflicts of interest to the extent possible. When conflicts of interest arise, grantees must identify, disclose, and manage them in compliance with applicable rules and regulations. When conflict-of-interest issues are overlooked or hidden, this creates problems for the individuals involved, as well as grantees, subrecipients, or contractors. This bulletin discusses common types of conflicts of interest, offers best practices for avoiding and managing them, and the potential consequences of not handling them appropriately.

Identify, disclose, and manage all real and apparent conflicts of interest through elimination, mitigation, or waivers.

1. Know the Requirements.

In general, conflicts of interest occur when one's private interest and public duties overlap, resulting in a real or perceived lack of independence or impartiality. Common situations include:

- Elected officials voting on awarding of funds to organizations where a family member is on the staff or where the elected official is on the subrecipient's board;
- Executive directors of subrecipients entering into contracts with companies they are affiliated through employment of, or ownership by, themselves or their relatives;
- Grantee officials or staff who have relatives who may benefit from a subrecipient's programmatic activities; and
- Failure to notify the U.S. Department of Housing and Urban Development (HUD) about conflicts of interest, or late and or incomplete requests for exceptions.

The existence of a conflict of interest does not necessarily mean that any individual acted improperly or illegally, but it does mean that, unless properly handled and addressed, he or she could end up being in violation of Federal rules. Therefore, all such cases must be identified and resolved by eliminating the conflict or obtaining a written exception.

Two sets of conflict-of-interest rules exist – one for procurement activities and others for non-procurement, sub-granting/program delivery activities.

A. **Procurement Standards**: Regulations at 2 CFR (Code of Federal Regulations) 200.318(c) require non-Federal entities to maintain written standards of conduct

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B. covering conflicts of interest, including organizational conflicts of interest. Organizational conflicts of interest occur when, because of relationships with a parent company, affiliate, or subsidiary organization, the non-Federal entity is unable or appears to be unable to be impartial in conducting a procurement action involving a related organization.

Regulations are in transition between grants issued before December 26, 2014 (when 2 CFR Part 200 went into effect), and those issued later. See the footnote below for more detail.[1]

Example of a Procurement Conflict of Interest
- A Neighborhood Stabilization Program (NSP) grantee funded a subrecipient to rehabilitate 28 homes. The subrecipient failed to report a conflict-of-interest situation when it entered into two contracts with a construction company that was 50 percent owned by the NSP subrecipient's executive director. Although the subrecipient stated that it had disclosed all relationships to the grantee in the proposal process, the grantee overlooked HUD's conflict-of-interest requirements and the requirements found in the agreement. Because the grantee approved the proposal and awarded the agreement, the subrecipient believed that there were no conflict-of-interest issues. The grantee should have flagged the conflict of interest situation during its risk assessment of the subrecipient and prohibited the use of the executive director's construction firm.

B. **Non-procurement Standards**: Regulations at 2 CFR 200.112 require HUD to establish conflict of interest policies for Federal awards and require non-Federal entities to disclose in writing any potential conflict of interest to HUD or a pass-through entity in accordance with HUD's policy. HUD is finalizing its conflict-of-interest policy, but entities are still expected to use the policies developed under the various Community Planning and Development (CPD) program-specific regulations. In general, all CPD program regulations prohibit grant-assisted activity benefitting relatives of people who work for the grantee or the pass-through entity.

Example of Non-Procurement Conflict of Interest
- A city awarded a Community Housing Development Organization (CHDO) $215,975 in HOME funds to sell and construct one single-family home. At the time of the award, a city official's daughter was the president of the CHDO. The city official abstained from voting on the basis that there was a relationship with the executive director. However, the city was required to disclose these relationships to HUD and had not done so. The city should have developed and implemented written procedures to ensure compliance with HUD's conflict-of-interest regulations, including disclosure of potential conflict-of-interest situations.

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[1] For more detail see Special Directive SD-2015-01, dated February 26, 2015 "Transition to 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Final Guidance. (http://portal.hud.gov/hudportal/documents/huddoc?id=15-01sdn.pdf)

2

2. Train Employees

Grantees and subrecipients ought to build an organizational culture that is conscious of potential conflicts of interest so that action can be taken to avoid or mitigate conflicts as they arise. Provide conflict-of-interest training for all employees, including those of the organization and the governing authority, the organization's leadership and, as appropriate, the organization's agents. To have the most impact, the organization should have a written policy requiring annual conflict-of-interest training, and legal counsel or other qualified individuals should review the policy with employees (and board members), subrecipient officers, and pass-through entity staff at least annually. Documenting training is a best practice. The organization should:

- Provide training;
- Require that staff annually submit certifications regarding outside businesses, outside employment, and volunteer positions;
- Record a certification of attendance at trainings; and
- Follow up with annual refresher sessions.

3. Create Procedures to Document Compliance

Conflict-of-interest policies and procedures should describe how conflicts will be handled. When a conflict or potential conflict of interest exists, the person with the conflict should advise the board or management committee in writing and seek guidance on how to resolve the conflict. Conflict-of-interest notifications usually include:

- The person's name, position, phone number and address;
- Details of the nature of the conflict of interest, (perceived, apparent, or actual);
- Date of notification; and
- Requested action to address the conflict of interest (recusal, exemption request, etc.).

The notification and subsequent actions should be recorded in minutes of board or management meetings. Record-keeping best practices includes documenting:

- Conflict-of-interest notifications;
- Cases of failure to disclose;
- Disclosure by others (for example colleague or member of the public);
- Reviews or investigations of alleged conflicts;
- Assessment of the matter and how it was considered;
- Action taken or resolution; and
- Annoying or trivial claims.

4. Implement the Regulations

Often people are unaware that their activities are in conflict with the best interests of the organization. A goal should be to raise awareness, encourage disclosure and discussion of issues that may constitute a conflict, and constantly encourage a "culture of candor."

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<u>Leadership and culture</u> are important aspects of compliance. Boards or leaders should establish a culture of compliance and honesty and encourage disclosure by establishing a protocol for staff to self-report possible conflicts, raise suspected conflict-of-interest issues, or ask for guidance, without fear of retaliation. Leadership should appoint an individual or office to ensure conflict-of-interest rules are implemented and followed. However, the protocol should not rely solely on voluntary compliance, but also on procedures to allow grantees and subrecipients to report and have independent checks made to ensure that conflicts do not exist.

<u>Monitoring</u> is a best practice that entails having someone review the names of the principals of businesses that may become subrecipients, contractors or suppliers to determine whether there are apparent or real conflicts of interest with staff or agents of the awarding entity or pass-through entity. Many organizations circulate a questionnaire each year (usually in conjunction with training) to find out whether any board member, officer, or employee has a conflict of interest. Typically, the questionnaire asks them to disclose existing conflicts and reminds them to disclose any that may crop up in the future.

Monitors should also determine whether subrecipients have conflicts of interest in the sub-awards and contracts by asking them to disclose the names of their immediate family and business partners and those of the principals of the organizations and contractors with which they transact grant project business.

The primary goal in managing conflicts of interest is to ensure that as decisions are made, they are seen to be made on proper grounds, for legitimate reasons, and without bias or unfairness.

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5. Know the Consequences.

Violating conflict-of-interest rules can have serious consequences for a grant program. Bad publicity surrounding undisclosed conflicts may seriously undermine the public trust in the program as well as damage personal reputations. Audits and investigations can result in the grantee's having to repay Federal funds, or individuals being fired or prosecuted.

A Conflict of Interest Can Lead to Criminal Actions

In some cases, conflicts of interest can lead to criminal prosecutions. It's not that the conflict of interest itself is a criminal act, but it can lead to other acts, such as deliberately hiding relationships, financial gains or other advantages through false statements, misrepresentations, or filing false documents, which are crimes. With such personal risk at stake, it is easy to see why disclosures of conflicts of interest are so important.

Example of a Prosecution Resulting from a Conflict of Interest

- A former planning commissioner and her ex-boyfriend were convicted on Federal corruption charges. The pair took part in a scheme in which she steered more than $2 million in contracts and loans to him. She got the agency to award a computer contract to a former boyfriend's company. The contract, which started at $8,900,

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escalated to about $1 million over 5 years. The former planning commissioner did not reveal details of her personal relationship with the ex-boyfriend and helped keep his name off the contracts his company received. She knowingly hid the conflict of interest and personally benefited from her actions. As a result, she and her ex-boyfriend were convicted. Sentencing is pending.

If you have knowledge of possible fraud, promptly report it to your local HUD Office of Inspector General (OIG) or online to the OIG hotline on OIG's Web site at https://www.hudoig.gov/report-fraud.

6. Request an Exception

HUD may grant an exception to non-procurement conflicts of interest on a case-by-case basis. It is the recipient's responsibility to submit a written request for an exception to its local HUD CPD office. When submitting a request, the recipient must provide the following documentation as threshold requirements for consideration:

- A public disclosure of the conflict (include how the disclosure was made); and
- An opinion of the recipient's attorney that the exception does not violate State or local law.

HUD determines whether threshold requirements are met and whether the circumstances fall within exception criteria permitted by the regulations. Remember that submitting a request does not authorize a recipient to engage in any activity or enter into any contract that constitutes a conflict. You may proceed only after you receive the approval in writing from HUD.

7. Get Help

Conflict-of-interest requirements are often nuanced and must be reviewed case by case. HUD provides assistance when conflict-of-interest situations arise or are in question. You can get help from your local CPD office when such issues arise.

Bottom line:
Conflicts of interest are situations not allegations…
BUT they must be disclosed and managed properly.

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Section 2: Organizational Relationships

LEARNING OBJECTIVES

Upon completion of this section, you should be able to:

- Describe the organizational relationships your agency must cultivate for performance excellence

- Determine communication strategies

- Determine how to evaluate your performance through the voice of the external and internal stakeholders (and also customers)

- Design data gathering tools and listening methods to capture the needs of the customers you serve and achieve customer engagement in your program

- Implement technology tools for program operations to better serve your customers and reduce administrative expense

HUD – STAKEHOLDER

PHAs generally have the most contact with their Field Office. Therefore, this should be the primary relationship to develop within the HUD structure.

- Be responsive to their requests

- Make every effort to be compliant

- Ask for assistance when you need it

LOCAL GOVERNMENT – STAKEHOLDER

It may be important to establish a relationship with the mayor and/or city council and/or aldermen.

- PHA could be a department of city, county or state government.

- City councilmen or aldermen can be involved in neighborhood, family or owner complaints.

COMMUNITY-BASED SERVICE PROVIDERS – STAKEHOLDERS OR CUSTOMERS

Relationship development is needed with these types of service-providers, if applicable:

- Supportive service providers
    - Targeted funding (FUP, VASH, Mainstream)
    - Family Self-Sufficiency (FSS)
    - Homeownership
- Minority organizations
- Legal Services (Legal Aide)

Customer Communication

Establishing effective communication with both families and owners creates better program understanding because clients know the rules and policies which affect them.

Analyze your forms and letters. Are they clear, concise and professional?

Many PHAs are utilizing social media outlets to publicize special events and positive initiatives at the housing authority. Social Media like Twitter, Facebook, Instagram and Linked-in allow the PHA to communicate in real time with its stakeholders and clients.

Technology and the PHA website can save staff time if the data gathered ties directly into the current housing software or adds efficiency to the processes.

Establishing a portal will allow your PHA to:

- Be accessible by families and owners
- Save staff time
- Guide client through a complicated process
- Streamline operations such as payment and inspection processes

VOICE OF THE CUSTOMER

The "voice of the customer" refers to the process of capturing customer-related information with the ultimate goal to improve customer service outcomes.

- See *Voice of the Customer* on Baldrige definitions.

The goal is to achieve customer engagement. Listening to the voice of the customer might include:

- Gathering and integrating various types of customer data such as survey data, focus group findings, blog comments and other social media data. This includes complaint data that affect customers' engagement.

Achieving a consistent level of exceptional customer service requires the total commitment and involvement of the executive leader, senior leaders, and staff.

The people who perform the day-to-day functions usually know where the obstacles and opportunities for exceptional service delivery lie.

For this reason, establishing an agency-wide approach is essential.

Family Meetings/Councils

PHAs can create a resident council for HCV for educational purposes and which can:

- Provide feedback on proposed policies, procedures, forms and action

- Champion change

- Provide service recommendations

This is typically an advisory council only.

Owner Meetings/Councils/Special Programs

Many PHAs establish owner groups and sponsor ongoing meetings and workshops to educate owners and to identify their concerns and issues. Such meetings and groups help to identify opportunities to improve service and promote more efficient working relationships.

Your PHA could include:

- HCV owners

- Project-based voucher (PBV) owners

- Special program owners

- Apartment/realtor associations

- Local Chamber of Commerce

- Local non-profits and social service agencies

Some PHAs have established programs for their property owners who have shown a high level of property management skills.

Owners may apply to participate in these programs.

If approved, benefits are extended to them, such as extended business hours, and access to a business center and dedicated staff.

Customer Service Strategies

A customer service momentum strategy would include:

- Conduct a baseline service assessment (focus groups, periodic surveys, face-to-face interviews)

- Develop quality service standards

- Conduct training/communicate service standards

- Track and monitor performance by getting ongoing feedback from owners, families and staff; review complaints

- Adopt customer service standards and reward high performers who meet the standards

Knowing which questions to ask is also important. For more information on this topic, review customer survey examples in the Master Book on pages 1.3-13 to 1.3-15.

Chapter 2   Workforce Management

Section 1: Introduction

LEARNING OUTCOMES

Upon completion of this chapter, you should be able to:

- Identify the roles and capabilities of the HCV manager
- Identify, and link knowledge, skills, and abilities (KSAs) with job functions
- Create a customized learning plan to improve KSAs
- Describe the methods for determining the staffing needs for your agency
- Select the most effective staffing model and caseload for your agency

OVERVIEW

The workforce is the agency's most valuable asset, making the way an agency manages the workforce vital.

The topic of workforce management addresses all of the responsibilities for maintaining a productive and content workforce.

Effective workforce management requires workforce planning. It serves as a manager's blueprint in formulating staffing decisions based on an organization's mission, strategic plan, budgetary resources, and a set of desired workforce competencies.

Workforce planning includes strategic planning, turnover analysis, budget projections, and workload projections. These factors influence decisions regarding staffing and staff activities such as recruitment and selection, assignment, training and development, performance management, and retention.

Workforce management is also important to ensure that an organization has sufficient and qualified human resources to accomplish its mission. That is, it is crucial to have the right number of people in the correct positions, and that those people are equipped with the skills necessary to do their jobs.

Section 2: Workforce Capability

Workforce capability is part of an agency's leadership system and refers to an organization's ability to accomplish its work processes through the knowledge, skills, and abilities of employees.

ROLE OF THE HCV MANAGER

Central to workforce capability in any PHA operating an HCV program is the HCV manager or director. The primary role of the HCV manager is just that—to manage people.

A manager performs five basic functions: planning, organizing, staffing, leading, and controlling.

A manager's role is to:

- Achieve effective utilization of resources in an organization through coordinated human efforts.

- Be responsible for aligning individual employees' objectives and departmental objectives with the organizational objectives.

The manager's role as a leader in the organization is to drive the mission and vision in every decision and action taken in the HCV department.

The supervision should directly relate to the goals of the agency in managing the performance of the HCV program.

The manager's role is to develop:

- Action plans to carry out the goals of the department that tie directly to the mission and vision of the agency

- Policy, procedures, performance metrics, and measures that reflect the leadership systems of the agency

The manager's role is to develop and/or implement the organizational structure and clearly identify who reports to whom. If and when the organizational structure becomes obsolete or ineffective, the HCV manager should recommend any changes, considering all available resources and the potential political and staff impact.

There are three levels of management: top, middle, and lower.

- The top level is the executive level and is usually comprised of the board and Executive Director or Chief Executive Officer (CEO). These individuals are the ultimate source of authority and their role is to set (board) and manage (Executive Director) the goals and policies of the agency.

- The middle level includes the department managers. They are responsible for the organizational and directional functions.

- The lower level includes the supervisors of a department or team leaders. Their role is to direct staff at the operational level. Their jobs are more "hands on" in terms of the agency's day-to-day activities.

- Small agencies would typically not have both middle and lower levels of management.

There is an overlap in the skills required to manage the HCV program at the various levels. Managers must be able to:

- Lead

- Plan

- Facilitate

- Budget

- Coach

- Evaluate

- Advocate

- Advise

It is part of the manager's role to develop and maintain productive internal and external relationships with:

- HUD
- The board
- Upper management
- Other departments
- Staff
- Families and owners
- Community-based service providers

Job Descriptions

Job descriptions will vary based on the size and needs of the agency, but some job functions, duties, and responsibilities are commonly shared by all HCV managers.

- Job descriptions should be updated as needed.

A clear and specific job description helps executive management to identify the qualifications needed to fill specific positions within the organization, in addition to formally documenting the performance expectations of those positions.

Detailed job descriptions also make it easy to develop work plans and performance appraisal systems.

Work plans and performance appraisals need to include functional accountabilities, work methods, skills, and standards for performance.

- Including these factors makes it possible for all parties to distinguish between poor, satisfactory, and high performance.

The HCV Manager's ability to perform illustrative tasks or being able to demonstrate for staff how work must be done and the expected outcomes are central to defining and measuring the HCV manager's abilities and effectiveness.

Typically, not all expected tasks are listed on the job description. The duties and responsibilities section of the job description summarizes the tasks to be performed. The "other duties as assigned" language typically covers functional accountabilities that may not specifically be listed on the job description but are a part of or have become part of the duties of the job.

Knowledge, Skills, and Abilities (KSAs)

All jobs have knowledge, skills and abilities requirements.

To accurately assess strengths and weaknesses, you need to evaluate employees' current KSAs against the KSAs that are required to perform their job duties.

Knowledge is what you know or understand. It is information that makes the performance of the job possible. (Example: Having knowledge of specific HUD regulations; knowledge of measuring and analyzing data)

Skills are what you have learned to do. They are readily observable, quantifiable or measurable. (Example: Performing an inspection in accordance with HQS; performing a quality control file review in accordance with the PHA protocol).

Ability is the capacity to perform an activity. (Example: Exercising judgment in resolving disputes; handling multiple tasks; dealing with conflict effectively).

It is also important to initially recognize as managers your own knowledge, skills, and abilities.

The chart in the Learning Activity that follows helps to identify:

- What you need to know as an executive manager

- How familiar you are with a specific subject area

- Whether more work is needed on the topic

Learning Activity 2-1:   Director/Manager Assessment and Customized Learning Plan

- Review the Typical Knowledge, Skills & Abilities in each of the subject areas. Indicate the importance of each KSA in your job at the PHA, how well you personally rate in each KSA, and whether you feel you need to work on a particular subject area.

- The chart has three columns:

  - Need to Know – this is something you don't yet know but feel you should. Use the rating scale on the chart to indicate your answer. Note that a 0 on the scale indicates "Not Applicable to My PHA." Only enter a 0 if you feel there is no need to develop a KSA in this area at your PHA. Keep in mind, however, the KSA may be needed at another PHA, so you may want to come back later and acquire KSAs in these areas.

  - Know Now – this is a topic you do know. Indicate your level of knowledge of the topic using the rating scale for this column.

  - Needs Work – if you either need to know it or it needs work, put a check mark in the box in this column.

- When you are finished with all of the subjects, review topics with a checkmark in the Needs Work column.

  - Start at the beginning and highlight the topics in the Need to Know column with a 3 or higher rating and a checkmark in the Needs Work column.

  - Then highlight the topics in the Know Now column with a 2 or lower rating and a checkmark in the Needs Work column.

  - Note in your Action Plan your findings.

Need to Know	Know Now	Needs Work
Mark how important knowledge of the subject area is for your job at the PHA	Mark how well you know the subject area.	Check if you need to work on this subject area
4 = Crucial 3 = Extremely important 2 = Moderately important 1 = Not very important 0 = Not applicable at my PHA	4 = Expert 3 = High knowledge 2 = Moderate knowledge 1 = Little knowledge 0 = No knowledge at all	✓

Figure 2-1: Typical Knowledge, Skills, and Abilities

Subject	Need to Know	Know Now	Needs Work
Technical housing knowledge			
Applicable HUD regulations and federal statutes			
Reading and interpreting the Federal Register and HUD notices			
Organizational structure of HUD and PHAs			
Federal, state, and local fair housing laws			
State and local real property law for renters and owners			
HUD's monitoring, reporting, performance, and audit requirements			
Provisions of the PHA's Administrative Plan			
Department practices and procedures			
Interrelated departments' functions			
Complete required studies such as rental market, utility allowance, etc.			
Create sample forms			
Demographics of the HCV program			
Services within the community			
Areas of affordable housing within the jurisdiction for referrals			
Resources available to operate and improve the program			
Completing a funding application			
Creating an internal budget			
Setting up a leasing schedule			
How and when housing assistance payments are made			
How and when to conduct an informal hearing			
How and when to conduct an informal review			
Conducting, documenting, and following up on file reviews			
How program dollars are allocated to PHA			
How program dollars are to be used			
How administrative fees are awarded to PHA			
Acceptable uses of administrative fees			
Other: (Add those relevant to your PHA)			

Subject	Need to Know	Know Now	Needs Work
All program functions, such as:			
Taking applications			
Monitoring a waiting list			
Determining the number of waiting list selections to ensure full program utilization			
Determining preliminary and final eligibility			
Verifying information			
Conducting all certifications			
HUD requirements for a family briefing			
Terms of the voucher			
Housing Quality Standards for all types of inspections			
Terms of Lease Addenda and HAP/Subsidy contracts			
Conditions of terminating owner from participation			
Portability requirements			
Family self-sufficiency			
Conducting rent reasonableness evaluations			
Other: (Add those relevant to your PHA)			
Management skills and abilities			
Computer software, hardware, and multi-user network systems			
Principles of public relations			
Advertising for a job opening in the department			
Hiring			
Interviewing prospective housing staff			
Utilizing staff resources and providing professional development opportunities			
Monitoring and measuring staff performance			
Completing a written performance evaluation			
Conducting staff performance evaluations			

Section 2: Workforce Capability

Subject	Need to Know	Know Now	Needs Work
Documenting performance problems			
Firing			
Establishing department goals and objectives			
Monitoring and measuring program performance			
Working with staff in establishing individual goals and objectives			
Planning job assignments			
Encouraging teamwork and fostering cooperation among staff			
Expectations of the executive director			
Roles and responsibilities of executive director, board, and program staff			
Mediating staff issues and conflicts			
Problem solving			
How to service irate customers			
How to coordinate supportive services			
How to develop and launch a successful marketing plan and conduct program outreach			
Clear verbal and written communication skills			
Active listening skills			
Research skills			
Analytical skills			
Reading comprehension skills			
Math skills			
Interpersonal skills for relating to a broad range of people			
Time management skills			
Public speaking skills			
Creative problem-solving skills			
Decision making skills			
Budgeting skills			
Crisis management skills			
Training skills			
Interviewing skills			
Leading and directing program staff			
Identifying and implementing effective organizational structures			
Explaining and applying HUD program regulations			

Subject	Need to Know	Know Now	Needs Work
Explaining and applying federal statutes			
Explaining and applying applicable state and local laws			
Researching issues within the context of HUD regulations			
Negotiating contract rents and adjustments			
Mediating tenant/landlord disputes			
Conducting hearings and reviews			
Predicting and planning for the effect of social and economic conditions on the HCV program			
Maintaining flexibility			
Compiling program data and retrieving information			
Gathering and using feedback			
Developing procedures, controls, and information systems			
Analyzing processes and work flow			
Identifying and implementing effective monitoring systems			
Identifying and providing professional development opportunities for staff			
Delegating work responsibilities			
Prioritizing projects and daily work assignments			
Analyzing reports, regulations, and notices			
Working under pressure and meeting deadlines			
Relating and responding to the concerns of families			
Relating and responding to the concerns of property owners			
Relating and responding to the concerns of the community			
Relating and responding to the concerns of program staff			
Enhancing the image of the subsidized housing industry			
Effectively using other PHAs, HUD, and service providers as resources			
Other: (Add those relevant to your PHA)			

Learning Activity 2-2:   Customized Learning Plan

• Review your items with checked boxes in this Learning Activity.

• Decide on the top 5 you will work on. Enter them with a priority number in the box below.

Item, Issue, or Initiative	Priority

Choose one of your top priorities from above and set up an implementation plan for yourself using the following document:

Learning Item_____

#	Task	Resource	Start Date	End Date
1.				
2.				
3.				
4.				
5.				

Section 3: Workforce Capacity

STAFFING MODELS FOR CASEWORKERS

There are several models for staffing that a PHA can employ. These can include the generalist model, the specialist model, the front office/back office model, or an approach that blends any of these models together.

There is no one "best" model-many variables within a particular agency can influence which staffing model may work the best, and PHAs can change from one model to another.

Staffing Models

Model 1: Basic Operational Model Overview

Designed for smaller agencies managing the Housing Choice Voucher (HCV) program, this streamlined model emphasizes essential functions and roles with a focus on efficiency and compliance.

- **Staff Roles and Responsibilities:**
  - **HCV Program Manager:** Oversees program operations, compliance, staff performance, and external coordination.
  - **Eligibility Specialists:** Handle applications, eligibility determinations, and participant reexaminations.
  - **Housing Inspectors:** Conduct HQS inspections, address complaints, and ensure compliance.
  - **Customer Service Representatives:** Provide frontline support, resolve issues, and guide applicants.

Model 2: Expanded Service Model Overview

This model, tailored for medium-sized agencies with larger voucher volumes, incorporates specialized roles to enhance participant support and ensure program effectiveness.

- **Staff Roles and Responsibilities:**
  - **HCV Program Director:** Provides strategic oversight, policy development, and stakeholder engagement while ensuring SEMAP compliance.
  - **Eligibility and Compliance Team:** Includes Eligibility Specialists and Compliance Officers to ensure regulatory adherence and conduct audits.

- **Housing Quality Team:** Led by a Senior Inspector who manages complex cases, trains staff, and oversees HQS inspections.

- **Participant Services Team:** Case Managers support participants with recertifications and changes; FSS Specialists assist with employment and training.

- **Operations and Support Team:** Customer Service Representatives handle inquiries; Data Analysts track KPIs and ensure data accuracy.

Model 3: Comprehensive Service Model Overview

Designed for large, urban agencies, this model emphasizes extensive management, specialized services, and advanced functional areas to address diverse participant needs and ensure high program performance.

- **Staff Roles and Responsibilities:**

  - **HCV Program Executive:** Oversees strategic planning, ensures integration with housing authority goals, liaises with city officials, and ensures SEMAP compliance.

  - **Program Management Team:** Includes HCV Program Directors and an Operations Manager to oversee daily operations and cross-functional teams.

  - **Specialized Services Team:** Coordinates programs like VASH for veterans and FSS for family economic independence, alongside other targeted services.

  - **Enhanced Participant Support Team:** Led by Senior Case Managers to provide advanced participant support.

  - **Technology and Innovation Team:** IT Specialists manage digital tools and portals; Data Analysts track KPIs and improve program efficiency.

  - **Legal and Compliance Team:** Legal Advisors handle contracts, and Compliance Officers ensure regulatory adherence.

Model 4: Case Management Model Overview

Focused on a customer-centered approach, this model assigns case managers to specific participant groups, fostering tailored support, stronger relationships, and participant success post-lease-up.

- **Staff Roles and Responsibilities:**

    - **HCV Program Director:** Leads program operations, ensures compliance, and manages external stakeholder relationships.

    - **Eligibility and Lease-Up Team:** Handles participant eligibility, voucher issuance, lease-ups, and landlord coordination.

    - **Case Management Team:** Manages participant portfolios, performs rent reasonableness checks, resolves landlord-participant conflicts, and supports portability and adjustments.

    - **Inspections Team:** Ensures HQS compliance through inspections, led by an Inspection Coordinator for logistics and documentation.

    - **Support and Administrative Team:** Customer Service Representatives and Data Clerks enhance participant experience and maintain accurate records.

Specialized Areas

Areas such as portability in/out, and targeted funding such as VASH, FUP, Near Elderly, Project-Based Vouchers, and Moderate Rehabilitation often have a specialized staff person.

The amount of specialization is usually directly related to the size of the agency. Smaller agencies may group all specialized areas into one or two sets of staff.

- The specialization may occur only in intake. For example, VASH or FUP vouchers require considerable coordination and communication with nonprofit organizations prior to lease-up relating to referrals, selection, and lease-up itself. Once they are leased, the functions operate much like regular functional areas.

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- In project-based vouchers, if there are several projects, they may be assigned to a housing specialist by project so that the housing specialist develops a rapport with the housing manager in the referral, selection, lease-up, and other occupancy functions. This program also requires a specialized rent calculation.

- In moderate rehabilitation, there are very few HUD regulations relating to occupancy, but there is a somewhat different rent calculation.

- When there are differences in calculation and several programs are involved, there are often specialists assigned to those programs.

CASELOAD ASSIGNMENT

Many PHAs assign caseloads based on the number of vouchers.

Other factors may include:

- Need for bilingual skills

- Number of elderly or disabled

- Number of large households

- Geographic expanse of jurisdiction

- Special needs populations

- Community support

The scope of a case worker's job is and should be a management decision.

- It should go without saying that the greater the caseload responsibility, the fewer the cases staff should have.

- In PHAs that assign full case management responsibilities, the caseload is about 300-350. Full caseload management typically would include everything that happens to the family after selection from the waiting list including inspections.

- Caseload management can also be partial, such as all functions after initial lease-up. It could exempt inspections or other functions. The caseload then increases to about 450-600.

- Totally specialized caseloads, such as annual reexaminations and interims only, with no case management, can reach about 650-800.

- All caseloads are measured on an annual basis.

The amount and type of clerical support can influence the size of the caseload as well.

- With budget cuts, the caseloads may need to be moved higher.

- If the PHA has to reduce staff, consider redistributing more of the workload to clerical staff. There are many clerical functions in a housing specialist's job.

Caseloads can be organized by:

- Alphabet

- Zip codes

- Owners

- Random

A random approach assigns new cases as they are assigned to the department.

- They are assigned to the caseworker with the lowest caseload for they year or for that month. The caseworker retains ownership of that family.

Caseloads may not be equally distributed each month and may require redistribution on a monthly basis.

- Unless a random approach is used.

Caseloads may also need to be temporarily redistributed when staff leave or are on leave.

- Review the maximum caseload per housing specialist when redistributing.

With new staff, there should be a graduated caseload to allow new employees to learn the functions of the job.

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To get a better idea of how caseloads are distributed in your agency, project your caseloads out in a chart for a year by month, staff person, and by team. This will allow you to determine whether the caseloads are relatively even, and to redistribute if needed.

CASELOAD AND ACCURACY PLAN

Since production and accuracy are both important, there should be a Caseload and Accuracy Plan in place which spells out the graduated caseload for new employees as well as experienced employees with an accuracy expectation.

These tie into performance standards.

CALCULATION OF STAFFING NEEDS

There are a variety of methods which can be used to calculate the staffing needs of your HCV department functions. These include:

- Informal managerial judgments

- Benchmarking

- Cycle time

Informal Managerial Judgments

The knowledge and insight of a competent manager should not be discounted when projecting staffing needs.

An experienced manager should have a good understanding of the extent of work involved in performing various housing functions, the seasonal spikes and lows, and the nature of the skills and competencies required.

Benchmarking

A PHA may also look toward the staffing levels of comparable-sized PHAs as a basis for staffing decisions.

Keep in mind there are certain variables that must be considered, such as organizational structure and staff experience and competencies.

Cycle Time

The term *cycle time* refers to the time required to fulfill commitments or to complete a task from start to finish.

The information needed for this type of assessment includes:

- The tasks needed to perform the various program functions

- The average number of minutes needed to perform each task

- The average number of staff hours available per month to perform functions

The knowledge check can reveal:

- Whether people are taking too long to finish a task or too little time.

- What is the ideal average processing time

- Whether your agency is staffed correctly to get the job done in time and accurately.

Review the example in the Master Book page 2.3-14, which can be used for any functional area. The example is the process for Initial Lease-Up.

- Another method of cycle time is to ask staff how much time they spend on certain activities or observe them while they are performing activities.

- It is worth noting that HUD uses all of these methods to calculate the per unit cost of staffing the HCV program in their Admin Fee Study.

Admin Fee Study Figures

Function	Min/Func	# Per Yr	PHA Min/Yr	PHA Hrs/Yr	Staff Needs
Recerts	232	872	202,304	3371.73	1.98
Interims	100	314	31,392	523.20	.31
Moves	36	87	3,139.20	52.32	.03
Port-Outs	11	174	1,918.40	31.97	.02
Termination	20	70	1,395.20	23.25	.01
Reas Accom	3	44	130.80	2.18	.00
TOTAL					2.32

NOTE: 1702 staff work hours per year used – in reality it's less than that after lunch and breaks are deducted and then average vacation, holidays, sick leave days are subtracted

HUD Admin Fee Study Excerpt

Intake and Eligibility □ Applicant intake, including wait list management □ Process port-ins □ Eligibility determinations □ Informal reviews □ Denial of eligibility □ Reasonable accommodation □ Data entry, file management, and reports	**Lease Up** □ Briefings □ Voucher issuance □ Search assistance □ Extensions, expirations, and withdrawals □ RFTA processing □ Rent reasonableness □ HAP contracts □ Informal reviews □ Reasonable accommodation □ Data entry, file management, and reports
Ongoing Occupancy □ Annual and interim recertifications □ Moves □ Rent reasonableness □ Process port-outs □ End of participation □ Terminations (includes informal hearings) □ Other informal hearings □ Reasonable accommodation □ Data entry, file management, and reports	**Inspections** □ Scheduling and notifications □ Preparing for inspection □ Driving to and from inspection □ Conducting inspection □ Post-inspection paperwork □ HQS enforcement □ Reasonable accommodation
HCV FSS □ Working with partners □ Marketing, outreach, and enrollment □ Case management, services, and referrals □ Escrow monitoring or payouts □ Program exits and port-outs □ Reasonable accommodation □ Staff meetings or training □ Data entry, file management, and reports	**Supportive Services (non-FSS)** □ Working with partners □ Marketing, outreach, and enrollment □ Case management, services, and referrals □ Homeownership-related services and referrals □ Work related to expanding housing opportunities
Monitoring and Supervisory □ Plans/policies □ Preparing, approving, distributing HAP □ PIC and EIV □ SEMAP and file QC □ VMS reporting and corrections □ Other monitoring □ HCV staff supervision □ Board support □ Community relations □ Billing and budget support □ Audit support □ Research studies	**Supporting Activities** □ General customer service □ Community/owner relations □ Staff meetings □ General email, voicemail, or IT □ HCV-related training

Non-HCV Activities

The RMS device also captured information on time spent on activities not related to the HCV program, special vouchers, or HCV FSS. This was necessary to capture time when staff were taking a break or not working for some other reason and time when staff were working on another program, which was common among smaller PHAs with less specialized staff. In addition to specifying regular vouchers, special vouchers, or HCV FSS, staff could respond via the RMS device that they were working on one of the following activities:

□ **Work or training related to other programs** (includes time spent working on public housing, HOPE VI, Shelter Plus Care, and other HUD programs; USDA/Rural Development LIHTC; and other federal, state, or local programs, including work for other housing authorities or property management functions for PHA-owned or managed properties)

□ **General email or voicemail** (email or phone work that cannot be attributed to a particular program, such as checking email after a period out of the office for a staff person who works on multiple programs)

□ **Lunch, break, and time spent not at work** (e.g., doctor's appointments, sick leave, vacation, unpaid time off)

□ **Overhead work** (work on overhead functions). This option was only available to PHA staff who served overhead functions as well as working on frontline activities

Exhibit 4-2. Core Categories for Analysis of Time Spent on HCV Program

Core Function	General Description	Main Activities Included
Intake, Eligibility, and Lease-Up	Work on behalf of households applying to and entering the HCV program	☐ Wait list and applications ☐ Port-ins ☐ Eligibility determinations ☐ Briefings ☐ Voucher issuance and housing search ☐ Unit approval (RFTA processing and rent reasonableness for new units) ☐ HAP contracts ☐ Reasonable accommodation ☐ Associated data entry, file management, and reports
Ongoing Occupancy	Work on behalf of existing voucher participants	☐ Annual and interim recertifications ☐ Moves ☐ Rent reasonableness ☐ Port-outs ☐ End of participation ☐ Terminations (includes informal hearings related to termination) ☐ Other informal hearings (not related to termination) ☐ Reasonable accommodation ☐ Associated data entry, file management, and reports
Inspections	All work related to HQS inspections for new and existing voucher participants	☐ Scheduling and notifications ☐ Preparing for inspection ☐ Driving to and from inspection ☐ Conducting inspection ☐ Post-inspection paperwork ☐ HQS enforcement ☐ Reasonable accommodation

Variation in Time Estimates

The observed variation across PHAs in time per voucher and per activity reflects the fact that each PHA has a different way of approaching the program, even among high performers. The variation also reflects the study design of collecting data at different points of the year for different PHAs. Many HCV activities are not conducted in the same proportions year-round. PHAs may have intensive lease-up periods during the year based on when vouchers become available. In contrast, annual recertifications tend to be conducted at several points during the year for different groups of participants, since annual recertifications must be completed before the anniversary date of lease-up. Monitoring and supervisory activities, such as preparing reports and assembling SEMAP data, may happen more intensively toward the end of the PHA's fiscal year. Updating the HCV wait list generally happens once a year or less often, so some PHAs were observed doing this function (increasing the time spent on intake and eligibility activities), while others were not.

Collecting time data from different PHAs at different times of the year allows the study to measure program times and costs at different points in the program cycle, which is very important for ensuring that activities that do not happen very often or happen only once a year are not missed. The disadvantage of this approach is a higher level of variation across PHAs in time observed for different activities, particularly when the time observed during the two-month data collection period is annualized and divided by all vouchers under lease, as is shown in the tables that present time per voucher under lease.

The variation in overall time per voucher affects the study's estimates or per unit administrative costs because labor is a large component of program costs. As discussed in Chapter 6, the models that we developed to explain the observed variation in per unit administrative costs include several variables derived from the time estimates, including total time per voucher and time spent on different components of the program such as intake and ongoing occupancy.

Exhibit 4-3 shows the average distribution of frontline staff time across the five core categories of HCV work. Ongoing occupancy activities—that is, the work done on behalf of existing HCV participants—take up the largest share of frontline staff time (50 percent). This is followed by intake, eligibility, and lease-up activities for households applying to and entering the program (16 percent), inspection activities for new admissions as well as existing participants (16 percent), and monitoring and supervisory activities (15 percent). On average, staff spent only 2 percent of their time providing supportive services outside of the Family Self-Sufficiency program.

Exhibit 4-4 also shows confidence intervals for the mean estimates (95% CI). The confidence intervals can be interpreted as follows: we can be 95 percent confident that the mean percent of time spent on ongoing occupancy is between 46 percent and 54 percent. **Exhibit 4-3. Distribution of Percent of Frontline Staff Time by Core HCV Category**

Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI_a		
Ongoing occupancy			25%	43%	53%	50%	58%	70%	46%-54%
Intake, eligibility, and lease-up			1%	10%	14%	16%	20%	49%	13%-20%
Monitoring and supervisory			0%	9%	15%	15%	19%	32%	13%-18%
Inspections			1%	10%	16%	16%	23%	33%	13%-18%
Supportive services (not FSS)			0%	0%	1%	2%	3%	11%	1%-3%

Exhibit 4-4. Hours per Year per Voucher Under Lease

Min.	25th PCTL	Median	Mean	75th PCTL	Max.			95% CI
Ongoing occupancy			3.5	5.3	6.5	6.8	8.2	13.6	6.2-7.4
Intake, eligibility, and lease-up			0.2	1.3	1.9	2.3	2.8	7.4	1.7-2.9
Inspections			0.1	1.2	2.0	2.2	2.9	4.9	1.8-2.6
Monitoring and supervisory			0.0	1.1	1.9	2.2	2.8	5.6	1.7-2.6
Supportive services (not FSS)			0.0	0.0	0.1	0.3	0.4	1.4	0.2-0.4
Total hours			**7.2**	**11.0**	**14.2**	**13.8**	**15.6**	**21.4**	**12.9-14.6**

Exhibit 4-4 shows that, for every voucher under lease, PHAs spent, on average, 13.8 hours per year on frontline HCV activities. The 95 percent confidence interval for this average is 12.9 to 14.6 hours per voucher under lease per year. The lowest time per voucher observed was 7.2 hours, and the highest was 21.4 hours. Time spent on ongoing occupancy, the most time-consuming of the core HCV functions, ranged from 3.5 hours per voucher per year to 13.6 hours per voucher per year, with an average of 6.8 hours per voucher per year.

To make the data on time per voucher under lease shown in Exhibit 4-4 and subsequent exhibits more concrete, we present a simple example of a PHA with 1,000 vouchers under lease. As shown in Exhibit 4-5, a PHA administering 1,000 vouchers with the same distribution of time as the average PHA in the study would need 13,770 hours of staff work time per year, of which 6,815 hours would be spent on ongoing occupancy. The time data collected through this study suggest that full-time PHA staff work an average of 1,702 per year, or 82 percent of a 40-hour work week, the rest of the time being spent on paid and unpaid time off. This is consistent with national estimates for worker productivity. According to data compiled by the Federal Reserve Bank of St. Louis, Americans worked an average of 1,704 hours per year in 2011 (www. research.stlouisfed.org). Using 1,702 as the total working hours for a full-time employee in a year, the 13,770 hours of frontline staff time needed to administer the 1,000-voucher program translates to 8.1 full-time equivalent staff (FTEs).

Caution should be exercised in extrapolating from the data in this way, as we observe wide variation in the total staff time per voucher across PHAs. For example, programs administering more than 500 vouchers spend somewhat less time per voucher per year than smaller programs, demonstrating some savings from economies of scale.[31]

Exhibit 4-5. Example of Mean Hours per Voucher Under Lease per Year Translated to FTEs for 1,000-Unit HCV Program

	Hours per Voucher per Year	Total Hours per Year	FTEs
Intake, eligibility, and lease-up	2.3	2,302	1.4
Ongoing occupancy	6.8	6,815	4
Inspections	2.2	2,182	1.3
Monitoring and supervisory	2.2	2,196	1.3
Supportive services	0.3	275	0.2
Total Hours	**13.8**	**13,770**	**8.1**

The remaining sections of this chapter explore the main categories of HCV work in detail, followed by analysis of the available data on time spent on special voucher programs and for different types of households. We do not show work on supportive services in detail in this chapter, as supportive services represents only 2 percent of total HCV labor time overall, or less than 20 minutes per voucher per year.

4.2 Intake, Eligibility, and Lease-Up for New Households

Intake, eligibility, and lease-up covers all the frontline work conducted on behalf of new applicants to the HCV program and those entering the program from the time a household applies to the program to the time it comes under lease, with the exception of time spent on HQS inspections for new households. We organized the time data collected on intake, eligibility, and lease-up work into seven categories:

- **Wait list and applications:** includes activities related to opening, closing, and maintaining the wait list, taking applications, providing wait list status to applicants, and selecting applicants off the wait list.

- **Port-ins:** includes sending and receiving HUD Form 52665, billing for port-ins, communicating with sending PHAs, and responding to inquiries about port-ins.

- **Determination of eligibility:** includes conducting eligibility determinations, denial of eligibility, and informal reviews.

- **Voucher issuance and housing search:** includes briefing households, issuing vouchers, providing housing search assistance, and processing search time extensions and withdrawals.

- **Unit approval:** includes processing the request for tenancy approval (RFTA) and conducting rent reasonableness.

- **HAP contract:** includes work associated with preparing and updating the HAP contract and landlord payment information.

☐ **Reasonable accommodation:** includes additional work conducted on behalf of applicants and voucher recipients needing reasonable accommodation.˙Time spent processing port-outs is not included under intake, eligibility, and lease-up, even though some households may port out of the PHA's jurisdiction immediately upon receiving the voucher. For the purposes of data collection and analysis, time spent processing port-outs is categorized under ongoing occupancy.]

Time spent on intake, eligibility, and lease-up also includes supportive administrative work such as data entry, filing, copying, and phone calls and emails related to intake and leasing. The time spent on these administrative activities has been allocated across the seven categories based on the relative proportion of staff time spent in these areas.

4.2.1 Time on Intake, Eligibility, and Lease-Up Activities per Voucher Leased

Exhibit 4-6 shows the time spent on each of these activities, in minutes, using as the denominator all the vouchers under lease per year, including vouchers used by existing HCV participants who do not require this work. Across all of the vouchers under lease in the program, PHAs spent an average of 138 minutes (2 hours and 18 minutes) per voucher working on activities related to managing the waiting list, processing new applicants, and helping newly admitted households lease a unit. The 95 percent confidence interval for this average is 102 to 174 minutes per voucher under lease per year.

The most time-consuming aspects of intake, eligibility, and lease-up were managing the wait list and applications (average of 49 minutes per voucher under lease per year), determining eligibility (average of 33 minutes per voucher under lease per year), and issuing vouchers and assisting households through the search process (average of 16 minutes per voucher under lease per year).

Exhibit 4-6. Minutes per Year per All Vouchers Leased for Intake, Eligibility, and Lease-Up Activities for Vouchers Issued to New Households

Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI			
Wait list and applications	1	17	36	49	66	165	34-64		
Port-ins	0	1	5	13	11	104	5-21		
Determination of eligibility	1	11	18	33	44	165	22-44		
Voucher issuance and search	0	3	7	16	19	103	8-24		
Unit approval	0	3	8	12	18	62	9-16		
HAP contract	0	3	9	13	17	65	9-17		
Reasonable accommodation	0	0	0	1	1	9	1-2		
Total	13	76	111	138	169	445	102-174		

4.2.2 Time on Eligibility Determinations and Voucher Issuances

Exhibit 4-7 shows the time spent on intake, eligibility, and lease-up transactions just for households that had a new or turnover voucher issued during the year, whether or not they succeeded in leasing up. These estimates are based on time collected through RMS and transaction counts collected from PHAs.[33] As shown in Section 3.3 above, vouchers issued represent only a small share of vouchers under lease, so the intake time per voucher issued is going to be much higher than intake time spread over all vouchers under lease.

The data in Exhibit 4-7 show that for every new or turnover voucher issued, PHAs spent an average of 196 minutes (3 and 16 minutes) on eligibility determinations and 85 minutes (1 hour and 25 minutes) on voucher issuance and assistance through the housing search process.

Exhibit 4-7. Intake, Eligibility, and Lease-Up Time (in Minutes) per Voucher Issued

Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI		
Minutes on eligibility determinations per voucher issued (n=54)	11	59	126	196	257	1,037	124-269	
Minutes on voucher issuance and search per voucher issued (n=54)	2	19	55	85	115	338	60-110	

4.2.3 Time on Port-In Activities

Exhibit 4-8 shows the time spent processing port-ins, per port-in household. The time measured includes the time spent processing new port-ins as well as billing and paperwork associated with existing port-ins for which the PHA is billing.[34] The associated count includes the new port-ins processed by the PHA during the RMS period, plus any existing port-ins for which the PHA was billing.[35] PHAs spent an average of 155 minutes (2 hours 35 minutes) on port-in related activities for every port-in household (new port-ins and existing billed port-ins). However, there is a wide variance in time per port-in processed across the study sites, suggesting that the median time per port-in (100 minutes) may be a more reliable measure.

Exhibit 4-8. Time per Port-In Household

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI
Minutes per port-in processed (new ports plus existing ports for which the PHA bills)	4	25	100	155	228	925	102-209

The study did not collect separate time data for time spent processing new incoming ports and time spent on billing activities related to port-ins that the PHA was administering on behalf of another PHA. However, if we analyze the time per port-in among the nine PHAs that were mostly billing for ongoing port-ins during the RMS period (as opposed to processing new port-ins), the average time per port-in was much lower—31 minutes per household. If we assume that most of this time is spent on processing billing, which is done year-round, we can estimate that these nine PHAs spent about 202 minutes (3 hours and 22 minutes) per billed port-in over the course of a year. This is time spent in addition to the time spent on regular HCV functions, but there are also some functions that a PHA would not do for a billed port-in household—for example, waiting list activities and eligibility determinations and port-out processing. Together these functions amount to an average of 100 minutes of frontline staff time per year for these nine PHAs. Thus, we estimate that the additional time spent on billed port-in households (compared to the PHA's own households) to be about 102 minutes per year (1 hour and 42 minutes).

Ongoing occupancy covers all the work conducted for the tenancy of existing HCV participants, with the exception of time spent on HQS inspections. We organized the time data collected on ongoing occupancy into seven categories:

- **Annual recertifications:** includes preparing for and scheduling annual recertifications, conducting interviews, verifying income and household composition, reviewing EIV, and calculating total tenant payment and HAP.

- **Interim recertifications:** includes receiving and processing requests for interim recertifications, conducting interviews and verifying income, calculating total tenant payment and HAP, and processing vendor changes and notifications.

- **Moves:** includes receiving and processing move requests, determining eligibility for a move, and conducting move briefings.

- **Processing port-outs:** includes determining participants' eligibility for port-out, providing participants with information on porting, sending HUD Form 52665, communicating with receiving PHAs, and updating participant files.

☐ **Terminations:** includes investigating cases that could lead to terminations as well as processing terminations, conducting hearings, and coordinating post-termination litigation.

End of participation: includes processing the end of participation agreement and updating files and data systems following an end of participation.

☐ **Reasonable accommodation:** includes additional work conducted on behalf of participants needing reasonable accommodation.

Time spent on ongoing occupancy also includes supportive administrative work such as data entry, filing, copying, and phone calls and emails related to ongoing occupancy, and informal hearings not related to termination. The time spent on these activities has been allocated across the seven categories based on the relative proportion of staff time reported in these areas.

4.3.1 Time on Ongoing Occupancy Activities per Voucher Leased

Exhibit 4-9 shows the time spent on each of these activities per year, in minutes, as an average for all vouchers under lease per year, including vouchers leased up by newly admitted households. For every voucher in the program, PHAs spent an average of 409 minutes (6 hours and 49 minutes) per year performing tasks associated with maintaining households already in the program, not including inspections, management tasks, and supportive services.

The biggest component of ongoing occupancy work is the annual recertification required for all households in the program. PHAs spent an average of 232 minutes (3 hours and 52 minutes) conducting each annual recertification. The confidence interval on this estimate indicates that we can be 95 percent confident that the true average is between 206 minutes (3 hours and 26 minutes) and 257 minutes (4 hours and 17 minutes).

After annual recertifications, the next most time-consuming aspect of ongoing occupancy is interim recertifications, even though not all households in the program require interim recertifications. On average, interim recertifications take 100 minutes per household under lease (over an hour and a half). After annual and interim recertifications, the other aspects of ongoing occupancy are less time-consuming, averaging a total of 78 minutes per year per voucher under lease for work related to moves, port-outs, terminations, end of participation agreements, and reasonable accommodation.

Exhibit 4-9. Minutes per Year <u>per All Vouchers Leased</u> for Ongoing Occupancy Activities

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI
Annual recertifications	124	173	225	232	276	647	206-257
Interim recertifications	20	63	87	100	119	257	84-116
Moves	0	19	29	36	53	78	28-43
Processing port-outs	0	4	7	11	13	59	7-14
Terminations	0	8	16	20	29	79	15-26
End of participation	0	3	5	8	9	61	5-10
Reasonable accommodation	0	0	2	3	5	19	2-4
Total	**211**	**321**	**391**	**409**	**491**	**818**	**372-446**

4.3.2 Time on Annual Recertifications, Interim Recertifications, and Moves

Exhibit 4-10 shows time spent per annual recertification, per interim recertification, and per move. These estimates are based on the transaction counts collected for the study. The number of annual recertifications conducted in a year is similar to the total number of vouchers under lease, so the average time per annual recertification, 228 minutes (Exhibit 4-10), is similar to the average time spent on annual recertifications per all vouchers leased, 232 minutes (Exhibit 4-9). By contrast, not every household receives an interim recertification, so the average time per interim recertification for those households who received interim recertifications, 156 minutes (Exhibit 4-10) is substantially higher than the average time spent on interim recertifications per all vouchers leased, 100 minutes (Exhibit 4-9).

Exhibit 4-10. Minutes per Transaction for Select Ongoing Occupancy Activities

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI	
Minutes per annual recertification (n=58)	79	150	187	228	310	498	192-264
Minutes per interim recertification (n=60)	41	95	123	156	186	661	121-191
Minutes per move (n=46)	47	103	187	247	282	785	181-313

Interim recertifications took less time on average than annual recertifications—156 minutes per interim compared to 228 minutes per annual. PHA staff may only look at some changes in income or expenses during an interim recertification (such as an increase or decrease in income) and do not necessarily re-verify all income and assets that were verified during the annual recertification or retest for rent reasonableness.

4.3.3 Time on Port-Out Activities

Exhibit 4-11 shows the time spent processing port-outs, per port-out household. The time measured includes the time spent processing new port-outs as well as billing and paperwork associated with existing port-outs for which the PHA is being billed.[36] [36 36 The activities recorded in the time estimate include determining participants' eligibility for port-out, providing participants with information on porting, sending HUD Form 52665, communicating with receiving PHAs, verifying and approving port-out bills, and updating participant files.]

The associated count includes the new port-outs processed by the PHA during the RMS period, plus any existing port-outs for which the PHA was billed.[37] [37 37 The count of new port-outs processed came from the transaction counts for the two-month RMS period provided by the PHA. In a few cases the PHA was not able to provide the count so we obtained it from HUD's PIC data system. We obtained the count of billed port-outs from HUD's VMS system. We used the count of billed port-outs from the month before the start of RMS so as to avoid double counting between existing billed port-outs and new port-outs for which the PHA might be billed in the future.]

On average, PHAs spent an average of 71 minutes (1 hour 11 minutes) on port-out related activities for every port-out household (new port-outs and existing billed port-outs). However, as with port-ins, there is a wide variance in time per port-out processed across the study sites, suggesting that the median time per port-out (41 minutes) may be a more reliable measure.

Exhibit 4-11. Time per Port-Out Household

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI
Minutes per port-out processed (new ports plus existing ports for which the PHA is billed)	4	23	41	71	86	296	47-95

The study did not collect separate time data for time spent processing new outgoing ports and time spent on billing activities related to port-outs being administered by another PHA. However, it was important for the development of the proposed fee formula to understand the relative cost of these two components (see Chapter 7).38 Specifically, we needed to determine approximately how much time PHAs spend on ongoing billing activities for port-outs versus processing new port-outs in order to determine whether the new formula needed to provide additional compensation for port-out activities.

To determine approximately how much time PHAs spend on ongoing billing activities for port-outs, we created a regression model to explain the observed variation in time spent on port-out activities across the PHAs in the study. The dependent variable in the model was minutes spent on port-out processing during the eight-week RMS period and the independent variables were the number of outgoing ports processed during that period (i.e., new port-out transactions) and the number of port-out households that the PHA was billing for during that period). The model is ordinary least squares with no intercept term. The intercept term was left out, or in other words restricted to be zero, because it does not make sense to have a non-zero intercept if the PHA has zero port-out transactions and zero port-outs billed. We also excluded two PHAs that were determined to be outliers. 39

Exhibit 4-12 shows the results of the regression model. Only the number of billed port-out households is a statistically significant driver of time spent on port-out processing during the RMS period, which may in part be explained by the much larger number of port-outs being billed (6,153) than port-out transactions (514) at the study sites during RMS period. The coefficient on the number of billed port-out vouchers is 23.6, suggesting that, on average, each billed port-out voucher takes about 24 minutes of time over an eight-week period, or about 156 minutes of time over the course of the year. In other words, on average, PHAs spent just over 2.5 hours per year for every port-out voucher billed. As shown in Exhibit 4-4, the overall time spent on all frontline voucher activities (including time spent processing port-out transactions) was 13.8 hours (828 minutes) per voucher under lease per year. Thus, the frontline time spent on port-out billing equates to about 19 percent of the time spent administering non-port-out vouchers (156/828=0.19). These estimates are revisited in the context of the proposed fee formula in Chapter 7.

4.4 Inspections

Time spent on inspections covers all the work related to Housing Quality Standards (HQS) inspections, including inspections of new units as well as annual inspections. We organized the time data collected on inspections into seven categories:

- **Scheduling and notifications:** includes scheduling inspections with landlords and tenants, sending notices and responding to inquiries about scheduled inspections, and working with contractors to schedule inspections and evaluate inspection results.

- **Preparing for inspections:** includes time spent preparing for inspections in the field including downloading itinerary/schedule, planning routing, and reviewing prior inspection results.

- **Driving to and from inspections:** includes the time spent driving to, from, and between field inspections, and any related car activities such as buying gasoline.

☐ **Conducting inspections:** includes the time spent conducting a field inspection, including waiting for landlords or tenants. Inspections are categorized as follows: ☐ First inspection for a new unit ☐ Reinspection for a new unit ☐ First annual inspection ☐ Reinspection for annual ☐ Complaint, emergency, or other special inspection ☐ Quality control inspection ☐ Inspection type unknown

- **Post-inspection paperwork:** includes general administrative activities, email, and phone calls related to inspection such as completing the HUD form 52641 and other post-inspection paperwork, uploading data from handheld devices, evaluating routine inspection results, 50058/PIC completion and submission, data entry, filing, mailing, and data storage.

- **HQS enforcement:** includes evaluating inspection results for possible need for HQS enforcement, placing or lifting unit abatements, communicating deficiencies and abatements to owners and tenants, and participating in related court proceedings.

☐ **Reasonable accommodation:** includes any additional activities related to scheduling or conducting inspections for participants with disabilities including working with legal assistance, advocates, and service providers to respond to reasonable accommodation requests, and scheduling inspections with service providers or additional PHA staff.

Exhibit 4-13 compares the time spent on all inspection-related activities for the 47 PHAs that conduct their inspections in house and have reliable time data and for the 9 PHAs that contract out their inspections. We found that PHAs that conduct their inspections in house spent, on average, 163 minutes (2 hours and 43 minutes) per year per voucher under lease on inspection-related activities, compared to 37 minutes for those who contract out their inspections. PHA staff time is substantially lower for PHAs that contract out their inspections, but some staff time is still needed to coordinate with the contractor, review inspection results, communicate with landlords and program participants, and conduct quality control inspections, among other activities. The time estimates in Exhibit 4-13 include all inspection work, including new unit inspections, annual inspections, and any reinspections resulting from HQS violations found during the first inspection.

Exhibit 4-13. Minutes Spent by PHA Staff per Year <u>per All Vouchers Leased </u>for All Inspections Activities, In-House Versus Contracted-Out Inspections

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI	
PHAs using in-house inspectors (n=47)	54	110	156	163	206	292	139-186
PHAs using contract inspectors (n=9)	7	13	31	37	52	61	16-58
All PHAs combined (n=56)	7	61	135	136	192	292	110-161

The rest of this section focuses on the time measured for those PHAs that conduct their inspections in house.

Exhibit 4-14 shows the time spent on each of the seven inspections-related activities, in minutes, per voucher under lease per year. As would be expected, the largest share of the total time spent on inspections is spent conducting the inspections (42 minutes) and on driving to inspections (37 minutes). Together, these two activities represent about half the time that the average PHA spent on inspection-related activities. The other half of the time was spent on post-inspection paperwork (35 minutes on average), scheduling the inspections and notifying landlords and participants (26 minutes), and preparing for inspections (15 minutes). PHAs spent relatively little time on HQS enforcement activities and reasonable accommodation when spread across the entire portfolio of vouchers.

Exhibit 4-14. Minutes per Year <u>per All Vouchers Leased </u>for Inspection Activities, In-House Inspections Only

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI	
Scheduling and notifications	0	14	23	26	31	69	19-34
Preparing for inspection	0	8	12	15	17	43	11-19
Driving to/from inspection	7	23	34	37	47	98	30-44
Conducting inspection	7	31	40	42	54	87	36-49
Post-inspection paperwork	0	22	38	35	47	85	30-41
HQS enforcement	0	1	3	5	6	21	3-7
Reasonable accommodation	0	0	0	1	1	29	0-3
Total	**54**	**110**	**156**	**163**	**207**	**292**	**139-186**

Within the category of conducting inspections, we collected information on the type of inspection (e.g., initial occupancy inspection, annual inspection, complaint inspection). Using the transaction count data collected through the study, we analyzed time per inspection for different types of inspections, as shown in Exhibit 4-15. The times shown in Exhibit 4-15 are shorter than those shown in Exhibit 4-14, because, counting reinspections, PHAs typically conduct more than one inspection per year for each voucher under lease, so the time in Exhibit 4-14 is spread over a smaller denominator (all vouchers leased) than the time in Exhibit 4-15 (inspections conducted).

Exhibit 4-15 presents time per inspection for four types of inspections—first inspections; reinspections; complaint, emergency, or other special inspections; and quality control inspections.[41] The exhibit shows only *the time spent driving to and from the inspection and actually conducting the inspection.*

Across all inspection types, PHAs spent an average of 53 minutes per inspection conducting and getting to and from the inspection. The 95 percent confidence interval for this average is 42 to 64 minutes. PHAs spent only slightly more time on first inspections than on reinspections (52 minutes versus 47 minutes, on average).

Section 3: Workforce Capacity

We observed a very wide range of time spent on complaint, emergency, and special inspections, which is not surprising, given that these types of inspections occur relatively infrequently. The median time spent conducting and getting to and from complaint, emergency, and special inspections was 75 minutes and the mean (average) was 114 minutes. The 95 percent confidence interval for the average time on complaint, emergency, and special inspections is wide—49 to 179 minutes— suggesting that the estimate is not very reliable. Quality control inspections took the least time (45 minutes on average) but also had a fairly wide confidence interval.

Exhibit 4-15. Minutes Conducting and Driving to/From Inspections, per Inspection, by Inspection Type, In-House Inspections Only

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI
Minutes per first inspection (annual or new unit) (n=45)	9	35	47	52	62	210	42-62
Minutes per reinspection (annual or new unit) (n=43)	9	26	36	47	64	153	37-58
Minutes per complaint, emergency, or special inspection (n=32)	5	24	75	114	149	375	49-179
Minutes per quality control inspection (n=13)	19	19	22	45	50	146	13-78
Minutes per inspection, all types (n=47)	**13**	**30**	**44**	**53**	**62**	**209**	**42-64**

Exhibit 4-16 shows the time per inspection for all inspection activities, including preparing for the inspection and post-inspection paperwork, as well as conducting the inspections. Overall, PHAs spent an average of 104 minutes (1 hour and 44 minutes) per inspection. Consistent with Exhibit 4-15, PHAs spent slightly more time on average on first inspections than on reinspections. Complaint, emergency, and special inspections were the most time-consuming (230 minutes on average), but varied greatly across PHAs. Quality control inspections were the least time-consuming (91 minutes on average) but also varied greatly across PHAs.

Exhibit 4-16. Minutes on All Inspection Work, per Inspection, by Inspection Type, In-House Inspections Only

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI
Minutes per first inspection (annual or new unit) (n=45)	41	69	96	107	128	306	88-125
Minutes per reinspection (annual or new unit) (n=43)	21	56	80	99	117	320	78-121
Minutes per complaint, emergency, or special inspection (n=32)	12	43	161	230	314	802	92-369
Minutes per quality control inspection (n=13)	36	40	42	91	128	272	30-152
Minutes per inspection, all types (n=47)	**32**	**72**	**95**	**104**	**128**	**303**	**89-119**

4.5 Monitoring and Supervisory Activities

Monitoring and supervisory activities are mainly done by HCV program supervisors but are still considered frontline activities because they directly support the HCV program only. This category includes HUD reports, internal program monitoring and reports, quality control activities, audit and board support, and staff supervision. We organized the time data collected on monitoring and supervisory work into four categories:

☐ **Planning and monitoring:** includes developing annual and administrative plans and procedures, monitoring utilization and other program metrics, interacting with HUD and the PHA's Board of Commissioners, and working on community relations.

☐ **Budget and HAP:** includes preparing annual budgets, monitoring program spending, and preparing monthly HAP payments to landlords.

☐ **HUD reporting and quality control:** includes uploading data to the PIC, EIV, and VMS systems and making corrections, conducting file reviews and reporting for SEMAP, and implementing internal quality control procedures (other than quality control HQS inspections, which are captured under Inspections).

☐ **Staff supervision:** includes providing training and supervision to other HCV staff.

Exhibit 4-17 shows the time spent on each of the four monitoring and supervisory activities, in minutes, per voucher under lease per year. The data suggest that the average PHA spent 132 minutes (just over 2 hours) per year for every voucher under lease on frontline monitoring and supervisory activities. Planning and monitoring work took up the largest share of this time (51 minutes), followed by work associated with monitoring the budget and preparing HAP payments (43 minutes). On average, HUD reporting took less than half an hour per voucher under lease per year, and staff supervision less than 15 minutes. The amount of time spent on HUD reporting is modest on a per voucher basis—an average of 24 minutes per year per voucher under lease—but translates to about 400 hours per year for a program of 1,000 vouchers, or about one-quarter of a full-time equivalent staff.

Exhibit 4-17. Minutes per Year per All Vouchers Leased for Monitoring and Supervisory Activities

	Min.	25th PCTL	Median	Mean	75th PCTL	Max.	95% CI	
Planning and Monitoring	0	22	32	51	80	197	34-67	
Budget and HAP	0	17	32	43	60	168	32-55	
HUD Reporting	0	12	17	24	33	111	18-31	
Staff Supervision	0	4	11	13	15	95	10-16	
Total	**0**	**66**	**112**	**132**	**169**	**338**	**105-159**	

Learning Activity 2-3:   Calculating Staffing Needs

- The objective of this learning activity is to use cycle time to estimate staffing needs. The chart lists the various tasks which could be required of a Housing Specialist and the appropriate time it could take to do each task. Your assignment is to calculate the average staff time available during the year, determine the total staffing hours needed for each task, and then determine how many staff are needed to complete the department's workload.

- When you use this at home, you can list the tasks within your program, determine the number of each item you process per year, the amount of average time it takes to complete each task, and combine the tasks required of the Housing Specialist position in your agency to determine total hours needed. Utilize any other actual factors, such as average vacation, sick, holiday time off, etc. to then calculate the total staff needed. You may utilize the spreadsheet on the portal to complete this for your agency at home.

- For this activity, we have provided the information for you to calculate the total hours needed each year for each task and the average total annual hours available. **Work hours per year are 1690 because we subtract breaks and lunch to use 6.5 actual work hours per day.**

- Not only do you want to know how many staff you need for each task, but you also want to know whether people are taking too long to finish a function, such as a reexamination, (which could mean they aren't organizing and focusing on the task) or too little time (is it affecting the quality of the finished product?) You also want to find the ideal average processing time. You want to know whether you are staffed correctly to get the work done in time, especially if some of the activities they are responsible for are late.

- Once you have the data, you will be able to more accurately set performance standards. You also want to be able to set up a corrective action plan if the standards are not met because the results are inaccurate (high errors) or reflect poor production numbers.

Tasks	Per Year	Per Month	Task Hours	Total Hours per year	Staff Needed	Housing Specialist Time	Per Year	Per Month
Recerts	1500	125	3.25			Work Hours per HS	1690	140.83
Interims	720	60	1			Holidays	176	14.67
Owner rent increases	144	12	0.50			Vacation	120	10.00
Terminations	105	9	0.50			Sick	56	4.67
EOPs/Reinstatements	25	2	0.50			*Total Hours Available*		
Total	2494	208						
Leasing								
RFTA received/Unit set up	225	19	0.30	67.50				
Briefing	20	2	1.50	30.00				
Rent Determination	225	19	0.35	78.75				
Inspections	0	0	0.00	0.00				
Prepare HAP Contract & Lease	225	19	0.35	78.75				
Process certification	225	19	0.25	56.25				
Total	920	77						
Customer Service								
Phone calls	1845	154	0.15	276.75				
Client visits–walk-ins	810	68	0.25	202.50				
Total	2655	221						
Other								
Quality Control	465	39	0.60	279.00				
EIV Reviews	260	22	0.50	130.00				
Training	15	1	1.00	15.00				
Data entry into tracking system	1530	128	0.25	382.50				
Total	2270	434						
Total for workload	5684	719						

How do you incorporate cycle time, productivity, cost control and other efficiency and effectiveness factors into those processes?

- Determine time spent on each task

- Determine whether all steps are needed

- Determine staffing costs

A supervisor can also help staff manage time by:

- Having staff block two hours in the afternoon to return phone calls and answer email

- Setting up specific days for certain activities

- Setting a quality control day (e.g., Wednesday, to get files to QC by Friday)

- If the person does leasing, setting up a leasing day

Notes

Chapter 3　　Effective Supervision

Section 1:　Introduction

LEARNING OUTCOMES

Upon completion of this chapter, you should be able to:

- Describe the five basic functions of a manager

- Analyze the managerial skills you have vs. what you need

- Hire, onboard, and train new staff

- Write performance standards and design performance incentives

- Implement employee performance improvement techniques by utilizing Individual Development Plans (IDPs)

- Conduct exit interviews

- Implement best practices within your agency

- Communicate effectively

INTRODUCTION

Supervisory skill building is very important to being effective in an executive manager's job.

While technical skills are important and will continue to be an asset to the PHA, developing the people and management skills you will need as a supervisor becomes is a crucial task.

The five management functions include:

- Planning—selecting future courses of action and deciding how to achieve desired results

- Organizing—deciding what activities are necessary to reach goals and dividing human resources into work groups to reach them

- Staffing—recruiting, training, promoting and rewarding people to do the organization's work

- Leading—guiding, influencing, and motivating employees in the performance of their duties and responsibilities

- Controlling - comparing actual performance with planned action and taking corrective action if needed

Fee Study Supervisory Time

Function	Min/Yr per V Leas'd	# V's Lsd	Hrs/ Yr	# Supvs
Planning and Monitoring (Admin Plan, procedures, monitoring utilization & prog metrics, HUD, Board, community relations)	51			
Budget and HAP (budgets, monitoring spending, HAP payments)	43			
HUD Reporting and QC (uploading data and corrections to PIC, EIV, VMS), SEMAP file reviews/reporting, QC	24			
Staff Supervision (training and supervision)	13			
TOTAL	132			

NOTE:
Hrs/yr=Min/Yr x V's Leased/60
Supervisors=Hrs/yr divided by 1704

The skills to develop for effective management include:

- Conceptual skills

- Human relations skills

- Administrative skills

- Technical skills

People don't care about what you know until they know you care.

Staff need to feel valued. A successful manager has and demonstrates a concern for the wellbeing of the employees they supervise. By developing an environment of trust, the employee feels you are there to help them.

Supervisors cannot motivate people. However, successful managers learn what motivates each person to provide a successful motivational environment in which people choose (or don't) to motivate themselves. People want feedback—both on what they are doing right, and where they need improvement.

Successful managers set an example for their employees through their own actions. The goal is to help your employees succeed. Supervisory flexibility is critical for managers to succeed.

We suggest you read HCV EM MB Chapter 3 and attend the Supervisory course offered by NMA. Read management books!

The Master Book covers the following aspects of supervisory skill building:

- 3.3-1 Communication
- 3.3-18 Listening
- 3.3-22 Managing Conflict
- 3.3-25 Giving Feedback
- 3.3-28 Delegation
- 3.3-30 Time Management
- 3.3-31 Meeting Management
- 3.3-39 Social Media and the Workplace
- 3.3-42 Creating a Motivational Environment
- 3.3-45 Coaching Employees
- 3.3-48 Performance Evaluation
- 3.3-66 Employee Discipline
- 3.4-1 DiSC Profile
- 3.5-1 Situational Leadership

Section 2:   Selection, Onboarding and Training

How personnel are selected, brought onboard and trained has a major impact on the quality of the workforce.

The specific hiring practices, and tools used to hire staff and the methods used to train them are directly linked to a PHAs success.

HIRING AND SELECTION

Taking the staffing needs into consideration, it is possible to understand who the PHA needs to hire, and for what job.

Job description requirements, knowledge, skills, and abilities needed to do the job, and the job attributes should all be considered in obtaining the best person to fill the job.

The hiring process consists of:

- An application that results in knowing whether you have workforce capability

- A testing process to determine whether the person has the workforce capabilities needed

- An interview process to build upon and assess the information gathered from the application.

Effective hiring policies include:

- Job interviews in which candidates are asked to describe specific examples of their skills

- Automated resume screening and search

- Simulations that gauge specific job-related abilities and skills

- Assessments that predict whether candidates are motivated by the aspects of a particular job or an agency's character

Be clear about the requirements of the job. Most PHAs have considerable emphasis on production, accuracy, and data entry. The prospective employee may have an expectation of high client interaction and the "contribution to society" they will make.

The first step involved in selecting personnel is identifying whom to consider. In doing this, there are essentially two choices: promote from within or recruit and select from outside the organization.

The greatest benefit of promoting or hiring from within your organization is that you can observe first-hand the knowledge, skills, and abilities of the potential employee.

If you cannot observe first-hand, other supervisors can provide this information to you.

The following steps will assist you:

- Identify the qualities, characteristics, and basic aptitudes you want in a potential employee (see Common Attributes for a Housing Specialist in the Master Book starting on page 2.4-8.)

- Develop interview questions that allow your applicants to demonstrate that they have the desired qualities and skills

- Review "Acceptable and Unacceptable Interview Questions" in the Master Book pages 2.4-15 to 2.4-17

- Select an interview team of preferably three people

- During the interview, take notes

- After the interview, complete a Candidate Summary Form

- Check the applicant's references and offer the job

ONBOARDING

Onboarding refers to the mechanism through which new employees acquire the necessary knowledge, skills, and abilities to become effective organizational members and insiders.

Onboarding is particularly important in the housing authority arena because of the technical, regulatory, and policy knowledge needed, as well as the strong computer and organizational skills required.

Employee security forms should be a part of the onboarding process. These include:

- Confidentiality Agreement

- Disclosure of Family Relationships

- Disclosure of Interest in Real Estate

A new hire orientation should consist of:

- Overview of the organization

- Overview of the job duties

- Overview of employee benefits

- Overview of agency personnel policies

- Tour of the facility and introduction to staff

- Review of work space and equipment

Review Sample New Hire Checklist—Master Book page 2.4-27

Review Sample New Hire Pathway—Master Book page 2.4-29

STAFF TRAINING

The training program should be a combination of the following types of training:

- On-the-job training (OJT)

- Classroom instruction

- On-line training

- Self-study

Your work system tools should be part of the training including:

- HUD regulations pertinent to the HCV program

- The PHA's Administrative Plan (agency policy)

- HCV procedures

- HCV forms and letters

- Desk Guide

- Wiki—A web application which allows collaborative modification, such as SharePoint

Software training must be integrated into the work processes so that the staff person being trained understands how the housing rules and policies are carried out through the software.

An overall HCV training plan includes other components as well, including:

- Quality control process training

- Quality control results training

- Mini-training on common errors

There are a variety of sources used for training in all PHAs: supervisor, staff, and vendors.

Regardless of the amount of external and internal training provided, daily one-on-one involvement by the supervisor with each staff person is the most critical part of developing high performers.

Generational Learning Preferences

Baby Boomers	Gen X	Gen Y	Gen Z
• Traditional classroom-style structured learning • Share their knowledge and expertise. • May need support with digital learning tools.	• Flexibility (self-paced online learning) • Open to traditional and digital learning • Practical skills learning	• Collaborative, technology-based learning • Continuous learning opportunities with career progression. • Feedback and recognition of achievements.	• On-demand, bite-sized learning accessed from multiple devices. • Personalized learning content and pace. • Experiential and interactive learning methods

Book recommendation:

- Supervisory Management, by Donald C. Mosely

Section 3: Performance Management

The overall goal of performance management is to ensure that the organization and all of its subsystems (processes, departments, teams, employees, etc.) are aligned in an optimal fashion to achieve the results desired by the organization.

Achieving the overall goal of performance management requires several ongoing activities including:

- Identification and prioritization of desired results

- Establishing a means to measure progress toward the results

- Setting standards for assessing how well results are being achieved

- Tracking and measuring progress toward results

- Exchanging ongoing feedback among those participants working to achieve results, periodically reviewing progress

- Reinforcing activities that achieve results

- Intervening to improve progress where needed

PERFORMANCE STANDARDS

Performance standards set expectations.

- Employees need to know what is expected of them.

- With clear expectations, you and employees can measure performance objectively.

- With continued feedback, you and the employee will have fewer surprises.

Performance standards should be set for the job duties in the description of the position.

Performance standards for a housing specialist or caseworker, for example, primarily relate to the production and accuracy requirements stated in the Caseload and Accuracy Plan.

The manager's role is to establish clear expectations, measure and analyze performance, and provide effective supervision.

KEY PERFORMANCE INDICATORS

A **Key Performance Indicator (KPI)** is a measurable value that indicates how effectively an individual, team, or organization achieves specific objectives. KPIs are used to track progress toward strategic goals, provide insights into performance, and identify areas for improvement.

Definition

- **Key**: Focuses on the most critical aspects of performance.

- **Performance**: Relates to activities that contribute to achieving goals.

- **Indicator**: Provides a measurable value to assess success.

Use

KPIs are used to:

1. **Monitor Progress**: Track performance over time to ensure goals are being met.

2. **Align Efforts**: Ensure that individual, departmental, and organizational activities are in sync with strategic objectives.

3. **Identify Gaps**: Highlight areas where performance is lagging, enabling timely corrective actions.

4. **Motivate Teams**: Provide clear benchmarks for success, fostering accountability and focus.

Example KPI: Measuring Monthly Recertifications Completion

KPI Name: **Monthly Recertification Completion Rate**

Definition: This KPI measures the percentage of assigned recertifications a staff member completes within the designated month's timeframe.

KPI Details

Objective: Ensure timely and accurate completion of all assigned recertifications to meet regulatory compliance and organizational goals.

- Formula:

$$\text{Completion Rate } (\%) = \left(\frac{\text{Number of Recertifications Completed on Time}}{\text{Total Assigned Recertifications}} \right) \times 100$$

Example

Total Assigned Recertifications: 20

Recertifications Completed on Time: 18

Calculation:

Calculation:

$$\left(\frac{18}{20}\right) \times 100 = 90\%$$

Target

Ideal Completion Rate: 95% or higher.

Acceptable Threshold: 90%-94% (requires monitoring).

Below Threshold: <90% (requires intervention).

Usage in Feedback

Tracking: Supervisors review the KPI monthly and provide feedback to staff members during check-ins.

Improvement Plan: If the completion rate falls below the threshold, identify barriers (e.g., workload, training gaps) and implement corrective actions.

Recognition: Highlight staff who consistently exceed the target to motivate continued high performance.

By using this KPI, the organization can ensure that recertifications are being completed promptly and consistently, contributing to compliance and operational efficiency.

PERFORMANCE INCENTIVES

Creating a motivational environment demands supervisory flexibility.

- Managing a multigenerational workforce

- Generational characteristics awareness

- Effective use of DiSC profile

- Effective use of situational leadership

Learning Activity 3-1:   Agency Innovations/Incentives

Greatest motivators—rank them:

Motivator	Rank
Good wages	
Interesting work	
Appreciation and recognition	
Being in on things	
Job security	

STAY INTERVIEWS

Manager meets with a current employee to find out why they continue to work in the organization. It is a periodic one-on-one informal discussion that:

- Identifies factors that are driving retention and engagement

- Reinforces the factors so the employee knows they are valued

Benefits

- Motivate the employee

- Personalized

- Focus on key employees – hear what they have to say – leads to problem solving

- Inexpensive

Process

- Schedule, keep informal, ask questions and listen

- Take notes for feedback and follow up

- Summarize key points

- Work together for solutions

- Build Stay Action Plan

- Close with THANK YOU and follow through!

Learning Activity 3-2:   Designing an Innovative Incentives Program

Agency Innovations/Incentives	Yes	Priority	Maybe	No
Flexible hours during day, based on team and business need				
Flexible schedules during week				
Arrive late, but make up time				
Dress code based on climate, roles, and client exposure				
Flexibility for those on maternity leave or FMLA				
Embrace family change (e.g. baby shower)				
Embrace diversity, individuality, creativity				
Encourage staff to challenge status quo without insubordination				
Promote from within - priority to internal candidates				
Bring your dog to work day				
Pajama day				
Extended lunch				
Telecommute one day a week				
Flexibility in working from home				
Teambuilding activities				
Sick leave sharing for serious illnesses				
Health insurance 100 percent paid				
Staff training in communications				
Volunteer as a team for charity event				
Food drive				
Biannual team outings				
Holiday party				
Potlucks and other celebrations				
Dress up for Halloween and other holidays				
Employee of the month				
Peak performer award of half-day off within 30-day period				
Skillbuilding webinar related to job				
Allow "cubicle" decoration for office				
Paid volunteer work for x days per year				

- Each agency should design a performance incentives plan to encourage and reward employees for performance excellence results. By placing an emphasis on performance excellence, production and accuracy will usually increase.

- Under Workforce Management on the portal.nanmckay.com website, in the Best Practices folder, review the following documents:

- Best Practices

- Employee Recognition Program

- Operational Innovations: Agency A

- Operational Innovations: Agency B

- Stay Interviews

- Teambuilding: Agency A

- Teambuilding: Agency B

Section 4:   Individual Development Plans (IDPs)

Individual Development Plans (IDPs) may also be referred to as Career Development Plans, Performance Improvement Plans, or Corrective Action Plans.

The IDP provides an opportunity for the employee to clearly understand what is expected of them and how to meet those expectations. It can be used at any point during employment, from the beginning of employment through serving as part of the performance evaluation.

Individual Development Plans (IDPs) are most often used as Corrective Action Plans to clearly define the actions and activities needed to improve performance.

Measurements and analysis in quality control establishes your leadership systems for performance measurement (see the Quality Control section in Chapter 6). After the results are measured and analyzed, if the performance results are not up to the level of the performance standards, the supervisor needs to undertake performance improvement techniques.

Performance improvement techniques could include coaching, training, policy or procedure clarification, or other methods.

If performance improvement is needed, it should be written into an IDP.

IDPs are written to close the gap between the actual performance and the desired performance.

Review the Sample Individual Development Plan in the Master Book on page 2.5-21.

Section 5:   Termination

Most agencies have a mix of good, average, and poor performers. The goal is of course to have all high performers with leadership systems in place.

High performers are both willing and able. If staff are unwilling or unable to improve their performance, it should result in termination (taking into consideration the environment of the PHA.)

For this reason, it is crucial for managers to train and mentor staff, develop performance metrics, and monitor them.

If poor performers are allowed to stay on, it causes motivational problems for the rest of the staff. The poor performer has set the standard.

Poor performers who are not terminated can cause morale to drop and cause tension between employees who perform at a higher level in the same or similar positions.

Over time, high performing employees will want to leave unless they are on a good development path. If everyone leaves, poor performers are the only employees left.

The answer is to create leadership systems, monitor to the metrics that have been set, evaluate staff, and take action where needed.

Eventually the job may be completed with fewer employees because more are high performers and the low performers are gone.

EXIT INTERVIEW

An exit interview is a meeting with a terminating employee that is generally conducted by human resources staff. The exit interview provides your organization with the opportunity to provide frank, honest feedback from the employee who is leaving your employment.

If human resources staff are not available, managers should be encouraged to conduct exit interviews. The exit interview is an integral component in your employee ending process because of the information you can obtain to improve your workplace.

Sample Exit Interview Questions

What caused you to start looking for a new job in the first place?

Why have you decided to leave the company?

Have you shared your concerns with anyone in the company prior to deciding to leave? What was the response?

Was a single event responsible for your decision to leave?

What does your new company offer that encouraged you to accept their offer and leave this company?

What do you value about the company?

What did you dislike about the company?

The quality of supervision is important to most people at work. How was your relationship with your manager?

What could your supervisor do to improve his or her management style and skills?

What are your views about management and leadership in general? In the company?

What did you like most about your job?

What did you dislike about your job? What would you change about your job?

Do you feel you had the resources and support necessary to accomplish your job? If not, what was missing?

We try to be an employee-oriented company in which employees experience positive morale and motivation. What is your experience of employee morale and motivation in the company?

Were your job responsibilities characterized correctly during the interview process and orientation?

Did you have clear goals and know what was expected of you in your job?

Did you receive adequate feedback about your performance day to day and in the performance development planning process?

Did you clearly understand and feel a part of the accomplishment of the company's mission and goals?

Describe your experience of the company's commitment to quality and customer service.

Did the management of the company care about and help you accomplish your personal and professional development and career goals?

What would you recommend to help us create a better workplace?

Do the policies and procedures of the company help to create a well-managed, consistent, and fair workplace in which expectations are clearly defined?

Describe the qualities and characteristics of the person who is most likely to succeed in this company.

What are the key qualities and skills we should seek in your replacement?

Do you have any recommendations regarding our compensation, benefits, and other reward and recognition efforts?

What would make you consider working for this company again in the future? Would you recommend the company as a good place to work to your friends and family?

Can you offer any other comments that will enable us to understand why you are leaving, how we can improve, and what we can do to become a better company?

End the exit interview meeting on a positive note. Commit to using the information provided to improve your workplace. Wish your employee success in his or her new endeavor. End the exit interview graciously.

Section 6:   DiSC Profile

DiSC is a personal assessment tool used to improve work productivity, teamwork and communication.

DiSC is non-judgmental and helps people discuss their behavioral differences.

DiSC profiles help you and your team:

- Increase self-knowledge: how you respond to conflict, what motivates you, what causes you stress and how you solve problems

- Learn how to adapt your own style to get along better with others

- Foster constructive and creative group interactions

- Facilitate better teamwork and minimize team conflict

- Manage more effectively by understanding the dispositions and priorities of employees and team members

You were sent a link to the DiSC profile to complete and were asked to print it out and bring it with you.

Your profile result showed your favored behavioral style in the workplace, which are the dot(s) above the middle space.

Every person has a predominant behavioral style, but using that style all of the time does not always yield the best results.

The DiSC profile allows us to build from our strengths and help us adapt our behavior based on the behavioral styles of others when we need to improve productivity. That is, cultivating an awareness of others' behavioral styles allows us to study situations and people, and put into practice appropriate behavioral strategies.

Diversity and Productivity

Research and studies show that the perception of differences is often the root of conflict between people.

When people solely focus on their differences, they are less productive.

When people acknowledge and work to understand differences, and establish a common working ground towards shared goals, they are more productive.

Why DiSC?

DiSC has multiple benefits, including:

- Understanding how to communicate with employees based on their behavior style for favorable acceptance of directives or requests

- Understanding employees' preferred work environment

- Understanding how each behavioral style will react to certain situations

- Understanding what to avoid when dealing with different styles

DiSC Profile Results

In the DiSC profile, there are four behavioral styles, each with its own recognizable behaviors, strengths and vulnerabilities.

Behavior styles are not "good" or "bad." All four styles are needed for the success of an organization. They include:

- D = Dominance: Shaping the environment by overcoming opposition to accomplish results, task oriented

- I = Influence: Emphasis on shaping the environment by influencing or persuading others, people-oriented

- S = Steadiness: Emphasis on cooperating and sharing responsibilities with others within existing circumstances to carry out the task

- C= Cautious/Conscientiousness: Working within existing circumstances to ensure quality and accuracy

High D

High D Behavioral Tendencies:

- High "sense of personal worth"

- Task oriented—needs results

- Motivated by directness

- Getting immediate results

- Causing action

- Accepting challenges

- Making quick decisions

- Questioning the status quo

- Assuming authority in situations

- Managing trouble

- Solving problems

- *Perceived* as having a lack of concern for others' views and feelings

High D needs others who:

- Weigh pros and cons

- Calculate risks

- Use caution

- Create a predictable environment

- Research the facts

- Recognize the needs of others

Ds:

- Goal: See results; do it NOW

- Fear: Being taken advantage of, loss of control

- Ds tend to be impatient: they don't understand why other people can't move faster; challenging

High I

High I Behavioral Tendencies:

- Optimistic

- People-oriented

- Motivated by social recognition

- Making a favorable impression

- Being articulate

- Creating a motivating environment

- Generating enthusiasm

- Entertaining people

- Viewing situations with optimism

- Participating in a group

High I needs others who:

- Concentrate on the task

- Seek facts

- Speak directly

- Respect sincerity

- Are task- instead of people-oriented

- Take a logical approach

- Demonstrate follow-through

Is:

- Goal: Being involved with people, having fun, getting people to talk to one another

- Fear: Not being liked

- May exhibit poor time management due to involvement in relationships, lack of objectivity due to concern for feelings. When faced with tasks or people, will tend to choose people.

High S

High S Behavioral Tendencies:

- Team player, family oriented

- Steady, ritualistic

- Consistent, predictable performance

- Demonstrates patience

- Motivated by established practices

- Helping others

- Showing loyalty

- Being a good listener

- Calming excited people

- Creating a stable, harmonious work environment

High S needs others who:

- React quickly to unexpected change

- Become involved in more than one thing

- Apply pressure on others

- Work comfortably in an unpredictable environment

- Help to prioritize work

- Are flexible in work procedures

Ss:

- Goal: Being involved with people, but want everyone to do their own share

- Fear: situations where no one knows what is happening, uncertainty, lack of control

- Need stability

- Tendency to be adverse to change unless involved in the process, may be perceived as too stable or too modest

High C

High C Behavioral Tendencies:

- Accurate - precision quality control person, weigh pros and cons

- Task oriented

- Motivated by adherence to standards

- Thinking analytically

- Using subtle or indirect approaches to conflict

- Checking for accuracy

- Analyzing performance critically

- Using a systematic approach to situations

- Prefers facts to emotion

High C needs others who:

- Delegate important tasks

- Make quick decisions

- Use policies only as guidelines

- Compromise with the opposition

- State unpopular positions

- Initiate and facilitate discussions

- Encourage teamwork

Cs:

- Goal: Be compliant to their own high standards; accuracy

- Fear: Unwarranted personal criticism (sometimes even warranted)

- Avoid personal, sensitive issues because Cs are wrapped up in facts. May suffer from "analysis paralysis"

DiSC Classical Patterns

General Highlights
DiSC® Classic

Interpretation Stage I *(See page 6, Guidelines for Interpretation.)*

	DESCRIPTION		ACTION PLAN	

D — DOMINANCE

Emphasis is on shaping the environment by overcoming opposition to accomplish results.

This person's tendencies include
- getting immediate results
- causing action
- accepting challenges
- making quick decisions
- questioning the status quo
- taking authority
- managing trouble
- solving problems

This person desires an environment that includes
- power and authority
- prestige and challenge
- opportunities for individual accomplishments
- a wide scope of operations
- direct answers
- opportunities for advancement
- freedom from controls and supervision
- many new and varied activities

This person needs others who
- weigh pros and cons
- calculate risks
- use caution
- create a predictable environment
- research facts
- deliberate before deciding
- recognize the needs of others

To be more effective, this person needs
- to receive difficult assignments
- to understand that they need people
- to base techniques on practical experience
- to receive an occasional shock
- to identify with a group
- to verbalize reasons for conclusions
- to be aware of existing sanctions
- to pace self and to relax more

i — INFLUENCE

Emphasis is on shaping the environment by influencing or persuading others.

This person's tendencies include
- contacting people
- making a favorable impression
- being articulate
- creating a motivating environment
- generating enthusiasm
- entertaining people
- viewing people and situations with optimism
- participating in a group

This person desires an environment that includes
- popularity, social recognition
- public recognition of ability
- freedom of expression
- group activities outside of job
- democratic relationships
- freedom from control and detail
- opportunities to verbalize proposals
- coaching and counseling
- favorable working conditions

This person needs others who
- concentrate on the task
- seek facts
- speak directly
- respect sincerity
- develop systematic approaches
- prefer to deal with things instead of people
- take a logical approach
- demonstrate individual follow-through

To be more effective, this person needs
- to control time, if **D** or **S** is low
- to make objective decisions
- to use hands-on management
- to be more realistic when appraising others
- to make priorities and deadlines
- to be more firm with others, if **D** is low

S — STEADINESS

Emphasis is on cooperating with others within existing circumstances to carry out the task.

This person's tendencies include
- performing in a consistent, predictable manner
- demonstrating patience
- developing specialized skills
- helping others
- showing loyalty
- being a good listener
- calming excited people
- creating a stable, harmonious work environment

This person desires an environment that includes
- maintenance of the status quo unless given reasons for change
- predictable routines
- credit for work accomplished
- minimal work infringement on home life
- sincere appreciation
- identification with a group
- standard operating procedures
- minimal conflict

This person needs others who
- react quickly to unexpected change
- stretch toward the challenges of accepted tasks
- become involved in more than one thing
- are self-promoting
- apply pressure on others
- work comfortably in an unpredictable environment
- help to prioritize work
- are flexible in work procedures

To be more effective, this person needs
- to be conditioned prior to change
- to validate self-worth
- to know how personal effort contributes to the group effort
- to have colleagues of similar competence and sincerity
- to know task guidelines
- to have creativity encouraged

C — CONSCIENTIOUSNESS

Emphasis is on working conscientiously within existing circumstances to ensure quality and accuracy.

This person's tendencies include
- adhering to key directives and standards
- concentrating on key details
- thinking analytically, weighing pros and cons
- being diplomatic with people
- using subtle or indirect approaches to conflict
- checking for accuracy
- analyzing performance critically
- using a systematic approach to situations or activities

This person desires an environment that includes
- clearly defined performance expectations
- values of quality and accuracy
- a reserved, business-like atmosphere
- opportunities to demonstrate expertise
- control over factors that affect their performance
- opportunities to ask "why" questions
- recognition for specific skills and accomplishments

This person needs others who
- delegate important tasks
- make quick decisions
- use policies only as guidelines
- compromise with the opposition
- state unpopular positions
- initiate and facilitate discussions
- encourage teamwork

To be more effective, this person needs
- to have time to plan carefully
- to know exact job descriptions and performance objectives
- to schedule performance appraisals
- to receive specific feedback on performance
- to respect people's personal worth as much as their accomplishments
- to develop tolerance for conflict

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Classical Profile Patterns
DiSC® Classic

Achiever Pattern

EXAMPLE
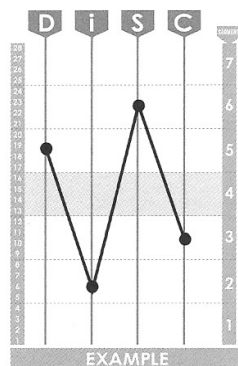
Emotions: is industrious and diligent; displays frustration

Goal: personal accomplishments, sometimes at the expense of the group's goal

Judges others by: ability to achieve concrete results

Influences others by: accountability for own work

Value to the organization: sets and completes key result areas for self

Overuses: self-reliance; absorption in the task

Under pressure: becomes frustrated and impatient; becomes more of a "do-er" and less of a "delegator"

Fears: others with competing or inferior work standards affecting results

Would increase effectiveness through: less "either-or" thinking; clearer task priorities; consideration of optional approaches; willingness to compromise short-term for long-range benefits

The motivation of Achievers is largely internal and flows from deeply felt personal goals. Their commitment to their own goals prevents them from automatically accepting the group's goals. Achievers need to see how they can blend their personal goals with the organization's goals. By retaining control over the direction of their lives, Achievers develop a strong sense of accountability.

Achievers demonstrate a keen interest in their work and an intense, continual pursuit of accomplishment. They have a high opinion of their work and may hesitate to delegate tasks when under pressure. Instead, they take on the work themselves to ensure that things are done right. When they delegate, they have a tendency to take back the task if it does not go according to their expectations. Their guiding premise is, "If I succeed, I want the credit; if I fail, I will take the blame."

An Achiever should communicate more with others to expand their thinking beyond either "I have to do it myself" or "I want all the credit." They may need help in finding new approaches for achieving their desired results. Achievers function at peak efficiency, and they expect recognition equal to their contribution — high wages in for-profit organizations and leadership positions in other groups.

Agent Pattern

EXAMPLE
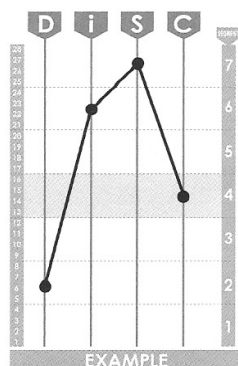
Emotions: accepts affection; rejects aggression

Goal: group acceptance

Judges others by: commitment to tolerate and include everyone

Influences others by: empathy; friendship

Value to the organization: supports, harmonizes, empathizes; focuses on service

Overuses: kindness

Under pressure: becomes persuasive, using information or key friendships if necessary

Fears: dissent; conflict

Would increase effectiveness through: strength in the realization of who they are and what they can do; firmness and self-assertion; ability to say "no" when appropriate

Agents are attentive to both the human relations and task aspects of their work situation. Empathetic and supportive, they are good listeners and known for their willing ear. Agents make people feel wanted and needed. Because Agents respond to others' needs, people do not fear being rejected by Agents. Agents offer friendship and are willing to perform services for others.

Agents have excellent potential for organizing and completing tasks effectively. Agents naturally promote harmony and teamwork and are particularly good at doing for others what they find difficult to do for themselves.

Agents fear conflict and dissent. Their supportive approach may enable others to tolerate a situation rather than encouraging them to engage in active problem-solving. In addition, the Agent's tendency to adopt a "low profile" — instead of having open confrontations with aggressive individuals — may be perceived as a lack of "toughness." Although they are concerned with fitting into the group, Agents have a fair degree of independence.

Appraiser Pattern

EXAMPLE
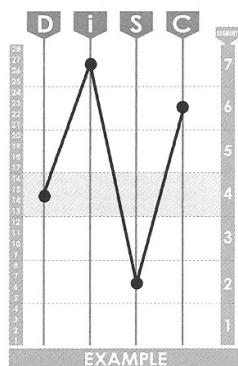
Emotions: is driven to look good

Goal: "victory" with flair

Judges others by: ability to initiate activities

Influences others by: competitive recognition

Value to the organization: accomplishes goals with the team

Overuses: authority; ingenuity

Under pressure: becomes restless, critical, impatient

Fears: "loss" or "failure"; others' disapproval

Would increase effectiveness through: individual follow-through; empathy when showing disapproval; steadier pace

Appraisers make creative ideas serve practical purposes. They use direct methods to accomplish results. Appraisers are competitive, but other people tend to view them as assertive rather than aggressive because Appraisers are considerate of others. Instead of giving orders or commands, Appraisers involve people in the task through persuasion. They elicit the cooperation of those around them by explaining the rationale for the proposed activities.

Appraisers help others to visualize the steps needed in order to accomplish results. Appraisers usually speak from a detailed plan of action that they have developed in order to ensure an orderly progression toward results. In their eagerness to win, Appraisers can become impatient when their standards are not maintained or when extensive follow-through is required.

Appraisers are good critical thinkers. They are verbal in their criticisms and their words occasionally may be caustic. Appraisers have a better control of the situation if they relax and pace themselves. A helpful axiom to achieve this is, "You win some, you lose some."

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Classical Profile Patterns
DiSC® Classic

Counselor Pattern
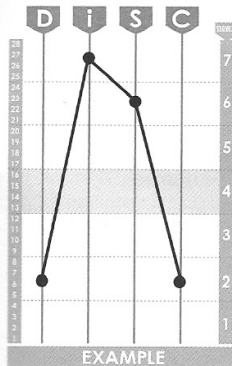
Emotions: is approachable; shows affection and understanding

Goal: friendship; happiness

Judges others by: positive acceptance of others; ability to look for the good in people

Influences others by: personal relationships; "open door" policy

Value to the organization: remains stable and predictable; develops a wide range of friendships; listens to others' feelings

Overuses: indirect approach; tolerance

Under pressure: becomes overly flexible and intimate; is too trusting without differentiating among people

Fears: pressuring people; being accused of causing harm

Would increase effectiveness through: attention to realistic deadlines; initiative to complete the task

Counselors are particularly effective at solving people's problems. They impress others with their warmth, empathy, and understanding. Their optimism makes it easy to look for the good in others. Counselors prefer to deal with others by building long-standing relationships. As a good listener with a willing ear for problems, a Counselor offers suggestions gently and refrains from imposing his or her ideas on others.

Counselors tend to be overly tolerant and patient with non-producers. Under pressure, they may have difficulty confronting performance problems. Counselors may be indirect when issuing orders, making demands, or disciplining others. By adopting the attitude that "people are important," Counselors may place less emphasis on task accomplishment. They sometimes require help in setting and meeting realistic deadlines.

Counselors often take criticism as a personal affront, but they respond well to attention and compliments for well-done assignments. When in a position of responsibility, Counselors tend to be attentive to the quality of working conditions and provide adequate recognition for members of their group.

Creative Pattern
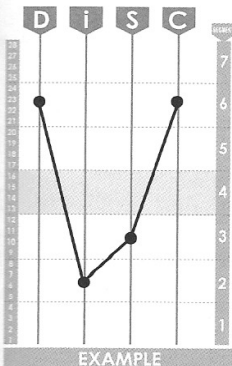
Emotions: accepts aggression; restrains expression

Goal: dominance; unique accomplishments

Judges others by: personal standards; progressive ideas for accomplishing tasks

Influences others by: ability to pace development of systems and innovative approaches

Value to the organization: initiates or designs changes

Overuses: bluntness; critical or condescending attitude

Under pressure: becomes bored with routine work; sulks when restrained; acts independently

Fears: lack of influence; failure to achieve their standards

Would increase effectiveness through: warmth; tactful communication; effective team cooperation; recognition of existing sanctions

Persons with a Creative Pattern display opposing forces in their behavior. Their desire for tangible results is counterbalanced by an equally strong drive for perfection, and their aggressiveness is tempered by sensitivity. Although they think and react quickly, they are restrained by the wish to explore all possible solutions before making a decision.

Creative persons exhibit foresight when focusing on projects, and they bring about change. Since individuals with a Creative Pattern have a drive for perfection and demonstrate considerable planning ability, the changes they make are likely to be sound, but the method they choose may lack attention to interpersonal relationships.

Creative persons want freedom to explore, and they want the authority to examine and retest findings. They can make daily decisions quickly but may be extremely cautious when making bigger decisions: "Should I accept that promotion?" "Should I move to another location?" In their drive for results and perfection, Creative persons may not be concerned about social poise. As a result, they may be cool, aloof, or blunt.

Developer Pattern
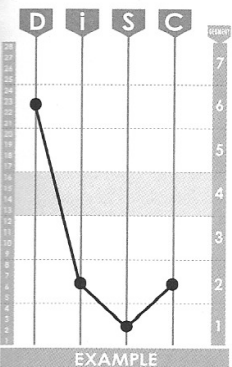
Emotions: is concerned with meeting personal needs

Goal: new opportunities

Judges others by: ability to meet the Developer's standards

Influences others by: finding solutions to problems; projecting a personal sense of power

Value to the organization: avoids "passing the buck"; seeks new or innovative problem-solving methods

Overuses: control over people and situations to accomplish his or her own results

Under pressure: works alone to complete tasks; is belligerent if individualism is threatened or challenging opportunities disappear

Fears: boredom; loss of control

Would increase effectiveness through: patience, empathy; participation and collaboration with others; follow-through and attention to quality control

Developers tend to be strong-willed individualists, continually seeking new horizons. As self-reliant, independent thinkers, they prefer to find their own solutions. Relatively free of the constraining influence of the group, Developers are able to bypass convention and often create innovative solutions.

Although they most often use direct, forceful behavior, Developers can also shrewdly manipulate people and situations. When required to participate with others in situations that limit their individualism, Developers tend to become belligerent. They are persistent when pursuing the results they desire and will do whatever is necessary to overcome obstacles to success. In addition, they have high expectations of others and can be critical when their standards are not met.

Developers are most interested in achieving their own goals. Opportunities for advancement and challenge are important to them. By focusing on results, they may lack empathy or seem uncaring by dismissing others' concerns.

(15)

Classical Profile Patterns
DiSC® Classic

Inspirational Pattern

EXAMPLE
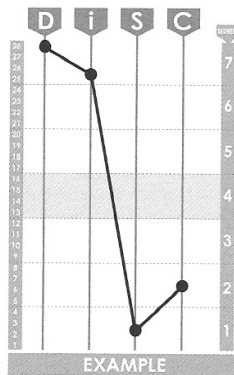
Emotions: accepts aggression; downplays need for affection

Goal: control of their environment or audience

Judges others by: projection of personal strength, character, and social power

Influences others by: charm, direction, intimidation; use of rewards

Value to the organization: acts as a "people mover"; initiates, demands, compliments, disciplines

Overuses: attitude that "the ends justify the means"

Under pressure: becomes manipulative, quarrelsome or belligerent

Fears: weak behavior; loss of social status

Would increase effectiveness through: genuine sensitivity; willingness to help others to succeed in their own personal development

Persons with the Inspirational Pattern consciously attempt to modify the thoughts and actions of others. They want to control their environment. They are astute at identifying and manipulating an individual's existing motives in order to direct that person's behavior toward a predetermined end.

Inspirational persons are clear about the results they want, but they do not always immediately verbalize them. They state the results they want only after they have primed the other person, offering friendship to those who desire acceptance, authority to those who seek power, and security to those who want a predictable environment.

Inspirational persons can be charming in their interactions. They are persuasive when they want help in repetitive and time-consuming details. People often experience a conflicting sensation by feeling drawn to Inspirational people and yet being curiously distanced. Others may feel "used" by Inspirational persons' powers of manipulation. Although they sometimes inspire fear in others and override their decisions, Inspirational persons are generally well liked by co-workers because they use their considerable verbal skills to persuade others whenever possible. Inspirational persons clearly prefer to accomplish goals through cooperation and persuasion instead of domination.

Investigator Pattern

EXAMPLE
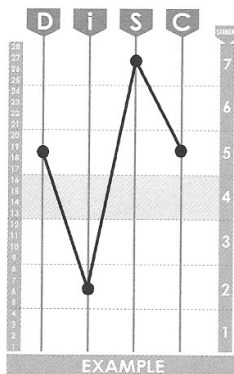
Emotions: is dispassionate; demonstrates self-discipline

Goal: power through formal roles and positions of authority

Judges others by: use of factual information

Influences others by: determination, tenacity

Value to the organization: offers comprehensive follow-through; works determinedly on tasks individually or in a small group

Overuses: bluntness; suspicion of others

Under pressure: tends to internalize conflict; holds on to grudges

Fears: involvement with the masses; responsibility to sell abstract ideas

Would increase effectiveness through: flexibility; acceptance of others; personal involvement with others

Objective and analytical, Investigators are dispassionate "anchors of reality." Generally undemonstrative, they calmly and steadily pursue an independent path toward a fixed goal. Investigators are successful at many things, not because of versatility but due to their dogged determination to follow through. They seek a clear purpose or goal from which they can develop an orderly plan and organize their actions. Once a project has begun, Investigators fight tenaciously to achieve their objectives. Intervention is sometimes needed to change their direction. As a result, they can be perceived as stubborn and opinionated.

Investigators do well with challenging technical assignments in which they can use actual data to interpret the information and draw conclusions. They respond to logic rather than emotion. When selling or marketing an idea, they are most successful with a concrete product.

Investigators are not especially interested in pleasing people, and they prefer to work alone. They can be perceived as cold, blunt, and tactless. Because they value their own thinking ability, Investigators evaluate others by how they use facts and logic. To increase their effectiveness in personal interactions, Investigators need to develop a greater understanding of other people, especially others' emotions.

Objective Thinker Pattern

EXAMPLE
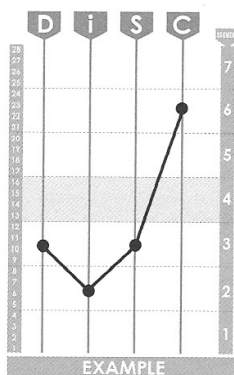
Emotions: rejects interpersonal aggression

Goal: correctness

Judges others by: ability to think logically

Influences others by: use of facts, data, and logical arguments

Value to the organization: defines and clarifies; obtains, evaluates, and tests information

Overuses: analysis

Under pressure: becomes worrisome

Fears: irrational acts; ridicule

Would increase effectiveness through: self-disclosure; public discussion of their insights and opinions

Objective Thinkers tend to have highly developed critical thinking abilities. They emphasize the importance of facts when drawing conclusions and planning actions, and they seek correctness and accuracy in everything they do. To manage their work activities effectively, Objective Thinkers often combine intuitive information with the facts they have gathered. When in doubt about a course of action, they avoid public failure by preparing meticulously. For example, Objective Thinkers will master a new skill privately before they use it in a group activity.

Objective Thinkers prefer to work with people who, like themselves, are interested in maintaining a peaceful work environment. Considered shy by some, they may be reticent in expressing their feelings. They are particularly uncomfortable with aggressive people. Despite being mild-mannered, Objective Thinkers have a strong need to control their environment. They tend to exert this control indirectly by requiring others to adhere to rules and standards.

Objective Thinkers are concerned with the "right" answer and may have trouble making decisions in ambiguous situations. With their tendency to worry, they may get bogged down in "analysis paralysis." When they make a mistake, Objective Thinkers often hesitate to acknowledge it. Instead, they immerse themselves in a search for information that supports their position.

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Classical Profile Patterns

DiSC® Classic

Overshift Pattern
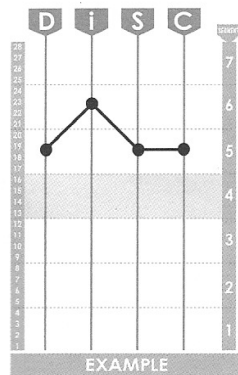
EXAMPLE

Before you go further, review your profile graph scores for the possibility of errors made when computing your responses or plotting your scores. An Overshift Pattern occurs when all four plotting points are positioned in the upper portion of the graph. This indicates that the person considers all four behavioral styles to be of equally high importance. As a result, the **shape** of the profile does not match any of the commonly occurring Classical Profile Patterns.

Classical Patterns represent combinations of high and low plotting points, whereas the Overshift Pattern has only high plotting points. When an Overshift Pattern appears in Graph III, it is recommended that one of the other two graphs be used for interpretation, but remember that Graph I or Graph II represents only half of the responses. It may be helpful to retake the profile with a clearer focus.

Perfectionist Pattern

EXAMPLE
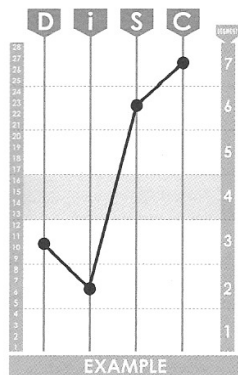
Emotions: displays competence; is restrained and cautious

Goal: stability; predictable accomplishments

Judges others by: precise standards

Influences others by: attention to detail; accuracy

Value to the organization: is conscientious; maintains standards; controls quality

Overuses: procedures and "fail-safe" controls; overdependence on people, products, and processes that have worked in past

Under pressure: becomes tactful and diplomatic

Fears: antagonism

Would increase effectiveness through: role flexibility; independence and interdependence; belief in self-worth

Perfectionists are systematic, precise thinkers and workers who follow procedure in both their personal and work lives. Extremely conscientious, they are diligent in work that requires attention to detail and accuracy. Because they desire stable conditions and predictable activities, Perfectionists are most comfortable in a clearly defined work environment. They want specifics on work expectations, time requirements, and evaluation procedures.

Perfectionists may become bogged down in the details of the decision-making process. They can make major decisions but may be criticized for the amount of time they take to gather and analyze information. Although they like to hear the opinions of their managers, Perfectionists take risks when they have facts that they can interpret and use to draw conclusions.

Perfectionists evaluate themselves and others by precise standards for achieving concrete results while adhering to standard operating procedures. This conscientious attention to standards and quality is valuable to the organization. Perfectionists may define their worth too much by what they do and not by who they are as people. As a result, they tend to react to personal compliments by thinking, "What does this person want?" By accepting sincere compliments, Perfectionists can increase their self-confidence.

Persuader Pattern

EXAMPLE
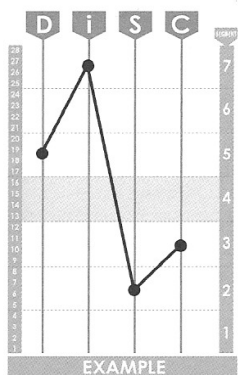
Emotions: trusts others; is enthusiastic

Goal: authority and prestige; status symbols

Judges others by: ability to express themselves; flexibility

Influences others by: friendly, open manner; verbal skills

Value to the organization: sells and closes; delegates responsibility; is poised and confident

Overuses: enthusiasm; selling ability; optimism

Under pressure: becomes indecisive and is easily persuaded; becomes organized in order to look good

Fears: fixed environment; complex relationships

Would increase effectiveness through: challenging assignments; attention to task-oriented service and key details; objective data analysis

Persuaders work with people, striving to be friendly while pushing forward their own objectives. Outgoing and interested in people, Persuaders have the ability to gain the respect and confidence of various types of people. Persuaders can impress their thoughts on others, drawing people to them and retaining them as clients or friends. This ability is particularly helpful when Persuaders sell themselves or their ideas to win positions of authority.

The most favorable environment for Persuaders includes working with people, receiving challenging assignments, and experiencing a variety of work activities that require mobility. They seek work assignments that will give them the opportunity to look good. As a result of their naturally positive outlook, Persuaders may be too optimistic about a project's results and others' potential. Persuaders also tend to overestimate their ability to change the behavior of others.

Although Persuaders desire freedom from routine and regimentation, they need to receive analytical data on a systematic basis. Once alerted to the importance of the "little things," Persuaders can use the information to balance their enthusiasm with a realistic assessment of the situation.

⑰

Classical Profile Patterns
DiSC® Classic

Practitioner Pattern

EXAMPLE
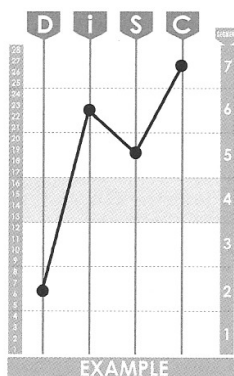
Emotions: wants to keep up with others in effort and technical performance

Goal: personal growth

Judges others by: self-discipline; position and promotions

Influences others by: confidence in their ability to master new skills; development of "proper" procedures and actions

Value to the organization: is skilled in technical and people problem-solving; displays proficiency and specialization

Overuses: overattention to personal objectives; unrealistic expectations of others

Under pressure: becomes restrained; is sensitive to criticism

Fears: being too predictable; no recognition as an "expert"

Would increase effectiveness through: genuine collaboration for common benefit; delegation of key tasks to appropriate individuals

Practitioners value proficiency in specialized areas. Spurred on by a desire to be "good at something," they carefully monitor their own work performance. Although their aim is to be "the" expert in an area, Practitioners frequently give the impression that they know something about everything. This image is particularly strong when they express their knowledge on a variety of subjects.

As Practitioners interact with others, they project a relaxed, diplomatic, and easygoing style. This congenial attitude may change quickly in their own work area when they become intensely focused in order to meet high standards for performance. Practitioners evaluate others on the basis of their self-discipline as measured by their daily performance. They have high expectations for themselves and others, and they tend to express their disappointment.

Although they naturally concentrate on developing an organized approach to work and increasing their own skills, Practitioners also need to help others to build skills. In addition, they need to increase their appreciation of those who contribute to the work effort even though they may not use the Practitioner's preferred methods.

Promoter Pattern

EXAMPLE
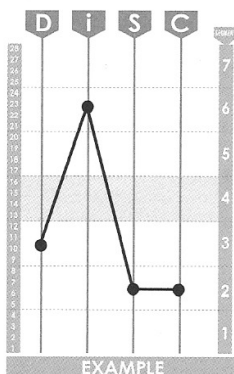
Emotions: is willing to accept others

Goal: approval, popularity

Judges others by: verbal skills

Influences others by: praise, opportunities, favors

Value to the organization: relieves tension; promotes projects and people, including him or herself

Overuses: praise, optimism

Under pressure: becomes careless and sentimental; is disorganized

Fears: loss of social acceptance and self-worth

Would increase effectiveness through: control of time; objectivity; sense of urgency; emotional control; follow-through on promises and tasks

Promoters have an extensive network of contacts. They are usually gregarious and socially adept, and they develop friendships easily. They rarely antagonize others intentionally. Promoters seek favorable social environments where they can develop and maintain their contacts. Verbally skilled, they promote their own ideas and create enthusiasm for others' projects. With their wide range of contacts, Promoters have access to the people who can help them.

Since Promoters prefer to participate and interact with others in activities, they may be less interested in task accomplishment. They may continue to seek out any situation that involves meeting people and socializing even though their job requires attention to more solitary activities. They thrive on meetings, committees, and conferences.

Usually optimistic, Promoters tend to overestimate the ability of others. They often leap to favorable conclusions without considering all the facts. Promoters will learn to be objective and emphasize results with coaching and direction. Time management may present challenges for Promoters. By setting a time limit on conversation and discussion, they can remind themselves of the urgency of "closing" and accomplishing the task.

Result-Oriented Pattern

EXAMPLE
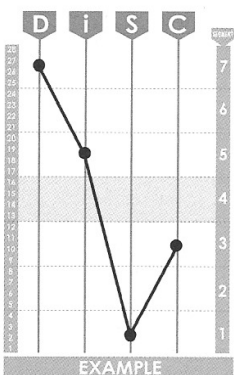
Emotions: verbalizes ego strength; displays rugged individualism

Goal: dominance and independence

Judges others by: ability to accomplish tasks quickly

Influences others by: force of character; diligence

Value to the organization: persistence; doggedness

Overuses: impatience; "win-lose" competition

Under pressure: becomes critical and fault-finding; resists participating with a team; may overstep boundaries

Fears: others will take advantage of them; slowness, especially in task activities; being a pushover

Would increase effectiveness through: explanation of their reasoning and consideration of other views and ideas about goals and solutions to problems; genuine concern for others; patience and humility

Result-Oriented people display self-confidence, which some may interpret as arrogance. They actively seek opportunities that test and develop their abilities to accomplish results. Result-Oriented persons like difficult tasks, competitive situations, unique assignments, and "important" positions. They undertake responsibilities with an air of self-importance and display self-satisfaction once they have finished.

Result-Oriented people tend to avoid constraining factors, such as direct controls, time-consuming details, and routine work. Because they are forceful and direct, they may have difficulties with others. Result-Oriented people prize their independence and may become restless when involved with group activities or committee work. Although Result-Oriented people generally prefer to work alone, they may persuade others to support their efforts, especially when completing routine activities.

Result-Oriented people are quick thinkers, and they are impatient and critical toward those who are not. They evaluate others on their ability to get results. Result-Oriented people are determined and persistent even in the face of antagonism. They take command of the situation when necessary, whether or not they are in charge. In their uncompromising drive for results, they may appear blunt and uncaring.

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6/1/25

Classical Profile Patterns

DiSC® Classic

Specialist Pattern

EXAMPLE
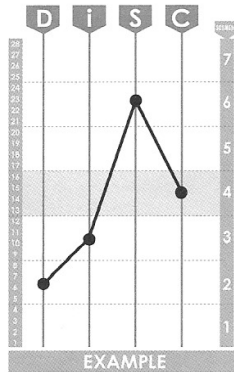
Emotions: is calculatingly moderate; accommodates others

Goal: maintenance of the status quo; controlled environment

Judges others by: friendship standards; competence

Influences others by: consistent performance; accommodating others

Value to the organization: plans short term; is predictable, consistent; maintains steady pace

Overuses: modesty; low risk-taking; passive resistance to innovation

Under pressure: becomes adaptable to those in authority and thinks with the group

Fears: change, disorganization

Would increase effectiveness through: public discussion of their ideas; self-confidence based on feedback; shortcut methods

Specialists "wear well" with others. With their controlled stance and modest manner, they are able to work well with a number of behavioral styles. Specialists are considerate, patient, and always willing to help those they consider friends. They build close relationships with a relatively small group of associates in the work environment.

Their efforts are directed toward retaining familiar and predictable patterns. Most effective in specialized areas, Specialists plan their work along directed channels and achieve a remarkably consistent performance. Appreciation from others helps to maintain that level of consistency.

Specialists are slow to adapt to change. Prior conditioning gives them time to change their procedures while maintaining a consistent level of performance. Specialists may need help to start new projects or develop shortcut methods to meet deadlines. Finished projects are often put aside for further revisions. Specialists should consider throwing away old files that have outlived their usefulness.

Tight Pattern
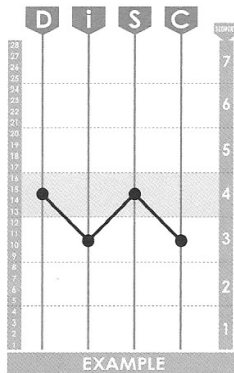
EXAMPLE

Before you go further, review your profile graph scores for the possibility of errors made when computing your responses or plotting your scores. A Tight Pattern occurs when all four plotting points are positioned in the middle area of the graph with only one segment difference between the four points. This indicates that the person considers all four behavioral styles to be of equal importance. As a result, the **shape** of the profile does not match any of the commonly occurring patterns.

Classical Profile Patterns represent combinations of high and low plotting points, whereas the Tight Pattern has plotting points only in the middle area. When a Tight Pattern appears in Graph III, it is recommended that one of the other two graphs be used for interpretation, but remember that Graph I or Graph II represents only half of the responses. It may be helpful to retake the profile with a clearer focus.

Undershift Pattern
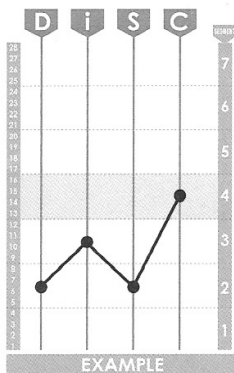
EXAMPLE

Before you go further, review your profile graph scores for the possibility of errors made when computing your responses or plotting your scores. An Undershift Pattern occurs when all four plotting points are positioned in the lower portion of the graph. This indicates that the person considers all four behavioral styles to be of equally low importance. As a result, the **shape** of the profile does not match any of the commonly occurring patterns.

Classical Patterns represent combinations of high and low plotting points, whereas the Undershift Pattern has only low plotting points. When an Undershift Pattern appears in Graph III, it is recommended that one of the other two graphs be used for interpretation, but remember that Graph I or Graph II represents only half of the responses. It may be helpful to retake the profile with a clearer focus.

Learning Activity 3-3:   Video: Introduction to the Four DiSC Styles

• Video:

_____

_____

_____

_____

_____

_____

_____

_____

_____

Why isn't a D just a D, a C just a C, etc?

• Because it depends on where the other styles are on the chart.

As we examine each style, think:

• What if I were supervising a person with this style, or...

• What if I were being supervised by a person with this style?

• Would this knowledge shape the way I related to them?

Learning Activity 3-4:   Communication Preferences

Group exercise

• Bob's QC scores and on-time completion numbers have been in a slump. How would you communicate this to him if he were a High D? High I? High S? High C?

_____

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Learning Activity 3-5:   Behavioral Tendencies in Your Workplace

• Take a few minutes to look at the Behavioral Tendencies for each style.

• Write the initials of your co-workers (your boss, the people you supervise, etc.) at the top of the column. Make a check mark under the initials for each person beside each itemized tendency for each style that you think fits the person.

• Ignore the shaded areas until you are finished.

• Then look at the number of check marks you made under each tendency heading (High D, High I, etc.). Can you clearly see which tendency each fits into?

• Now you can check the shaded area applicable to each person.

		Initials			
Enter Initials of Coworkers					
High D Behavioral Tendencies					
High "sense of personal worth"					
Task oriented—needs results					
Motivated by directness					
Getting immediate results					
Causing action					
Accepting challenging tasks					
Making quick decisions					
Questioning the status quo					
Assuming authority in situations					
Managing trouble					
Solving problems					
Total					
High I Behavioral Tendencies:					
Optimistic					
People-oriented					
Motivated by social recognition					
Making a favorable impression					
Being articulate					
Creating a motivating environment					
Generating enthusiasm					
Entertaining people					
Viewing situations with optimism					
Participating in a group					
Total					

	Initials				
Enter Initials of Coworkers					
High S Behavioral Tendencies:					
Team player, family oriented					
Steady, ritualistic					
Consistent, predictable performance					
Demonstrates patience					
Helping others					
Motivated by established practices					
Showing loyalty					
Being a good listener					
Calming excited people					
Creating a stable, harmonious work environment					
Total					
High C Behavioral Tendencies:					
Accurate – precision quality control person					
Task oriented					
Motivated by adherence to standards					
Thinking analytically					
Using subtle or indirect approaches to conflict					
Checking for accuracy					
Analyzing performance critically					
Using a systematic approach to situations					
Total					

Learning Activity 3-6:   Leadership Challenges and Growth Checklists

Leadership Challenges & Growth Checklist for High D Profiles

For a High D (Dominance) profile in the DISC personality model, the most challenging leadership skills are often empathy and emotional intelligence—specifically, the ability to slow down, actively listen, and connect with others on a deeper level.

Why is this difficult for a High D?

- **Task Over People Focus** – High D leaders are **goal-driven, competitive, and results-oriented**, often prioritizing efficiency and outcomes over personal relationships. They may struggle to take the time needed to nurture team dynamics.

- **Impatience with Process** – They thrive on **fast decision-making and action**, so they may find it frustrating when team members need more time, support, or reassurance.

- **Direct and Blunt Communication** – High-D leaders appreciate **clarity and brevity. However**, their **directness can come across as harsh** to more sensitive team members, making it harder to build trust and rapport.

- **Struggle with Delegation** – High Ds prefer to be in control and **may not trust others to execute tasks as efficiently as they would**, which can lead to micromanagement or taking on too much themselves.

- **Resistance to Vulnerability** – They often view emotions as **distractions rather than valuable leadership tools**, making it harder for them to show vulnerability, admit mistakes, or connect with their team on a human level.

Key Leadership Skills to Develop:

☐ **Active Listening** – Slowing down and truly hearing concerns without immediately pushing for solutions.

☐ **Coaching & Development** – Investing in **mentoring** and **developing** employees rather than just expecting results.

☐ **Patience with Team Members** – Understanding that **not everyone operates at their speed** and that different working styles are still effective.

☐ **Empathy & Emotional Intelligence** – Recognizing and validating team members' emotions to build stronger relationships.

☐ **Collaboration over Command** – Encouraging **team input** instead of always dictating the direction.

Personal Action Plan

Areas I Need to Improve:

_____

_____

_____

Steps I Will Take:

_____

_____

_____

Accountability & Progress Tracking:

☐ I will seek feedback from my team on my leadership approach.

☐ I will set a personal goal to practice one of these skills weekly.

☐ I will review my progress monthly and adjust my approach as needed.

Notes & Reflections

_____

_____

_____

This checklist is designed to help High D leaders refine their leadership style while maintaining their strength in decision-making and execution. Leadership growth is a continuous journey—keep challenging yourself!

Leadership Challenges & Growth Checklist for High I Profiles

For a High I (Influence) profile in the DISC personality model, the most challenging leadership skills are discipline, structure, and follow-through—specifically, maintaining focus, setting clear expectations, and ensuring accountability within their teams.

Why is this difficult for a High I?

- **Easily Distracted by New Ideas** – High I leaders are **creative, enthusiastic, and spontaneous**, sometimes leading to a lack of follow-through on long-term goals.

- **Struggles with Structure and Routine** – They thrive on **flexibility and social interaction**, which can make structured plans or rigid processes feel restrictive.

- **Avoids Conflict** – High I leaders **value relationships and positivity**, often at the expense of addressing challenging issues or holding people accountable.

- **Talks More Than Listens** – Their **natural charisma and love for conversation** can sometimes prevent them from actively listening to team members' concerns.

- **Overcommits and Overpromises** – They may take on too many projects or make commitments they struggle to fulfill because of their enthusiasm and desire to please.

Key Leadership Skills to Develop:

☐ **Time Management & Prioritization** – Learning to focus on the most critical tasks rather than being pulled in too many directions.

☐ **Accountability & Follow-Through** – Setting clear goals and ensuring both themselves and their team members stay on track.

☐ **Conflict Resolution** – Developing the courage to address issues directly and constructively.

☐ **Active Listening** – Consciously try to listen and talk less in conversations.

☐ **Strategic Decision-Making** – Evaluate the big picture before jumping into action.

Personal Action Plan

Areas I Need to Improve:

_____

_____

_____

Steps I Will Take:

_____

_____

_____

Accountability & Progress Tracking:

☐ I will create a structured plan for my key goals and stick to it.

☐ I will set deadlines and track my progress regularly.

☐ I will seek feedback on my leadership approach from trusted colleagues.

Notes & Reflections

_____

_____

_____

Leadership Challenges & Growth Checklist for High S Profiles

For a High S (Steadiness) profile in the DISC personality model, the most challenging leadership skills are often decisiveness, assertiveness, and adaptability—specifically, handling conflict, making tough decisions, and embracing change.

Why is this difficult for a High S?

- **Avoids Conflict –** High S leaders prioritize **harmony and teamwork**, often at the expense of addressing difficult conversations or making tough decisions.

- **Struggles with Change –** They thrive on **stability and consistency**, making it difficult for them to adapt to rapid changes in the workplace.

- **Overly Accommodating –** Their desire to **support others** may lead them to take on too much, say yes too often, or struggle to enforce boundaries.

- **Hesitant to Make Quick Decisions –** Because they care deeply about **fairness and group consensus**, they may delay decisions while ensuring everyone's input is considered.

- **Prefers Comfort Over Risk-Taking –** High S leaders often stick to **familiar methods** and may be reluctant to embrace new strategies or innovations.

Key Leadership Skills to Develop:

☐ **Assertiveness & Confidence –** Learning to voice opinions clearly and stand firm in decisions.

☐ **Decision-Making Under Pressure –** Developing strategies to make timely, informed decisions without excessive hesitation.

☐ **Change Management –** Embracing change as an opportunity for growth rather than a disruption.

☐ **Setting & Enforcing Boundaries –** Ensuring that being supportive does not come at the cost of personal well-being or productivity.

☐ **Handling Difficult Conversations –** Gaining the skills to address conflicts directly and constructively rather than avoiding them.

Personal Action Plan

Areas I Need to Improve:

_____

_____

_____

Steps I Will Take:

_____

_____

_____

Accountability & Progress Tracking:

☐ I will practice making small, quick decisions to build confidence.

☐ I will seek out opportunities to address minor conflicts constructively.

☐ I will remind myself that change can be positive and necessary for growth.

Notes & Reflections

_____

_____

_____

This checklist is designed to help High S leaders balance their natural steadiness with assertiveness and adaptability, leading to more effective leadership. Leadership growth is a continuous journey—keep striving!

Leadership Challenges & Growth Checklist for High C Profiles

For a High C (Conscientiousness) profile in the DISC personality model, the most challenging leadership skills are flexibility, delegation, and interpersonal engagement—specifically, adapting to change, trusting others with tasks, and balancing logic with emotional intelligence.

Why is this difficult for a High C?

- **Perfectionism & Over-Critical Nature** – High C leaders **hold themselves and others to high standards**, which can lead to over-analysis and difficulty in accepting imperfection.

- **Struggles with Delegation** – Their **desire for accuracy and control** can make it difficult to trust others with important tasks.

- **Rigid Thinking & Resistance to Change** – They **prefer established systems and thorough planning**, challenging adaptability to sudden shifts.

- **Limited Emotional Engagement** – They may struggle emotionally connecting with their team members because they focus on logic and facts.

- **Slow Decision-Making** – Their **tendency to gather extensive data** before making decisions can result in delays and missed opportunities.

Key Leadership Skills to Develop:

☐ **Adaptability & Open-Mindedness** – Practicing flexibility when plans change or new ideas emerge.

☐ **Delegation & Trust** – Learning to empower team members by distributing tasks effectively and trusting in their capabilities.

☐ **Balancing Analysis with Action** – Recognizing when to move forward without over-analyzing every detail.

☐ **Emotional Intelligence & Team Engagement** – Connecting with team members personally, beyond just tasks and results.

☐ **Efficient Decision-Making** – Setting clear time limits for research and analysis before deciding.

Personal Action Plan

Areas I Need to Improve:

_____

_____

_____

Steps I Will Take:

_____

_____

_____

Accountability & Progress Tracking:

☐ I will actively seek feedback on my adaptability and delegation skills.

☐ I will set deadlines for decision-making to prevent over-analysis.

☐ I will prioritize building relationships with my team members.

Notes & Reflections

_____

_____

_____

This checklist is designed to help High C leaders balance their precision and analytical skills with adaptability and interpersonal connection, leading to more effective leadership. Growth is a continuous process—keep evolving!

Section 7: Team Building (Patrick Lencioni)

INTRODUCTION

Teamwork is almost always present within those agencies/ programs/teams that succeed.

Teamwork is almost always lacking within organizations that fail.

So why do we focus most of our time on finance, strategy, technology, and other topics?

- Because it's hard to achieve and measure

When people come together and set aside their needs for the good of the whole, politics and confusion are eliminated and they get more done in less time and with lower costs.

Page 3-45

Learning Activity 3-7:   Your Teams

• List the members of your executive team.

_____

_____

_____

• List the members of other teams within your agency, dividing them by team.

_____

_____

_____

_____

_____

• Which are the most effective teams?

_____

_____

_____

• What makes them effective?

_____

_____

_____

_____

• What do you think makes a team ineffective?

_____

_____

_____

• Are all of them really a team?

_____

_____

Learning Activity 3-8:   Team Analysis

Instructions: Select a team to evaluate, preferably the executive team. Use the scale below to indicate how each statement applies to your team. It is important to evaluate the statements honestly and without over-thinking your answers.

3   Usually
2   Sometimes
1   Rarely

_____ 1. Team members are passionate and unguarded in their discussion of issues.

_____ 2. Team members call out one another's deficiencies or unproductive behavior.

_____ 3. Team members know what their peers are working on and how they contribute to the collective good of the team.

_____ 4. Team members quickly and genuinely apologize to one another when they say or do something inappropriate or possibly damaging to the team.

_____ 5. Team members willingly make sacrifices (such as budget, turf, head count) in their departments or areas of expertise for the good of the team.

_____ 6. Team members openly admit their weaknesses and mistakes.

_____ 7. Team meetings are compelling and not boring.

_____ 8. Team members leave meetings confident that their peers are completely committed to the decisions that were agreed on, even if there was initial disagreement.

_____ 9. Morale is significantly affected by the failure to achieve team goals.

_____ 10. During team meetings, the most important - and difficult - issues are put on the table to be resolved.

_____ 11. Team members are deeply concerned about the prospect of letting down their peers.

_____ 12. Team members know about one another's personal lives and are comfortable discussing them.

_____ 13. Team members end discussions with clear and specific resolutions and calls to action.

_____ 14. Team members challenge one another about their plans and approaches.

_____ 15. Team members are slow to seek credit for their own contributions, but quick to point out those of others.

Scoring

- Dysfunction 1–Trust: Statements 4 + 6 + 12   =   ____

- Dysfunction 2–Conflict: Statements 1 +7 + 10   =   ____

- Dysfunction 3–Commitment: Statements 3 + 8 + 13   =   ____

- Dysfunction 4–Accountability: Statements 2 + 11 + 14   =   ____

- Dysfunction 5–Results: Statements 5 + 9 + 15   =   ____

- 8+ – probably not a problem for team

- 6 or 7 – dysfunction could be a problem

- 3-5 – dysfunction needs to be addressed

Five Dysfunctions of a Team

Dysfunction #1: Absence of Trust: Members trust one another, and they are comfortable being vulnerable with each other about their weaknesses, mistakes, fears, and behaviors. This is essential because. . .

Dysfunction #2: Fear of Conflict: Teams that trust one another are not afraid to engage in passionate dialogue around issues and decisions that are key to the organization's success. They do not hesitate to disagree with, challenge and question one another; all in the spirit of finding the best answers, discovering the truth, and making great decisions. This is important because. . .

Dysfunction #3: Lack of Commitment: Teams that engage in unfiltered conflict are able to achieve genuine buy-in around important decisions, even when various members of the team initially disagree. That's because they ensure that all opinions and ideas are put on the table and considered, giving confidence to team members that no stone has been left unturned. This is critical because . . .

Dysfunction #4: Avoidance of Accountability: Teams that commit to decisions and standards of performance do not hesitate to hold one another accountable for adhering to those decisions and standards. What is more, they don't rely on the team leader as the primary source of accountability; they go directly to their peers. This matters because . . .

Dysfunction #5: Inattention to Results: Teams that trust one another, engage in conflict, commit to decisions, and hold one another accountable are very likely to set aside their individual needs and agendas and focus almost exclusively on what is best for the team. They do not give in to the temptation to place their departments, career aspirations, or ego-driven status ahead of the collective results that define team success.

Trust

Members of teams with an absence of trust:

- Conceal their weaknesses and mistakes from one another
- Hesitate to ask for help or provide constructive feedback
- Hesitate to offer help outside their own area of responsibility
- Jump to conclusions about the intentions and aptitudes of others without attempting to clarify
- Fail to recognize and tap into one another's skills and experiences
- Waste time and energy managing their behaviors for effect
- Hold grudges
- Dread meetings and find reasons to avoid spending time together

Members of trusting teams:

- Admit weaknesses and mistakes
- Ask for help
- Accept questions and input about their areas of responsibility
- Give one another the benefit of the doubt before arriving at a negative conclusion
- Take risks in offering feedback and assistance
- Appreciate and tap into one another's skills and experiences
- Focus time and energy on important issues, not politics
- Offer and accept apologies without hesitation
- Look forward to meetings and other opportunities to work as a group

Conflict

Well-managed diverse teams outperform other teams. Different views on life help team face challenges.

Conflict can be helpful. Conflict can be managed. Conflict ignored doesn't go away.

Strategies to manage conflict include:

- Role conflict – clarify who is doing what
- Process conflicts – write procedures
- interpersonal conflicts – accept and change
- Direction conflicts – clarify team values
- Conflicts that happen around external situations – work with what can be changed.

When conflict arises:

- Be willing to listen
- Gather the facts
- Take responsibility

Conflict Continuum

Draw the continuum:
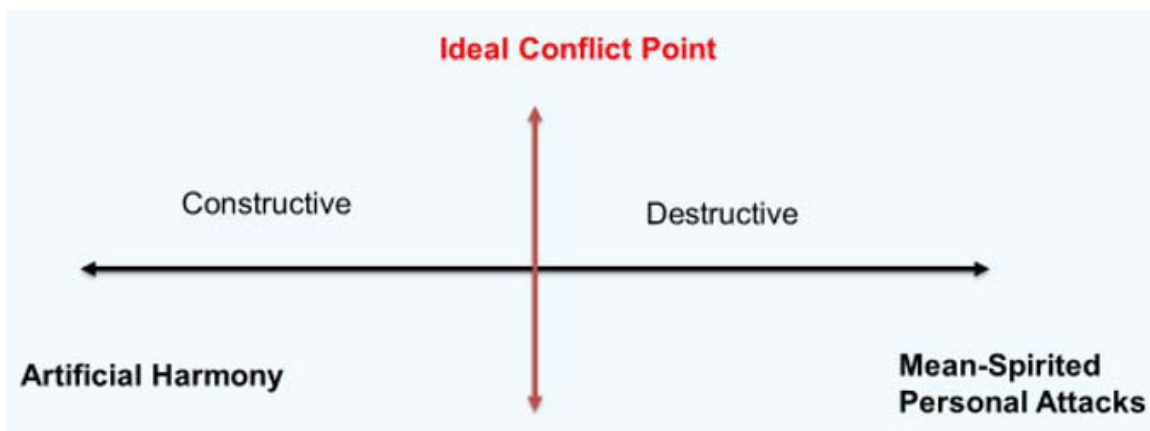
Teams that fear conflict

- Have boring meetings

- Create environments where back channel politics and personal attacks thrive

- Ignore controversial topics that are critical to team success

- Fail to tap into all the opinions and perspectives of team members

- Waste time and energy with posturing and interpersonal risk management

Teams that engage in positive conflict

- Have lively, interesting meetings

- Extract and exploit the ideas of all team members

- Solve real problems quickly

- Minimize politics

- Put critical topics on the table for discussion

Commitment

A team that fails to commit. . .

- Creates ambiguity among the team about direction and priorities

- Breeds lack of confidence and fear of failure

- Revisits discussions and decisions again and again

- Encourages second-guessing among team members

A team that commits

- Creates clarity around direction & priorities

- Aligns the entire team around common objectives

- Develops an ability to learn from mistakes

- Moves forward without hesitation

- Changes direction without hesitation or guilt

Accountability

A team that avoids accountability . . .

- Creates resentment among team members who have different standards of performance

- Encourages mediocrity and low standards

- Misses deadlines and key deliverables

- Places an undue burden on the team leader as the sole source of discipline

A team that holds one another accountable . . .

- Ensures that poor performers feel pressure to improve

- Identifies potential problems quickly by questioning one another's approaches without hesitation

- Establishes respect among team members who are held to the same high standards

- Avoids excessive bureaucracy around performance management and corrective action

Results

A team that is not focused on results . . .

- Stagnates and fails to grow

- Loses achievement-oriented employees

- Encourages team members to focus on their own careers and individual goals

- Is easily distracted

A team that focuses on collective results…

- Retains achievement-oriented employees

- Minimizes individualistic behavior

- Enjoys success and suffers failure acutely

- Benefits from individuals who subjugate their own goals and interests for the good of the team

- Avoids distractions

Conclusion: Five Dysfunctions of a Team

The true measure of a team is that it accomplishes the results that it sets out to achieve.

To do this on a consistent, ongoing basis, a team must overcome the five dysfunctions by embodying the behaviors described for each one.

The Ideal Team Player
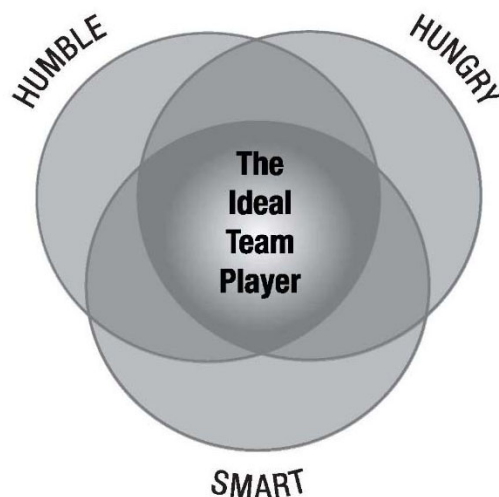
Humble

Ideal team players are humble. They lack excessive ego or concerns about status. Humble people are quick to point out the contributions of others and slow to seek attention for their own. They share credit, emphasize team over self and define success collectively rather than individually.

Hungry

Ideal team players are hungry. They are always looking for more. More things to do. More to learn. More responsibility to take on. Hungry people almost never have to be pushed by a manager to work harder because they are self-motivated and diligent. They are constantly thinking about the next step and the next opportunity.

Smart

Ideal team players are smart. They have common sense about people. Smart people tend to know what is happening in a group situation and how to deal with others in the most effective way. They have good judgment and intuition around the subtleties of group dynamics and the impact of their words and actions.
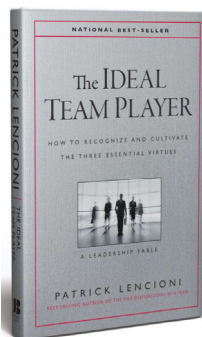
SELF-ASSESSMENT

Instructions: Take this assessment to evaluate yourself relative to the three virtues of an ideal team player. Respond as honestly as possible, as this will allow you to most accurately identify any areas of development that you may have.

Use the scale below to indicate how each statement applies to how you think your teammates may see you and your actions on the team. Choose the rating response number that best applies to each statement and record it in the box to the right of the statement. Then total your scores for each of the three virtues.

Rating Scale: 3 = Usually   2 = Sometimes   1 = Rarely
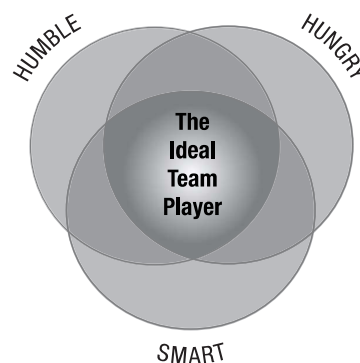
Name _____	Score

HUMBLE MY TEAMMATES WOULD SAY:		
	1. I compliment or praise them without hesitation.	
	2. I easily admit to my mistakes.	
	3. I am willing to take on lower-level work for the good of the team.	
	4. I gladly share credit for team accomplishments.	
	5. I readily acknowledge my weaknesses.	
	6. I offer and accept apologies graciously.	
	TOTAL HUMILITY SCORE	

HUNGRY MY TEAMMATES WOULD SAY:		
	7. I do more than what is required in my own job.	
	8. I have passion for the "mission" of the team.	
	9. I feel a sense of personal responsibility for the overall success of the team.	
	10. I am willing to contribute to and think about work outside of office hours.	
	11. I am willing to take on tedious or challenging tasks whenever necessary.	
	12. I look for opportunities to contribute outside of my area of responsibility.	
	TOTAL HUNGER SCORE	

SMART MY TEAMMATES WOULD SAY:		
	13. I generally understand what others are feeling during meetings and conversations.	
	14. I show empathy to others on the team.	
	15. I demonstrate an interest in the lives of my teammates.	
	16. I am an attentive listener.	
	17. I am aware of how my words and actions impact others on the team.	
	18. I adjust my behavior and style to fit the nature of a conversation or relationship.	
	TOTAL SMART SCORE	

SCORING

Remember, the purpose of this tool is to help you explore and assess how you embody the three virtues of an ideal team player. The standards for "ideal" are high. An ideal team player will have few of these statements answered with anything lower than a '3' (usually) response.

A total score of 18 or 17 (in any virtue) is an indication that the virtue is a potential strength.

A total score of 16 to 14 (in any virtue) is an indication that you most likely have some work to do around that virtue to become an ideal team player.

A total score of 13 or lower (in any virtue) is an indication that you need improvement around that virtue to become an ideal team player.

Finally, keep in mind that while this tool is quantitative, the real value will be found in the qualitative, developmental conversations among team-members and their managers. Don't focus on the numbers, but rather the concepts and the individual statements where you may have scored low.

TEAM BUILDING EXERCISE AT HOME

Reexams

- Form groups of three or four members (or ask participants to choose team members)

- Ask team what causes extra controllable time in their work day (e.g. correcting errors)

- What could the team do to reduce errors?

- What incentives might the team members receive if errors were reduced by a certain percentage?

RECOMMENDATIONS

Books to read:

- The Five Dysfunctions of a Team

- Overcoming the Five Dysfunctions of a Team

- The Ideal Team Player

Website: www.tablegroup.co

- Free assessments to take

YouTube:

- Search for Patrick Lencioni

Section 7: Team Building (Patrick Lencioni)

Notes

Chapter 4   Basic Financial Management and Program Utilization

Section 1: Introduction

LEARNING OUTCOMES

Upon completion of this chapter, you should be able to:

- Read, interpret, and apply the ACC and the Funding Exhibit from HUD

- Describe and explain HUD's funding methodology

- Implement the set-up and tracking of funding and fees

- Utilize monitoring tools such as VMS and the HUD forecasting tool

- Take the necessary steps in order to maintain financial stability

INTRODUCTION

HCV managers need an understanding of:

- How the program is financed

- Funding and leasing utilization requirements

- How to use tools to track, monitor and forecast lease-up and funding dollars

- How to maximize reduced admin fees

Page 4-1

Section 2: Annual Contributions Contract

ACC or CACC is the primary contract between the PHA and HUD.

- For reference review the ACC documents in the Master Book on pages 4.2-3 through 4.2-6.

The ACC contains the following parts:

- Contract document (HUD-52520)
  - This specified the PHA's obligations
- Funding exhibit
  - This lists the increments and their associated funding

Under the terms of the ACC, HUD makes payments for the operation of the voucher program.

The funding cycle takes place on a calendar year basis (Jan-Dec), and HUD will pay the PHA:

- HAP
- Administrative fees

Some specific requirements of the ACC include the following:

- The PHA and owners must comply with the U.S. Housing Act 1937 and all HUD regulations.
- The PHA must use funding to provide decent, safe, and sanitary housing.
- The PHA must maintain complete and accurate accounting records.
- The PHA must furnish HUD with financial information and program reports, records, statements, and documents as required.

The ACC gives HUD the ability to take possession of all or any PHA property or rights, including funds, if:

- The PHA failed to comply with ACC obligations
- The PHA failed to comply with HAP contract
- The PHA failed to enforce owner requirements
- The PHA makes any misrepresentation to HUD

ACC FUNDING EXHIBIT

The second part of the ACC is the Funding Exhibit which is an attachment to the ACC that lists the PHA's increments (number of units) and their associated funding.

Form HUD-52520A is used to incorporate any changes in the Funding Exhibit into the master ACC. No signatures are required.

- Increment = a grouping of awarded (authorized) units

- Example: Increment WI195VO0054 has 1,107 authorized units and received a total of $1,461,068 in funding over three months

Increment terms are based on available funds at the time of expiration or renewal. HUD uses an 11-digit numbering system:

- Position 1-2 = State

- Position 3-5 = PHA code

- Position 6-7 = Program type

- Position 8-11 = Increment #

Program designators are two-digit alpha codes:

- VO = housing choice voucher program

- AF (formerly VOA) = voucher admin funding

- Additional codes

- Other possible identifiers in the increment positions

For increment terms:

- Each increment has a beginning and end of term

- Terms based on available funds at expiration and renewal

- Regardless of when the term expires, the PHA will receive all funds committed for 12-month period

Calculation of Calendar Year 2024 Renewal Funding
Housing Choice Voucher Program

1	HA Number:	xxx95
2	HA Name:	xxx HOUSING AUTHORITY

CY 2024 Renewal Funding

3	CY 2024 HCV Renewal Funding after Offset and Amounts Owed HUD	$10,916,024	

CY 2024 Non-Renewal Funding

4	CY 2024 Non-Renewal Funding (TPVs, VASH, etc.) to Date	$47,694	
5	CY 2024 Estimated RAD 1 Funding For First Full Year After Conversion	$0	
6	CY 2023 Proration Increase	$1,783	
7	Total CY 2024 HCV Renewal and Non-Renewal Funding		$10,965,501

ELIGIBILITY

8	Total Unit Months Leased per VMS - CY 2023	13,268	
9	Total Unit Months Available - CY 2023	14,508	
10	Capping Percentage	100%	
11	Total CY 2023 HAP Expenses per VMS	$9,378,908	
12	Total CY 2023 Capped HAP Expenses (Line 11 x Line 10)	$9,378,908	
13	Renewal Funding Inflation Factor	1.16888	
14	Inflated Eligibility Sub-Total (Line 12 x Line 13)	$10,962,818	
15	First Time Renewals - Appendix II	$8,060	
16	Transfers In or Out	$0	
17	Total DHAP Eligibility	$0	
18	Total Renewal Eligibility (Line 14 + Line 15 + Line 16 + Line 17)	$10,970,878	
19	Proration Factor		99.500%
20	Prorated Eligibility (Line 18 x Line 19)		$10,916,024

FUNDING

21	**Total CY 2024 Renewal Funding after Offset**	$10,916,024
22	Renewal Funding Obligations, January through May 2024	$4,105,832
23	Remaining to Obligate for CY 2024 Prior to Reduction for Funds Due to HUD (Line 21 - Line 22)	$6,810,192
24	Reduction for Funds Due to HUD	$0
25	Remaining to Obligate for CY 2024 after Reduction for Funds Due to HUD (Line 23 - Line 24)	$6,810,192
26	Total Eligibility through May 2024	$4,548,343
27	Additional Obligations Due to PHA through May, 2024 (Line 26 - Line 22, if Line 26 is higher; else 0)	$442,511
28	Excess Obligations through May, 2024 (Line 22 - Line 26, if Line 22 is higher; else 0)	$0
29	CY 2024 Inflated Per Unit Cost	$806.00

This value is calculated as total inflated VMS Expenses, minus HAP Costs After the First of the Month, divided by total Unit Months Leased.

30 Comments

Terminology:

- *Annual Contributions Contract (ACC)* – Covers contractual responsibilities between the PHA and HUD that allows the PHA to administer the program

- *Budget Authority (BA)/Annual Budget Authority (ABA)* – The total dollars HUD will make available for the term of an increment

- *Contract Term* – The number of months HUD will fund an increment

- *First Day of Term* – The first day funding can begin for an increment

- *Last Day of Term* – The last day funding can be disbursed for an increment

- *Funding Increment Number* – A unique number that identifies a group of awarded units or a special allocation of funds, such as FSS coordinator funds

- *Units* – The number of units HUD made available to the PHA for an increment (called baseline, authorized, or allocated units)

- *Unit Months Available (UMA)* – Baseline units multiplied by 12

- *Unit Months Leased (UML)* – The total number of units leased through a period of 12 months

- *Voucher Management System (VMS)* – Collects PHA data on units leased, HAP expenses, and other monetary information that enables HUD to fund, obligate, and disburse funding in a timely manner, based on actual PHA use

- *Per Unit Cost (PUC)* – Average HAP cost per unit per month

- *Attrition Rate* – Average number of terminations/absorbed port outs of vouchers each month

- *Program Reserves* – Unspent HAP held by HUD. Also known as HUD-held reserves (HHR)

- *Restricted Net Position* – Unspent HAP held by the PHA

- *Unrestricted Net Position* – Unspent administrative fees held by the PHA

- *Emergency Vouchers* – EHVs are to assist individuals and families who are experiencing homelessness; at risk of experiencing homelessness; fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking; or were recently homeless and for whom providing rental assistance will prevent the family's homelessness or having high risk of housing instability. Please see Notice PIH 2021-15 for more information.

Section 3:   Key Points of HAP and Fees Funding

HAP RENEWAL FUNDING FOR THE HCV PROGRAM

Voucher renewal funding for each year is based on HAP expenses (leasing and cost data) as validated in VMS for the prior calendar year.

Congress appropriates the funding. HUD Headquarters allocates the funding to PHAs on a calendar year basis.

HAP Renewal Funding Formula
Re-benchmarking

Total HAP Costs From VMS (for prior CY)

− | Cost of Over-leasing |

+ | First Time Renewal Vouchers |

= | Total HAP Costs Base |

Apply the Renewal Funding
Inflation Factor

Total HAP Cost Base

X

| Renewal Funding Inflation Factor |

= | Total Renewal Eligibility |

6/1/25

Apply Pro-ration Factor

Total Renewal Eligibility

X | **Pro-ration Factor** |

= | **Pro-rated CY Renewal Funding (CY Budget Authority)** |

OFFSET

The offset comes from the RNP/HHR, and HUD reduces the annual funding amount.

Reducing the annual funding requires the PHA to use their RNP/HHR.

Example: The agency was eligible for $8,225,921 of funding for the calendar year, but HUD "offset" the funding by $280,341, which changed their renewal funding to $7,945,580.

SEMAP utilization is based on final annual funding after any potential offset.

For HUD terminology, offset and reallocation have the same definition

Offset

Pro-rated CY Renewal Funding

Less | **RNP Offset (if any)** |

= | **CY HAP Obligation** |

RESERVE ACCOUNTS

HUD-Held Reserves (HHR) or Program Reserves

- 2017-06: Cash management Requirements

- Undisbursed Budget Authority

- HUD-Held Reserves can be used for leasing

RESTRICTED NET POSITION (RNP)

- Unused HAP disbursements held by the PHA

- Your success is not measured by how much you keep but rather how well you spend it.

- How much should you keep?

  - 2 to 6 percent of your monthly budget authority is a good average

  - SEMAP High Performer requires you spend 98 percent (or lease 98 percent of baseline units)

  - Enough to cover incremental increases in HAP

Hierarchy of Reserve Accounts (low to high)

- Restricted Net Position (RNP)

- HUD-Held Reserves (HHR) (Savings account)

- Set-aside Category 1-4 (Emergency Fund)

CASH MANAGEMENT

Know and maximize your available funds:

- Initial Budget Authority (renewal BA)

- New ACC Units (opt-outs, VASH, NED, etc.)

- PHA Income (fraud recoveries and FSS forfeitures)

- Set-Aside Funds (includes shortfall funding)

- Restricted Net Position (RNP)

- HUD-Held Reserves (HHR)

The more you spend, the more your BA increases.

Annual budget authority (ABA) is the amount of money the PHA can utilize throughout the calendar year.

One-twelfth of ABA doesn't automatically get disbursed by HUD to the PHA.

HUD disburses ABA as needed determined by VMS reported leasing and HAP expense.

ABA not needed for HAP in the current calendar year (CY) is moved to the HUD-held program reserve.

HUD makes disbursements of CY ABA based on the last validated month reporting in VMS. For example, HUD used October 2020 validated VMS costs to determine January through March 2021 HAP payments to ensure timely HAP payments for these months.

VMS is reported in arrears, and it takes 40-45 days to have each month validated. PHAs report their April VMS data from May 4-22. Once the reporting period closes, it takes the FMC another 7 business days to perform the initial VMS validation, then Headquarters runs a second validation for another 3-5 business days. Therefore, April validated data is ready for use during early June.

These excess amounts roll into the RNP account if not used. The PHA doesn't lose money. The PHA's CY ABA is fully obligated, but under cash management, if not needed, HUD holds it for the PHA.

Restricted Net Position will go up by any amounts HUD over-disbursed in ABA, plus 50 percent of fraud recovery.

It is not uncommon to see PHAs establish leasing plans based on HUD disbursements without considering other sources of funds. This begins increasing amounts in reserve accounts.

If reserve accounts grow too large, you may be subject to recapture, or HUD may instruct you to utilize funds by issuing vouchers or increasing payment standards.

HUD also does CY HAP reconciliation no less than twice a year and makes up any shortfall in HAP at calendar year end from the HUD-Held Program Reserve assuming there is still a balance remaining.

PHAs can access program reserves whenever necessary for eligible HAP needs. Contact the Financial Analyst at the FMC.

The PHA may not use Program Reserves to cover prior CY HAP deficits.

Causes of Shortfall

1. The number one reason for shortfall is the HCV Program Team does not speak or coordinate with the Finance Team and vice-versa! And, if they do, they are not speaking the same language.

2. The number two reason is PHA is not using HUD's two-year tool (TYT).

   - Custom tools should be compared to HUD's TYT and significant variances must be explained.

   - TYT should be updated no less than once per month.

3. Then number three reason is the PHA is not updating VMS for prior periods. TYT relies on VMS data.

4. The number four reason is poor planning, because:

   - No active or effective leasing plan

   - Aged waiting lists

   - Inaccurate data or assumptions

   - Late planning

To prevent shortfall, the HCV Program Team must coordinate and communicate with the HCV Finance Team.

The HCV Program team and Finance Team should be trained in the HUD renewal funding method and general HCV finances.

The HCV Program Team should review and validate the accuracy of VMS.

The HCV Program Team should explain variances prior to VMS submission.

Shortfall Funding Source:

- Apply for set-aside funds: Notice PIH 2022-14

    - Category 1: Prevent Terminations (Shortfall)

    - Category 2a: Unforeseen Circumstances

    - Category 2b: Portability

    - Category 3a: Project-Based Vouchers

    - Category 3b: MTW New Cohorts

    - Category 4: HUD-VASH

    - Category 5: Lower-Than-Average Leasing

    - Category 6: Disaster

    - Category 7: NLT Inspection Withheld Housing Assistance Payments

- Respond to NOFAs (VASH)

SEMAP

To earn the maximum 20 points for the Section Eight Management Assessment Program (SEMAP) Lease-up Indicator:

- The percent of units leased during the last calendar year or the percent of allocated budget authority expended during the last calendar year must be 98 percent or higher.

- To receive 15 points, at least 95 percent of units must be leased or budget authority expended during the last calendar year.

To be eligible for funding, PHAs must manage their programs in a prudent manner to enable them to serve families within their yearly allocations and voucher baselines on a calendar-year basis

PHAs must report required data to the VMS on a monthly basis. If they do not, they are subject to sanction.

Section 4: Voucher Management System (VMS)

Renewal funding is based on validated VMS leasing and cost data for the prior calendar year.

Accurate reporting drives HAP availability

- Timely corrections and VMS reconciliations are absolutely necessary!

PHAs are required to comply with reporting requirements and timelines for reporting monthly through the VMS.

- Start entering data on the 4th of the subsequent month.
- Data due in VMS by the 22nd of the subsequent month (or HUD's stated deadline).

HUD will impose a 10 percent penalty against a PHA's monthly administrative fees for failure to comply with VMS reporting requirements.

The VMS User Manual is available on HUD's web site at www.hud.gov. The VMS Manual has fields related to MTW, RAD, PBV, Emergency Vouchers, and Disaster.

VMS is used to manage critical leasing and HAP data. Data is typically entered into VMS by the finance manager but can be done so by whoever is designated by the Executive Director. The five main data entry screens in VMS are as follows:

- Voucher UML and HAP
  - Separated by voucher type (i.e. FUP, VASH, Mainstream, Homeownership, Enhanced Vouchers, Emergency Vouchers)
  - FSS Escrow Deposits
- Other Income and Expense
  - Fraud recovery
  - LBP clearance tests
  - Unpaid portable billings
  - Additional expense/comments
- Additional Expense/Comments

- Disaster UML and HAP
  - DVP, DHAP Katrina/Rita, DHAP Ike/Gustav
- PHA Contact Information

Submission Executive Summary

- VMS system has a series of cross validation checks to ensure information entered is accurate.

Executive Summary

- Reports will assist management in monitoring leasing and HAP expenses (not currently working).

The Voucher UML/HAP tab is a very critical component of the VMS submission and should be reviewed prior to the submission with the HCV Management team. This tab contains vital information on UML and HAP as well as monthly averages to be used for leasing projections and trend analysis. The headings include:

- UML
- UML Last Month
- Average UML Last 12 Months
- Average UML Year to Date
- HAP
- HAP Last Month
- Average HAP Last 12 Months
- Average HAP Year to Date

Important Fields to Track:

- UMA compared to UML
- ABA compared to HAP dollars spent
- Monthly PHA PUC compared to HUD-funded PUC

VMS Special Program Breakout

- RAD
- Litigation
- Homeownership
- MTW
- 1-Year Mainstream
- Family Unification
- Non-Elderly Disabled
- VASH
- HOPE VI
- Tenant Protection
- Enhanced Vouchers
- Emergency Vouchers
- DHAP to HCV
- PBV

Validation of Data in VMS

Once information has been submitted in VMS, it must be validated to check for data entry errors. The Validate Data function is crucial to the integrity of the data entered by the user prior to saving and submitting to the database.

VMS verifies the apparent validity of the data via a series of steps, first checking for proper format, and second, comparing the amounts that fall within "reasonable" ranges. Where possible, related fields should be compared to insure completeness and consistency against a list of business rules. Where inaccuracies are found, the system will generate error messages that must be addressed and explained.

Prior Month Corrections in VMS

It is critical that the PHA reconcile VMS data at least quarterly. PHAs should enter adjustments/revisions as they are discovered to ensure accurate data is available at all times for utilization and budget projection purposes. PHAs should not wait until the end of the year to make corrections.

HAP expenses are entered under the month for which they are applicable, regardless of the month in which they are actually paid.

HAP expenses are only entered after the payment has been made.

The Prior Month Correction process must be used to alter payments.

NMA's HCV Financial Management Class for Managers is an excellent resource for better understanding the financial side of executive management.

AUDITING THE VMS REPORT IN YOUR SOFTWARE

Common red flags:

- Family searching out of a unit coded as unit month leased

- Abatements and holds not being counted as unit month leased (should be)

- More enhanced vouchers than tenant protection vouchers (enhanced is subset of tenant protection)

Audit for accuracy in VMS reporting category (follow the money).

- Port-out are FUP—reported under FUP

- Homeownership are FUP—reported under FUP

Checks and Balances

HCV Manager should review the VMS report before accounting team submits to VMS.

Make sure you submit by the HUD deadline.

Review with prior month's VMS to identify consistencies, trends or other red flags. (Are holds and abatements part of your problem, expected lease-up materialize?)

Look for any variances in any category which are more or less than 3% percent from prior month and provide an explanation in Comments in the VMS Module

Sample VMS Streamlined Guidelines

Review this and highlight important areas for your use at the PHA.

Particularly note that the HAP expenses are included in VMS in the month they apply, not the month they are paid.

Why?

What would be an example of this?

VMS Best Practices

Establish a procedure for monthly submission.

Regularly reconcile HAP expenditures and be able to speak to any discrepancies.

Run your VMS after your mid-month check run if you have them so you capture as much information as you can.

Track the expenditures (HAP and admin expenses) by program.

VMS must be submitted monthly.

VMS requires prior month corrections.

Expenses must be reported on an accrual basis

HUD can conduct a VMS Data Integrity review at any time and will recapture funds and fees it has overpaid

Two Calendar Year Reconciliations

Prior month correction in prior calendar year.

HUD will go back one year and capture all prior year adjustments to get to $0 net variance.

• Portability billings, deceased tenants

Two year for purpose of more accurate HUD and PHA held reserves and over/under funding

HUD may not reimburse you for the prior year after renewal funding (funding availability)

NMA's HCV Financial Management Class for Managers is an excellent resource for better understanding the financial side of executive management.

Section 5: Monitoring Your Funding

One of the most important responsibilities of an HCV manager is to ensure that the HAP annual budget authority (ABA) is used to assist as many eligible participants as the funding will support, and does not exceed the number of the PHA's authorized units and funded dollars.

To maximize the annual budget authority, HCV managers must determine approximately how many units the HAP budget authority will support.

• Remember that HUD will not fund overleasing which is leasing more annual unit months than your annual baseline unit months.

Many PHAs have used excess funds to support units over their ACC authorized units; this is no longer permitted.

PHAs may lease in excess of ACC authorized units in a given month or months, but must be within ACC authorized units by calendar year end.

The yo-yo effect is caused by:

• Not monitoring your funding

• Realizing you are underleased

• Overleasing to compensate

• Finding yourself under leased or over leased

Starting the year slightly overleased is generally an acceptable practice (approximately 101 percent). However, you must know your "attrition rate" and you should never be over 100 percent in UML at the end of the calendar year.

If you get a substantial reduction of funding due to proration requirements, especially with a continuing resolution, you may not have enough money for currently leased units. For this reason, it must be monitored closely.

Failure to lease all units possible (within baseline) within the total funding amount may impact future funding and negatively affect your administrative fee earnings.

What can you do to ensure you maximize program utilization, but not exceed your annual budget renewal authority and your annual baseline units?

• Review your VMS and leasing reports monthly.

• Review PIC to ensure it matches VMS reporting.

• Compare your HUD funded PUC with your actual PHA PUC to ensure they are aligned.

• Ensure HCV managers and finance managers meet monthly to discuss funding and utilization.

TRACKING PUC AND HAP FUNDS

Tracking PUC

Your PHA's actual per unit costs (PUC) may be more or less than the PUC available under your budget authority.

Therefore, you need to compare your "funded" PUC with your "actual" PUC.

Determine the HUD-funded PUC by dividing the total renewal funding for this year by the total unit months leased in VMS for the previous calendar year

• **A unit month** = 1 unit leased for one month

• If the PHA had one unit leased all 12 months, the total unit months leased would be 12

Example: Anytown PHA

- Total HAP budget authority: $5,400,000

- ACC baseline units: 1,000

  - 1,000 x12 = 12,000 units months available

    - 1,000 units leased for 12 months

- $5,400,000 divided by 12,000 unit months equals $450.00 per unit cost (PUC) per month available for HAP

- If monthly average HAP (PUC) is equal to or less than $450.00 per month, Anytown PHA could fully lease all (1,000) authorized baseline units.

- Remember, the PHA needs to review monthly figures, including:

  - Your actual PUC vs. your HUD-funded PUC

  - Your actual number of leased units vs. your HUD-funded units from renewal funding to determine whether you need to use RNP or Program Reserves

  - Your actual HAP with the HAP spending target from renewal funding

PUC Example – One Month

- HAP costs for March $294,300

- Families leased in March   900

- Actual PUC for March $ 327

  - To arrive at the actual PUC for a month, divide the total HAP paid for a month by the actual units leased for that month

PUC Example – Multiple Months

- Total HAP Jan-Mar $879,450

- Families leased

  - January   860

  - February   905

  - March   900

  - TOTAL   2,665

- Actual PUC Jan-Mar $ 330

Tracking HAP

Not all PHAs have sufficient BA to fully utilize baseline units.

- If monthly per unit costs exceed per unit BA, your PHA cannot fully lease-up because HUD will not fund the increases for additional costs.

- Tracking monthly HAP expense is critical if your PHA's per-unit HAP expense is higher than your BA can support.

PUC is ever-changing. This is because of:

- Participants entering and leaving the program

- Annual and interim reexams

- Rent to owner increases

The number of units under lease will change from month to month, as will the number of units your actual funding will support.

For this reason, analyzing PUC only at the beginning of the year is a mistake you cannot afford to make.

The PHA should compare HAP dollars spent to the funding dollars by determining what percent of the year has elapsed and what percent of the funding was used

Impact of HAP Budget Authority on Lease-up

An underleased PHA may deliberately overlease near the end of the year in order to fully utilize annual funding, but will be overleased at the beginning of the next year.

An overleased PHA may deliberately underlease not to exceed annual funding, but if underleasing takes place at the end of the year, the PHA risks being underleased at the beginning of the next year.

MONITORING TOOLS

To maintain financial control and make fact-based decisions, you need timely and reliable information.

You must monitor:

- Monthly lease-up

- Monthly HAP expenses (including FSS escrow)

- Financial reports

- Success rates

- Lease up timeframes, etc.

MONITORING TOOL: MANAGEMENT SCORECARD

Funding Analysis Report

This report reflects HAP dollars budgeted across each month.

Funding Analysis Report Re-spread

It also reflects actual HAP spread for each month past and remaining HAP funds respread across months remaining in year.

Agency:													Year:
Enter Data into Green fields. Yellow fields autocalculate but may be overriden. Overriding Yellow fields removes formulas.	JAN	FEB	MARCH	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL
HAP													
HAP Budget Authority	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$482,130	$5,785,555
Actual HAP (inc port outs & FSS)	$475,696	$475,235	$477,211	$480,123	$480,999	$483,765	$484,501	$484,051	$483,104	$481,753	$479,998	$477,565	$5,764,001
Variance	-$6,434	-$6,895	-$4,919	-$2,007	-$1,131	$1,635	$2,371	$1,921	$974	-$377	-$2,132	-$4,565	-$21,554
Percent Variance	98.67%	98.57%	98.98%	99.58%	99.77%	100.34%	100.49%	100.40%	100.20%	99.92%	99.56%	99.05%	99.63%
YTD Variance	-$6,434	-$13,328	-$18,247	-$20,253	-$21,384	-$19,748	-$17,377	-$15,456	-$14,481	-$14,858	-$16,989	-$21,554	-$21,554
PUC													
HUD-Funded PUC	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72	$541.72
Actual HAP PUC	549.94	548.14	548.52	548.71	549.09	549.73	549.94	549.43	549.61	549.32	548.57	547.04	549.00
Variance	8.22	6.42	6.80	6.99	7.37	8.01	8.23	7.71	7.89	7.60	6.85	5.32	7.29
Percent	101.52%	101.18%	101.26%	101.29%	101.36%	101.48%	101.52%	101.42%	101.46%	101.40%	101.26%	100.98%	101.35%
UNITS													
HUD Baseline Units	890	890	890	890	890	890	890	890	890	890	890	890	10,680
Actual Leased (inc port outs)	865	867	870	875	876	880	881	881	879	877	875	873	10,499
Variance to baseline	-25	-23	-20	-15	-14	-10	-9	-9	-11	-13	-15	-17	-181
YTD Variance to baseline	-25	-48	-68	-83	-97	-107	-116	-125	-136	-149	-164	-181	-181
ADMINISTRATIVE FEES													
HUD Funded Admin Fees	$47,656	$47,761	$47,918	$48,181	$48,233	$48,443	$48,496	$48,496	$48,391	$48,286	$48,181	$48,076	$578,119
Earned Fees	$63,541	$63,681	$63,891	$64,241	$64,311	$64,591	$64,661	$64,661	$64,521	$64,381	$64,241	$64,101	$770,825
Billed Port-in Earned Fees													
Total Admin Fees Paid	$47,656	$47,761	$47,918	$48,181	$48,233	$48,443	$48,496	$48,496	$48,391	$48,286	$48,181	$48,076	$578,119
Actual Admin Costs (month)	$45,012	$44,443	$48,756	$45,213	$49,563	$47,321	$48,511	$41,255	$45,121	$45,111	$45,875	$45,222	$551,403
Variance to Paid fees	-$2,644	-$3,318	$838	-$2,968	$1,330	-$1,122	$15	-$7,241	-$3,270	-$3,175	-$2,306	-$2,854	-$26,716
Percent	-5.87%	-7.47%	1.72%	-6.56%	2.68%	-2.37%	0.03%	-17.55%	-7.25%	-7.04%	-5.03%	-6.31%	-4.85%
Cumulative Variance	-$2,644	-$5,962	-$5,124	-$8,092	-$6,763	-$7,885	-$7,870	-$15,111	-$18,381	-$21,556	-$23,862	-$26,716	-$26,716
PORTABILITY OUT													
Units	6	6	6	5	5	6	7	7	7	6	6	5	72
HAP	$4,567.00	$4,568.00	$4,765.00	$4,123.00	$4,132.00	$4,987.00	$5,757.00	$5,764.00	$5,732.00	$4,899.00	$4,678.00	$4,122.00	$58,094.00
Actual PUC port outs	$761.17	$761.33	$794.17	$824.60	$826.40	$831.17	$822.43	$823.43	$818.86	$816.50	$779.67	$824.40	$806.86
PORTABILITY IN													
Units													
HAP													
Actual PUC port ins													

Column A Admin Fees $	74.99	*Earned Fees* = Number of units under lease as of the first of the month times the HUD published Admin Fee amounts
Column B Admin Fees $	69.99	*HUD Funded Fees* = Earned Fees times the Proration Fee Factor
Fee Factor	75%	

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Review your variances—what level are they? You should be able to explain all variances over 5-10 percent, up or down, with a written narrative.

Monthly financial reports let you monitor:

- If HAPs are higher than HUD funding due to PUC or leasing
    - You have less control over PUCs than leasing

- If HAPs are higher than advances from HUD

- If admin fees will cover actual expenses

- If actual PUCs are higher than the HUD-funded PUC level
    - If so, then look at cost-cutting measures, such as reducing payment standards and subsidy standards

- RNP (HAP Reserves)
    - Use it or lose it!

- UNP (Admin Fee Reserves)
    - This should be used for unanticipated necessary expenses to avoid a deficit

Timely Portability Changes

If the PHA is administering the voucher, it must bill the initial PHA for reimbursement.

The Initial Housing Authority (IHA) will reimburse the receiving Housing Authority (RHA) for HAP and 80 percent of the IHA's admin fee (Column B rate).

Note billing deadlines in Notice PIH 2016-09.

FSS MONITORING REPORT

If the PHA has a Family Self Sufficiency (FSS) program, participants may be receiving a monthly escrow amount as part of their participation in the program.

The HCV manager should receive a monthly report on FSS escrow deposits as reported in VMS as these amount are funded from HAP.

- Remember that escrow deposits and forfeitures, depending on the size of your FSS program, may have an impact on your ABA.

- See Master Book for sample FSS Monitoring Report, Repayment Agreement Monitoring Report, and Portability Activity Monitoring Report.

OVERVIEW OF THE TWO-YEAR FORECASTING TOOL

HUD developed a spreadsheet for PHAs and HUD staff to assist in projecting HCV leasing, spending, and funding over a four year period.

The tool and a guide is now online directly from HUD's website and pre-populates data from VMS.

The tool also contains an analysis of the admin fee.

Projections of leasing and spending require four key variables:

- Success rate: Percent of vouchers resulting in lease

- Turnover rate: Participants leaving the program

- Issuance to Leasing Time: Average months

- Per Unit Cost: the Monthly HAP Expenses divided by the number of leased units

In recent years, HUD has added key features such as:

- Cash Management tab tracking disbursements and PHA and HUD Held Reserve monthly

- Year three and four projection sheets with their own funding proration options

- VASH breakout projection with funding, and VASH spending money and referral worksheet

- Waiting List calculator translating issuances planned to number of names to pull from the waiting list

- Breakout for PBV and RAD: Inventory leasing and vacancies

- Identifying amount of "excess" reserves subject to offset, which changes with differing easing scenarios created by the PHA in the tool

- For PHAs with substantial PBV and/or RAD inventory, a projection tab that breaks out tenant based, PB, and even RAD PBV to permit separate PUC and leasing scenarios

- Graphic trending of individual special purpose vouchers

- A detailed breakout of the composition of funding sources, e.g. individual new allocations

- The PUC tab has been supplemented with rent burden data, both comparative with national norms and trended, in addition to FMR trend

Boxes in **yellow** should be verified by the PHA and changed as needed.

https://www.hud.gov/program_offices/public_indian_housing/programs/hcv

- Portability Letter to PHAs, 9/15/15

Related Information
- Voucher Utilization Tools
- Voucher Management System (VMS) - User's Manual
- Hurricane recovery resources
- FR Notice on the Louisiana Disaster Waivers

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SECRETARY OF HUD   WHAT WE DO

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OFFICE OF HOUSING CHOICE VOUCHERS

TOOLS

- HCV Training Videos

This file contains links to "bite-size" training videos for the HCV Tools found on this page.

- HCV Two-Year Tool Guide

This file contains step-by-step instructions for using the Two-Year Tool.

- HCV Two-Year Projection Tool (Updated 2/19/2020)

- Tool of Tools (ToT) (Updated 2/19/2020)

This is a combination of two tools:

1) Payment Standard Tool (PST)

This tool helps a PHA determine the repercussions of potential future payment standard changes on both program costs AND participant rent burden. Additional analytical tools (e.g. overhoused analysis) are available. The instructions/guide are found within the Tool.

2) HCV Analysis Tool (HAT)

The output of the HAT is two-fold: 1) a four-page PDF with an overview of a PHA's voucher program, including PHA-to-state and PHA-to-country comparisons and 2) a "PIC Drill-Down" report that allows the user to analyze tenant-level data in PIC.

The Two-Year-Tool: TOP

PHA Name	Erie Metropolitan Housing Authority		PHA Number	OH028

ACC/Funding Information

ACC	Current Year (2019)	Year 2 (2020)	Year 3 (2021)
Beginning ACC Vouchers	1,062	1,062	1,062

Funding Components	Current Year (2019)	Year 2 (2020)	Year 3 (2021)
Initial BA Funding (net offset)	$5,033,790	$5,719,1..	$5,423,405
Offset of HAP Reserves	$307,466	$0	$0
Set Aside Funding	$0	$0	$0
New ACC Units Funding	$58,897	$0	$0
Total ABA Funding Provided	$5,152,687	$5,719,105	$5,423,405
PHA Income	$11,990	$0	$0
Total Cash-Supported Prior Year-End Reserves	$307,259	$470,810	$766,510

Funding Proration/Offset Levels

HAP	
Year 2 (2020) Rebenchm	99.0%
Year 3 (20..) Rebench..	100.0%
Year 2 (2020)% Excess Reserves Offset	25.0%
Year 3 (2021)% Excess Reserves Offset	0.0%

Administrative Fees	
Year 1 (2019)	79.0%
Year 2 (2020)	80.0%

Program Projection Variables

Access Rate	55%	Annual Turnover Rate	11.7%
			PIC EOP% as of 12/31/2019 (105 EOP $t 11.5%

Time from Issuance to HAP Effective Date (Current 2.8 months)	
% lease ..30 days	18%
% leased in 30 to 60 days	..0%
% leased in 60 to 90 days	38%
% leased in 90 to 120 days	4%
% leased in 120 to 150 days	0%

2020 "Estimated" Inflation	3%

Leasing and Spending Outcomes: Current and Following Year Projections

	2019	2020
UML % of ACC (UMA)	85.5%	89.6%
HAP Exp as % All Funds	92.2%	87.6%
HAP Exp as % of Eligibility only	102.6%	94.8%

End of Year Results

	2019	2020
Projected 12/31 Total HAP Reserves	$470,810	$766,510
HAP Reserves as % of ABA (Stat: 17.6%)	9.1%	13.4%
"Excess" Reserves Subject To Offset	$0	$537,745

End of Year 3 Results (2021)

Projected Total HAP Reserves	$1,298,013	23.9%
		Reserves % BA

HUD-Held Reconciliation Cash Sufficiency Check

HUD-established	$800,975	HUD-established

The Two Year Tool: Bottom

Total Funding

	Total Funding		
Total Funding Available	$6,071,336	$6,189,915	$6,189,915

Administrative Fees Analysis [See Detail]

	2019	2020
Admin Fees Earned (T.F. - $53,490)	$529,694	$560,920
Expense	$537,841	$560,628
Expended %	107.2%	99.9%

<= 7,200 UMLs (No Proration)	> 7,200 UMLs (No Proration)
$62.88	$58.88

OH028 has a cost per UML of $51.44 compared to its Earning/UML & Site per group of $50.61 (a difference of 1.6%) and its state peer group (of all PHAs in the state) per group of $48.78 (a difference of 5.2%).

OH028 has the most recent, official (end of fiscal year) UMP. OH028 has a projected 2019 Calendar Year-End (CYE) UMP of ($13,834) (or -37.5% of CY 2019 Earned Admin Fees) and a 2020 CYE UMP of ($155,602) (or -35.4% of CY 2020 Earned Admin Fees).

CYE HHR

	HUD-estimated Net Excess Cash	HUD-Reconciled	PHA-Held Cash 12/31/2018 (VMS)
	$106,284	$907,259	$321,119 / $322,084
HUD-Reconciled (Cash Capped)			
Lower of H17/H17 (May Override)	$907,259		
Lower of H17/H17 (May Override)	$106,284		

HUD-Reconciled Excess Cash v PHA RNP (12/31/2018)

HUD v. PHA difference: ($56,367,000) or 1.1% of Eligibility	$162,651	<--VMS EOY RNP =========== = EOY Excess

Main Table

2019	UMAs	Actual UMLs	Actual HAP	Vouchers Issued/Projected To Be Issued	Other Planned Additional Reductions	New Leasing from Issued Vouchers	Estimated Attrition	UMLs: Actual/Projected	HAP: Actual/Projected	PUC: Actual/Projected	Manual PUC Override	Cumulative % Annual Leased	Cumulative % Eligibility Expended	Monthly UML %	Monthly ABA Expended %
Jan-19	1,062	872	$453,979					872	$453,979	$521		82.1%	99.8%	82.1%	99.8%
Feb-19	1,062	879	$458,956					879	$458,956	$522		82.4%	100.3%	82.8%	100.9%
Mar-19	1,062	899	$468,245					899	$468,245	$521		83.2%	101.2%	84.7%	102.9%
Apr-19	1,062	900	$468,119					900	$468,119	$520		83.6%	101.6%	84.7%	102.9%
May-19	1,062	909	$475,411					909	$475,411	$523		84.0%	102.2%	85.6%	104.5%
Jun-19	1,062	917	$478,377					917	$478,377	$522		84.4%	102.7%	86.3%	105.1%
Jul-19	1,062	910	$468,069					910	$468,069	$514		84.6%	102.7%	85.7%	102.9%
Aug-19	1,062	918	$468,178					918	$468,178	$510		84.8%	102.7%	86.4%	102.9%
Sep-19	1,062	907	$460,663					907	$460,663	$508		84.9%	102.6%	85.4%	101.2%
Oct-19	1,062	914	$460,010					914	$460,010	$503		85.0%	102.4%	86.1%	101.1%
Nov-19	1,062	933	$471,194					933	$471,194	$505		85.2%	102.5%	87.9%	103.6%
Dec-19	1,062	934	$469,925					934	$469,925	$503		85.5%	102.6%	87.9%	103.3%
Total	12,744	10,892	$5,601,126	0		0	0.0	10,892	$5,601,126	$514		85.5%	102.6%		
2020															
Jan-20	1,062	942	$463,649					942	$463,649	$492		88.7%	97.3%	88.7%	97.3%
Feb-20	1,062	957	$453,230	56				957	$453,230	$474		89.4%	96.2%	90.1%	95.1%
Mar-20	1,062					10	-9.3	957	$453,319	$474		89.6%	95.8%	90.1%	95.1%
Apr-20	1,062					21	-9.3	963	$458,908	$474		90.0%	95.9%	91.2%	96.3%
May-20	1,062					20	-9.4	980	$463,942	$474		90.5%	96.2%	92.2%	97.3%
Jun-20	1,062					2	-9.5	972	$460,425	$474		90.7%	96.3%	91.5%	96.6%
Jul-20	1,062					0	-9.5	963	$455,943	$474		90.7%	96.2%	90.7%	95.7%
Aug-20	1,062					0	-9.4	953	$451,504	$474		90.5%	96.0%	89.8%	94.7%
Sep-20	1,062					0	-9.3	944	$447,108	$474		90.4%	95.8%	88.9%	93.8%
Oct-20	1,062					0	-9.2	935	$442,756	$474		90.1%	95.5%	88.0%	92.9%
Nov-20	1,062					0	-9.1	926	$438,445	$474		89.9%	95.2%	87.2%	92.0%
Dec-20	1,062					0	-9.0	917	$434,176	$474		89.6%	94.8%	86.3%	91.1%
Total	12,744	1,699	$498,879	96	0	53	-93.0	11,415	$5,423,405	$475		89.6%	94.8%		

FINANCIAL – Beginning Year: Cash & Investments (VMS) of $321,119 compares to RNP (VMS) of $162,651. Current: Note negative UMP of $-328,218. VMS Cash & Investments of $321,220 compares to VMS RNP plus UMP of $100,688. SPVs: Additional SPV leasing should focus on the 6 unleased VASH vouchers.

[Graphs]

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Cost per Unit Tab:

PUC Analysis

Year	Month	ACTUAL Leased Units	Actual HAP	Per Unit Cost	Monthly Change	Rolling Three Month Average
2016	J	2,723	$1,481,576	$544.10		
2016	F	2,712	$1,473,566	$543.35		
2016	M	2,632	$1,476,363	$548.65	0.98%	$545.37
2016	A	2,679	$1,487,393	$555.43	1.24%	$549.14
2016	M	2,737	$1,540,775	$562.34	1.35%	$555.67
2016	J	2,782	$1,570,367	$564.47	0.27%	$560.35
2016	J	2,857	$1,631,360	$571.00	1.16%	$566.14
2016	A	2,887	$1,671,661	$579.03	1.41%	$571.50
2016	S	2,334	$1,692,008	$576.69	-0.40%	$575.57
2016	O	2,945	$1,705,552	$579.13	0.42%	$578.29
2016	N	2,943	$1,709,588	$580.30	0.30%	$578.31
2016	D	2,927	$1,706,423	$583.00	0.36%	$581.01
2017	J	2,324	$1,718,837	$587.86	0.83%	$583.92
2017	F	2,903	$1,714,730	$585.46	0.27%	$586.77
2017	M					
2017	A					
2017	M					
2017	J					
2017	J					
2017	A					
2017	S					
2017	O					
2017	N					
2017	D					

PUC Analysis

Legend: Per Unit Cost — Rolling Three Month Average — Linear (Per Unit Cost)

Remove Abated Units from PUC Calculation
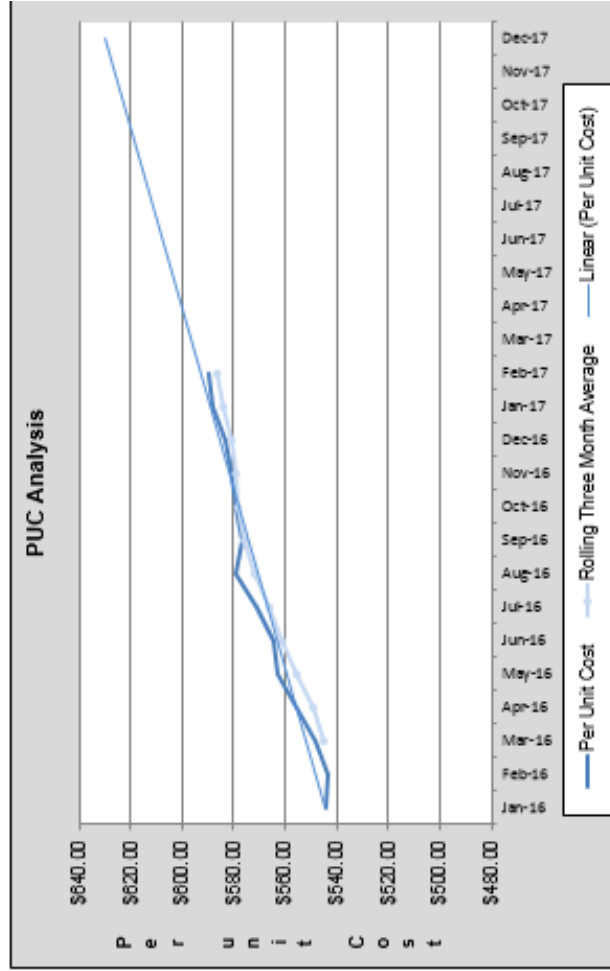
Adjust PUC Scale

Y-Axis	PUC
Min	
Max	

Tabs: Projection Analysis | Projection Analysis - Years 3&4 | IP Input & QA Check | **PUC Analysis** | VASH Projection Analysis

Additional Tools:

Cash Management:

Additional Disbursement for TX431 (Tarrant County Housing Assistance Office) – FYE 9/30 (Obligations/Disbursements As of February 15, 2017)

Housing Assistance Payments (HAP)

Category (BOM: Beginning of Month / EOM: End of Month)	PHA HELD								ESTIMATED HUD HELD			
Owner	Actual/Projected Disbursements (HUD to landlords)	Actual/Projected Expenses (PHA to landlords)	Disbursements Minus Expenditures	Fraud Recovery/ FSS Forfeitures	Calculated EOM RNP	Reported EOM RNP (VMS)	EOM RNP Difference	Actual/Projected UMLs	BOM HHR	Obligations (in HUD's systems)	Actual/Projected Disbursements (HUD to)	EOM HHR
Years	2016/2017			2016/2017					2016/2017			
January-16	$1,514,880	$1,481,576	$33,304	$4,505	$369,251	$365,708	$3,543	2,723	$1,777,307	$1,538,896	$1,514,880	$1,801,323
February-16	$1,489,958	$1,473,566	$16,392	$16,150	$401,793	$398,250	$3,543	2,712	$1,801,323	$1,497,062	$1,489,958	$1,808,427
March-16	$1,073,690	$1,476,963	($403,273)	$2,098	$618	($2,925)	$3,543	2,692	$1,808,427	$1,497,062	$1,073,690	$2,231,799
April-16	$1,480,450	$1,487,999	($7,549)	$8,000	$1,069	($2,474)	$3,543	2,679	$2,231,799	$1,524,737	$1,480,450	$2,276,086
May-16	$1,500,655	$1,540,775	($40,120)	$18,980	($20,071)	($23,614)	$3,543	2,737	$2,276,086	$1,512,923	$1,500,655	$2,288,355
June-16	$1,179,713	$1,570,367	($390,654)	$1,870	($408,855)	($412,398)	$3,543	2,782	$2,288,355	$1,523,423	$1,179,713	$2,632,065
July-16	$1,511,155	$1,631,360	($120,205)	$2,042	($527,018)	($530,561)	$3,543	2,857	$2,632,065	$1,523,423	$1,511,155	$2,644,334
August-16	$1,573,882	$1,671,661	($160,506)	$31,380	($656,144)	($662,094)	$5,950	2,887	$2,644,334	$1,523,423	$1,511,155	$2,656,602
September-16	$1,573,882	$1,692,008	($118,126)	$2,449	($771,821)	($777,771)	$5,950	2,934	$2,656,602	$1,506,840	$1,573,882	$2,606,143
October-16	$2,479,682	$1,705,552	$774,130	$2,784	$5,093	($857)	$5,950	2,945	$2,606,143	$1,506,648	$2,479,682	$1,633,302
November-16	$1,666,420	$1,709,588	($43,168)	$1,755	($36,320)	($42,270)	$5,950	2,943	$1,633,302	$1,506,648	$1,666,420	$1,473,530
December-16	$1,666,420	$1,706,429	($40,009)	$2,991	($73,338)	($79,288)	$5,950	2,927	$1,473,530	$1,506,648	$1,666,420	$1,313,758
January-17	$1,719,516	$1,718,897	$619	$8,032	($64,687)	($85,128)	$20,441	2,924	$1,313,758	$1,514,046	$1,719,516	$1,108,289
February-17	$1,719,516	$1,714,730	$4,786	$1,633	($58,268)	($78,709)	$20,441	2,909	$1,108,289	$1,514,046	$1,719,516	$902,819
March-17	*$1,748,395*	*$1,706,252*	*$42,143*	*$0*	*($16,125)*	*$0*	*($16,125)*	*2,892*	*$902,819*	*$1,514,046*	*$1,748,395*	*$668,470*
April-17	*$1,748,395*	*$1,701,525*	*$46,870*	*$0*	*$30,745*	*$0*	*$30,745*	*2,879*	*$668,470*	*$1,514,046*	*$1,748,395*	*$434,121*
May-17	*$1,748,395*	*$1,701,162*	*$47,233*	*$0*	*$77,978*	*$0*	*$77,978*	*2,874*	*$434,121*	*$10,500*	*$1,748,395*	*($1,303,773)*

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In tracking success rates, the tool helps the PHA track how many families are pulled from the list, how many are issued a voucher, and how long it takes for a family to lease up.

The tool is also designed to help a PHA determine the percentages of families who are not successful, even after being issued a voucher.

Success Rate Tab:
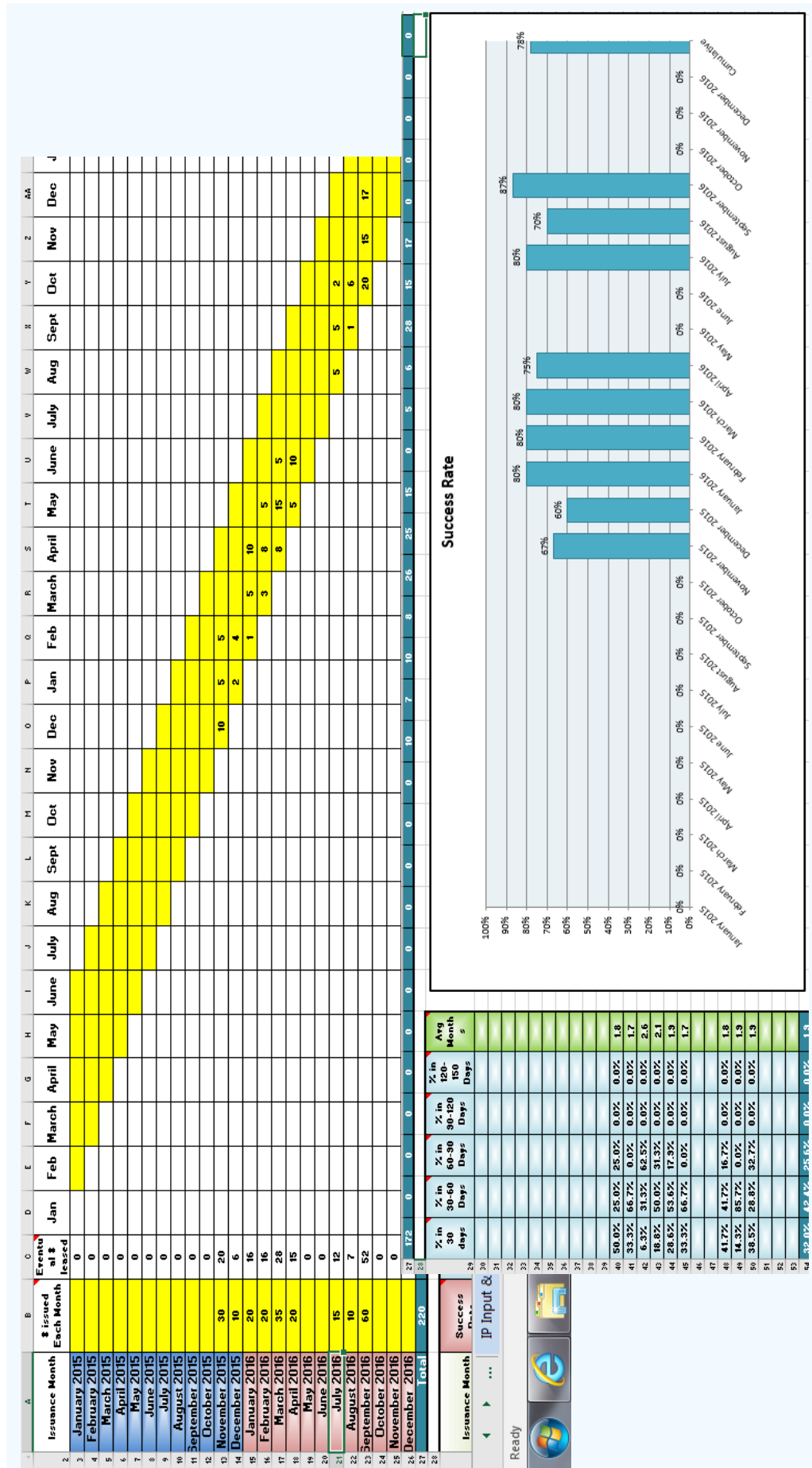
Payment Standard Tool:

Payment Standard Tool:

PST Guide

Rent Burden by Bedroom Size/PUC Change:

FMR/PS/RB Analysis – Housing Authority : CA125 VACAVILLE

Voucher Size	Efficiency	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom	5 Bedroom	6 Bedroom	7 Bedroom	8 Bedroom	9 Bedroom	10 Bedroom
Current											
FMR	$830	$1,024	$1,284	$1,871	$2,242	$2,578	$2,915	$3,251	$3,587	$3,924	$4,260
Payment Standard	$913	$1,126	$1,412	$1,965	$2,242	$2,578	$3,207	$3,576	$3,946	$4,316	$4,686
As % of FMR	110.0%	110.0%	110.0%	105.0%	100.0%	100.0%	110.0%	110.0%	110.0%	110.0%	110.0%
2017 - Year 1											
FMR	$830	$1,024	$1,284	$1,871	$2,242	$2,578	$2,915	$3,251	$3,587	$3,924	$4,260
Payment Standard	$913	$1,126	$1,412	$1,965	$2,242	$2,578	$3,207	$3,576	$3,946	$4,316	$4,686
As % of FMR	110.0%	110.0%	110.0%	105.0%	100.0%	100.0%	110.0%	110.0%	110.0%	110.0%	110.0%
2018 - Year 2											
FMR	$830	$1,024	$1,284	$1,871	$2,242	$2,578	$2,915	$3,251	$3,587	$3,924	$4,260
Payment Standard	$913	$1,126	$1,412	$1,965	$2,242	$2,578	$3,207	$3,576	$3,946	$4,316	$4,686
As % of FMR	110.0%	110.0%	110.0%	105.0%	100.0%	100.0%	110.0%	110.0%	110.0%	110.0%	110.0%

Date of PS Change: 2/1/2017
Est. Change in Annual Rent (starting in Yr. 2): 0.0%
Est. Change in Annual Utility Allowance (starting in Yr. 2): 0.0%

Quick How-To
1. Load PIC Data.
2. Input Current, Year 1, and Year 2 FMRs and PSs.
3. Input PS Change Date/annual rent/utility change.

If red, HUD has the regulatory ability to require an increase in payment standards.

Voucher Bedroom Size	Regular Total (PBVs)	~Current Rent Burden — Percent >31% rent burden: 50.6%		CYE 2017 - Year 1 — Percent >31% rent burden: 42.3%		CYE 2018 - Year 2 — Percent >31% rent burden: 30.9%		CYE 2018 - Year 3 — Percent >30% rent burden: 30.9%	
		% >= 41%	% >= 31%	% >= 41%	% >= 31%	% >= 41%	% >= 31%	% >= 41%	% >= 31%
Efficiency	1	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
1 Bedroom	712	21.2%	51.5%	17.3%	42.1%	14.2%	31.0%	14.2%	31.0%
2 Bedroom	249	30.9%	46.6%	28.9%	42.6%	20.1%	35.7%	20.1%	35.7%
3 Bedroom	84	19.0%	54.8%	16.7%	44.0%	3.6%	16.7%	3.6%	16.7%
4 Bedroom	17	11.8%	52.9%	5.9%	41.2%	5.9%	29.4%	5.9%	29.4%
5 Bedroom	2	0.0%	50.0%	0.0%	50.0%	0.0%	0.0%	0.0%	0.0%
6 Bedroom	0								
7 Bedroom	0								
8 Bedroom	0								
9 Bedroom	0								
10 Bedroom	0								

Roll-Up Summary

Category	Current	CYE - Year 1	CYE - Year 2	CYE - Year 3
Monthly HAP	$748,279	$765,692	$792,972	$792,972
End of Year Change from Prior		$17,413	$27,280	$0
End of Year Change (%)		2.3%	3.6%	0.0%

Double Click to Open the "How-To" Guide

Buttons: Load PIC Data | Tool Notes | Payment Standards via Percent | Move to Two-Year Tool | PIC Analysis | Subsidy Standard Analysis

Overall, by the end of 2018, your PUC will increase by $42.08, or about 6.1%.

PUC Change from Current

	2017	2018	2019
January	$0.00	$6.13	$0.00
February	$0.00	$7.55	$0.00
March	$0.00	$5.89	$0.00
April	$0.00	$6.14	$0.00
May	$4.29	$0.00	$0.00
June	$4.13	$0.00	$0.00
July	$3.65	$0.00	$0.00
August	$4.00	$0.00	$0.00
September	$0.05	$0.00	$0.00
October	$0.16	$0.00	$0.00
November	$0.03	$0.00	$0.00
December	$0.06	$0.00	$0.00

Subsidy Standard Analysis:

Subsidy Standard Analysis

Bedrooms	Voucher Size Count	Counts — Unit Size > Voucher Size	Counts — Unit Size <= Voucher Size	Overhoused — Current % >= 41%	Overhoused — Current % >= 31%	Overhoused — CYE 2017 Year 1 % >= 41%	Overhoused — CYE 2017 Year 1 % >= 31%	Not Overhoused Rent Burden — Current % >= 41%	Not Overhoused Rent Burden — Current % >= 31%	Not Overhoused — CYE 2017 Year 1 % >= 41%	Not Overhoused — CYE 2017 Year 1 % >= 31%	Not Overhoused — CYE 2018 Year 2 % >= 41%	Not Overhoused — CYE 2018 Year 2 % >= 31%	Not Overhoused — CYE 2018 Year 3 % >= 41%	Not Overhoused — CYE 2018 Year 3 % >= 31%
0	1	1 (100.0%)	0 (0.0%)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
1	712	304 (42.7%)	408 (57.3%)	35.9%	64.1%	31.3%	56.6%	10.3%	42.2%	6.9%	31.4%	5.1%	19.1%	5.1%	19.1%
2	249	95 (38.2%)	154 (61.8%)	57.9%	68.4%	55.8%	67.4%	14.3%	33.1%	12.3%	27.3%	3.9%	18.2%	3.9%	18.2%
3	84	17 (20.2%)	67 (79.8%)	17.6%	70.6%	17.6%	52.9%	19.4%	50.7%	16.4%	41.8%	1.5%	14.9%	1.5%	14.9%
4	17	- (-)	17 (100.0%)	-	-	-	-	11.8%	52.9%	5.9%	41.2%	5.9%	29.4%	5.9%	29.4%
5	2	- (-)	2 (100.0%)	-	-	-	-	0.0%	50.0%	0.0%	50.0%	0.0%	0.0%	0.0%	0.0%
6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

For more information on how to use the HUD Forecasting Tool for initial lease-up, attend the NMA Program Management class.

Call your NMA Account Representative and ask for a consulting session online with a personal walk-through using your own data!

ADMIN FEE FUNDING PROVISIONS FOR THE HCV PROGRAM

Congress appropriates administrative fees separately from HAP.

Administrative fees are typically prorated based on Congressional mandates. HUD may provide "Special Fees" subject to available funding:

- *Homeownership*: $200 per closing as reported in PIC

- *Multifamily Housing Conversion Actions*: $200 per unit occupied on the date of the eligibility event
  - This is a one-time fee.

- *Port-in Fees:* For receiving PHAs where port-in vouchers comprise a significant portion of their vouchers under lease (20 percent or higher) as of the end of the year, as reported in PIC. HUD automatically calculates these fees and the receiving PHA receives 12 months of funding equal to 15 percent of the PHA's Column A rate for administrative fees.

TRACKING ADMIN FEES AND UNRESTRICTED NET POSITION

The PHA is like any business-it can't continue to spend more than it receives.

If you can spot an adverse trend in time, you can reduce expenses

Administrative fee funding may only be used for activities related to the provision of HCV assistance, including related development activities such as:

- Unit modification for accessibility purposes

- Development of project-based voucher units

Administrative fees that were earned and not spent and subsequently moved into unrestricted net position (UNP) at year-end must only be used for the same purpose in the following years.

USES OF ADMINISTRATIVE FEES, NOTICE PIH 2022-18

- HUD has determined that PHAs may use ongoing administrative fee funding for the activities listed in Notice PIH 2022-18 as they qualify as "administrative and other expenses in administering the Section 8 tenant-based rental assistance program."

- Eligible uses for HCV administrative fees include the following "other eligible activities" related to leasing units and owner recruitment and retention:

  - Owner incentive and retention payments

  - Security deposit assistance

  - Utility deposit assistance and utility arrears

  - Application fees, non-refundable administrative or processing fees, refundable application deposit assistance, and broker fees

  - Holding fees (i.e., a fee that an owner requires to "hold" the unit that is rolled into the security deposit after the application is accepted but before the lease is signed)

  - Renter's insurance, if required by the lease

- The decision to use administrative fees for these other activities rests solely with the PHA. PHAs are not required to use their administrative fees for these other activities.

- In addition, PHAs are also permitted to use UNP for these expenses.

The PHA must track monthly admin fee earnings vs monthly projected earnings.

HUD doesn't require PHAs to develop or submit budgets for administrative expenses, but you must know whether the funded admin fees will cover your direct and indirect actual expenses, your fixed costs, and your variable costs.

The PHA earns administrative fees by multiplying the number of units leased on the first day of the month (verified in VMS) by the fee factor.

HUD publishes fee rates about February of each year with a Column A rate and a Column B rate.

- "A" rate applies to the first 600 units leased on the first day of the month

- "B" rate applies to all units leased in excess of 600 units leased on the first day of the month and portability

- Example:
  - A PHA leases 1000 units in January
  - Column A = $70.00 – Column B = $60.00 and HUD pro-ration = 100%
  - The PHA is paid $70.00 for first 600=$42,000.00
  - The PHA is paid $60.00 for last 400=$24,000.00
  - The PHA earns $66,000.00 in Admin Fee for January

- Example:
  - A PHA leases 960 units in February
  - Column A = $70.00 – Column B = $60.00 and HUD pro-ration = 100%
  - The PHA is paid $70.00 for first 600=$42,000.00
  - The PHA is paid $60.00 for last 360=$21,600.00
  - The PHA earns $63,600.00 in Admin Fee for February (loss of $2,400 for the month)

- Example:
    - A PHA leases 935 units in March
    - Column A = $70.00 – Column B = $60.00 and HUD pro-ration = 100%
    - The PHA is paid $70.00 for first 600=$42,000.00
    - The PHA is paid $60.00 for last 335=$20,100.00
    - The PHA earns $62,100.00 in Admin Fee for March (loss of $3,900.00 for the month)
    - The PHA can then calculate the amount of fees earned for each month.
    - However, fees may be prorated due to the amount of funding available from Congress.

In the past, HUD-funded admin fees were prorated below 100% and sometimes were amended later in the CY.

- Example:
    - Published admin fee $43.00
    - $43.00 x 74% = $31.82
    - When the funded fees were not established until later in the calendar year, fees for the entire CY had to be recalculated.

Since 2017, admin fees are advanced monthly for PBV units, and prorated based on PBVs reported in the PBV fields in VMS based on the latest admin fee quarterly reconciliation.

Learning Activity 4-1:   Budget

- Compare the expenses for March with the YTD expenses below. Assume it's March and you are assessing how your actual expenses compare with your allocated expenses on the budget. In addition, compare with the HUD funded administrative fees. What concerns would you have? Are there trends you should be concerned about? What else should you be looking at? If you were an HCV Manager, what possible actions would you take?

_____

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INCOME	Jan			Feb			March			YTD		
Bugdeted is HUD funded Admin fee	Bud	Act	Variance	Bud	Act	Variance	Bud	Act	Variance	Bud	Act	Variance
Actual is what the PHA earned	175,000	166,555	($8,445)	175,000	168,344	($6,656)	175,000	169,322	($5,678)	525,000	504,221	($20,779)
EXPENSES	Bud	Act	Variance	Bud	Act	Variance	Bud	Act	Variance	Bud	Act	Variance
Administrative Salaries	100,000	90,000	10,000	100,000	88,222	11,778	100,000	92,444	7,556	300,000	270,666	29,334
Overtime Salaries	5,000	7,000	(2,000)	5,000	6,333	(1,333)	5,000	6,243	(1,243)	15,000	19,576	(4,576)
Auditing Fees	10,000	10,000	0	10,000	10,000	0	10,000	10,000	0	30,000	30,000	0
Management Fee	15,000	14,686	314	15,000	14,686	314	15,000	14,686	314	45,000	44,058	942
Bookkeeping Fee	5,000	4599	401	5,000	4599	401	5,000	4599	401	15,000	13,797	1,203
Advertising and Marketing	1,200	1,100	100	1,200	1,100	100	1,200	1,100	100	3,600	3,300	300
Employee Benefits	21,000	20,322	678	21,000	20,666	334	21,000	20,789	211	63,000	61,777	1,223
Office Expenses	3,000	4,200	(1,200)	3,000	4,177	(1,177)	3,000	4,232	(1,232)	9,000	12,609	(3,609)
Legal Expenses	12	12		12	12		12	12		36	0	36
Service Fees	0		0	0		0	0		0	0	0	0
Other Administrive Expenses	3,000	4,300	(1,300)	3,000	4,222	(1,222)	3,000	4,231	(1,231)	9,000	12,753	(3,753)
Total Expenses	163,212	156,207	7,005	163,212	154,005	9,207	163,212	158,324	4,888	489,636	468,536	21,100
Net Cash Flow	11,788	10,348		11,788	14,339		11,788	10,998		35,364	35,685	

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UNDERSTANDING UNRESTRICTED NET POSITION (ADMIN FEE RESERVE)

Unrestricted net position refers to unused admin fees earned but not spent.

Changes in the admin fee reserve must be tracked.

HUD doesn't cap the amount the PHA can accumulate.

The PHA can use these amounts to cover future administrative fee deficits.

If the reserve is going down, you should determine whether it's because of periodic deficits or a long-term trend in deficit spending.

- Reserves are meant to be used for one-time or periodic events

- Long-term trends need to be corrected

The admin fee reserve shouldn't be used to fund long-term expenses.

Take, for example, a PHA that has $100,000 in reserves

- The PHA added an employee at $25,000

- If the PHA is running at break-even, adding this employee would cause a deficit

- Fee reserves would be gone in four years

If a PHA's earned and funded fees do not cover program costs, the PHA can use UNP to cover the costs.

Chapter 5   Operational Work Systems

Section 1: Introduction

LEARNING OUTCOMES

Upon completion of this chapter, you should be able to:

- Design, manage, and improve work systems and work processes to deliver customer value and achieve organizational success

- Write policy and procedures

- Identify and incorporate tools to improve processes

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Section 2: Work Systems and Processes

Work systems relate to how the work of your organization is accomplished. This includes:

- Communication of HUD requirements

- Quality control plans to ensure compliance

- Procedures for timely and accurate reporting

Work systems are the way an organization aligns its internal operations and workforce with its key vendors, suppliers, partners and collaborators such as:

- Veterans Administration

- Department of Child and Family Services (DCFS)

- Groups that may help us lease up our special vouchers

HUD is the main external partner for PHAs. HUD requirements demand that managers design work systems and processes that ensure HUD's reporting requirements and deadlines are met, and that HUD-required operating systems and forms are properly utilized.

- See examples in Master Book on page 5.2-1.

If we outsource activities that contribute to an agency's core service delivery and customer value chain, they should be included in its work systems.

- This could include, for example, tracking and monitoring mechanisms when contracting out inspections, reexaminations, call center, or printing services.

Work systems and process are part of an organization's leadership systems. All leadership systems contribute to sustainability in PHA operations and ensure the work and organizational relationships will have continuity, regardless of who the senior leaders may be.

Work systems coordinate the internal work processes and the external resources necessary for the PHA to develop, produce and deliver services to its customers so that they succeed in the industry.

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Work processes are a subset of our overall work system. The term *process* refers to linked or coordinated activities with the purpose of producing a result (or service) for an internal or external **customer**. Generally, processes involve combinations of people, machines, tools, techniques or materials, in a defined series of steps or actions.

Major parts of a PHA's work systems would include:

- HUD regulations and HUD-required policies

- Computer software used by the agency

- Forms and letters

Section 3: Administrative Plan Policy Direction

ADMINISTRATIVE PLAN REQUIRED CONTENT

All agencies that operate an HCV program must adopt an administrative plan. The purpose of the administrative plan is to establish policies for carrying out the programs in a manner consistent with HUD requirements and local goals and objectives contained in the PHA's agency plan. The Administrative Plan must be approved by the Board of Commissioners and is a required attachment to the PHA 5-Year Plan

The PHA plan contains the PHA's definition of *significant amendment*. If is it considered a significant amendment, additional steps apply.

Forty-five days before the Board meeting, the PHA must:

- Make it available for public viewing at PHA office

- Publish a notice informing that it is available for review (recommend posting on PHA's site)

- Invite comments

The Board meeting must be public and consider comments.

Mandatory requirements for the HVC program are found in:

- Statutes

- HUD regulations

  - HCV regulations are found principally in 24 CFR Parts 5, 982 and 985

- Current PIH notices

- Forms required by HUD regulations (e.g., HUD-50058)

- Opinions or rulings by the Office of General Counsel (OGC)

- The required contents of the administrative plan are described in 24 CFR 982.54 and in the Master Book.

  - For your reference, review the list of required content that starts on Master Book page 5.3-9.

Examples of language from mandatory references include the following:

- CFR 982.516(a): "The PHA **must** obtain third-party verification or document…"

- CFR 5.615(c)(5): "The PHA **may not** include imputed welfare income… if the family was not assisted at the time of sanction."

Where there is no mandatory federal guidance, PHAs must comply with state law, if it exists. Where state law is more restrictive than federal law, but does not conflict, state law prevails.

Where no law or HUD authority exists on a particular subject, industry practice should support PHA policy.

MANDATORY VS. DISCRETIONARY POLICIES

HUD also gives PHAs the authority to adopt discretionary policies in many areas of the HCV program, including areas that are not stipulated in HUD regulations. Such policies must be reasonable and not conflict with or ignore a HUD requirement or prohibition.

The agency's discretionary policy document is the administrative plan, which lays out all of the PHA's policies for how the program is run and how decisions are made.

To write an administrative plan, you must distinguish between program areas that are mandatory and those allowing discretion.

Written policy is needed to close regulatory gaps and ensure operational consistency. Decision points within the language of a regulation indicate the need to develop policy. That is, decisions made by PHAs must be within legal and regulatory limits:

- To clarify regulations, as needed, without changing their intent

- To provide guidance and direction where HUD is silent

An example of discretionary policy in the regulations would be:

- "The PHA may…"

HUD regulations don't cover all areas of administering the HCV program, for example:

- Fraud policies

- Development of subsidy standards

For issues not covered by mandatory references, use safe harbor guidance

- HUD recommends that such policies be based on prior HUD written guidance (such as a HUD guidebook) that has not been superseded by a regulation, notice or handbook.

- Using this guidance creates a "safe harbor."

Safe harbor references include:

- Guidebooks

- Notices that have expired

- Handbooks that have expired

- Recommendations from individual HUD staff

The role of the HUD Field Office is to:

- Inform PHAs as to what is mandatory, with references

- Inform PHAs what is optional or discretionary

- Ensure policies and procedures are adopted and implemented

Annual/Biennial Inspections Selection from Nan McKay Model Admin Plan

8-II.C. ANNUAL/BIENNIAL HQS INSPECTIONS [24 CFR 982.405(a)]

PHA Policy

Each unit under HAP contract must be inspected within 12 months of the last full HQS inspection.

The PHA will accept the results of inspections performed by HUD or for other housing programs such as HOME or LIHTC.

Scheduling the Inspection

PHA Policy

If an adult family member cannot be present on the scheduled date, the family should request that the PHA reschedule the inspection. The PHA and family will agree on a new inspection date that generally should take place within 5 business days of the originally-scheduled date. The PHA may schedule an inspection more than 5 business days after the original date for good cause.

If the family misses the first scheduled appointment without requesting a new inspection date, the PHA will automatically schedule a second inspection. If the family misses two scheduled inspections without PHA approval, the PHA will consider the family to have violated its obligation to make the unit available for inspection. This may result in termination of the family's assistance in accordance with Chapter 12.

8-II.D. SPECIAL INSPECTIONS [HCV GB, p. 10-30]

The PHA will conduct a special inspection if the owner, family, or another source reports HQS violations in the unit. If the reported condition is not life-threatening (i.e., the PHA would require the owner to make the repair within no more than 30 calendar days), then the PHA must inspect the unit within 15 days of when the PHA received the complaint.

PHA Policy

During a special inspection, the PHA generally will inspect only those deficiencies that were reported. However, the inspector will record any additional HQS deficiencies that are observed and will require the responsible party to make the necessary repairs.

If the annual inspection has been scheduled or is due within 90 days of the date the special inspection is scheduled the PHA may elect to conduct a full annual inspection.

8-II.E. QUALITY CONTROL INSPECTIONS [24 CFR 982.405(b); HCV GB, p. 10-32]

HUD requires a PHA supervisor or other qualified person to conduct quality control inspections of a sample of units to ensure that each inspector is conducting accurate and complete inspections and that there is consistency in the application of the HQS.

The unit sample must include only units that have been inspected within the preceding 3 months. The selected sample will include (1) each type of inspection (initial, annual, and special), (2) inspections completed by each inspector, and (3) units from a cross-section of neighborhoods.

**Instructions for Preparing Chapter 8: Housing Quality Standards
and Rent Reasonableness Determinations**

8.II.C. ANNUAL/BIENNIAL HQS INSPECTIONS [24 CFR 982.405(a)]

Effective July 1, 2014, PHAs may establish a policy for performing unit inspections biennially rather than annually [*Federal Register* notice 6/25/14]. This policy could apply to some or all assisted units. PHAs still have the option to inspect every unit annually.

☑ **Decision Point: Will the PHA choose to adopt biennial inspections? (Model plan, p. 8-13)**

Things to Consider

- While biennial inspections may save money, you should also consider the risk of paying HAP on a property that does not meet minimum HQS and may subject families to dangerous living conditions for a period of two years before another inspection.

☐ *Option 1: Use the model plan language shown below. No changes to the model plan are needed.*

Each unit under HAP contract must be inspected annually within 12 months of the last full HQS inspection.

☐ *Option 2: Replace the language in the model plan with the following:*

Each unit under HAP contract must be inspected annually within 24 months of the last full HQS inspection. If a unit is found to have a life-threatening HQS fail, the owner of that unit will be required to participate in annual inspections for all units for the period of 24 months before being returned to biennial inspections. This does not apply to life-threatening HQS fails caused by tenants. One or more substantiated complaints will also require the owner of that unit to participate in annual inspections for all units for the period of 24 months before being returned to biennial inspections. The PHA reserves the right to require annual inspections of any owner at any time.

☐ *Option 3: Use PHA-established policy. Edit the model language or delete it and insert the PHA's policy.*

**Instructions for Preparing Chapter 8: Housing Quality Standards
and Rent Reasonableness Determinations**

The 6/25/14 *Federal Register* notice that implemented biennial inspection options also gave PHAs the option of using inspections performed by HUD or conducted for other housing programs such as HOME and LIHTC.

☑ **Decision Point: Will the PHA accept the results of inspections performed by HUD or conducted for other housing programs for the annual/biennial inspection? (Model plan, p. 8-13)**

Things to Consider

- Although most other housing programs follow UPCS, not HQS, *FR* 6/25/14 states that relying on these inspections is allowed.

- If your PHA chooses to accept the results of LIHTC inspections, remember that LIHTC does not use a pass/fail system, so PHA staff will have to evaluate whether instances of noncompliance noted as part of the inspection rise to the level of an HQS fail.

  ☐ *Option 1: Use the model plan language shown below. No change to the model plan is needed.*

    The PHA will accept the results of inspections performed by HUD or for other housing programs such as HOME or LIHTC.

  ☐ *Option 2: Use PHA-established policy. Edit the model language or delete it and insert the PHA's policy.*

Scheduling the Inspection

☑ **Decision Point: How will the PHA handle family "no shows" or requests to reschedule for the annual/biennial inspection? (Model plan, p. 8-13)**

Things to Consider

- The language in this Section concerning who attends the inspection should be consistent with the policy stated in 8-II.A above.

- Having to reschedule appointments and make multiple trips to the unit to conduct inspections is burdensome to the PHA. A stringent policy with respect to rescheduling helps the PHA complete inspections within the timeframes expected by HUD.

- On the other hand, terminating assistance because the family has failed to make the unit available for inspection is a serious step.

- You should select a policy that is appropriate for your jurisdiction.

**Instructions for Preparing Chapter 8: Housing Quality Standards
and Rent Reasonableness Determinations**

☐ *Option 1: Use the model plan language shown below. No change to the model plan is needed.*

If an adult family member cannot be present on the scheduled date, the family should request that the PHA reschedule the inspection. The PHA and family will agree on a new inspection date that generally should take place within 5 business days of the originally-scheduled date. The PHA may schedule an inspection more than 5 business days after the original date for good cause.

If the family misses the first scheduled appointment without requesting a new inspection date, the PHA will automatically schedule a second inspection. If the family misses two scheduled inspections without PHA approval, the PHA will consider the family to have violated its obligation to make the unit available for inspection. This may result in termination of the family's assistance in accordance with Chapter 12.

☐ *Option 2: Use PHA-established policy. Edit the model language or delete it and insert the PHA's policy.*

Section 4: Key Work Processes

Work processes create the internal structure of how the work is accomplished and involve all of the activities needed to sustain the various program functions. They involve how staff are utilized and which tools should be created by the PHA to accomplish the work.

- Examples of work processes include written procedures for the functional areas of the program, mini-procedures for a specific task, workflows, automated reports, meetings, and checklists. Data entry and transmission of a HUD-50058 are specific examples of work processes.

Work processes should be easy to reference, simple to understand, designed in a step-by-step process, and tie into procedure checklists.

When HUD regulations and forms and agency policy, systems, letters and forms are referenced within these processes, it allows staff a better understanding of how the agency's work processes are integrated.

Projects are unique work processes intended to produce a particular outcome and then go out of existence.

PROCEDURES

The difference between a policy and a procedure is that policies are words of direction created to ensure and support key requirements, mission, or vision. Procedures are documented actions taken that illustrate how policy is incorporated into daily operations.

Policies may not always have supported procedures, but procedures should always support a policy (and may support many policies).

The relationship between procedures and policies is intertwined:

- Procedures are the essential steps that define how policy is implemented.

- Policies are incorporated into the PHA's operations through procedures.

Good procedures include:

- The specific tasks to be accomplished

- Designation of responsible staff

- Timeframes in which tasks must be performed (if applicable)

- The appropriate forms, documents, and systems to be used

- Approvals (if necessary)

- Regulatory or admin plan references

Written procedures are essential to ensure consistency in operations. If staff understands what, when, and how to accomplish a task, errors (and frustration) are greatly reduced. The organization's sustainability in turn greatly increases because there will be guidelines for all future staff to follow.

Procedures are typically needed when a function or process:

- Is lengthy (example: SEMAP supervisory audits)

- Is complex (example: data entry and transmission of a 50058)

- Is routine—but it is essential that everyone strictly follows the same rules (example: organization of documents in the tenant file)

- Demands consistency (example: rent reasonableness)

- Involves documentation (example: verification of income)

Other indicators of when a procedure may be needed are when the same questions are asked repeatedly by staff, when people seem confused about what to do, if there are several ways to interpret how something should be done, or if the same errors are made by different staff.

Each program function or area (intake, hearings, annual reexaminations, etc.) should have a set of procedures that provide step-by-step instructions (see Section 5.4 of Master Book).

In functional areas involving multiple steps or a wide range of activities, it may be necessary to create mini-procedures for specific steps. For example, rent calculation is voluminous and must be broken into mini-procedures which are then referenced through the primary procedure.

For example, you could have mini-procedures such as:

• Zero income procedures

• Verification of disability procedures

• Verification hierarchy procedures

• Utility allowance procedures

These mini-procedures usually incorporate screen shots of the computer program used to input data so that staff know exactly what to do to accomplish the needed task.

• See Exhibit 5.4-6 of the Master Book for examples

Sometimes mini-procedures are needed due to a specific situation. For example, as a newly-hired HCV Manager, you may discover that many of the files do not contain the executed HAP contract. This will probably be an audit finding if discovered by HUD or OIG.

For this reason, you may need a procedure for how to handle this specific situation until staff are trained and the situation no longer exists.

• See page 5.4-64 in the Master Book for an example

Support staff, such as clerks, could be assigned procedures as part of the overall function. For example, assume the clerk was assigned the responsibilities noted in the Master Book examples.

• The procedures for those responsibilities could be something like the procedures listed in the Master Book examples.

These procedures could include their own accompanying checklist (see Master Book).

Steps to Developing a Procedure for Annual Reexaminations:

1. Create a simple step-by-step procedure outline of each step it takes to complete a process, such as annual reexaminations.

   - See Master Book for example in Exhibit 5.4-1

2. Then turn the procedural outline into a checklist for the Housing Specialist to use in completing the reexamination that would be included in the file.

   - See Master Book for example in Exhibit 5.4-2

3. Create an Advanced File Checklist as an advanced procedure guide to be used when staff reach and maintain an accuracy level of at least 95 percent.

   - See Master Book for example in Exhibit 5.4-3

4. Create a formal procedure for this area that references forms and supporting documents.

   - See Master Book for example in Exhibit 5.4-4

   - Note: A full example of this procedure is included on the Nan McKay portal (see page Intro-1 in this book)

5. Turn the procedure into a Desk Guide

   - See Master Book for example in Exhibit 5.4-5

   - Note: A more complete Desk Guide example is included on the Nan McKay portal (see page Intro-1 in this book)

6. Procedures could have an accompanying "wiki" with links to other "how to" areas

   - See example in Master Book starting on page 5.4-30

   - Note: A more comprehensive example of a wiki is included on the Nan McKay portal (see page Intro-1 in this book)

Section 5: Document Creation

The documents created by PHAs are an important part of its internal work processes. All forms and letters used by staff should be approved by management.

PHA documents fall into three basic categories:

- Interactive forms: forms created to collect data and information from applicants and participants

- Form letters: forms created to notify applicants and participants of various program requirements or events or to communicate information to them

- Internal forms and reports: forms or reports created to communicate between departments

It is useful for PHAs to create a forms inventory system of management-approved forms and letters. This system should be maintained by a designated person who is responsible to review them periodically and revise them as needed.

PHAs should review all of their current forms to ensure that they meet a high professional standard. They are a direct reflection on how an agency views its customers and does business.

Section 6: Software

Every agency has selected a housing software system to manage the HCV program. There are several major vendors in the industry that provide this software.

The agency's work processes are driven by the software unless there is enough customization to offset it.

- When a PHA changes software vendors, they will usually need to change their internal work processes to accommodate the new software.

Other software utilized may include an electronic filing system, call center software, a call tracking system, a criminal background check system, a data tracking system, a rent reasonableness system, an inspection system, kiosks, and a performance management system.

Keep in mind that integrating these systems may comprise a major effort. Ensuring that the staff understands and can operate the computer systems is critical to the operation of the HCV program and the design of its work processes.

Section 7: Work Process Tools

As part of work systems and processes, tools will further contribute to work being accomplished in a timely and efficient manner.

Once work processes and tools are in place, the PHA can then measure progress. Tools could take many forms such as calendars, software tracking systems, and file systems.

These tools function as part of a PHA's leadership system to ensure consistency in operation so that desired results are achieved.

• Section 5.8 of the Master Book includes examples of various tools for managing annual reexaminations.

Learning Activity 5-1:   Technology

- Review the list and discuss the technology options you have implemented or are considering.

	Vendor
Family Portals	
☐ Update contact information	
☐ Appointment scheduling and changes	
☐ Text reminders	
☐ Access to documents (which ones?)	
☐ Online applications	
☐ Waiting list inquiries–learn position on waiting list	
☐ Reexaminations (edit what has changed)	
☐ Interims (edit what has changed)	
☐ Move requests	
☐ Status of move	
☐ Request hearing	
☐ Hearing results	
☐ Submission of scanned documents (from computer or phone)	
☐ Documents returned go directly to Housing Specialist's computer	
☐ Take customer service survey	
☐	
☐	
Owner Portals	
☐ Appointment Scheduling and changes	
☐ Text reminders	
☐ Inspection results and history	
☐ Self-certification of minor repairs prior to reinspection	
☐ Remittance statements summarizing HAP paid by date by client name or check number with adjustment information back 2 years	
☐ Printable 1099s	
☐ Calendar of payment dates	

	Vendor
☐ Rent comparability data	
☐ Rent increase requests and results	
☐ Change of address	
☐	
☐	

Other

☐ Electronic filing system	
☐ Work number	
☐ UIV source such as child support–welfare	
☐ Debit cards for families	
☐ E-Signing (what documents? Check E-Sign Act)	
☐ Scanned files	
☐ Tablets in waiting room	
☐ Tablets for inspections or outsource	
☐ Call center software or tracking system	
☐ Phone call tracking on individual phones	
☐ Rent reasonableness	
☐ Inspection tablets/hand-helds	
☐ SharePoint	
☐ Workflow software (Podio, software vendors e.g. Rent Café)	
☐ Mail management (documents printed to virtual printer and envelopes stuffed and mailed by vendor)	
☐ Email communication with families	
☐ Email communication with owners	
☐ Criminal background checks	
☐ Software letters	
☐ Data warehouse	
☐ Scripts for common reports	
☐	
☐	

Employees	Vendor
☐ Online applications	
☐ Scanned document submission	
☐ Zoom for training videos	
☐ Online Admin Plan (searchable)	
☐ Online procedures or workflows	
☐ Knowledge Base Automated (look up–Desk Guide)	
☐ Performance management system	

STUDY ASSIGNMENT

Review Master Book:

- Chapter 4

- Chapter 5

Complete chapter quizzes.

Notes

Chapter 6   Measurements and Analysis

Section 1: Introduction

LEARNING OUTCOMES

Upon completion of this chapter, you should be able to:

- Create and implement a quality control program

- Select, gather, analyze, and manage data

- Create spreadsheets and reports to measure performance

- Tie performance measurement to performance standards

- Develop a problem response strategy and an implementation plan

- Implement knowledge management within the organization

- Develop a problem response strategy and an implementation plan

- Implement knowledge management within the organization

The quality control cycle for a PHA should look like this:

The Quality Control Cycle

Review of files and discovery of errors

Increased, detailed communications to promote consistency in operations

Determine cause of error

Correction of error

Focused group staff training geared to error trends

Identification of error trends

Individual, focused staff coaching
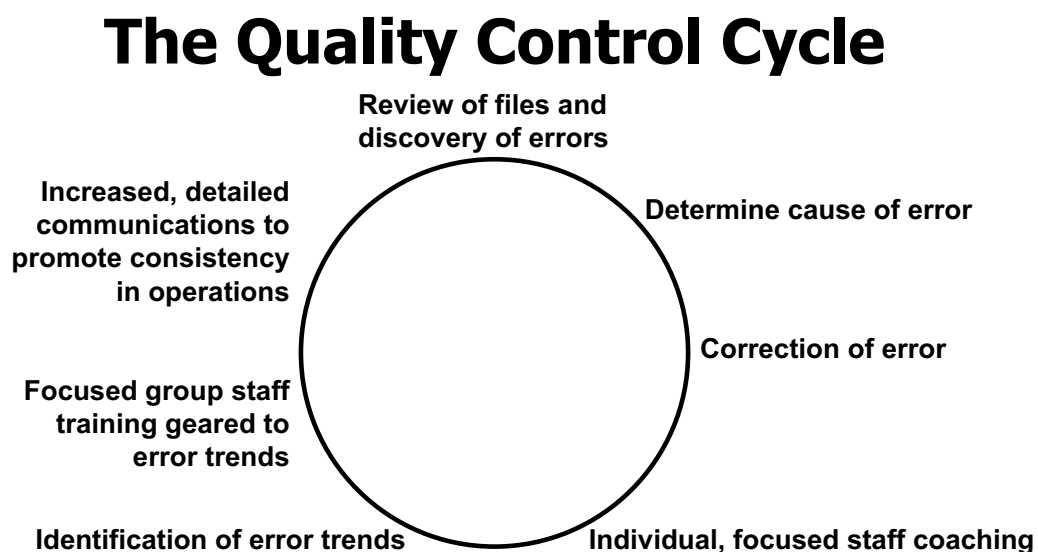
Preventing errors is the primary objective of quality control.

Section 2: Quality Control Planning

Maintaining program integrity goes far beyond reviewing tenant files. A Program Integrity Schedule is a comprehensive document that includes all of the program areas to quality control, acceptable performance standards, and the frequency of reviews that will be conducted in those areas. Key program indicators (KPIs) identify the most critical outcomes to measure. The KPIs are on the Program Integrity Schedule (See Master Book pages 6.2-9 through 6.2-20).

The objectives of a quality control program are:

- Prevention of errors before they are unrecoverable and have a negative legal or financial impact

- Identification of the root causes of errors and deficiencies, and taking steps to prevent their recurrence

- Tracking negative and positive trends in production and accuracy

- Documenting compliance with HUD program requirements and PHA administrative policies and procedures

- Documenting performance by establishing a baseline and tracking improvement over time

- Documenting the status of program operations and showing improvement over time

An effective quality control program provides output data that clarifies actual individual and organizational performance.

It enables managers to identify leading and lagging indicators in production and accuracy and take steps toward improvement.

It also helps managers to identify unproductive staff as well as to identify and reward improved or excellent performance.

TYPES OF QUALITY CONTROL

Preventive Quality Control

Preventive quality control deters errors before they have a negative impact, especially a dollar impact.

- The goal in preventative quality control is to ensure that the HAP payment is correct before the payment goes to the landlord, and to ensure that the HUD-50058 is accurate before submitted to PIC.

Periodic Quality Control

Periodic quality control involves comprehensive program review done at intervals, on a schedule, or as a result of an action such as a HUD or OIG audit.

Examples include:

- Single Audit Act review
- SEMAP reviews done monthly
- Annual program review

Continuous Quality Control

Continuous quality control is the ongoing process of regularly collecting and analyzing information about key activities or transactions to develop trends.

File reviews monitor performance on files after payments have been initiated and are a key means to measure and track quality in the HCV program. Files include not only paper files but also automated 50058 records.

File reviews will help you to:

- Evaluate the accuracy and timeliness of the work of housing specialists
- Determine whether required documents and documentation are present
- Evaluate compliance with PHA policies

A file review plan should focus on the areas where errors are most likely to occur.

Section 3: Conducting Quality Control
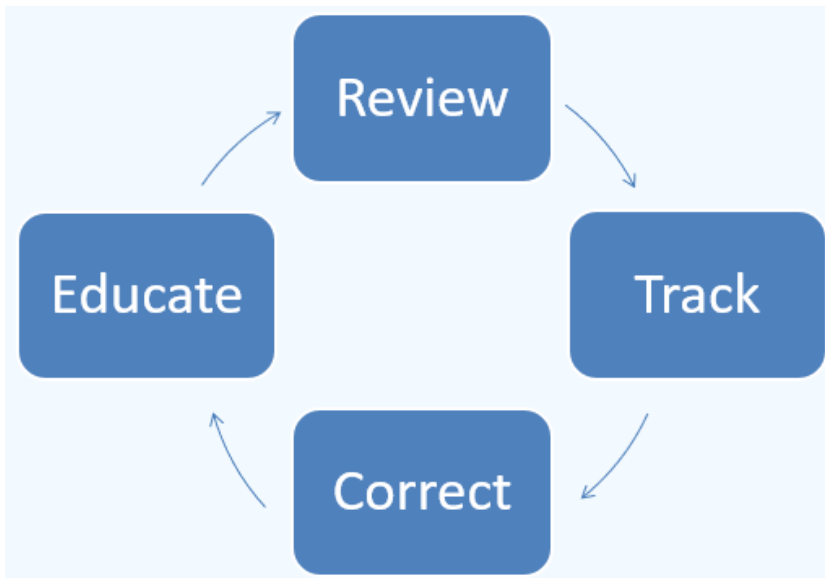
INTERNAL QUALITY CONTROL: PREVENTIVE

The first level of quality control should be done by the staff person who does the work and "certifies" that the work has been done correctly. Staff should quality control their own files prior to submitting them for payment using a detailed checklist such as the Annual File Review Checklist on Master Book page 6.3-3.

The second level is done by the QC specialist or supervisor.

- It may not be practical to review all the files prior to payment. This is especially the case in a larger PHA, but at least a percentage of files should be reviewed.

- A supervisor should plan to quality control a certain number of files each week, spending at least 1.5–2 hours per week on this function.

- The supervisor should review past reports to identify staff who are more likely to make errors and concentrate file reviews on those low performers.

Peer-to-peer quality control can aid in the process. It may not be monitored, but it can help the quality control "score" and improve team concept. Peer-to-peer quality control can be done as a group and used as a learning tool.

Page 6-4

FORMAL QUALITY CONTROL: CONTINUOUS

Some PHAs establish a quality control department to perform continuous quality control file reviews, some designate a high-performing staff person as a QC specialist; and some PHAs designate a supervisor to do QC. Review Master Book page 6.3-8 for information on how to select and train quality control staff.

Tools for selecting files include:

- PIC reports – these reports can generate lists for some transactions

- PHA vendor software – such software may be able to generate reports that list files in categories

QC staff should:

- Review files

- Complete 50058 calculations without looking at the completed calculations in the files

- Look for consistency between the paper and electronic files

The QC reviewer could use a variety of QC tools such as:

- Detailed file checklist (Master Book page 6.3-3)

- RIM review checklist (Master Book page 6.3-11)

- Additional checklists (Master Book page 6.3-19 for Interim QC Checklist)

A process for supervisory QC could include these steps:

- Review recert report for number of transactions processed each week

- Perform a QC supervisory review on 10 percent of that number the following week

- Review monthly report to determine whether each supervisor completed their 10 percent

- If deficient, supervisor has 48 hours to complete

- Manager conducts 10 percent of supervisory findings and enters into database

- If errors are missed, coach supervisor

Process Memo

Date:

To: Supervisors and Staff

From: Director

Subject: Supervisory QC

_____

Each week, the re-certification report is sent which shows how many transactions were processed by each team. The supervisor will perform a quality control supervisor review on 10% of that number the following week. For example, if Team A processed 100 files in the previous week, it would be the responsibility of the Team A supervisor to review 10 files for the current week. The supervisor findings will be recorded in a database.

QC Supervisor Pass/Fail	Fail
QC: Supervisor Findings	Annual income should be 10,500; the 58 reflects 9,750 because the net was used instead of gross.
	No existing entries.

Report to measure whether 10% quota was met.

On a monthly basis, a report will be run to determine whether or not a supervisor completed 10% of their minimum threshold for QC.
This will be done by taking the total transactions processed for the month and comparing it with the total supervisor QC reviews entered into the PHA's database. If the report shows that a supervisor is deficient in meeting at 10% quota, the supervisor will have 48 hours to complete the remaining files.

After receiving that report, the manager will then conduct their own 10% of the supervisor's findings and compare their findings with the supervisors. See example below.

Team	Total Processed for the Month	10% quota for supervisor
Team A	220	22
Team B	200	20
Team D	210	21
Totals	630	63

Process Memo

For this manager, they must QC 10% of 63 (6 files) and compare with the supervisor's findings. The manager must enter their findings into the PHA's data base.

Manager QC Review	Fail ▽
Manager's QC findings	Supervisor did not cite that the rent reasonableness has an incorrect bedroom size. |

If the manager finds any errors missed by the supervisor, the manager will bring that to the supervisor's attention and coach them about those issues.

Report to measure accuracy of supervisor and managers reviews

After the quality control department has concluded their reviews with a specific performance month, a report will be sent to that shows how staff performed that month and what the errors were. The report will compare what the found with supervisory/managerial QC to determine if the supervisor or manager missed any errors. This report will also measure whether the manager met their 10% quota.

The manager will review this report and use any discrepancies as a potential coaching mentoring for the supervisor for improvement going forward. If a supervisor or a manager consistently fails to cite errors on a frequent basis, they could be subject to disciplinary action by their immediate supervisor.

If you have any questions about this memo, please see your immediate supervisor.

- The PHA could utilize an automated QC program, which is typically fashioned after a RIM-type of review but also includes other file errors. It allows for automated data entry and a variety of reports.

PREVENTIVE ERROR CORRECTION

Error correction takes time. If files are not submitted for QC until the last week of the month, there will not be time for adequate preventive QC and to fix discrepancies.

- Fixing errors should be a priority. There should be a principle in place that if the file is not fixed, it is incomplete.

- All corrections should be made within one day of notification if possible.

- Reserving a day to correct errors is helpful. The supervisor can set up a QC day (e.g., the Wednesday before the Friday due date for file submission to Finance for preventive errors).

- All corrections should be responded to, updated, and logged into the spreadsheet to be able to conduct error analysis and for tracking.

The supervisor should follow through with the staff person who made the error and "close the loop." This ensures that staff understand what the error is and how to correct it, and that the error is indeed corrected.

Learning Activity 6-1:   Quality Control Approach

Instructions:

- Have one person volunteer to be the facilitator.

- Answer the questions below.

1.   Describe your approach to quality controlling files (when, how often, how many done by supervisor per week, is there a QC department, how are files chosen).

_____

_____

_____

_____

2.   What forms are used?

_____

_____

_____

_____

3. Who corrects the errors found? Is there a time limit for corrections to be made? Does anyone re-review the corrections?

_____

_____

_____

_____

_____

4. What do you do to ensure the errors won't reoccur?

_____

_____

_____

_____

_____

Section 4:   Production Performance Measurement

INTRODUCTION

Performance measurement refers to how to select, collect, align, and integrate data for tracking daily operations and organizational performance that relevant to the agency's strategic objectives (e.g., SEMAP high performer).

PRODUCTION MEASUREMENT

Performance measures should be created for all functional areas of the program, and these measures should tie back to the individual performance standards for each staff position performing that function. Managers should measure both the level of production (e.g., that deadlines are being met) and the quality and accuracy of the work performed.

The Daily, Weekly and Monthly Production charts in the Master Book can assist your agency in detecting a major problem before it may be too late to solve it.

For each data point to be monitored, there are leading indicators and lagging indicators.

A leading indicator refers to:

• What should happen during a specific period

• The goal

Leading indicators are a good predictive tool.

Examples of leading indicators for a month for utilization prediction include:

• Number of people to pull from waiting list

• Number of people to be determined eligible

• Number of briefings to be held

• Number of vouchers to be issued

• Number of vouchers that will lease up

A lagging indicator:

- Has already happened

- Illustrates what was planned for but not accomplished

  - Example: late reexams

- Helps to make changes in the future

A lagging indicator occurs when the PHA falls short of the goal, showing what has not happened during the specific period of time for which the goals have been set. So, if the goal was to issue 100 vouchers by a certain date and only 80 were issued, 20 would be a lagging indicator.

Managers can create a leading indicator for a lagging indicator by setting leading indicators to correct for the lagging indicator. Your new leading indicator, if you were to issue 100 vouchers again, would be $100 + 20$. You would also have to adjust for a 70 percent success rate.

Since reexams occur over several months, you do not want to wait until immediately before the effective date to correct. You can correct for the lagging indicators by process due by month.

- See Reexam Calendar, Master Book pages 5-8-3 to 5.8-6.

Monthly Recertification Production Progress Report
August

HSG SPEC	NOV REEXAMS INTERVIEWED								OCTOBER REEXAMS PROCESSED											DEC REEXAMS PREPARED FOR INTERVIEW						
DAYS OF MO	GOAL	1	2	3	5	8	9	TOTAL	GOAL	10	11	12	16	17	18	19	22	23	24	TOTAL	GOAL	25	26	28	30	31	TOTAL
Name 1	10	0	1	3	1	2	1	8	8	0	0	2	2	1	0	1	0	1	1	8	23	5	5	0	2	0	12
Name 2	20	3	4	2	4	4	1	18	35	0	4	5	6	6	3	6	5	0	0	35	30	10	4	12	1	2	29
Name 3	35	5	4	3	0	0	0	12	30	0	0	2	3	3	2	5	7	0	0	22	32	6	8	6	6	6	32
Name 4	30	5	4	5	5	5	6	30	37	3	5	6	6	5	0	5	7	0	0	37	35	6	7	6	6	10	35
TOTAL	95	13	13	13	10	11	8	68	110	3	9	15	17	15	5	17	19	1	1	102	120	27	24	24	15	18	108

6/1/25

Learning Activity 6-2:   Reexamination Analysis and Solutions

PROJECTED REEXAMINATIONS CHART

Housing Specialist	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Monthly Total
Housing Specialist 1													
Housing Specialist 2													
Housing Specialist 3													
Housing Specialist 4													
Housing Specialist 5													
Total by Month													

Instructions for Use

1. **Data Entry**:

   o Enter the number of reexaminations assigned to each housing specialist under the respective months.

   o Fill in the monthly totals for each row in the "Monthly Total" column.

   o Sum the totals for each column in the "Total by Month" row to calculate the overall workload for each month.

2. **Formulas**:

   o **Monthly Total** for each housing specialist: Use the formula =SUM(B2:M2) for each row.

   o **Total by Month** for each column: Use the formula =SUM(B2:B6) for each column.

   o Adjust the cell references as needed based on the actual rows and columns in your spreadsheet.

3. **Formatting**:

   o Apply borders to create a clean, grid-like structure.

   o Use bold formatting for header rows and totals for easier readability.

DUE AND ACTUAL REEXAMINATIONS CHART

HS	Jan Due	Jan Act	Feb Due	Feb Act	Mar Due	Mar Act	Quarterly Total Due	Quarterly Total Actual
1	45	40	45	42	45	43	**135**	**125**
2	45	45	45	43	45	45	**135**	**133**
3	45	42	45	40	45	39	**135**	**121**
4	45	45	45	45	45	45	**135**	**135**
5	45	30	45	28	45	26	**135**	**84**
Total	225	202	225	198	225	198	**675**	**598**

Using the information above, review the number due and add any lagging indicators from the previous month to see the total revised number due for the following month. Assume the actual figures above remain and complete the lagging indicators for each month and the revised due for the following month. If the lagging indicators are not addressed the following month, the figures will snowball and you will easily get behind – without even recognizing it!

REVISED REEXAMINATIONS DUE CHART FOR LAGGING INDICATORS

HS	Jan Due	Jan Act	Jan Lag	Feb Due (Rev)	Feb Act	Feb Lag	Mar Due (Rev)	Mar Act	Mar Lag	Qtr Due	Qtr Act	Qtr Lag
1	45	40			42			43		135	125	
2	45	45			43			45		135	133	
3	45	42			40			39		135	121	
4	45	45			45			45		135	135	
5	45	30			28			26		135	84	
Total	225	202			198			198		675	598	

Section 4: Production Performance Measurement

Performance Analysis Report for January - March

Overview

This report evaluates the performance of Housing Specialists (HS) for the first quarter of the year (January through March). The analysis compares the number of cases assigned ("Due") to the actual number of cases completed ("Act"). It highlights discrepancies, identifies high and low performers, and provides actionable recommendations to improve overall performance.

Key Findings

1. Individual Performance Analysis

- **HS 1**: Completed 125 out of 135 cases, achieving a completion rate of 92.6%. While slightly below target, performance is generally consistent across months.

- **HS 2**: Completed 133 out of 135 cases, achieving a 98.5% completion rate. This is strong performance, indicating efficient case handling.

- **HS 3**: Completed 121 out of 135 cases, achieving an 89.6% completion rate. Performance is below target, with notable shortfalls in February and March.

- **HS 4**: Achieved 100% completion, consistently completing all 135 assigned cases. HS 4 is a model performer.

- **HS 5**: Completed only 84 out of 135 cases, achieving a 62.2% completion rate. This is significantly below expectations and highlights a need for immediate intervention.

2. Team Performance

- The total team completion rate is **88.6%**, with 598 cases completed out of 675 due.

- The team's shortfall of 77 cases is largely driven by the underperformance of HS 5, who accounts for 51 of the total missed cases.

Recommendations

1. Support for Low Performers

- **HS 5**:
    - Schedule a one-on-one meeting to identify challenges, such as workload management, training gaps, or external factors.
    - Assign a mentor (e.g., HS 4) to provide guidance and share best practices.
    - Reduce caseload temporarily to focus on improving efficiency and accuracy, then gradually scale up.
    - Provide additional training on time management and prioritization.

- **HS 3**:
    - Offer refresher training sessions on effective case management techniques.
    - Implement weekly performance check-ins to track progress and address issues proactively.

2. Recognition for High Performers

- **HS 4**:
    - Recognize their outstanding performance publicly during team meetings.
    - Explore opportunities for HS 4 to mentor underperforming team members.

- **HS 2**:
    - Provide positive feedback and small incentives to maintain high performance levels.

3. Team-Wide Initiatives

- **Performance Reviews**:
    - Conduct monthly performance reviews for all team members to provide timely feedback.
    - Use these reviews to identify trends and address potential issues early.

- **Training Workshops**:
    - Organize quarterly training sessions focusing on common challenges such as time management, software efficiency, and compliance.
    - Invite high performers to lead sections of the workshops to foster a collaborative learning environment.

- **Case Redistribution**:

    - Temporarily redistribute cases from HS 5 to high performers (e.g., HS 4) to maintain overall productivity while HS 5 improves.

---

4. Monitoring and Accountability

- Establish clear metrics for improvement:

    - For HS 5: Increase completion rate to at least 75% in the next quarter.

    - For HS 3: Achieve a 95% completion rate by the end of the second quarter.

- Utilize a shared dashboard to track individual and team performance in real-time.

Conclusion

The team shows potential for strong performance, with several members excelling in case completion. Addressing the challenges faced by HS 5 and providing additional support for HS 3 can significantly boost the team's overall productivity and efficiency. Consistent monitoring, targeted training, and recognition of high performers will foster a motivated and high-performing team.

Individual Development Plan (IDP) for Housing Specialist 5

Employee Name: Housing Specialist 5
Supervisor Name: _____
Date: _____

---

1. Performance Areas for Improvement

1. **Case Completion Rate**: Current completion rate is 62.2% (84 out of 135 cases). The target is to achieve at least 90% completion within the next three months.

2. **Efficiency and Time Management**: Address delays in completing cases and improve overall workflow.

3. **Accuracy and Compliance**: Ensure all completed cases meet quality and compliance standards.

---

2. Goals and Objectives

Goal	Specific Objective	Target Date
Increase completion rate	Achieve 75% completion rate by the end of the first month.	_____
	Achieve 85% completion rate by the end of the second month.	_____
	Achieve 90% completion rate by the end of the third month.	_____
Improve workflow efficiency	Implement daily task prioritization and planning practices.	_____
Enhance compliance and accuracy	Attend refresher training on compliance and case accuracy.	_____

---

3. Development Actions

Action	Responsibility	Completion Date
Participate in one-on-one mentoring sessions	Housing Specialist 4 (Mentor)	_____
Attend a refresher training workshop	Supervisor/Training Coordinator	_____

Action	Responsibility	Completion Date
Complete weekly performance reviews	Supervisor	_____
Utilize a case prioritization tool	Employee	_____
Submit daily task reports for review	Employee/Supervisor	_____

4. Support and Resources

1. **Mentorship**: Regular guidance from HS 4 to improve workflow and share best practices.

2. **Training**: Refresher sessions focusing on compliance, accuracy, and time management.

3. **Tools**: Provide access to task management software or spreadsheets for prioritizing cases.

4. **Feedback**: Weekly feedback sessions with the supervisor to monitor progress and provide support.

5. Monitoring and Progress Reporting

Progress will be evaluated weekly, with detailed reports prepared at the end of each month.

Sample Progress Report for Housing Specialist 5

Date: _____

Performance Summary

- **Monthly Completion Rate**: 72% (97 out of 135 cases)

- **Quality Compliance**: 93% accuracy across completed cases (based on supervisor reviews).

- **Key Improvements**:

    o Implemented daily task prioritization.

    o Attended a compliance workshop and demonstrated improved accuracy in calculations.

Challenges and Solutions

- **Challenge**: Struggled to meet the daily case completion target.

    - **Solution**: Adjusted case prioritization to focus on high-priority tasks first.

- **Challenge**: Hesitation in completing complex cases.

    - **Solution**: Scheduled additional mentoring sessions with HS 4 to address specific concerns.

Recommendations

- Continue mentoring sessions twice a week to build confidence in complex cases.

- Aim to complete at least 100 cases in the next month to meet progress benchmarks.

Supervisor Comments:

_____

_____

Employee Comments:

_____

_____

Supervisor Signature: _____

Employee Signature: _____

Discussion Outline for Supervisory Meeting with Housing Specialist 5

Purpose: To address performance challenges, provide constructive feedback, and collaboratively develop strategies to improve case completion and accuracy.

---

1. Welcome and Setting the Tone

- **Objective**: Start the meeting with a positive and collaborative tone.

- **Talking Points**:

    o Acknowledge the purpose of the meeting: "We're here to support your success and address challenges together."

    o Emphasize that the discussion is about growth and improvement, not criticism.

---

2. Review of Performance Metrics

- **Objective**: Present and discuss performance data to identify gaps.

- **Talking Points**:

    o Case completion rate (e.g., 62.2% compared to the target of 90%).

    o Accuracy and compliance rates (e.g., errors or issues identified during quality control).

    o Trends over the last three months (January to March).

Question for Employee:

- "How do you feel about your performance over the past few months? Are there any challenges you'd like to share?"

---

3. Discuss Identified Challenges

- **Objective**: Understand the root causes of performance gaps.

- **Talking Points**:

    o Ask about time management and workload:

        ▪ "Are you experiencing any specific challenges with managing your caseload?"

    o Address potential skill gaps:

- ▪ "Do you feel confident with the tools and processes required to complete your cases accurately?"
  - o Explore external factors:
    - ▪ "Are there any external factors or personal challenges affecting your performance?"

Question for Employee:

- • "What areas do you feel you need the most support in?"

---

4. Feedback and Observations

- • **Objective**: Provide constructive feedback based on observations.
- • **Talking Points**:
  - o Highlight strengths:
    - ▪ "I've noticed that when you complete cases, the quality is generally strong. Let's work on improving your efficiency to match that quality."
  - o Address areas for improvement:
    - ▪ "I've observed delays in completing cases. Let's discuss ways to overcome this and ensure we're meeting targets."

---

5. Develop an Action Plan

- • **Objective**: Collaboratively create a plan to improve performance.
- • **Talking Points**:
  - o Review the **Individual Development Plan (IDP)** goals and actions.
  - o Set clear expectations for the next month:
    - ▪ "For April, let's aim to complete 100 cases with at least 90% accuracy."
  - o Assign specific resources:
    - ▪ Mentoring sessions, training workshops, and prioritization tools.
  - o Establish a progress monitoring schedule:
    - ▪ "We'll check in weekly to track your progress and address any roadblocks."

---

6. Employee Input

- **Objective**: Encourage the employee to share their perspective and contribute to the plan.

- **Talking Points**:

  - "What strategies do you think would help you succeed in meeting these goals?"

  - "Is there any additional support or resources you'd find helpful?"

Question for Employee:

- "Do you feel confident in the steps we've outlined? If not, what adjustments would you suggest?"

---

7. Summary and Next Steps

- **Objective**: Summarize the discussion and confirm agreed-upon actions.

- **Talking Points**:

  - Recap key points:

    - Performance gaps identified.

    - Agreed-upon strategies and goals.

  - Confirm next steps:

    - "Our first check-in will be next Monday. We'll review your progress and adjust as needed."

---

8. Close on a Positive Note

- **Objective**: End the meeting with encouragement and motivation.

- **Talking Points**:

  - "I'm confident in your ability to improve, and I'm here to support you every step of the way."

  - "Let's work together to make the next few months a success!"

Follow-Up:

- Share a written summary of the meeting and the agreed action plan with the employee for reference.

USING REPORTS TO TRACK PRODUCTION

Track staff daily and monthly performance in productivity by specialist and by team using a calendar, report, or dashboard to determine:

- Where individual staffing problems are

- What personnel actions are needed

- What trends are developing.

For reference, see the following reports found in section 6.4 in the Master Book:

- Daily Performance Tracking Report (Master Book page 6.4-5)

- Monthly/Quarterly Report – HCV Recertifications (Master Book page 6.4-8)

- Monthly Report – Interims (Master Book page 6.4-13)

- Monthly/Quarterly Report – PBV/MR Recertifications (Master Book page 6.4-14)

- Monthly Report – PBV/MR Recertifications (Master Book page 6.4-14)

- Monthly Report – PBV Vacancy (Master Book page 6.4-15)

- Backlog Recertifications (Master Book page 6.4-16)

Section 5: Accuracy Measurement

Production and accuracy are essential to reexamination performance excellence. If the files are completed on time, but contain errors, the reexamination cannot be considered a success. If the inspection was conducted but it had errors in the determination, the inspection cannot be considered a success. Processing transactions both accurately and on time are necessary to be successful under SEMAP.

USING REPORTS TO TRACK ACCURACY

Although identifying individual errors is an important element of quality control, it's not the only aspect. Looking at performance and production over time (trends) using reports can provide important insights that lead to error reduction.

The most useful information to track depends on the circumstances at each agency. Generally tracking is valuable to look for variations in:

- The number and percentage of errors by error type, staff person, and team (or department)
- The improvement in error rates

For reference, see the Master Book for the following:

- Daily Performance Report (page 6.4-5)
- Weekly Program Integrity Detail Report (page 6.5-6)
- Sample QC Report (page 6.5-7)
- File Error Report (page 6.5-8)
- QC Error Type Breakdown Report (page 6.5-10)
- File Review Error Report (page 6.5-11)

In addition, see Master Book page 6.5-13 for:

• QC Dashboard

• QC Results by Housing Specialist

Tie these individual quality control results back into the Caseload and Accuracy Plan. Use the QC Results for the Caseload and Accuracy Plan to monitor results each month.

Error analysis reports can identify problems, including:

• Lack of policy

• Lack of clarity in procedure

• Lack of training

ERROR REDUCTION STRATEGY

To create an error reduction strategy, standards and measurement tools, such as written performance standards and a Caseload and Accuracy Plan, must be in place.

The key to quality control error elimination is to:

• Maintain current performance reports and analyze results, levels, and trends

• Provide one-on-one mentoring and training to staff on errors made (also utilize quality control staff, especially with individuals with the highest errors) and document the employee file with the attempts made

• Encourage improved performance

• Take action with the poor performers

In terms of quality control, always keep in mind:

• Quality control is the most important function in HCV administration.

• Treat every file as if it will be reviewed for quality control by HUD or the OIG

Learning Activity 6-3:   Measurement Tools

Discuss with a partner the status of your measurement tools, using the following questions:

• Is a QC team or person in place?

_____

• How often are file reviews being completed?

_____

• Is the sampling adequate to produce relevant results?

_____

• Are the most relevant QC reports being produced by the QC staff?

_____

• Is there a recent easy-to-reference error type breakdown report accessible?

_____

• Are there recent individual error reports available?

_____

Section 6: The Problem-Solving Process

The process of problem solving requires the development of two related strategies: a problem analysis strategy and a response strategy.

PROBLEM SOLVING OVERVIEW

1. Explore the issue

    a. Tell me about the situation

    b. What happened then?

    c. Tell me more

2. Define the issue

    a. Sounds like it is important for you

    b. Pare it down

3. Act - draw up a plan of action

    a. What have you done or thought about doing?

    b. Here are some other ideas

The following chart illustrates the steps that make up the two parts in the error problem analysis strategy:

```
┌──────────────┐         ┌──────────────────────────────┐
│              │─────────│     Clarify area of concern    │
│   Problem    │         └──────────────────────────────┘
│   Analysis   │         ┌──────────────────────────────┐
│              │─────────│  Understand what really happened│
│              │         └──────────────────────────────┘
│              │         ┌──────────────────────────────┐
└──────────────┘─────────│    Identify reasons for errors  │
                         └──────────────────────────────┘

┌──────────────┐         ┌──────────────────────────────┐
│              │─────────│    Find appropriate solutions   │
│  Response    │         └──────────────────────────────┘
│  Strategy    │         ┌──────────────────────────────┐
│              │─────────│ Develop an implementation Plan  │
└──────────────┘         └──────────────────────────────┘
```
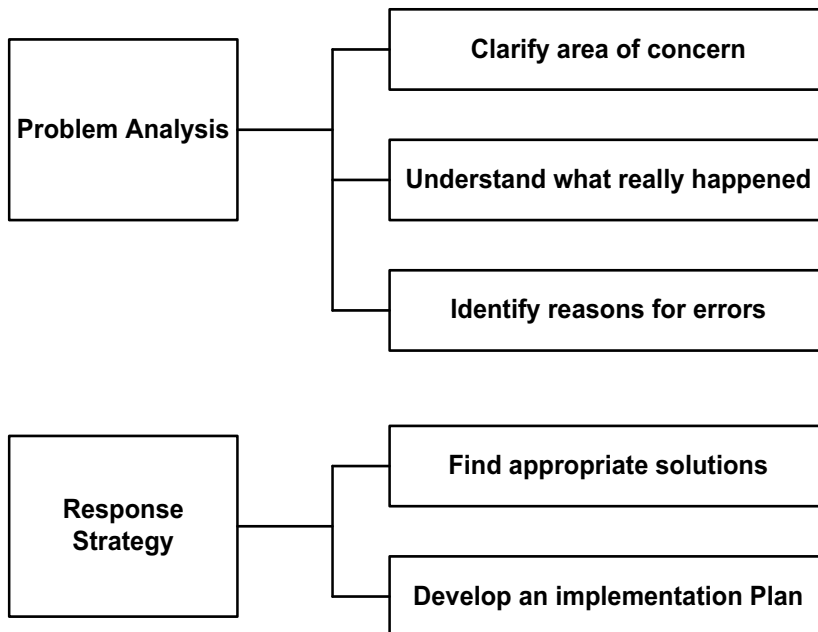
Even if it seems obvious what went wrong, you must identify causes of the problem. For example:

- An audit or QC review may have identified some errors

- However, knowing what to do about the errors requires a deeper understanding of exactly what happened and why

When analyzed, this data will assist the manager to identify:

- Errors and negative trends

- Breakdowns in leadership systems

- Overall organizational performance

- Production and accuracy performance by department or program function

- Individual staff who are performing well and those who are not

- Unclear (or needed) policies and procedures

- Problems in communication, coordination and cooperation

THE STEPS OF PROBLEM ANALYSIS

Step 1: Clarify the Area of Concern

The first step in problem analysis is to clarify the area of concern. Don't confuse the problem with its cause. Falling short of leasing goals or a high number of PIC errors is symptomatic of a problem, but not the cause of the problem. By focusing on the symptom, PHAs may end up solving the wrong problem. Getting the facts is absolutely necessary.

- How does this concern tie back into the mission and vision of the agency?

- How does it tie back into the goals of the department?

  - For example, if the goal is to have a 95 percent accuracy rate and the reports show the accuracy is at 80 percent, staff are not meeting the goal

To clarify the area of concern:

- Work with one issue at a time

- Use as many sources of info as possible

- Identify the requirements or expectations

- Ask: What is the problem behind the problem?

Step 2: Understand What Really Happened

Making a plan just as problems arise can result in:

- Forgetting the steps that come before the plan

- Solving the wrong problem

Always find out what the problem is before attempting to fix it.

PHAs often believe that the solution to any problem is training.

In order to understand what really happened, managers need all of the information. For example, if your SEMAP score for indicator #3 is zero, what type of information would be needed?

- In which of the performance indicators did the error(s) occur? (Utility allowances? Income calculation? Allowances? Verification?)

- What are the specific errors?

- How frequently were the errors made?

- In what transaction type did the errors occur? (Mostly new admissions? Annual reexaminations?)

- Who made the errors? (Evenly distributed among teams? Mostly one team? Mostly one individual?)

- Are there data entry issues or some other special circumstance?

Step 3: Identify the Reasons for the Error/problem

It often takes patience and good questioning skills to identify the root cause of problems or errors. The stated reason given for an error or problem is not always the root cause. For example, if a staff person says that they did not know a rule, a policy, or a procedure, that is not the root cause of the error. The question is more likely why they didn't know. You will get to the root cause when you can no longer ask "why." The root cause may be a lack of training, but it could also be a vague or unclear policy or procedure, or a lack of supervision.

Common causes of errors among PHAs include:

- Uneven workload distribution

- Inadequate training of staff

- Inadequate forms and written tools

For reference, see the chart in the Master Book on page 6.6-4.

Reasons for Errors/Problems

Stated Reason	Root Cause
• Staff "didn't know" WHAT to do	• Policy/procedures? • Lack of knowledge? • Inadequate supervision? • Inadequate training?
• Staff "didn't know" HOW	• Knowledge/training? • Skill or ability? • Inadequate supervision?

Stated Reason	Root Cause
• Staff COULDN'T	• Inadequate infrastructure? • Excessive workload? • Forms/other tools? • Computer capacity?

• Staff WON'T/DON'T
  - Have always done it a certain way
  - Didn't think it was important
	• Organizational Culture
	• Inadequate supervision
	• Lack of clear procedures

PROBLEM RESPONSE STRATEGY

This section covers the steps in the process after problems have been identified and analyzed to determine the cause.

The response strategy consists of two steps:

1. Find appropriate solutions

2. Develop an implementation plan

When the root cause has been identified, you will need to find the appropriate solution. The solution may involve more than one action.

Solving complex problems takes time, and you cannot do everything at once. Consider the most pressing problems first or the problems with the most severe consequences; then think short-, medium-, and long-term solutions.

- Doable vs. deluxe.

- The "ideal" solution is not always possible.

- Consider a quick fix, followed by a long-term solution.

IMPLEMENTATION PLANS

Implementation plans are important because:

- Understanding is not enough; action must follow.

- Writing down a plan increases the chances it will be successful.

Tips for developing the plan include:

- Identify key players and bring everyone on board.

- Remain flexible. Be ready to revise based on the suggestions of other players.

- Be specific and detailed.

Section 6: The Problem-Solving Process

At the onset of plan development:

- List all of the steps.

- Think strategically about who can best carry out each task.

- Assign responsibilities and deadlines.

    - Designate staff with appropriate interests and skills

    - Consolidate the individual plans to identify overloaded individuals and confirm priorities

Section 7: Leading Through Change

STEPS TO IMPLEMENT CHANGE

Preparation

- Document the as-is
  - Establish comprehensive leadership systems so there is no question about how work is done
    - Policy, procedure, forms, letters
  - Update comprehensive admin plan
- Using regulations, comprehensive admin plan, and software program used, establish "desk guide" for each functional area as "blueprints" of as-is

Finalization

- When HOTMA is finalized, what is to be done?
- Install revised software including portals and other technology as financially feasible
- Revise leadership systems in place
  - Establish "blueprints" to follow (process memos will probably not suffice especially if no detailed procedures are already in place)
    - Decide on methodology

Management Role

- Train all staff on revised regulations, admin plan, proce-dures, and software
  - Supervisors and staff learning together
- Divide into functional areas and then divide into smaller chunks
- Use a variety of training methodologies
  - Your own YouTube channel, procedures
- Utilize current regulatory online training and develop online training beyond regulations for leadership systems
- Depending on the size of the agency, develop teams of three to five people to process (e.g. recerts)

- Mentor, mentor, mentor
  - Train supervisory staff on coaching and mentoring
- Reevaluate within first quarter and revise as necessary
- Some of the regulations will be implemented later than others
  - Revise above as needed and reuse process above again

Develop an Action Plan
  - Who is going to do what by when

HOW TO LEARN NEW SKILLS FAST

- Fix it, change it
  - Break into subskills or smaller units
- Solutions
  - Learn by connections - unfamiliar to familiar
- Get the right help
  - YouTube videos, read reg, job shadowing
- Standards
  - What action is fastest, easiest, most useful
  - Give enough time to practice
- Results
  - Give time to result and see what results they have accomplished so far. Time to absorb info to stick to memory

FIVE STEPS TO SUCCESSFUL CHANGE

Step 1. Acknowledge and Understand the Need for Change

- Problem > Solution - Resist
- Spend time understanding the situation
- Involve a range of people to be sure what the change is (read the reg and discuss)
- Understand why the change needs to be made
- Consider how this is going to affect the org
- Diagram what the complexity of the change is

Step 2. Communicate the Need and Involve People

- Communicate to stakeholders – who are they?

- What is important to others? What motivates them? How will this change affect them?

- Takes time and resources

- Can be frustrating because there may be suggestions you have already considered and decided on in step 1. But rushing communication will lessen buy-in and cause more problems later.

Step 3. Develop Change Plans

- Detail it out - where you want to be - be exact
    - What will be different?
    - What are the objectives you want to achieve?
    - What will be the performance measures?

- Specify the change you want to see and understand the change.

- Develop a project plan and schedule the activities.

Step 4. Implement Change Plans

- This is the actual change part

- Make sure everyone knows what has to happen and what their role is

- Provide the support and watch out for stress

- Maintain some routine as far as possible

- Take a look at individuals and how people are reacting and how you can manage the reactions

Step 5. Evaluate Progress and Celebrate Success

- As soon as you can start identifying what is going well, make sure people are thanked appropriately

- Acknowledge the hard work

- Celebrate the successes

Case Study A

Becky is starting to panic. She looked at her numbers in the Two- Year Forecasting Tool and realized that not only are they underleased, they aren't using their money either-and it all means less in administrative fees. She feels she has enough staff but wonders how long that will last if they are underleased. All she hears from clients is, "I can't find anything. Can I get an extension on my voucher?" She knows it's the market, but if this trend continues, the PHA will be in big trouble. She's not sure what to do. It seems like she has tried everything.

Review the information and complete the form.

1. Clearly define the problem. Write a brief synopsis of the problem.

    _____

    _____

    _____

2. Determine possible causes of the problem.

    _____

    _____

    _____

    _____

    _____

    _____

3. Brainstorm for action alternatives. List alternatives from the sublime to the ridiculous. Sarah could:

    1. _____

    _____

    2. _____

    _____

    3. _____

    _____

4. _____

_____

_____

_____

_____

_____

_____

_____

5. _____

_____

_____

6. _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

4. Select one alternative and plan the strategy. (Pick the one that is most viable at this time.)

_____

_____

_____

_____

_____

_____

5. Implement Action Plan. (Use your WB Action Plan form—who is going to do what by when.)

_____

_____

_____

_____

_____

_____

6. Reevaluate your plan and repeat the steps as often as necessary to improve the end result.

_____

_____

_____

_____

_____

_____

_____

Case Study B

Steps for Problem Solving

1. **Define the Problem**

   o What are the indicators that a problem exists?

   o Identify the issue clearly and concisely.

   o Determine the root cause.

   o Write a definition of the problem

2. **Gather Information**

   o Collect data, facts, and any relevant details about the problem.

   o Engage stakeholders for input and perspectives.

3. **Generate Potential Solutions**

   o Brainstorm possible solutions.

   o List options without evaluating them initially.

4. **Evaluate Alternatives**

   o Consider the pros and cons of each option.

   o Assess feasibility, risks, and potential outcomes.

5. **Choose the Best Solution**

   o Select the most viable option based on analysis.

   o Ensure alignment with goals and constraints.

6. **Develop an Action Plan**

   o Outline the steps to implement the solution.

   o Assign responsibilities, set deadlines, and allocate resources.

7. **Implement the Solution**

   o Execute the plan according to the timeline.

   o Monitor progress and adjust as needed.

8. **Evaluate the Outcome**

   o Measure the success of the solution.

   o Gather feedback and identify lessons learned.

Problem-Solving Worksheet

Use this form to document and structure your approach to solving a problem.

Step 1: Define the Problem

- What is the problem?

- What is the root cause?

Step 2: Gather Information

- What information is available?

- Who are the stakeholders?

Step 3: Generate Potential Solutions

- List possible solutions:

1.	
2.	
3.	

Step 4: Evaluate Alternatives

- Pros and cons of each solution:

1.	
2.	
3.	

Step 5: Choose the Best Solution

- Selected solution:

- Why this solution was chosen:

Step 6: Develop an Action Plan

- Steps to implement:

1.	
2.	
3.	

- Who is responsible?

- Timeline:

Section 7: Leading Through Change

Step 7: Implement the Solution

- Notes on implementation:

Step 8: Evaluate the Outcome

- Did the solution solve the problem? Why or why not?

- Lessons learned:

- Feedback for improvement:

YOUR TASK

Review the scenarios below and, using the problem-solving process, complete the form above as a group.

Scenario 1: HOTMA Implementation

The PHA is preparing to implement HOTMA but has faced challenges updating policies, training staff, and adjusting systems to comply with the new regulations. Despite initial training, staff remain unclear on key changes. The Executive Director realizes that the HIP software is not available. Therefore, the concern is the June 1, 2025, compliance deadline for the May 7, 2024, regulation. Policy updates have not been fully incorporated into the PHA's administrative plan for the May 7, 2024 regulation, and the staff is confused on what to do.

Scenario 2: HCV Utilization Issues

PHA significantly underutilizes Housing Choice Vouchers, with only 75% of the allocated vouchers being leased. Despite multiple discussions in monthly management meetings, the issue persists. Upon review, you discover that the HCV staff has been slow to process new applicants due to outdated procedures and insufficient training on the waitlist management system. Furthermore, the Executive Director realizes that utilization rates were not tracked regularly and that the issue was not flagged in time for corrective action.

Scenario 3: Late Reexaminations

PHA is experiencing a spike in late reexaminations, with over 25% of annual reexaminations overdue. During a routine SEMAP review, HUD flags this as a performance issue. Upon investigation, you found that the reexaminations were delayed due to staff shortages in the Occupancy department and a lack of automated reminders in the management system. The Executive Director learned that the issue had been ongoing for several months but was not brought to their attention because the supervisor assumed it would self-correct as staff adjusted to the workload.

Scenario 4: Portability Payments in Arrears

PHA A has been trying to collect a significant amount in portability arrears from PHA B, sending multiple follow-up emails without receiving a response or resolution. Frustrated by the lack of progress, PHA A escalated the matter to HUD for intervention. When the situation comes to light, PHA A's Executive Director discovers that he was unaware of the arrears until now. Further investigation reveals that the Finance and HCV departments failed to escalate the issue appropriately, leaving the Executive Director out of the loop and delaying critical action.

Scenario 5: Shortfall

Although you have been working with HUD staff to utilize your reserves, HUD has informed you that you are in shortfall, and additional shortfall money is unavailable. Your primary resource is the Two-Year Tool. You and the finance director have realized that you cannot serve all of the families currently on the program.

Section 8:   Performance Trends and Results

The primary purpose of performance measures is to track performance levels.

The most important driver of performance excellence is effective leadership systems.

The first step in establishing performance measures is to analyze performance levels and trends.

As performance measures are put into place, the PHA can begin to track both performance levels and trends that will show the current status of the agency's operation.

For reference, see:

- Improving Accuracy in the master book section 7.5, which utilizes the Caseload and Accuracy Plan.

- Performance Improvement Checklist in the master book, also in section 7.5.

- Performance Trends and Results Worksheet in section 7.4 of the master book.

If the outcomes are not trending in the desired direction, the agency will need to develop new goals and leading indicators that will point operations in a different direction. Measurement will need to continue to determine whether the PHA is meeting its new targets or goals.

Considering "willing and able" status, if adequate training and mentoring, up-to-date policies and procedures, and good quality control feedback on error correction are not provided, the management and supervisory staff are responsible for poor performance.

SEMAP IMPROVEMENT

HCV managers should have an ongoing system in place for performing SEMAP reviews and tracking data on SEMAP indicators throughout the year. Although only certain indicators require a supervisory audit and back-up documentation, it may be helpful to do a preliminary scoring on all the indicators to determine whether there are potential problems.

SEMAP reviews should be done with a sampling each month. The sampling can be accomplished throughout the year but be sure to start at the beginning of the agency's SEMAP fiscal year. This is important because if the PHA needs improvement, this will allow sufficient time for most of the indicators.

Using the sample size required by the SEMAP rule (24 CFR 985) is usually sufficient, but it is useful to increase the sample if the desired outcomes are not being met. Using a system like www.random.org will allow the PHA justify to HUD that all selections were random. If, even with increasing the sample size, outcomes are still falling below expectations, an action plan is needed. This, of course, will depend on whether the agency's goal is to be a high performer or a standard performer.

The HCV supervisor may not have control over all SEMAP areas. You may need buy-in and assistance from the inspections, finance, FSS, and maybe the intake supervisors. Therefore, it is helpful to approach the Executive Director with a plan on how to review SEMAP, and if the desired results are not being achieved, how to go about effecting improvement. Preparing for SEMAP is a collaborative effort of all the senior leaders and supervisors.

Unsatisfactory results will relate to either poor production or poor accuracy. The suggestions in this chapter are meant to allow your agency to make improvements. Focus on each individual indicator and develop an action plan. The plan should include all tasks to be accomplished, the person responsible, and the due date.

The reason we recommend beginning the SEMAP review process as early in the fiscal year as possible is because correcting some problems may take longer than others and may involve more than one person or department.

HCV PROGRAM ASSESSMENT

Although SEMAP is HUD's measurement of the HCV program, the agency should have a broader measurement, measuring all program areas.

Section 8: Performance Trends and Results

On the portal you will find a comprehensive assessment checklist to determine the regulatory and management health of your HCV program.

- Several people should complete this to get an accurate picture of operations.

- An assessment should be conducted by the Executive Director, HCV Manager, and any other top-level staff shortly after you return to work.

- Add any areas you feel are pertinent to program performance.

HCV Program Assessment Areas

- Waiting List
- Selection and Eligibility
- Lease-up and Moves
- Annual and Interim Reexams
- Inspections
- Owner Rent Changes
- Terminations
- Portability
- Reviews and Hearings
- Tenant Rent Calculation
- Financial and Funding
- Fair Housing
- Quality Control
- Customer Service
- HUD Systems
- Policy and Procedures
- Training
- Forms and Schedules
- Audits
- Management Issues
- Systems

Example

Please use the following rating scale to assess your program on the following chart:

0   Not applicable
1   Poor - needs extensive work
2   Fair - needs work soon
3   Adequate - needs work
4   Very good - needs a little work
5   Excellent - needs no work

ANNUAL REEXAMINATIONS	RATING 0-5	COMMENTS
PHA policy spells out whether reexam is conducted in conjunction with move		
Families are required to report changes in family composition		
Staff consistently follow the hierarchy of verification in obtaining and using documents		
Proper consent forms are signed and dated		
Annual reexam tracking is utilized to ensure timely completion of reexams such as a Reexam Calendar		
Reexam policies and procedures ensure correct and timely reexams		
The annual reexam process is not linked to the annual inspection process		
Families and owners are notified of new rent amounts on a timely basis in accordance with state/local laws		
Schedule enough time for appointments, usually 30-45 minutes		
Color-coded files for easy reference (Jan appointments, etc.)		
Clear case assignment methodology		
Reassignment plan for higher/lower month caseloads		
Reassignment plan for staff vacancies		
Tracking software utilized for larger programs (Sharepoint)		
Monitor backlogs and reschedule as needed		
Plan and checklist utilized for initial QC prior to check run		
Utilize monthly reports on production and accuracy		

ANNUAL REEXAMINATIONS	RATING 0-5	COMMENTS
INTERIM ADJUSTMENTS		
Family reporting responsibilities are clearly outlined in policy		
Interim policies consider administrative burden and impact on average HAP		
Interims are completed timely so proper notice provided		
Interims are tracked		
No backlog on interims is present		

6/1/25

Section 9:   Reports

As demonstrated throughout this seminar, there are many types of reports. In this section we will review some management reports. Management reports are typically those reports that the HCV manager prepares for the executive director and/or the Board of Commissioners.

There are several examples of reports included in the master book, starting in section 7.7. Reports should be concise, easy-to-read, and, if possible, include charts and graphs.

Section 10: Knowledge Management

One of the greatest challenges to managers is to ensure that knowledge and information circulates freely within and among individuals and departments.

Knowledge management is the process through which an organization uses its collective knowledge and intelligence to accomplish its strategic objectives.

The objective of knowledge management is to improve organizational efficiency, effectiveness, and innovation.

In order to achieve this, PHAs must identify, organize, and share their collective knowledge and expertise. This requires making the organization's knowledge explicit, transparent, and easier to access and use.

The focus of knowledge management is how an organization ensures the availability of high-quality, timely data and information for those who need it (e.g., turnover and new staff).

It also includes how an organization builds and manages its knowledge assets.

The term *knowledge assets* refers to the accumulated intellectual resources of the PHA. It is the knowledge possessed by the workforce in the form of information, ideas, learning, understanding, memory, insights, technical skills, and capabilities.

The PHA's workforce, software, databases, documents, guides, policies, and procedures are all parts of its knowledge assets.

How the PHA builds, organizes, and manages these knowledge assets creates value for the agency, its staff, and its customers.

Technology is a major part of knowledge management, but it is not exclusively about technology—it is also about process, people, behavior, workflow, and other factors. With high turnover, knowledge management and succession planning become critical.

How the knowledge base is organized, and the quality of its content will directly affect how the workforce will do their work, solve problems and make decisions, improve their processes and services, keep current with changing needs (as funding or programs change), and develop innovative solutions that add value for the customer and the PHA.

It will also affect customer engagement by making a range of information available to customers such as:

- Information on how to apply for assistance and the documents that are required
- Information about housing discrimination
- The status of an inspection
- How owners can register an available unit
- Contact directory of personnel

The difference between data information and knowledge is detailed in the master book in section 7.8.

The agency should create a succession plan and could include a leadership training program to prepare the next generation of staff and supervisors.

The program would help identify who can handle the rigor of advanced positions in the PHA. The leadership training could be taught by internal staff and by experts in and outside of the industry.

Rigorous standards could be established to ensure no missed deadlines or failure to complete assignments and to ensure that core job duties don't suffer. Those who successfully complete the process could then be considered for leadership positions as they become available.

STUDY ASSIGNMENT

Read master book:

- Chapter 6: Measurements and Analysis
- Chapter 7: Performance Solutions

Review course material in workbook and knowledge assessments. Add to action plan notes.

Notes

Chapter 7   Situational Leadership

Leaders have followers

Leadership

- A leader is a person who provides direction and purpose to the actions of others through the exercise of effective authority.

- ***Leaders***:

  - Provide vision

- ***Managers***:

  - Provide resources.

- ***Resulting synergy***:

  - Employee empowerment

- What is your leadership style? That is, what is your pattern of behaviors as others see you, not how you see yourself.

Learning Activity 7-1: Supervisor Behavioral Analysis Questionnaire

- Original written by Kenneth Blanchard, Drea Zigarmi, Patricia Zigarmi, and Ebert Steele

  - Revised for the Housing Choice Voucher Program

SELF

Perceptions of Supervisory Style

- **Directions:**

  - The purpose of the SBA II-Self is to provide you with information about your perceptions of your own supervisory style. This instrument consists of twenty typical job situations that involve a supervisor and one or more followers. Following each situation are four possible actions that a supervisor may take. Assume that you are the supervisor involved in each of the twenty situations. In each situation, you must choose one of the four supervisor decisions. Circle the letter of the decision that you think would most closely describe your behavior in the situation presented. Circle only one choice.

1. A new employee in your department has shown she can handle most basic tasks given to her. You have worked with her closely and believe she is able to take on a more difficult assignment. She wants the opportunity, but you know she will need more job knowledge to do the new assignment. You would:

    a. Assign her the new task. Give her time to adjust. Check her work results periodically.

    b. Assign her the new task. Explain how and when the task is to be done. Show her how to solve some of the problems that could arise. Supervise her closely.

    c. Assign her the new task. Tell her how and when the task is to be done, but listen to her concerns. Try to include her suggestions, but keep her focused on the task. Check her work on a regular basis.

    d. Assign her the new task. Praise her efforts when possible. Meet with her to listen to any concerns she may have. Check her work periodically.

2. Your HCV department staff was praised by their former supervisor for their work designing a new quality control file review system. Since your arrival in the department six months ago, you have worked with your staff during the month-to verify their file reviews. Their reviews have been very accurate. This month you will be in a training session during the monthly quality control file reviews. Your people have offered to review the files themselves. In a group meeting, you would:

    a. Appoint one of your staff to be responsible for the accuracy of the file reviews. Specify how the files should be verified, and provide a telephone number where you can be reached. Tell the person you appoint to call you each day to inform you on the progress.

    b. Present your method for reviewing file accuracy. Ask the staff for their ideas. Incorporate their suggestions as appropriate, but make sure they follow your instructions. Check back on Tuesday to see if they stayed with the plan.

    c. Ask your staff to review the files. Give them a deadline for completing the inventory. Call in on Wednesday to track progress and to see if your help is needed.

    d. Ask them to complete the file reviews and discuss their concerns. Encourage them to develop solutions to any problems they foresee. Assure them that they are capable of doing the work. Check back with them by phone to see if they need help.

3. You have recently been transferred to the HCV department from public housing. As the supervisor, you have learned that the performance of the workers in this unit has been good in the past but is now declining. They understand the basic work routine, but new HUD rules and the addition of new Administrative Plan changes have caused their work procedures to change. They are frustrated by the changes and do not see the need to do something new. In a group meeting, you would:

a. Discuss your plan for improving performance. Ask for and use their suggestions to improve your plan. See that the improved plan is followed and track performance.

b. Talk with the group about the decline in performance. As a part of the group, help them discuss the possible solutions. Encourage them to choose and carry out the best plan. Track their performance.

c. Make sure they know about the decline in their performance. Let them decide what the specific problems are and how to solve each one. Track their performance.

d. Let them know what you expect in the areas where performance is low. Go over the new work procedures with them, and be specific about how the procedures are to be followed. Track their performance.

4. Two of the employees on your team are having trouble working together. Their lack of coordination has caused needless delays and work foul-ups. Neither employee sees it as her problem. The employees lack both the job skills and the interpersonal skills to solve this conflict. You would:

a. Talk to them separately about the conflict. Then, get them together to discuss the problem. Outline how they are to resolve the conflict, including their ideas if possible. See that they solve the problem.

b. Talk to them separately about the conflict. Then, get them together to discuss the problem. Encourage them to make suggestions for getting along together. See that they use their ideas to solve the problem.

c. Talk to them both together. Let them know you are concerned about delays and foul-ups. Give them time to solve the problem by themselves. Periodically, check to see if the matter needs your attention.

d. Talk to them separately about the problem. Then, get them together and outline how they are to resolve the conflict. See that they solve the problem.

5. You have asked one of your employees to prepare a one-hour presentation to compare a new set of work procedures with the procedures now being used. He is having trouble organizing the information concerning reasons for the change. The presentation outline is five days overdue. He seems to be working hard on the outline with few results. You would:

   a. Ask him why the outline is late. Listen to his concerns and help him develop his own approach to the outline. See that he uses his ideas.

   b. Discuss the organization of the information and the format you want him to use. Ask for his ideas and include his suggestions when possible. Make sure he follows your general ideas.

   c. Tell him that you want the presentation outline in two days. Show him what the outline should look like. Follow up to see that the work is done on time.

   d. Let him know you are concerned about the lateness of the outline. However, give him more time to complete the task. Set another deadline to receive the outline.

6. The people in your section are normally competent and committed. Lately, however, the agency has been going through a reorganization. Your people are worried about how these changes will affect them. During this time, your section has missed some important performance goals, and your boss is upset. You would:

   a. Listen to their concerns in a group meeting. Answer what questions you can. Let them know that you and your boss are upset with their performance levels. Share your plan to get performance back on track. Include their suggestions when possible. Check their progress.

   b. Listen to their concerns in a group meeting. Answer what questions you can. Ask them to get their performance back on track. Check their progress.

   c. Listen to their concerns in a group meeting. Answer what questions you can. Explore their feelings and thoughts about the recent changes. Ask them for their ideas about how to get performance back on track. Get their commitment to use those ideas. Check their progress.

   d. Listen to their concerns in a group meeting. Answer what questions you can. Let them know that you and your boss are upset with performance levels. Tell them specifically what steps they must follow to get their performance back on track. Check their progress.

7. You have asked one of your workers to take on a new assignment. The assignment is important to the department's month-end performance goals. He is not very enthusiastic about the change because he will no longer be working with his buddies. You are also afraid he may not have all of the skills needed to handle the new assignment. You would:

    a. Listen to his concerns about the new assignment. Get his ideas on strategies he could use to successfully complete the assignment. Encourage him to follow through on his ideas. Acknowledge that change is difficult at first. Track his performance.

    b. Tell him specifically what you want done and how you want him to handle the new assignment. Acknowledge that change is difficult at first. Work with him closely and track his performance.

    c. Ask him to get started with the new assignment but let him determine how to go about it. Acknowledge that change is difficult at first. Be available to answer any questions. Keep track of his performance.

    d. Talk with him about what you want done and how you want to handle the new assignment. Ask for his ideas and include his suggestions in an action plan that you develop for him to follow. Acknowledge that change is difficult at first. Track his performance.

8. A usually motivated and competent employee has come to you for help. In the past, she has always successfully completed her assignments. You have asked her to take on a task that involves several activities she has done before, but this time the risks are higher. She seems hesitant to start the project because she has doubts about her ability to do it. You would:

    a. Go over a detailed outline of steps for the project. Assure her that she can complete the assignment if she follows the outline. Include her suggestions in the outline when possible. Track her performance as she follows the plan.

    b. Give her a detailed outline of steps for the project. Set some timelines and check to see if she has any questions. Track her performance as she follows the plan.

    c. Review her plan of action and listen to her doubts. Assure her that she will be able to complete the project successfully. Track her performance.

    d. Advise her to go ahead with the assignment. Be available to discuss any problems. Track her performance.

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9. One of your workers has missed several deadlines. His performance has dropped over the past month. You have spoken to him on two separate occasions. It appears that he has not kept up with recent changes in work procedures, and he does not want to learn them. You would:

   a. Let him know that he must improve his performance. Give him specific instructions on what he needs to do to improve. Set shorter timelines and show him the work procedures to be followed. Track his progress.

   b. Let him know that he must improve his performance. Ask him what he can do. Encourage him to follow the steps he has outlined. Listen to his concerns and encourage him. Track his performance.

   c. Have a discussion with him about the importance of using the new work procedures. Tell him what you want done, and how and when it should be done. Include any suggestions he might have for resolving this problem. Try to get him to discuss his unwillingness to learn the new work procedures. Track his performance.

   d. Make sure he is aware that his performance level is declining. Tell him that you want the problem resolved, and give him a timeline. Track his performance.

10. You are planning some important changes in work procedures that involve changes in work hours. While you have made most of the staffing decisions in the past, you know your people have some definite ideas about their work hours. Your people have been working well as a team for over a year and know their jobs. In the past, they have resolved the few personality conflicts that have occurred. You would:

   a. Get the group together and help them examine the options. As a part of the group, help them reach their decisions. Put their assignments into effect.

   b. Ask the group to determine the new work hours for your approval. Ask them to check with you if they have any problems.

   c. In a group meeting, discuss the new work hours that you are proposing. Use the group's ideas and suggestions to shape your final decision on the assignments.

   d. Work out the new work hours yourself and post them.

11. During the peak work periods of the last few months, you have held daily meetings with your people to discuss work-flow problems. The records show that your team's performance has steadily declined. Lately, your people have become less participative in these meetings, and they are not focusing on the problems. Although they have the skills, they show little motivation for solving the work-flow problems. In a group meeting, you would:

   a. Tell them about the decline in performance. Inform them that certain performance levels must be maintained. Outline the steps to be followed and track their progress.

   b. Make sure they are aware of their performance levels. Give them time to improve their performance. Let them know you are available if they have problems. Track their progress.

   c. Discuss their declining performance. Talk about the importance of improving performance. Specify the steps you feel should be followed. Include their ideas in your instructions if possible, and track their progress.

   d. Help the group explore the reasons for the performance decline. Get them to generate alternative solutions for improving unit performance. Track their progress in carrying out their plan.

12. For the last few months, your staff has been working as a team to plan a new project. During that time, you have found that one team member has taken the lead when problems arise. She has great HUD rules and computer knowledge, in addition to people skills. Because of time constraints, you must move on to other projects. You have asked her to take charge of the project, and she enthusiastically accepted. Most of the other team members are pleased. You would:

   a. Ask to see her goals and a plan for project completion. Then, let the group work on its own under her leadership. Keep track of the group's progress.

   b. Meet with her to discuss the goals and action steps of the plan you want her to follow. Draw out her suggestions and include them in your plan. Keep track of the team's progress.

   c. Meet with her to discuss any problems she foresees. Help her explore any ideas she has for bringing the project to completion. Track the group's performance.

   d. Meet with her to tell her the goals and action steps you want her to follow. Keep track of the team's progress.

13. One of your new employees is not keeping accurate time records. He has been on your work team for about a week and has a positive attitude toward his job. The accounting staff is beginning to complain about his poor records. The record-keeping forms are sometimes difficult to complete because of the number of activities to be recorded. You would:

    a. Clarify his duties and performance standards. Give him more time to improve his record keeping. Check his records periodically.

    b. Specify his duties and performance standards. Clearly tell and show him how you want the work records to be completed. Check his records daily.

    c. Have a discussion with him about his duties and performance standards. Explore any problems he may be having with the forms. Encourage him to develop solutions to improve his record keeping. Check his records weekly.

    d. Clarify his duties and performance standards. Explain what must be done, but ask for his ideas for improving his record keeping. Check his records weekly.

14. You have asked one of your less experienced workers to complete a portability report. She has not had this specific assignment before, but she has some skills that will help. She is somewhat hesitant to take on this assignment because she doesn't like to make mistakes. You would:

    a. Ask her to complete the portability report for your approval. Be available for any questions she might have. Monitor her progress.

    b. Listen to her concerns about the new assignment, but assure her she can handle it. Talk with her about various steps she might take to complete the assignment.

    c. Tell her exactly what needs to be done and how to do it. Ask her if she has any suggestions, and include her ideas in your instructions when possible. Monitor her progress.

    d. Tell her specifically how the inventory report should be completed. Work with her closely to see that it is done correctly.

15. You want your people to work more closely as a team and be involved in decisions that affect the group. Most of the members see the need for this approach, but they don't know how to get started. You have had a lot of experience in working with teams. You would:

a. Meet with the team and focus on issues that you think are important and easiest to handle. When conflicts arise among group members, specify how the conflict will be resolved. Watch and control the group process.

b. Meet as a team to focus on issues that the members feel are important. Participate as a team member. As conflicts arise, help the group examine different ways to resolve their differences. Watch and help the group as needed.

c. Meet as a team. Consider their ideas, but focus on issues that you feel are important. Choose the method of resolution when conflicts arise among group members. Explain the reasons for the choice. Watch and encourage discussion.

d. Meet as a team to focus on issues that the members feel are important. Do not assume the leadership role. As conflicts arise, let the team resolve the problem. Observe the group process.

16. You have asked one of your shift operators to make some changes to the Administrative Plan. The new plan must incorporate new HUD regulations not included in the old Plan. This employee is the most knowledgeable about the Admin Plan. She is excited about the new regulations and has studied them in depth. You would:

a. Explain the changes you want made and show her how to make them. Then, ask her for her ideas and suggestions. Include her ideas if possible, but make sure your instructions are followed.

b. Ask her how she thinks the changes should be made. Listen to her ideas and review them with her. Answer any questions she may have. Check her progress.

c. Ask her to make the changes and to let you know if she has any questions. Check her progress.

d. Tell her the changes you want made. Show her how to make these changes and frequently check her progress.

17. One of your most knowledgeable workers continually checks things with you before he acts. He comes to you for reassurance and support on tasks he has performed well in the past. You want him to work more independently in the future.
You would:

    a. Tell him that you prefer that he check with you less often. Define the steps you want him to follow when questions arise. Be less available so he must solve his own work-related problems.

    b. Find out why he needs to see you so frequently. Be firm and specific about how to solve his work problems so he does not have to check with you. Ask him to check with you less often.

    c. Find out why he needs to check with you so frequently. Continue to listen to his work-related questions. Help him examine alternative solutions to his work problems. Suggest that he check with you less often.

    d. Tell him that he does not have to check with you before he acts. Give him the operating manuals so he can find the answers to any questions. Monitor his performance.

18. For about six months, you have been trying to get your four staff members to work as a team and share in the decision making. Another department has been downsized, and three new people have been added to your staff. The new people have never been involved in group decision making. Both the old and the new members of your staff want to work as a team, but sometimes conflicts arise that they can't resolve. You would:

    a. Tell the entire team what they must do to resolve their differences. Work with them and show them how to deal with conflicts. Frequently monitor performance.

    b. Discuss the problem with the entire group. Explain the steps they need to take to resolve their differences. Include their suggestions in your directions. Follow up to see how they are doing.

    c. In a meeting, explore the team's ideas and suggestions on how decisions should be made. Encourage the team to use these procedures to resolve their conflicts so they can maintain productivity. Track their performance.

    d. Discuss the problem with the entire team. Ask them to take the necessary steps to solve the problem on their own. Check periodically to see if performance is maintained.

19. One of your best workers is in a slump. For the last three months, she has shown little of the enthusiasm she had shown in the past. She has all of the skills necessary to get the job done, but her productivity is down because of her attitude. You would:

   a. Tell her that her productivity is down. Be specific about the performance standards that must be maintained. Outline the steps she needs to follow to improve her productivity. Monitor her performance.

   b. Discuss the problem with her. Explain the work procedures she is to follow. Get her ideas for improving her performance. Make sure she follows the specific procedures by tracking her performance.

   c. Discuss the problem with her. Ask her what problems she might be having that are influencing her work attitude. Listen and be open to what you can do to help. Track her performance.

   d. Discuss the problem with her. Make sure she knows her productivity is down. Ask her to resolve the problem. Be available if she needs to talk. Monitor her performance.

20. Because of an increase in workload, it is necessary to divide your department into two teams. You have chosen an experienced and capable member of your department to lead one of the teams. He has performed all of the jobs in the department with enthusiasm and skill. He has even filled in for you on a number of occasions. He is willing to accept this additional responsibility. You would:

   a. Give him the responsibility of leading one of the teams. Ask him to call you if he has any questions. Track the team's performance.

   b. Assign him the responsibility of leading one of the teams. Discuss what and how things should be done. Explore his ideas and include his suggestions in your instructions. Track the team's performance.

   c. Give him the responsibility of leading a team. Help him explore possible problems and their solutions. Encourage him to use his ideas. Track the team's performance.

   d. Assign him the responsibility of leading one of the teams. Indicate exactly what and how things should be done. Track the team's performance.

The Situational Leadership Theory is a leadership theory developed by Paul Hersey, professor and author of the book *Situational Leader*, and Ken Blanchard, leadership guru and author of *The One Minute Manager*.

- The Situational leadership theory is that no one style is right for every supervisor all of the time.

- There is no single "best" style of leadership.

Basic styles of leadership behavior include:

- S1: Directing

- S2: Coaching/Participating

- S3: Supporting

- S4: Delegating/Empowering

Leadership style: Your **leadership** style is how you behave when you are trying to **influence the performance** of others. It is the way you supervise or work with someone.

Each style has a blend of directive and supportive behavior.

- Directive behavior involves: clearly telling people what to do, how to do it, and when to do it, and then closely supervising their performance.

- Key words are:
  - Structure
  - Control
  - Supervise

- Examples of directive behavior include:
  - Setting goals and standards
  - Developing an action plan
  - Setting job priorities
  - Establishing deadline
  - Setting up a monitoring process
  - Showing or telling how to do task
  - Clarifying the follower's role
  - Closely supervising progress

- Supportive behavior involves:

  - Listening to people

  - Providing support and encouragement for their efforts

  - Facilitating their involvement in problem-solving and decision-making.

- Key words are praise, listen and facilitate.

- Examples of supportive behavior include:

  - Listening to follower's problems

  - Recognizing and praising achievements

  - Asking for suggestions

  - Encouraging and reassuring followers

  - Communicating why talk is important

  - Disclosing information about self

  - Involving follower in setting goals and developing action plans

  - Facilitating problem solving

S1 Directing is characterized by one-way communication in which the leader defines the roles of the individual or group and provides the what, how, why, when, and where to do the task.

- Directing Style is for people who lack competence but are enthusiastic and committed. They need direction and supervision to get started.

Style 1 Leader (high directive, low supportive)

- Identifies problems

- Sets goals and defines roles

- Develops an action plan to solve problems

- Controls decision making

- Provides specific directions

- Initiates problem solving and decision making

- Announces solutions and decisions

- Closely supervises and evaluates work

S2 Coaching – while the leader is still providing the direction, he or she is now using two-way communication and providing the socio-emotional support that will allow the individual or group being influenced to buy into the process.

- Coaching Style is for people who have some competence but lack commitment. They need direction, **inspiration**, and supervision because they are still relatively inexperienced. They also need support and praise to build their self-esteem, and involvement in decision-making to restore their commitment.

Style 2 leader (high directive, high supportive)

- Identifies problems and sets goals

- Recognizes and praises progress

- Explains decisions

- Solicits ideas

- Makes final decisions after hearing a person's ideas, opinions, and feelings

- Continues to direct work

- Evaluates work

S3 Supporting (sometimes described as Participating) – this involves shared decision making about how the tasks are accomplished. The leader provides less task behaviors while maintaining high relationship behavior.

- Supporting Style is for people who have competence, but lack **confidence** or **motivation**. They do not need much direction because of their skills, but support is necessary to bolster their confidence and motivation.

Style 3 Leader (High supportive, low directive)

- Involves the follower in identifying problems and setting goals

- Allows the follower take the lead in defining how a task is to be done or problem solved

- Provides assurance and support, resources, and ideas if requested

S4 Delegating – the leader is still involved in decisions, however, the process and responsibility have been passed to the individual or group. The leader stays involved to monitor progress.

• Delegating Style is for people who have both competence and commitment. They are able and willing to work on a project by themselves with little supervision or support.

Style 4 Leader (Low directive, low supportive)

• Jointly defines problems with the follower

• Collaborates with the follower in setting goals

• Allows the follower to develop an action plan and control decision making about how, when, and with whom a problem should be solved, or task completed

• Accepts the follower's decisions

• Evaluates performance only periodically

• Allows the follower to take responsibility and credit

STYLE	DIRECTIVE BEHAVIOR	SUPPORTIVE BEHAVIOR
S1 Directing	High ⟷ Low	
S2 Coaching	High ⟷ High	
S3 Supporting	Low ⟷ High	
S4 Delegating	Low ⟷ Low	

Remember, no one style is considered optimal for all leaders to use all the time.

Effective leaders need to be flexible, and must adapt themselves according to the situation.

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Learning Activity 7-2:   Supervisor Behavior Analysis Scoring: Part 1 Style

Scoring Directions

1. Record your answers from the Questionnaire you completed in the Style Flexibility Score table. Circle the letter from each question.

2. Total your answers for the S1 column under Totals; then do the same for S2, S3, and S4 columns.

3. In the boxes under Difference Between, put the difference between your score for that column and 5 without regard to positive/negative.

4. Subtotal those numbers across for the Subtotal.

5. Subtract the Subtotal number from 30 to get your Style Flexibility Score.

6. Continue reading the instructions below under Style Flexibility.

Style Flexibility

1. The column headings under Style Flexibility correspond to the four supervisory styles.

   S1 - High Directive, Low Supportive Behavior

   S2 - High Directive, High Supportive Behavior

   S3 - High Supportive, Low Directive Behavior

   S4 - Low Supportive, Low Directive Behavior

   The column (S1, S2, S3 or S4) with the largest number of circled letters is your primary supervising style. Enter this number in the circle in the appropriate quadrant on the Primary Style Matrix. For example, assume that the column with the largest number of circled items is column S3. If eight items have been circled, you would enter the number 8 in the S3 circle on the Primary Style Matrix. If you have a tie for your primary style (two or more columns with the same number of items circled), enter the numbers from each of these styles in the appropriate quadrants.

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2. Any column with four or more circled letters, other than your primary style(s), is a secondary supervising style. Enter this number(s) in the appropriate triangle(s) on the Secondary Style Matrix.

3. Any column with less than four circled letters should be considered a style you may want to develop. Enter this number(s) in the appropriate box(es) on the Developing Style Matrix.

Style Flexibility Score

1. To obtain your Style Flexibility Score, calculate the difference between 5 and each total. Subtract in either direction. Disregard the plus or minus sign. Enter these numbers in the shaded boxes at the bottom of the Style Flexibility columns. For example, if the total in column S2 is 2, then the difference between 5 and 2 would be 3, and a 3 should be entered in the box. If the total is 6, then the difference between 5 and 6 would be 1, and a 1 should be entered in the box.

2. Add all four numbers in the shaded boxes and enter this sum in the Subtotal box. Subtract the Subtotal from 30 and enter this number in the Style Flexibility Score box. Scores can range from 0-30. Draw an arrow at the corresponding number on the Style Flexibility Graph. A lower score indicates low style flexibility, which means that you select the same one or two styles for every situation. A higher score indicates high style flexibility, which means that you use all of the four styles more or less equally.

STYLE FLEXIBILTY

	S1	S2	S3	S4
1	B	C	D	A
2	A	B	D	C
3	D	A	B	C
4	D	A	B	C
5	C	B	A	D
6	D	A	C	B
7	B	D	A	C
8	B	A	C	D
9	A	C	B	D
10	D	C	A	B
11	A	C	D	B
12	D	B	C	A
13	B	D	C	A
14	D	C	B	A
15	A	C	B	D
16	D	A	B	C
17	A	B	C	D
18	A	B	C	D
19	A	B	C	D
20	D	B	C	A
Totals				

DIFFERENCE BETWEEN

5	5	5	5	Subtotal
☐ +	☐ +	☐ +	☐ =	☐

Subtract the number in the Subtotal
box from 30 to get your

Style Flexibility Score ⟶ ☐

Primary Style Matrix
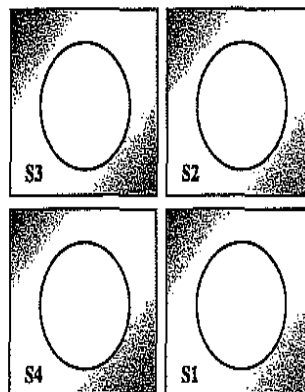
Secondary Style Matrix

Developing Style Matrix

Style Flexibility Graph

High — 30
— 25
— 20
— 15
— 10
— 5
Low — 0
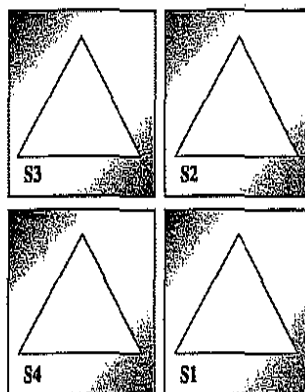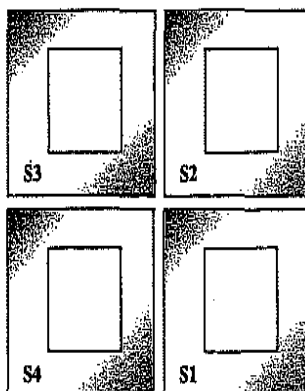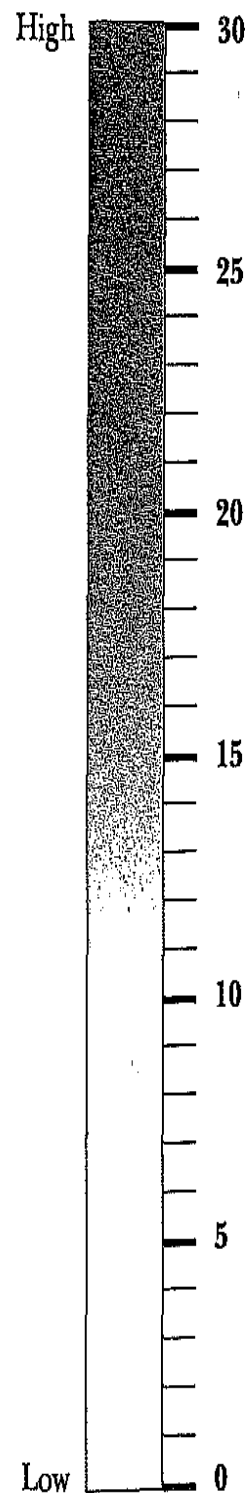
Development Level

The most successful leaders are those that adapt their leadership style to the development level of the individual or group they are attempting to lead/influence.

The development level relates to:

- The capacity to set high but attainable goals

- Willingness and ability to take responsibility for the task

- Relevant education and/or experience of an individual or a group for the task.

The right leadership style will depend on the person or group being led—the follower.

Four combinations of competence and commitment make up what we call *development level*.

- D1 - Low competence and high commitment
  - They generally lack the specific skills (new employees) required for the job in hand and are unable to do or to take responsibility for this job or task.

- D2 - Low competence and low commitment
  - They are still unable to take on responsibility for the task being done; however, they are willing to work at the task.

- D3 - High competence and low/variable commitment
  - They are experienced and able to do the task but lack the confidence to take on responsibility.

- D4 - High competence and high commitment
  - They are experienced at the task, and comfortable with their own ability to do it well. They are able and willing to not only do the task, but to take responsibility for the task.

Development Stages

- Stage 1: Enthusiastic Beginner

- Stage 2: Disillusioned Learner

- Stage 3: Emerging Contributor

- Stage 4: Peak Performer

Employees often progress through the four stages (levels) and sometimes move forward or back.

Example of forward progress for employee:

- New employee to experienced (D1 to D2 to D3 and maybe D4)

Example of backward progress for employee:

- New major HUD regulation or change in Admin Plan (D4 to D1)
- Personal crisis (D4 to D3)

The development levels are also task specific. A person might be generally skilled, confident and motivated in their job, but would still have a Development level D2 when asked to perform a task requiring skills they don't possess.

A good leader develops "the competence and commitment of their people so they're self-motivated rather than dependent on others for direction and guidance."

Development level of employee is dependent on:

- *Commitment* to job or task
- *Competence* with job or task

Manager varies the amount of:

- Direction
- Support

Leaders who do not match their style to that of those being led make it impossible for those being led to grow towards independence.

- D1=S1
- D2=S2
- D3=S3
- D4=S4

Situational Leadership Ⅱ

(High)

SUPPORTIVE BEHAVIOR

High Supportive and Low Directive Behavior

SUPPORTING

S3

High Directive and High Supportive Behavior

COACHING

S2

S4

DELEGATING

Low Supportive and Low Directive Behavior

S1

DIRECTING

High Directive and Low Supportive Behavior

(Low) ← DIRECTIVE BEHAVIOR → (High)

HIGH	MODERATE		LOW
D4	D3	D2	D1

DEVELOPMENT LEVEL OF FOLLOWER(S)
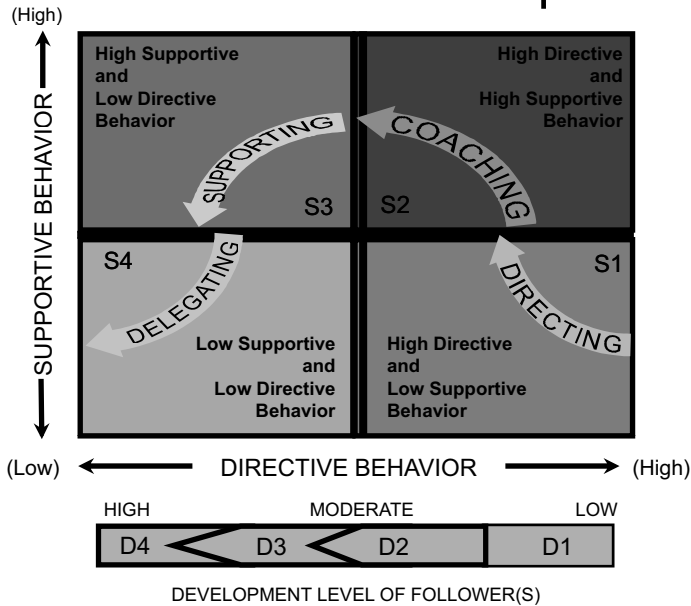
The Core Skill in Developing People

Emerging Contributor
Supporting
Building Self Reliance
S3

Disillusioned Learner
Coaching
Praising and Continued Work Direction
S2

S4
Peak Performer
Delegating
Delegating

S1
Enthusiastic Beginner
Directing
Providing Work Direction
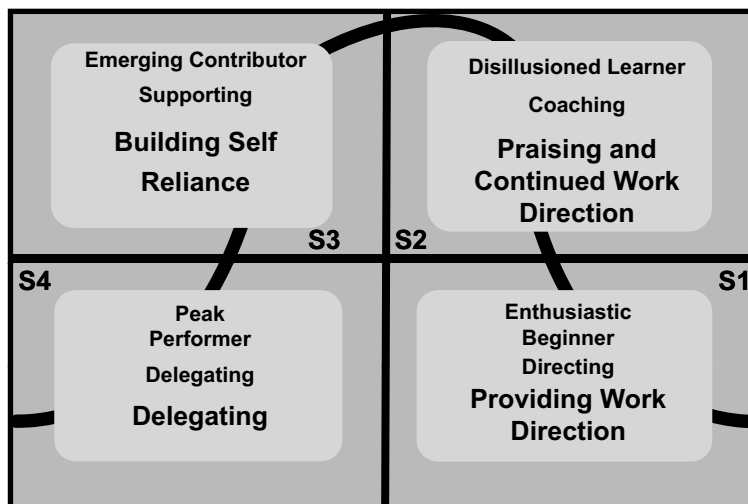
Learning Activity 7-3:   Supervisor Behavior Analysis Scoring: Part 2 Effectiveness

Style Effectiveness

- To score high on style effectiveness, you must not only show a high level of flexibility in style selection, but you must also choose the supervisory style that is most appropriate for each situation. The Style Effectiveness columns are headed by poor (P), fair (F), good (G), or excellent (E) ratings. The totals at the bottom of these columns indicate how often you chose a poor, fair, good, or excellent answer.

Style Effectiveness Score

1. To obtain your Style Effectiveness Score, multiply each total entered in the P, F, G, and E columns by the number below each total. Enter the products in the shaded boxes at the bottom of the Style Effectiveness columns. Add all four numbers and enter the sum in the Style Effectiveness Score box. Scores range from 20-80. A lower score indicates low style effectiveness, which means that you chose a greater number of fair or poor style choices for the 20 situations. A higher score suggests high effectiveness, which means that you chose a greater number of good and excellent style choices.

2. Draw an arrow at the corresponding number on the Style Effectiveness Graph.

	STYLE EFFECTIVENESS			
	P	F	G	E
1	A_4	D_3	C	B
2	A_1	B_2	D	C
3	C_4	B_3	D	A
4	C_4	B_3	D	A
5	D_4	A_3	B	C
6	D_1	A_2	B	C
7	C_4	A_3	B	D
8	B_1	A_2	D	C
9	D_4	B_3	A	C
10	D_1	C_2	A	B
11	A_1	C_2	B	D
12	D_1	B_2	C	A
13	A_4	C_3	D	B
14	A_4	B_3	D	C
15	D_4	B_3	C	A
16	D_1	A_2	B	C
17	A_1	B_2	D	C
18	D_4	C_3	B	A
19	A_1	B_2	D	C
20	D_1	B_2	C	A
als				

MULTIPLIED BY			
1	1	3	4

☐ + ☐ + ☐ + ☐ = ☐

e Effectiveness Score ⟶

Style Effectiveness Graph

High — 80

— 70

— 60

— 50

— 40

— 30

Low — 20

Style Diagnosis

• To better understand how you might improve your effectiveness score, it is helpful to examine the appropriateness of your style selections. The numbers in subscript in the poor and fair Style Effectiveness columns are the supervisory styles you chose when you circled responses A, B, C, or D. Record the number of Style 1 choices you made in the poor and fair columns and place that number in the oval in the S1 quadrant on the Style Diagnosis Matrix. Repeat this procedure for Style 2, Style 3 and Style 4 choices within the poor and fair columns. A pattern of four or more answers in the fair and poor categories in one supervisory style means that you may not be taking the development level of the person or group with whom you are working into consideration when choosing a supervising style. Go back to your SBA II-Self form, and reanalyze the situations to see if you can better understand why you may be using those styles inappropriately.

Style Diagnosis Matrix

Learning Activity 7-4:   Situational Leadership Video

Use a variety of leadership styles in directing and supporting the work of others and incorporate them in your roles as a manager.

Influence is power with people.

Important points toward working together:

- Every behavioral style is a positive style

- A strength overused becomes a weakness

- Value diversity

- Flex your style

Knowledge Checks

Chapter 1: Organizational Overview

Knowledge Check 1: Organizational Profile, Structure and Roles

1. The term organizational profile refers to which of the following?
    a. The organizational structure of the PHA
    b. The various programs administered by the PHA
    c. A snapshot of the organization, the key influences on how it operates, and the key challenges faced
    d. The SEMAP profile

2. Whose role is it to establish HUD's budget?
    a. Congress
    b. Office of Inspector General
    c. HUD headquarters
    d. HUD regional office
    e. HUD field office

3. PHAs are created under state enabling legislation. This legislation stipulates which of the following?
    a. The size of the PHA's housing program
    b. Procedures for appointment or election of commissioners
    c. The types of programs the PHA can administer
    d. The jurisdiction of the PHA
    e. Both b and d

4. Who appoints PHA Commissioners?
    a. Congress
    b. HUD headquarters
    c. HUD regional office
    d. HUD field office
    e. Local government (city, county, state)
    f. PHA

5. Ongoing monitoring of PHAs for program compliance and compliance with HUD systems is the responsibility of which of the following?
    a. HUD field offices
    b. HUD headquarters
    c. The Office of Inspector General
    d. HUD regional offices

6. HUD is organized into how many regions?
    a. One
    b. Five
    c. Ten
    d. Twenty

7. It is the HUD field office's role to:
   a. Write regulations
   b. Allocate funding
   c. Monitor performance with systems
   d. Report to Congress
   e. All of the above

8. Who is responsible for financial analysis and review of VMS reporting?
   a. The HUD Financial Management Center
   b. REAC
   c. The HUD field office
   d. HUD regional offices

9. The role of the Inspector General is to report to HUD headquarters.
   a. True
   b. False

10. REAC's role in the HCV program relates to what program function?
    a. Inspection
    b. Financial
    c. Payment standards
    d. Rent reasonableness

11. The primary regulation for the regular HCV program is 24 CFR:
    a. Part 1
    b. Part 7
    c. Part 882
    d. Part 900
    e. Part 982

Knowledge Check 2: Fair Housing Compliance

1. The civil rights law that provides protections for persons with disabilities to local entities is:

    _____

2. The HUD regulations addressing nondiscrimination can be found in 24 CFR:
    a. Part 982
    b. Part 960
    c. Part 8
    d. Part 5

3. The rule that requires PHAs to make assisted housing available without regard to gender identity is:
    a. The Fair Housing Act
    b. The Civil Rights Act
    c. ADA
    d. OGC's Disparate Treatment Rule
    e. The Equal Access Rule

Knowledge Check 3: Structure and Organization of the PHA

1. Which of the following is **NOT** a role of the PHA?
   a. To resolve owner/tenant disputes
   b. To establish policies and procedures for program operation
   c. To determine eligibility of applicants
   d. To administer funding

2. A benefit of contracting out PHA functions is that it is the contractor, not the PHA, who is accountable to HUD.
   a. True
   b. False

3. Commissioner appointment requirements are spelled out in:
   a. HUD regulations
   b. Federal law
   c. Administrative plan
   d. By-laws

4. Whose role is it to hire PHA staff?
   a. HUD headquarters
   b. HUD field office
   c. Mayor of the local government
   d. PHA Board of Commissioners
   e. PHA Executive Director

5. Whose role is it to approve the budget for salaries?
   a. HUD headquarters
   b. HUD field office
   c. Mayor of the local government
   d. PHA Board of Commissioners
   e. PHA Executive Director

6. To best understand the reporting relationships within a PHA, you would look at:
   a. The annual plan
   b. The organizational chart
   c. The five-year plan
   d. The administrative plan

7. A PHA must choose their organizational structure from one of three HUD-mandated structures.
   a. True
   b. False

Knowledge Check 4: Mission, Vision, Culture, Strategic Planning and Goals

1. A mission statement:
   a. Identifies potential risks to the PHA
   b. Embodies the purpose of the PHA
   c. Includes the vision of the organization's leaders
   d. Guides the actions and decisions of the PHA
   e. Both b and d

2. "The ABC PHA will be nationally recognized as an innovative agency and leader in creating community partnerships" is an example of:
   a. A mission statement
   b. A vision statement

3. The organizational culture within an organization is created by:
   a. The PHA staff
   b. Senior leaders
   c. The front-line supervisors
   d. The board of commissioners

4. The strongest indicator of the organizational culture is:
   a. The dress code
   b. How promotions are made within the organization
   c. The things that management pays attention to and rewards
   d. How staff interacts inside and outside of the workplace

5. The application of creativity, analysis, problem solving in planning and decision-making is called:
   a. Goal management
   b. Organizational planning
   c. Strategy deployment
   d. Strategic thinking

6. What is the document which represents the specific roadmap to get to where an organization wants to be in the future?

   _____

7. Strategic planning provides an idealized description of a desired outcome.
   a. True
   b. False

8. A strategy map for the HCV program should include:
   a. Financial management
   b. Customers
   c. Internal processes
   d. Employees
   e. All of the above

9. "90 percent of Housing Specialists who perform annual reexaminations will improve their accuracy rate on reexamination file reviews." Is this an acceptable SMART goal?
   a. Yes
   b. No

10. An organizational goal management solution ensures that individual employee goals and objectives align with the vision and strategic goals of the entire organization.

    a. True
    b. False

11. Which of the following is not a characteristic of a SMART goal?

    a. Measurable
    b. Substantive
    c. Time-driven
    d. Attainable

12. A way to ensure that every employee understands how their efforts contribute to the organization's success is called:

    a. Action planning
    b. Goal management
    c. Strategic thinking
    d. The SMART model

13. All are part of the 5-step process to resolve differences EXCEPT:

    a. Acknowledgment
    b. Appreciation
    c. Mandate
    d. Leverage
    e. Both c and d

Knowledge Check 5: Leadership Performance Systems

1. Which of the following is part of a leadership system?
   a. Strategy maps
   b. Organizational chart
   c. Performance standards
   d. All of the above

2. How leadership is exercised, formally and informally, throughout the organization refers to:
   a. Leadership systems
   b. Work systems
   c. Work processes
   d. Knowledge management

3. Leadership systems include:
   a. Structures and mechanisms for decision making
   b. Two-way communication
   c. Selection and development of leaders and managers
   d. Reinforcement of values and ethical behavior
   e. All of the above

4. Provide three examples of leadership systems.

   _____

   _____

   _____

Knowledge Check 6: Organizational Relationships

1. PHAs typically have the most contact with:
   a. HUD headquarters
   b. HUD regional office
   c. REAC
   d. HUD field office

2. A primary reason a PHA should develop a relationship with the mayor/city council is:
   a. They are the primary funder of the PHA
   b. They could be involved in a complaint about a family or owner residing in a neighborhood
   c. They typically would approve a PHA's budget
   d. They could have relatives in the HCV program

3. An automated communication vehicle for families and owners that can save PHA staff time is called a:
   a. Portal
   b. Regulation
   c. Policy
   d. Board of commissioners meeting

4. Which answer best describes the "Voice of the Customer?"
   a. Responding to customer complaints within 24 hours
   b. Capturing customer-related information with the ultimate goal of improving customer service outcomes
   c. The tone and manner in which staff communicates with clients
   d. Correspondence and other complaints from owners and tenants
   e. Both a and b

5. The PHA is required by HUD to establish a Resident Council of HCV families.
   a. True
   b. False

Chapter 2: Workforce Management

Knowledge Check 1: Workforce Management and Capability

1. Which of the following is not involved in workforce planning?
   a. Policy development
   b. Turnover analysis
   c. Budget projections
   d. Workload projections

2. Accomplishing work processes through the knowledge, skills and abilities of employees is called:
   a. Workforce capability
   b. Client management
   c. Performance management
   d. Workforce management

3. Which function is NOT one of the five basic functions managers perform?
   a. Planning
   b. Organizing
   c. Leading
   d. Specializing
   e. Controlling

4. The HCV manager's role is to develop all of the following except:
   a. Mission
   b. Policy
   c. Procedures
   d. Performance metrics
   e. Performance measures

5. Which level of management should be responsible for directing staff at the operational level?
   a. Executive
   b. Department managers
   c. Supervisors or team leaders

6. Which is true of the middle level of management which would include department managers?
   a. Responsible for the organizational and directional functions
   b. Responsible for setting goals and policies
   c. Responsible for a more "hands on" approach to management

7. Functional accountabilities, work methods, skills, and performance standards are essential for:
   a. Work plans and performance appraisals
   b. Creating policies
   c. Responding to customers
   d. Teamwork

8. What is most essential in determining the qualifications needed to fill a position?
   a. Skilled interviews of prospective employees
   b. Clear and specific job descriptions
   c. Thorough reference and background checks
   d. Pre-hire testing

9. The capacity to perform an activity is called:
   a. Ability
   b. Skill
   c. Knowledge
   d. None of the above

10. Understanding measuring and analyzing data is an example of:
    a. An ability
    b. A skill
    c. Knowledge
    d. None of the above

11. What you have learned to do is called:
    a. Ability
    b. Skill
    c. Knowledge
    d. None of the above

12. Dealing with conflict effectively is an example of:
    a. Knowledge
    b. Skill
    c. Ability
    d. None of the above

Knowledge Check 2: Workforce Capacity

1. In the generalist model, employees work in specific functional program areas such as moves or inspections.
   a. True
   b. False

2. A cross between the specialist model and the generalist model is known as:
   a. The team model
   b. A blended approach
   c. The Integrated model
   d. None of the above

3. The amount of staff specialization usually relates to:
   a. The experience of PHA staff
   b. The size of the PHA
   c. Established performance standards
   d. None of the above

4. Staff with full case management responsibilities can handle larger caseloads.
   a. True
   b. False

5. All caseloads are measured on a _____ basis:
   a. Daily
   b. Weekly
   c. Monthly
   d. Annual

6. The caseload assignment most typically used by PHAs is:
   a. Alphabet
   b. Zip Code
   c. Owner
   d. MSA districts

7. Which of the following should be included in a Caseload and Accuracy Plan?
   a. Graduated caseload for new employees
   b. Expectations for accuracy
   c. Quality control spreadsheets
   d. Both a and b

8. Calculating staffing requirements depends on:
   a. Future demands and workforce levels
   b. Longevity of staff
   c. Accuracy levels of staff
   d. Ability of staff to work as a team

9. Which of the following are methods to determine staffing needs?
   a. Cycle time
   b. Quantification
   c. Guestimation
   d. Both a and b

10. Determining staff needs through benchmarking means:
    a. Measuring the time needed to perform a task
    b. Comparing the production of one staff person to another
    c. Looking at staffing levels for comparable sized PHAs
    d. Tracking production by predetermined increments

11. Which of the following would be essential to determine cycle time for annual reexamination?

    a. The number of staff available

    b. How long it takes to perform the various tasks

    c. The policies on annual reexaminations

    d. The number of reexaminations to be completed

12. Cycle time refers to which of the following?

    a. The annual reexamination cycle

    b. The time it takes to fulfill commitments or complete tasks

    c. All aspects of key measures of time performance

    d. Both b and c

Chapter 3: Effective Supervision

Knowledge Check 1: Effective Supervision Part 1

1. The testing process in hiring is needed to determine workforce:
   a. Capacity
   b. Capability
   c. Contribution to society
   d. Generational fit

2. Conducting simulations that gauge specific job-related abilities and skills is an acceptable and effective hiring policy.
   a. True
   b. False

3. An effective hiring policy would be to always promote from within.
   a. True
   b. False

4. Onboarding employees is how the supervisor makes decisions on who should be promoted.
   a. True
   b. False

5. The best way to clarify expectations of staff is:
   a. To discipline under-performing staff
   b. To set performance standards
   c. To establish performance incentives
   d. To adopt quality control procedures

6. The most critical factor in developing high-performing staff is:
   a. Classroom training
   b. On-line training
   c. One-on-one involvement by the supervisor
   d. On-the-job training

7. Performance management optimizes results by:
   a. Aligning all subsystems to achieve overall organizational goals
   b. Establishing a means to track results
   c. Identifying desired results
   d. Helping supervisors to identify problems
   e. The organizational profile

8. Achieving the overall goal requires all of the following activities EXCEPT:
   a. Identification and prioritization of desired results
   b. Establishing means to measure progress towards the results
   c. Immediately placing low performers on an IDP
   d. Exchanging ongoing feedback on progress

9. To communicate what performance is expected of staff, utilize:
   a. Performance standards
   b. Exit interviews
   c. Performance policies
   d. Knowledge transfer

10. Which of the following are performance improvement techniques?
    a. Coaching
    b. Training
    c. Policy or procedure clarification
    d. All of the above

11. The best tool to bridge the gap between actual performance and desired performance is:
    a. An individual development plan
    b. Employee counseling
    c. Performance incentives
    d. Peer review

12. The best solution for staff that is unwilling or unable to improve their performance is:
    a. Assign them to a high performing team
    b. An individual development plan
    c. Termination
    d. Coaching

13. IDPs should only be used as part of the performance evaluation.
    a. True
    b. False

Knowledge Check 2: Effective Supervision Part 2 DiSC Profile

1. DiSC is a personal assessment tool used to:
   a. Determine promotional ability of staff
   b. Conduct performance evaluations
   c. Analyze file review results
   d. Improve work productivity

2. DiSC profiles help you and your team:
   a. Understand the HUD rules
   b. Respond to conflict
   c. Foster creative group interactions
   d. Both b and c

3. A positive benefit of understanding a person's behavioral style is you will understand their preferred communication style and their preferred work environment.
   a. True
   b. False

4. Using your predominant behavioral style all of the time will result in productivity.
   a. True
   b. False

5. The source of conflict between people results from:
   a. People focusing solely on their common ground
   b. Perceptions of differences
   c. Building common goals
   d. All of the above

6. A behavioral tendency to create a motivational environment would most likely be this behavioral style:
   a. Dominant
   b. Influences others
   c. Steady
   d. Cautious/conscientious

7. A behavioral tendency to calm excited people would most likely be this behavioral style:
   a. Dominant
   b. Influences others
   c. Steady
   d. Cautious/conscientious

8. A behavioral tendency to be motivated by adhering to HUD regulations would most likely be this behavioral style:
   a. Dominant
   b. Influences others
   c. Steady
   d. Cautious/conscientious

9. A behavioral tendency to analyze performance critically would most likely be this behavioral style:
   a. Dominant
   b. Influences others
   c. Steady
   d. Cautious/conscientious

10. A behavioral tendency to make quick decisions would most likely be this behavioral style:

   a. Dominant

   b. Influences others

   c. Steady

   d. Cautious/conscientious

11. A behavioral tendency of a high S behavioral profile is:

   a. Making quick decisions

   b. Weighing the pros and cons

   c. Being a team player

   d. Dominating

Chapter 4: Basic Financial Management and Program Utilization

Knowledge Check 1: Terminology and HAP Renewal Funding

1. The document that is the primary contract between HUD and the PHA is called the:
   a. HAP Contract
   b. IMS/PIC Contract
   c. VMS Contract
   d. ACC or CACC

2. As part of the ACC contract, the PHA must require owners in the HCV program to comply with HUD regulations:
   a. True
   b. False

3. Funding is based on:
   a. The calendar year
   b. HUD's fiscal year
   c. Congress's fiscal year
   d. The PHA's fiscal year

4. In the ACC funding exhibit, increment terms will be based on:
   a. The PHA's current financial status
   b. The previous quarter of actual funding
   c. Available funds at the time an increment expires and is renewed
   d. The PHA's need when an increment expires

5. Renewal funding is based on:
   a. Prior year funding for the PHA
   b. Validated VMS leasing and cost data for the prior calendar year
   c. Average VMS leasing and cost data
   d. Validated leasing and cost data for the prior fiscal year

6. Which HUD system enables HUD to obligate funding for PHAs based on actual PHA use?
   a. IMS/PIC
   b. The funding exhibit
   c. VMS
   d. None of the above

Knowledge Check 2: Cash Management

1. Under the cash disbursement procedures, PHAs are guaranteed to directly receive the entire ABA apportioned to them on a calendar year basis.
   a. True
   b. False

2. HUD-held reserves are called:
   a. Restricted net position
   b. Unrestricted net position
   c. Program reserves
   d. Renewal funding

3. PHA-held HAP reserves are called:
   a. Restricted net position
   b. Unrestricted net position
   c. Program reserves
   d. Renewal funding

4. The key difference between restricted net position and program reserves is:
   a. The PHA holds the cash balances of the restricted net position account where HUD holds the cash balances for the program reserves
   b. HUD holds the cash balances of the restricted net position account and the PHA holds the cash balances for the program reserves
   c. Neither a nor b is correct

5. The maximum amount the PHA can spend in a calendar year is:
   a. The maximum amount under the ACC
   b. Available ABA and any amounts in their restricted net position and program reserve balances approved for use by HUD
   c. No more than their available ABA because PHAs may no longer use restricted net position
   d. None of the above

6. HUD's disbursements to a PHA:
   a. Are based upon the previous month's costs as reported in VMS
   b. Are based on the last validated month reporting in VMS
   c. Are scheduled to arrive on the 20th business day of the month
   d. Both b and c

Knowledge Check 3: Monitoring HAP Funding

1. If a PHA leased 1,000 units for 12 months that would equal how many unit months leased?
   a. 12
   b. 120
   c. 1,200
   d. 12,000

2. PHAs may lease additional units above their baseline on an annual basis if they have sufficient annual budget authority.
   a. True
   b. False

3. An underleased PHA deliberately overleases near the end of their calendar year on a monthly basis in order to fully utilize calendar year funding.
   a. This is always the best solution
   b. This is not permitted
   c. This may result in cash-flow issues
   d. The PHA will be overleased at the beginning of the next year
   e. Both c and d

4. A PHA will earn their full SEMAP points for the leasing indicator if:
   a. They lease 95 percent of their baseline units
   b. They spend 98 percent of their annual budget authority
   c. They spend 95 percent of their annual budget authority
   d. Both a and c

5. The total renewal funding that will be received divided by the total unit months HUD used to determine HAP renewal funding results in:

   _____

6. To arrive at the actual PUC for a month:
   a. Multiply the average HAP by the number of units leased
   b. Divide the total HAP for the year by the number of units leased for the year
   c. Divide the total HAP for the month by the number of units leased for the month
   d. Divide the average HAP per unit by the number of units leased

7. If your actual PUC exceeds the HUD-funded PUC available under your budget authority:
   a. HUD will provide funding increases to cover the cost
   b. HUD will not provide funding increases to cover the cost
   c. HUD will reduce administrative fees by 10%
   d. Both b and c

8. If your actual PUC exceeds the HUD-funded PUC available under your budget authority, you should:
   a. Reduce your unit months leased
   b. Request a higher PUC from HUD
   c. Increase your unit months leased
   d. Terminate families from the program

9. When reviewing data in VMS, name
    three important data comparisons
    to track.

    _____

    _____

    _____

Knowledge Check 4: Administrative Fees

1. A PHA leased 780 units in April. The column A fee is $75. The column B fee is $65. The HUD proration is 100%. How much will the PHA earn in administrative fees for April?
   a. $58,500
   b. $56,700
   c. $50,700
   d. $62,400

2. Unused administrative fees that were earned and not spent are referred to as:
   a. Unrestricted net position
   b. Program reserves
   c. UMA
   d. Restricted net position

3. Administrative fee reserves:
   a. Is capped by HUD
   b. Can be used to cover future administrative deficits
   c. Generally should not be used to fund long term, fixed expenses
   d. Both b and c

4. If HCV administrative expenses exceed earned and funded fees, PHAs may use:
   a. Restricted net position
   b. Unrestricted net position
   c. Program reserve
   d. None of the above

5. Administrative fees may only be used for activities related to the provision of HCV assistance, including related development activities. Related development activities include which of the following?
   a. Development of project-based voucher units
   b. Supporting a voluntary public housing FSS program
   c. Unit modifications for accessibility purposes
   d. Both a and c
   e. All of the above

6. In order to determine administrative fees earned:
   a. Multiply the number of units leased by per-unit cost
   b. Multiply the number of units leased on the first day of the month by the fee factor
   c. Multiply the number of units leased annually by the fee factor
   d. Multiply budgeted units by the fee factor

7. PHAs are required to develop an administrative budget for non-HAP expenses.
   a. True
   b. False

Chapter 5: Operational Work Systems

Knowledge Check 1: Work Systems and Processes

1. Essential factors of "sustainability" include which of the following?
   a. Job description
   b. Workforce capacity
   c. Technology and resource availability
   d. All of the above

2. The ways in which an organization aligns its internal operations an workforce with its key vendors, suppliers, partners, and collaborators is:
   a. Strategy mapping
   b. Work systems
   c. Work goals
   d. Work processes

3. _____

   create(s) the internal structure of how the work is accomplished and involve(s) all of the activities needed to sustain the various program functions.

4. An example of a "work system" would include which of the following?
   a. Mailing letters for annual reexaminations
   b. Tracking and monitoring mechanisms for the company with which the PHA contracts to perform its inspections
   c. Conducting an informal hearing
   d. Selecting an applicant from the waiting list

5. An example of a work process would include which of the following?
   a. Data entry and transmission of a 50058 for a new admission
   b. Sending an email
   c. Answering a letter
   d. Reading a PIH notice

6. Work systems and process are part of an organization's leadership systems.
   a. True
   b. False

Knowledge Check 2: The Administrative Plan

1. Which of the following documents has the purpose of establishing policies for carrying out the program in a manner consistent with HUD requirements and local goals and objectives contained in the PHA's agency plan?
   a. The Code of Federal Regulations
   b. The administrative plan
   c. PIH Notices
   d. The personnel policy

2. In order to write an administrative plan, you must distinguish between program areas that are mandatory and those allowing discretion.
   a. True
   b. False

3. An agency's discretionary policies are not required to be stipulated in the PHA's administrative plan.
   a. True
   b. False

4. Mandatory requirements are found in:
   a. HUD regulations
   b. Current PIH notices
   c. Opinions or rulings by Office of General Counsel
   d. All of the above
   e. Both a and b only

5. Where state law is more restrictive than federal law, but does not conflict:
   a. The PHA should follow the state law
   b. The PHA should follow federal law
   c. The PHA is required to get a ruling from HUD
   d. The PHA may determine with which law to comply

6. If a HUD regulation states that "The PHA may not…," this means which of the following?
   a. The PHA has the option to decide
   b. The PHA is prohibited from doing something
   c. Neither of the above

Knowledge Check 3: Key Work Processes and Procedures

1. Policies are incorporated into the daily operations of a PHA through:
   a. Procedures
   b. The PHA plan
   c. Management directives
   d. The organizational chart

2. Procedures include which of the following?
   a. Tasks to be completed
   b. The appropriate forms to use
   c. Any required approvals
   d. All of the above

3. Work processes are most driven by:
   a. The housing specialists
   b. The HCV supervisor
   c. The PHA software
   d. HUD regulations
   e. PHA policy

4. Unique work processes that are intended to produce an outcome then go out of existence are called:
   a. Work systems
   b. Projects
   c. Policies
   d. Written procedures

5. Decision points within the language of a regulation indicate:
   a. The need for a procedure
   b. A requirement for the PHA
   c. The need to develop policy
   d. The need to obtain a decision from HUD

6. Procedures should include:
   a. Who is responsible
   b. Forms and systems used
   c. Applicable regulations and policies
   d. All of the above

7. Safe harbor references include:
   a. Guidebooks
   b. Expired notices
   c. Expired handbooks
   d. Recommendations from individual HUD staff
   e. All of the above

Chapter 6: Measurements and Analysis

Knowledge Check 1: Quality Control Planning and Types

1. An effective quality control system:
   a. Clarifies performance expectations
   b. Is required by HUD regulations
   c. Must be adopted by the board of commissioners
   d. Clarifies who reports to whom

2. Which of the following is included in a quality control plan?
   a. The time period for correcting errors
   b. The procedure for conducting file reviews
   c. Actions to ensure that errors are not repeated
   d. All of the above

3. HUD requires PHAs to establish a quality control plan.
   a. True
   b. False

4. The most important consideration in designing a quality control program is:
   a. The number of staff
   b. The number of units
   c. Prior SEMAP scores
   d. The goals and outcomes you want to achieve

5. Generally, the broader the desired outcome, the easier it will be to develop a quality control measurement process.
   a. True
   b. False

6. A supervisor reviews the HUD-50058 before it is approved in the computer system. This is an example of:
   a. Periodic quality control
   b. Preventive quality control
   c. Continuous quality control

7. A supervisory audit of SEMAP indicators for purposes of SEMAP certification is an example of:
   a. Periodic quality control
   b. Preventative quality control
   c. Continuous quality control

8. Preventive quality control:
   a. Is a comprehensive program review done at intervals
   b. Is an ongoing process of regularly collecting and analyzing data
   c. Deters errors before they have a negative impact
   d. Both b and c

9. If you wanted to look at trends and focus on areas where your PHA was most vulnerable, you would use preventive quality control.
   a. True
   b. False

10. The ultimate objective of quality control is to detect errors.
    a. True
    b. False

11. File reviews are an example of:
    a. Preventive quality control
    b. Periodic quality control
    c. Continuous quality control
    d. The goals and outcomes to be achieved

12. The type of quality control which deters a negative dollar impact is called:
    a. Preventive quality control
    b. Periodic quality control
    c. Continuous quality control
    d. The goals and outcomes to be achieved

13. A HUD audit would be an example of:
    a. Preventive quality control
    b. Periodic quality control
    c. Continuous quality control
    d. The goals and outcomes to be achieved

14. A supervisory audit of SEMAP indicators done monthly would be called:
    a. Preventive quality control
    b. Periodic quality control
    c. Continuous qu1ality control
    d. The goals and outcomes to be achieved

15. Trends are developed from which type of quality control?
    a. Preventive quality control
    b. Periodic quality control
    c. Continuous quality control
    d. The goals and outcomes to be achieved

Knowledge Check 2: Conducting QC

1. The first level of quality control should be done by a supervisor.
   a. True
   b. False

2. Supervisors should quality control files prior to submission for payment. It is recommended that the supervisor:
   a. Spend 1.5-2 hours per week on this function
   b. Review more files of staff prone to making errors
   c. Review 25 percent of the files submitted
   d. Both a and b
   e. a, b and c

3. If files are submitted the last week of the month, there is still adequate time to QC and fix discrepancies.
   a. True
   b. False

Knowledge Check 3: Production Performance and Accuracy Measurement

1. Key performance indicators should:
   a. Be created for all functional areas of the program
   b. Be targeted to poor performing staff
   c. Be concentrated on areas where there is financial risk
   d. Should tie back to individual performance standards for each staff position
   e. Both a and d only

2. If something should have been produced, but was not, it is called a:
   a. Leading indicator
   b. Lagging indicator
   c. Key performance indicator
   d. Projected indicator

3. If the goal is to complete 50 lease-ups and 50 families were issued vouchers but only 25 leased up, your lagging indicator would be:
   a. 25
   b. 100
   c. 50
   d. None of the above

4. If you did not complete the required reexaminations for January, the balance of uncorrected reexaminations:
   a. Are considered leading indicators for February
   b. Are considered lagging indicators for March
   c. Do not figure into reexams to be conducted for January

5. For a reexamination to be considered completed successfully:
   a. Conducted on time with errors
   b. File is completed on time with errors
   c. File was not completed on time but no errors
   d. File was completed on time with no errors

6. It is impossible to have an effective error reduction strategy without:
   a. A positive work environment
   b. Up-to-date personnel policies
   c. Standards and measurements
   d. Equitable caseloads

Knowledge Check 4: Problem Solving

1. The steps in problem analysis include all of the following, EXCEPT:
   a. Understanding what really happened
   b. Finding appropriate solutions
   c. Clarifying the area of concern
   d. Identifying the root cause of errors

2. A step of problem analysis strategy is to identify the cause of the problem.
   a. True
   b. False

3. By determining the cause of a problem, the manager can identify:
   a. Errors and negative trends
   b. Breakdowns in leadership systems
   c. Overall organizational performance
   d. Unclear policies and procedures
   e. All of the above

4. Common causes of PHA errors include all EXCEPT:
   a. Uneven workload distribution
   b. Inadequate staff training
   c. Regulations too difficult to implement
   d. Inadequate forms

5. A root cause of staff not knowing what and how to do a task is:
   a. Inadequate supervision
   b. Excessive workload
   c. Organizational culture
   d. Unimportant

6. What is the first step in the problem response strategy?
   a. Implement an action plan
   b. Develop an implementation plan
   c. Find appropriate solutions

Knowledge Check 5: Performance Trends and Results

1. The main purpose of performance measures is:
   a. To track performance levels
   b. To recognize high performing staff
   c. To improve customer service
   d. To identify leading indicators

2. If outcomes are not trending in the direction you want, you will need to develop:
   a. Incentives for staff
   b. Disincentives for staff
   c. A new strategic plan
   d. New goals and leading indicators

3. Which is not true regarding SEMAP?
   a. It is done at end of fiscal year
   b. HCV manager always has complete control over indicators
   c. There are 14 indicators

4. The two best times during the year to perform SEMAP reviews are:

   _____

   _____

Knowledge Check 6: Knowledge Management

1. Knowledge management is exclusively about having information available through the use of technology.
   a. True
   b. False

2. The objective of knowledge management is to improve training options.
   a. True
   b. False

3. Knowledge management is a vital part of succession planning.
   a. True
   b. False

Chapter 7: Situational Leadership

Knowledge Check 1: Situational Leadership

1. The most effective leadership style to use is one that:
   a. Meets the emotional needs of the employee
   b. Builds the confidence of the employee
   c. Matches the development level of the employee
   d. Matches the intelligence of the employee

2. Which of the following is NOT one of the basic leadership styles?
   a. Supporting
   b. Directing
   c. Delegating
   d. Motivating

3. Under the Situational Leadership model, the leadership styles differ in which way?
   a. The amount of direction and support
   b. The amount of discipline and reward
   c. The amount of delegation and coaching
   d. None of the above

4. The concept of situational leadership is to match your leadership style to the development level of the employee. Therefore, for an experienced employee who is comfortable with their own ability to complete their tasks, which leadership style would you use?
   a. S1 Directing
   b. S2 Coaching
   c. S3 Supporting
   d. S4 Delegating

Knowledge Check Answers

Chapter 1: Organizational Overview

Knowledge Check 1: Organizational Profile, Structure and Roles

1. c	3. e	5. a	7. c	9. b
2. a	4. e	6. c	8. a	10. b
				11. e

Knowledge Check 2: Fair Housing Compliance

1. See below	2. c	3. e

1. Americans with Disabilities Act

Knowledge Check 3: Structure and Organization of the PHA

1. a	3. d	5. d	7. b
2. b	4. e	6. b	

Knowledge Check 4: Mission, Vision, Culture, Strategic Planning and Goals

1. e	4. c	7. b	10. a
2. b	5. d	8. e	11. b
3. b	6. Strategic Plan	9. b	12. b
			13. c

Knowledge Check 5: Leadership Performance Systems

1. d	3. e	4. Strategy maps and goals
2. a		Organizational chart
		Performance standards
		Work systems
		Work processes and tools
		Quality control measurements

Knowledge Check 6: Organizational Relationships

1. d	3. a	5. b
2. b	4. b	

Chapter 2: Workforce Management

Knowledge Check 1: Workforce Management and Capability

1. a	4. a	7. a	10. c
2. a	5. c	8. b	11. b
3. d	6. a	9. a	12. c

Knowledge Check 2: Workforce Capacity

1. b	4. b	7. d	10. c
2. b	5. d	8. a	11. b
3. b	6. a	9. d	12. d

Chapter 3: Effective Supervision

Knowledge Check 1: Effective Supervision Part 1

1. b	4. b	7. a	10. d	13. b
2. a	5. b	8. c	11. a	
3. b	6. c	9. a	12. c	

Knowledge Check 2: Effective Supervision Part 2 DiSC Profile

1. d	3. a	5. b	7. c	9. d
2. d	4. b	6. b	8. d	10. a
				11. c

Chapter 4: Basic Financial Management and Program Utilization

Knowledge Check 1: Terminology and HAP Renewal Funding

1. d	3. a	5. b
2. a	4. c	6. c

Knowledge Check 2: Cash Management

1. b	3. a	5. b
2. c	4. a	6. b

Knowledge Check 3: Monitoring HAP Funding

1. d	3. e	5. See below	7. b	9. See below
2. b	4. b	6. c	8. a	

5. The HUD-funded PUC

9. Unit months available compared to unit months leased; Annual budget authority compared to HAP dollars spent; Monthly actual PHA per-unit cost compared to HUD-funded per-unit cost

Knowledge Check 4: Administrative Fees

1. b	3. d	5. d	7. b
2. a	4. b	6. b	

Chapter 5: Operational Work Systems

Knowledge Check 1: Work Systems and Processes

1. d	3. Work processes	5. a
2. b	4. b	6. a

Knowledge Check 2: The Administrative Plan

1. b	3. b	5. a
2. a	4. d	6. b

Knowledge Check 3: Key Work Processes and Procedures

1. a	3. c	5. c	7. e
2. d	4. b	6. d	

Chapter 6: Measurements and Analysis

Knowledge Check 1: Quality Control Planning and Types

1. a	4. d	7. a	10. b	13. b
2. d	5. b	8. c	11. c	14. b
3. b	6. b	9. b	12. a	15. c

Knowledge Check 2: Conducting QC

1. b	2. d	3. b

Knowledge Check 3: Production Performance and Accuracy Measurement

1. e	3. a	5. d
2. b	4. a	6. c

Knowledge Check 4: Problem Solving

1. b	3. e	5. a
2. a	4. c	6. c

Knowledge Check 5: Performance Trends and Results

1. a 2. d	3. b 4. The beginning of the SEMAP year Monthly throughout the year

Knowledge Check 6: Knowledge Management

1. b	2. b	3. a

Chapter 7: Situational Leadership

Knowledge Check 1: Situational Leadership

1. c	2. d	3. a	4. d

IMPROVING TEST-TAKING SKILLS

Below are some pointers that may assist you in minimizing the pressure many test-takers place on themselves during testing.

1. **Only ONE answer is correct for each question**

    Marking two answers to the same question on the Scantron answer sheets will be scored as a wrong answer.

2. **Answer one question at a time**

    You can only answer one question at a time. Don't be overwhelmed by the total number of questions on the test. Isolate each question as you read and answer it. If possible, cover the questions above and below the one you are working on.

3. **Work through the questions at a steady pace**

    When you read a question and have absolutely no idea what the answer is, make a check mark next to it in the test booklet and move on. Don't waste a lot of time pondering over questions you can't answer; go back to them after you have finished the test. Often, another question later on in the test will trigger the answer to the one you thought you didn't know.

4. **Identify the core topic**

    Sometimes when reading multiple-choice test questions, test takers get hung up in the words. Try to find the core topic of the question, isolate it, and ask yourself questions that trigger what you know about the topic.

    For example, let's take a question that pertains to income limits. Here are questions to ask yourself that may help identify the correct answer.

    *   Does this question pertain to applicants or participants? (because the rules are different)

    *   Does this question pertain to families entering the program or families moving/transferring to another unit?

    *   What is this question trying to see if I know?

5. **Identify key words and phrases**

   When you read a true/false question, remember that if *any part* of the question is false, the *whole statement* is false. Ask yourself, "Does this statement stand on its own as totally true?" If you find yourself thinking, "Well, it would be true if…"– it's probably false.

   Also use this method to evaluate the multiple choice answer options– if *any part* of an answer is wrong, then it is the *wrong* answer.

6. **Turn a multiple-choice question into true or false questions**

   If you cannot quickly identify the correct answer, you can usually eliminate one or two incorrect answers. After you have done this, take each of the remaining answers, add it to the end of the multiple choice question and see if it is a true or false statement.

7. **When you review, focus on the tough questions**

   When they finish a test, some test-takers go back and review every question– and sometimes they begin to doubt their answers. When they start to second-guess themselves, they often change answers that were correct. If you make a check mark next to the questions in your test booklet that you are not sure of, you can quickly identify the tough ones and use your time to review them.

8. **Answer all the questions, even if you have to guess at some**

   If, after going through the whole exam, there are still questions that have you stumped, first rule out the obviously wrong answer(s), then make your best guess at which of the remaining options is the right answer. Even a blind guess improves your chances of scoring a point.

9. **Visually inspect your answer sheet before you turn it in to the instructor**

   Look for incidental or unintentional pencil marks and erase them. If you changed an answer, make sure that the pencil mark for the first answer is completely erased.

10. **Make sure that you did not inadvertently skip a question, or skip a line on the Scantron answer sheet. This would cause all of the following answers to be incorrect.**

    Before turning in your Scantron sheet, review it to make sure that the number of lines filled in matches the number of questions on the test, and that no lines are blank.