

Community Engagement Requirements

I. Overview

Meaningful community engagement is a requirement of the PACT program. Community engagement should always be responsive to the overall PACT timeline and deliverables with resident input and decision-making feeding into design and other deliverables.

PACT partners are responsible for leading resident engagement, with direction, support, and guidance from the NYCHA Portfolio Planning team. Teams are encouraged to be as imaginative and creative as possible and work with resident leaders to craft an engagement roadmap that best meets their needs.

II. Community Engagement Specialist

PACT teams must have a Community Engagement Specialist who understands the full development process and is aware of the various workstreams and project deliverables such that engagement is sequenced appropriately and evolves with the project. The specialist will be the main point of contact on all things engagement and be responsible for crafting and implementing the Community Engagement Roadmap.

III. Expectations

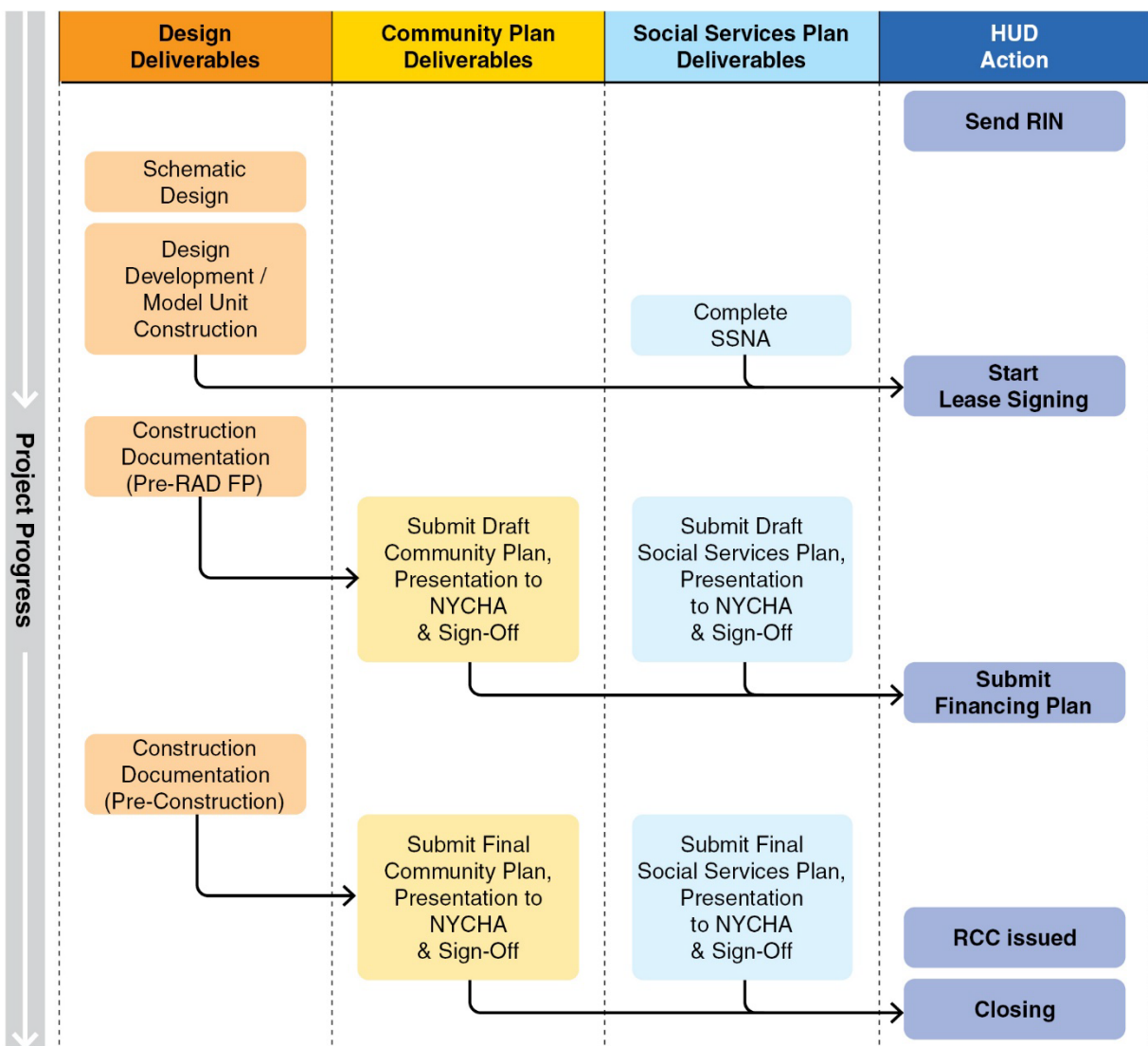
- a. All points in this document are required unless otherwise stated. PACT partners may propose departures from these requirements but must give justification prior to NYCHA approval.
- b. For all printed materials, meeting advertisements, and presentation decks, PACT partners must produce high-quality, graphically designed documents. Partners are expected to create graphic branding and consistent styles.
- c. All draft materials must be proofread, copyedited, and reviewed for content and messaging by all PACT partners prior to being shared with NYCHA for review. NYCHA will provide comments and feedback within five business days of receipt. PACT Partner teams must account for time for translation, printing, and distribution.
- d. Partners should review all presentation materials and related content with the Tenant Association (TA) Board or other resident leadership at least one week before sharing with the larger resident population.
- e. The PACT partner is responsible for working with Resident Outreach for Comprehensive Modernization Services (ROCMS) to ensure sign-in and notetaking occurs at all resident meetings.
- f. All-resident meetings should be held every 2-3 months.
- g. It is the PACT partner's responsibility to make sure they're abiding by all HUD engagement requirements (as per the [RAD Supplemental Notice 4B, July 2023](#)).

IV. Important Milestones

- a. Designation
- b. REDD Project Kick-off
- c. TA Board Monthly Meeting Kick-off
- d. PACT Partner Introduction Brochure to residents
- e. Community Engagement Roadmap Due
- f. PACT Partner introduction Kick-off Meeting

- g. Resident Meetings/Engagement Activities/Investigations
 - i. Inspections and existing conditions
 - ii. Social Services Needs Assessment
 - iii. Visioning and design
- h. Model Unit Construction and Tours
- i. Lease Signing
- j. Final Plans, including Community Plan
- k. 100-Day Plan
- l. Post-Closing Engagement Roadmap
- m. Closing
- n. Distribution of Day-After-Closing Packet

V. Deliverable Dependencies



VI. Community Engagement Roadmap (CER) Requirements

- a. The CER shall be due no later than six weeks after REDD project kick-off.
- b. A living document, it should be updated throughout the process as the timeline and milestones change, at NYCHA's request.
- c. The CER is a tool for NYCHA, the PACT team, and resident leaders to monitor engagement milestones and progress.
- d. The CER should include a plan for outreach to residents, resident leaders, elected officials, and other community stakeholders. The CER must detail an outreach, engagement, and reporting structure that will provide residents and elected officials with regular, proactive, and transparent project updates with meaningful engagement opportunities from designation through conversion.
- e. The end product of community engagement will be the Community Plan that memorializes and summarizes the final plans for rehabilitation, property management, and social services. The Community Plan should ensure residents are clear about what they can expect from the renovations and ongoing operations at their development. The expectation is that these plans would be shared at and around the time of closing. Therefore, the CER should cover all topics that will be in the plan and explain how they will build towards it, through resident engagement.
- f. PACT Partners will work collaboratively with NYCHA over the course of 4-6 weekly meetings following the REDD project kick-off to create the CER.

VII. Considerations:

- a. When planning for resident engagement, it's important to first consider your various goals and to craft an engagement activity or set of activities that will best achieve those goals. Some examples:
 - Goal: Share a lot of Information, with limited participation → Possible Activities: Town halls, newsletters
 - Goal: Foster conversation and input → Possible Activities: Facilitated workshops/roundtables
 - Goal: Gather feedback → Possible Activities: Surveys, tabling, door knocking
 - Goal: Answer questions 1-on-1 → Possible Activities: Open houses, tabling, door knocking, office hours
 - Goal: Make decisions → Possible Activities: Roundtables, resident committees, surveys
- b. Other examples of ways to engage with residents can include:
 - Newsletters
 - Swag (e.g. magnets with contact info)
 - Resident Committees with decision-making power (design, property management, social services, etc.)
 - Early Implementation/pilots
- c. It's important to consider every development's population and their unique needs. The same strategy at one development may not work at another. For example, senior developments may require engagement activities that prioritize one-on-one interactions; projects with large populations of non-English-speaking households might benefit from meetings hosted entirely in native languages.

VIII. Required Recurring Meetings

- Weekly or Biweekly NYCHA check-in

- Monthly in-person with the TA Board leadership, unless they specify otherwise.

IX. Required Resident Meeting Topics (can often be combined)

- PACT Partner Introduction
- Inspections
- Existing conditions report
- Social Services Needs Assessment
- Model Unit (before Model Unit tours)
- Preparing for Lease Signing (before start of Lease Signing appointments)
- Employment Opportunities
- Social Services Plan
- Draft Scope of Work
- Final Scope of Work (significant scope changes must be presented at another meeting)
- Preparing for Section 8 (presented by NYCHA) (one month prior to closing)
- Property Management Team Introduction (close to closing)

X. Resident Meetings Requirements

a. Presentation Content:

- Any presentation must include:
 - Intro to PACT slides, presented by a NYCHA representative;
 - NYCHA contact information for the PACT hotline, PACT office hours if applicable, and the NYCHA Customer Contact Center;
 - NYCHA logo (where other team member logos are displayed); and
 - PACT partner contact information and logo.
- All printed materials must be legible for all audiences. Body text in presentation decks should not be less than 16pt.

b. Presentation material should minimize text, with clear and concise bullet points. Graphics, photos, and diagrams should be used to help illustrate as much as possible.

c. Review:

- Presentation material must be reviewed with TAs in advance of all meetings (following NYCHA's review).

d. Flyers:

- The PACT partner must mail or door drop flyers at least one week in advance of the meeting, in every primary language spoken at the development. In addition, flyers in all languages should be hung on every floor and in common spaces at the development.
- Flyers for meetings should notify residents how they can retrieve paper copies of the presentations, by picking up a copy at a site office, asking for a copy to be delivered, or both.
- PACT partner contact information and website address should be included in all flyers/material distributed.
- For any flyering or door drops, it is best practice to send staff in groups of two and to have protocols in place in case there are any incidents.
- All posted material should be removed post-meeting.

e. Marketing:

- NYCHA will schedule robocalls and emails to all households in advance of a planned engagement event.
 - Beyond flyer, the PACT partner must advertise the meeting on their project website.
 - The PACT partner is responsible for owning the calendar invitation for all resident-facing meetings. The NYCHA Planning PM will provide a list of contacts that must be included all on resident-wide meetings. Partner teams should ensure that all local elected officials are aware of upcoming meetings.
- f. Logistics:
- Presentation decks and handouts must be printed in color in all required languages for in-person meetings.
 - All presentations with a slide deck should be projected onto a screen that can be legible from the back of the room.
 - The Planning PM may require additional screens for other languages, depending on the needs of any given development.
 - If pictures or video of residents are being taken, the PACT partner must have residents complete a photo release form.
- g. After each engagement event:
- The PACT partner must send NYCHA all final materials, including attendance numbers, sign-in sheets, and Zoom reports (if virtual).
 - All materials must be uploaded to the PACT partner's website and made available at their on-site office.

XI. Elected Official Engagement

PACT Partners are expected to build and maintain positive working relationships with all relevant local, state, and federal elected officials.

- a. Elected officials should be offered meetings, to be organized by the PACT partner after NYCHA's designation announcement. The NYCHA REDD Project Manager from Portfolio Planning and Intergovernmental Affairs team should always be invited. The timing of these meetings should occur:
 - i. After designation announcement
 - ii. For a model unit tour
 - iii. Before closing.
- b. In addition, elected officials should be invited to every all-resident PACT meeting.
- c. Prior to closing, teams are expected to proactively reach out to each elected official to notify them of the closing timeline (per NYCHA's direction) and offer pre-closing briefings. PACT Partners will report back to NYCHA following each meeting.

XII. Resources/Technology

PACT partners should be prepared to utilize a variety of staff resources and media to thoroughly engage residents. If your team does not have equivalent in-house tools/services, you should consider budgeting for the following resources, including but not limited to:

- a. **Project website:** should be kept up to date and be a resource for residents to access timely information about the project.
- b. **Web-based tools** for teleconferencing and online presentations, including Zoom or Microsoft Teams.
- c. **Printing:** Throughout the engagement process, many materials will need to be printed and distributed to residents, in multiple languages. In-house print shops or on-call printing services will be required.

- d. **Translation and Interpretation:** All materials will require translation in the primary languages read and spoken at each development. Simultaneous interpretation and/or separate meetings held in the primary language will be required for all in-person meetings, webinars, and conference calls, as-needed.
- e. **Food and Drink:** Where spaces permit, teams should provide light, healthy food and drinks for all in-person meetings. If available, PACT partners are encouraged to use resident-owned catering companies and other food businesses.
- f. **Childcare:** Consider providing on-site licensed/accredited childcare options to ensure residents with children can reasonably join and participate in in-person meetings.
- g. **Hotline and Email:** Dedicated hotline and email address for residents to ask questions and raise concerns.

XIII. Resources for residents as part of PACT:

- a. **Resident advisors:** Through the PACT Resource Team, a technical advisor in the areas of planning, policy, housing, and/or urban design may be hired to work closely with and support the needs of the TA Board. Other professional consultants, including architects and legal service providers, may also be hired to provide technical assistance.
- b. **Legal Aid Society:** All residents will also have access to free legal advice from the Legal Aid Society through a hotline.
- c. **Employment training:** PACT partners should coordinate with REES to identify current eligible residents and relevant training courses (OSHA 30, security, among others) that will be offered directly or through referrals. PACT partners must also coordinate with NYCHA REES on hosting job fair(s) to continue advertising employment opportunities and recruiting residents to fill those positions.

XIV. Resource Library

- a. [Community Plan Requirements](#)
- b. [Lease Signing Requirements](#)
- c. [Social Services Requirements](#)
- d. [Website Requirements](#)



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COMMUNITY PLAN REQUIREMENTS

Deliverable: Each PACT partner team will be responsible for creating a Community Plan document (40 pages maximum) that summarizes resident goals and describes the rehabilitation scope of work, property management plan and social service plan for the overall project. The plan should ensure residents are clear about what they can expect from the renovations and ongoing operations at their developments. The expectation is that these plans would be shared before or at closing (once scope is final or near final) in order to further demonstrate the benefits of PACT at this critical milestone.

Teams should prepare a plan that includes the sections and information listed below. Teams are expected to include concise narrative descriptions, photographs, diagrams, illustrations, and renderings in order to clearly communicate their plans. All text should be thoroughly checked for spelling and stylistic errors before being submitted to NYCHA for review.

Roles/Responsibilities

Author: PACT partner

Advisor: NYCHA, NYCHA architectural consultant - Peterson Rich Office (PRO)

Reviewer: NYCHA, PRO, Resident Associations

Audiences

Primary: Residents

Secondary: NYCHA, on-site CBOs, elected officials, general public (posted to website)

Draft Outline (to include, but not limited to):

- Introduction
 - PACT Partner overview
 - Overview of planned investments
- Description of key resident priorities and physical and operational needs
- Rehabilitation Plan
 - Final Scope of Work Summary
 - Apartments (e.g., finishes, appliances, flooring, windows)
 - Sites and Grounds
 - Buildings, including common and community spaces
 - Building Systems (e.g., heating/cooling, roofing, plumbing, etc.)
- Environmental remediation
- Resident Amenities and Social Services
 - Short description of planned social services and community programs
 - Workforce development and job training plan
- Property Management
 - Description of staffing plan
 - Description of approach to cleaning, maintenance, pest management, waste management, and other related processes
 - Summarized safety/security plan



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COMMUNITY PLAN REQUIREMENTS

PACT Partner Deliverables	In relation to Project Milestones
1st Draft Community Plan to NYCHA for Review (including placeholders where necessary)	After completion of the Design Deliverable phase
Review and approval by Resident Association	After NYCHA approval of draft plan and scope is final
Finalize Community Plan and send for translation and printing	After Resident Association sign-off
Distribute Community Plan	Once translated and printed
Addendum updates to plan as needed/directed by NYCHA	As needed

Production

- PRO will lead the creation of all plans. Exceptions can be made on a case-by-case basis.
- All assets must be submitted as individual jpeg/jpg, png, eps, or pdf files.
- All raster (pixel-based) images should be saved at 300 dpi (minimum), with a recommended minimum pixel size of 5100 px x 3300 px.

Final Review, Printing, and Distribution Requirements

- Once the document is finalized with NYCHA, it should be shared with Resident Association leadership for review and sign-off.
- The PACT team will create the document in the other language(s). NYCHA will send the InDesign package for the partner team to have translated. Final translated versions are to be sent to NYCHA.
- The PACT team will send NYCHA a physical final proof of the English version to review and approve before the team sends the mass printing order.
- Print Requirements: Magazine-quality with heavy-weight covers, glossy paper, and center-stapled/bound.
- The PACT team will finalize the cover letter based on the template from NYCHA for the community plan. The cover letter must include instructions for how to obtain a copy of a non-English version of the plan.
- Every household must receive one community plan with the cover letter. Plan to print and distribute an English version of the plan to each household and the cover letter in all required languages.
- The plans (in all languages when available) must be uploaded to their project website.
- After distribution to residents, please print and deliver:
 - 25 copies of the English version to NYCHA at 90 Church Street
 - 1 copy in all languages to local electeds
 - Extra copies for the Resident Association
 - Extra copies for the PACT partner to promote to new residents, community stakeholders, etc. to be made available in the management office.



NEW YORK CITY HOUSING AUTHORITY

PACT LEASE SIGNING GUIDANCE

PACT Lease Signing Guidance for PACT Partners

The following guidance outlines expectations for our PACT Partners to follow when starting the PACT lease signing process at PACT developments. PACT Partners should use this guidance to develop a PACT Lease Signing timeline with NYCHA.

- I. Form of PACT Lease.** NYCHA will provide PACT Partners with the following lease-related documents:
- Required form of PACT lease agreement
 - Lease riders and notices
 - PACT Template House Rules
 - Legal Aid flyer
 - Sample resident notices re lease signings

All materials will be shared in an external SharePoint folder. Copies of the lease, riders and notices are also posted publicly online on NYCHA's PACT resident resource page, [linked here](#).

The PACT Partner team, especially the PACT Property Management team, must review and familiarize themselves with the above documents upon receipt.

II. Deliverables and Timing

The following deliverables schedule should be updated with a timeline specific for each project. Additional details on each deliverable are described below the chart. PACT Partners should plan to discuss their timeline and review deliverables with NYCHA Real Estate Development 8 months before the anticipated closing date and prepare to start engagement with residents 6 months before closing.

PACT Partner Deliverables	Months before anticipated closing
1. Prepare and share initial Lease Signing Plan with NYCHA	6-8 months
2. Initial lease signing meeting with resident leaders	6 months
3. Finalize house rules	6 months
4. PACT lease overview resident meeting (with optional 2nd meeting)	5-6 months
5. Distribute sample PACT lease, house rules, and Legal Aid flyer to all households	5 months
6. Prepare individual leases	5 months
7. Conduct lease signing appointments	4-5 months
8. Upload signed leases to Section 8 portal	Starting 4-5 months
9. Share weekly lease signing status updates with NYCHA and lender	Starting 4-5 months



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10. Confirm NYCHA has sent public housing lease termination notice	2-3 months
11. Follow up notices and communication, as needed	Ongoing

1. **Prepare and Share Initial Lease Signing Plan with NYCHA**

PACT Partners should use this guidance to draft a brief lease signing plan with dates for all listed benchmarks. This should be discussed with NYCHA REDD staff during a weekly meeting around 6-8 months before closing.

2. **Initial Lease Signing Meeting with Resident Leaders**

PACT Partners will share a copy of the lease, along with lease cover page to all members of the tenant association board and set up a meeting to discuss the agreed-upon lease signing plan. If no tenant association exists, this can be done with a smaller group of resident leaders or working group, if present.

At this point, PACT Partners should also consider meeting with local elected officials and notifying them of the lease signing timeline. Prior to meeting with any local elected officials, PACT Partners should notify NYCHA. PACT Partners should provide each office with a copy of the sample lease and the Legal Aid flyer.

3. **Finalize House Rules**

PACT Partners are required to use the Template House Rules and only make edits or additions required by the partner team or at the request of the Tenant Association. Note that PACT Partners cannot charge fees greater than the fees currently charged by NYCHA, or otherwise have more stringent requirements than NYCHA public housing. NYCHA's Schedule of Charges for Tenant Accounts and NYCHA's House Rules are provided as a reference to each partner team.

House rules should be finalized in partnership with the tenant association. Any additions or edits to the Template House Rules will need to be reviewed and approved by NYCHA. Partners should use the Template House Rules document during their initial lease signing meeting with the TA Board to gather feedback.

If there are multiple developments within a project, PACT Partners may elect to have different house rules for each development if requested by tenant associations. Residents must receive a copy and sign the house rules during their lease signing appointment.

4. **PACT Lease Resident Meeting**

Prior to sharing a copy of the sample lease, residents should be invited to attend a resident meeting specific to the PACT lease. An example presentation is included in the SharePoint folder. PACT Partners should use the generally applicable slides in this deck (slides 15-25) and only deviate for property/timeline-specific information. The generally applicable content that should be covered at the lease overview meeting includes:



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PACT LEASE SIGNING GUIDANCE

- Outline of the lease signing process with timeline
- Expectations for scheduling lease signing appointments and 'what to bring to your appointment'
- Overview of the PACT lease
- Information about the Legal Aid hotline
- Q & A

5. **Distribute Sample PACT Lease and Legal Aid Flyer**

PACT Partners must distribute a printed copy of the sample lease to all households. PACT Partners can include information about upcoming meetings or lease signing appointments in this packet. The packet should be distributed to all households in both English and Spanish, and copies in all other relevant languages should be made available in the on-site office. PACT partners must ensure that each apartment receives a copy of the sample lease by dropping this packet of materials at every apartment door.

The packet of materials should include:

- Introductory letter from partner team (an example partner letter is in the SharePoint folder)
- PACT lease cover letter from NYCHA
- Sample PACT lease
- House Rules
- Legal Aid flyer

6. **PACT Partner Prepares Individual Leases, Riders and Notices**

NYCHA Leased Housing (LHD) will provide a list of the newly created Section 8 cases, contract rents, tenant rent shares, NYCHA subsidy amounts and the tenants' full address. This information will be used to populate individual leases.

Riders and Notices

Per HUD, the lease and all riders must be signed in English. Accordingly, we have included in the SharePoint folder the English versions of the riders that require signature, along with the translated versions of the notices that do not require signature. PACT Partners should arrange to have copies of the lease and riders in other languages available at lease signing appointments for reference and clarify that residents must sign all documents in English.

The HUD PBV tenancy addendum and Statement of Family Responsibility forms will be generated by NYCHA LHD and LHD will populate the forms with the case/household specific information.



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PACT LEASE SIGNING GUIDANCE

7. Conduct Lease Signing Appointments

PACT Partners are responsible for coordinating lease signings with residents. Sample lease signing appointment notices are provided in the SharePoint folder. Notices should be door dropped to all households in both English and Spanish. Information about the Legal Aid hotline should be included in the notice and partners are encouraged to re-distribute the Legal Aid flyer with this notice.

PACT Partners should allow 4-6 months (depending on number of units) for scheduling and meeting with residents to sign their PACT lease. Appointments should be offered during the regular work week, evenings, and weekends.

The following accommodations should be provided during lease signing appointments:

- Language support: Partners should be prepared to offer interpretative services. This can be done through a phone line or having an interpreter join the appointment in person.
- Households with limited mobility: Partners should plan to meet tenants in their apartment if a tenant has limited mobility and is unable to get to the property management office.
- Providing households with printed copies: Partners are required to print and deliver a final, executed copy of the lease to every household within 30 days of the lease signing.

Unresponsive Households

Reference the example notices in the SharePoint folder to draft letters to unresponsive households. Partners should conduct door knockings and utilize their social service provider to reach out to households that are harder to schedule appointments with. NYCHA Community Development can also assist with reaching out to unresponsive households.

8. PACT Partner uploads signed leases and lease documents to the Section 8 portal

The PACT partner is responsible for uploading all the required documents to the portal and associate to the correct form numbers. Documents include the PBV Tenancy Addendum; PBV Family Responsibilities; Public Housing tenancy documents, including lead based paint disclosure forms and the executed PACT Lease.

9. Weekly Updates to NYCHA

- a. Once lease signings begin, partners must provide two separate weekly updates on lease signing progress:
 - i. To NYCHA (REDD and LHD) – this should be the excel worksheet sent to the partner team by NYCHA project managers.
 - ii. To the larger working group (e.g., lenders) – See summary template below. It is important the larger group does not receive the full excel file to minimize electronic transmission of confidential tenant information.



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PACT LEASE SIGNING GUIDANCE

[DATE]	# [This column should reflect the number of units]	% [This column should reflect the percent of total units]
Leases signed to date		
Leases remaining to be signed		
Vouchers needed		
Units with unauthorized occupants		
Vacant		
Total		

Sample

12/13/2021	Totals	%
Leases Signed to Date	1404	87%
Leases Remaining to be signed	43	3%
Vouchers Needed	4	0%
Unauthorized	41	3%
Vacancies	129	8%
Total	1621	100%

10. Confirm NYCHA has sent public housing lease termination notice

NYCHA will send the HUD-required public housing lease termination notice to all households approximately 2-3 months prior to conversion. A copy of the lease termination notice is provided in the SharePoint folder.

PACT Partner Website Content Guidelines

July 2023

Purpose

This memo provides guidelines for PACT Partners to follow when launching/updating resident-facing websites. This guidance is not exhaustive and we encourage teams to continue to think of new tools, communication strategies and ways to use websites to enhance resident participation and inclusion in the process.

Goals and Objectives

- Create an accessible and easily navigable webpage to:
 - Update residents on project progress
 - Organize and share informational documents and collateral
 - Provide clear channel for resident-to-development team communication
 - Outline opportunities for resident participation
- Encourage consistent communication across PACT partner websites
- Provide highest-quality user experience for residents

Website Accessibility Standards

- Font: All webpages must include text that is 12 point or larger in a readable font
- Text on page: to the greatest extent possible, partners should include text directly on the webpage (instead of using text graphics or linking to PDFs). This will allow e-readers and translation plug ins to read the text
- Color contrast: Partners should ensure that all color and text contrast is high enough to be readable
- Translation: partners must include a plugin that allows text to be translated into applicable languages.
- Other plug in options: partners are encouraged to include a plugin to help with accessibility features such as grey scale, font enlarger, translation and font readers.
 - For an example of a website with accessibility tools, visit: www.harlemriver.org

Webpage Content

Each website must contain the following content. Each item below does not require its own unique section/tab, and can be combined as makes sense per project. Overall, we encourage text to be placed on the page and not have all information linked to documents. This helps ensure any translation plug-in can read the text (or e-reader) and that important information is not hard to find.

- Homepage with project overview, to include:
 - Name of the project
 - Brief PACT program explanation (noting that the project will bring comprehensive repairs, new property management, enhanced social services, while maintaining affordable rent and resident protections)

- PACT Partner team introduction, including notable experience
- Link back to NYCHA PACT website: <https://www1.nyc.gov/site/nycha/about/pact.page>
- Contact information for the development team. At a minimum contact information for property management should be listed, including at 24 hour number for emergency repairs.
- Contact form (where residents can submit comments/questions directly from the webpage)
- Resident Resources, examples include:
 - Information on hiring/training opportunities
 - Updates on social service provision
 - Notes on property management processes- paying rent, submitting work orders, and others.
 - Frequently Asked Questions
- Schedule/Timelines
 - Resident meetings
 - Inspections
 - Construction
- Resident contact information collection
- Overview of resident protections. Please use NYCHA documents listed below for language in this section, so residents receive consistent language regarding their rights and protections.
- Document Repository with downloadable links to all collateral and presentation material

Review Protocol

- Partners will provide notice to NYCHA in advance of any substantial updates, including but not limited to, uploading new residents resources, creating new pages/tabs or adding tools to solicit resident input to the webpage.
- Teams will work with NYCHA to establish standards for post-meeting updates and share:
 - Meeting content overview and speakers
 - Attendance
 - Minutes/summary, including common questions
 - Link to recording of the meeting
 - Link to PDF/PPT document of presentation material
- When new, previously unreviewed collateral is created for the web, NYCHA will review material and provide comments within five business days.

NYCHA Materials & Resources

Development teams are encouraged to use the following documents (or language from the PACT webpage) in creating their webpages. Using consistent information provides clarity to residents and ensures that everyone across our PACT portfolio receives the same information.

- **PACT webpage**
- PACT 4- page Info Spread
- What is PACT? 2-pager
- Resident Rights & Protections 2-pager
- Employment Opportunities 2- pager
- PACT Design & Construction 2- pager



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PACT SOCIAL SERVICE REQUIREMENTS

Social Service Requirements for PACT Development Partners

UPDATE November 2023

NYCHA seeks to improve residents' quality of life not only through extensive physical rehabilitation of the NYCHA developments and streamlined property management services, but also through access to social services and resources – both on-site and through resident referrals to off-site organizations and services. PACT provides a unique opportunity to enhance and provide additional services and community programming to NYCHA residents.

Following designation, PACT partners will work directly with NYCHA's Portfolio Planning team to:

- a. Develop a service coordination model for their project;
- b. Conduct a Needs Assessment using a standardized template;
- c. Identify any existing providers actively serving the community;
- d. Identify any additional social service provider(s) to deliver services to the community; and
- e. Finalize a formal Social Services Plan.

Social Service Coordination Model

NYCHA residents currently have access to workforce training, job opportunities, and social service referrals for vulnerable populations. These are services that NYCHA provides through a service coordination model for public housing residents.

PACT partners should develop an appropriate service coordination model, based on the unique characteristics of the development, existing providers, and resident population, to provide enhanced and direct services to residents. In this model, the partner team should identify a main point of contact (the "lead service coordinator") to oversee the enhancement and delivery of services and community programming for all residents. The lead service coordinator should oversee a team of on-site case managers that provide direct support and referrals to households. This model should also identify ways to connect residents to services that are available to Section 8 households and any other services or programming identified by residents. For example, the model should outline a plan for conducting referrals to the Family Self-Sufficiency program, using NYCHA's OpportunityConnect portal and successor systems, referring tenants to vetted providers that have formal partnerships with NYCHA, and making use of other public and private resources to assist residents.¹

¹ This excludes social service referrals directly to NYCHA for intervention in tenancy, lease enforcement, or related matters; this function should be incorporated within the scope of the property management and social service provider team. NYCHA expects that property management and the social service provider will work together to conduct proactive outreach around tenancy issues, as outlined in the Resident Stability & Retention Guidelines.



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The service coordination model should include on-site presence at the PACT development, and the Social Services Plan should include the number of on-site service coordinators, their hours of operation, and how they plan to be accessible and available to residents at all developments in the PACT project. NYCHA expects each PACT partner to provide adequate staffing levels based on each project's need and size. The lead service coordinator and the proposed model should be introduced to both NYCHA and resident leaders before the PACT partner begins their Needs Assessment. Information about the social service model and lead coordinator should be described in resident meetings and shared with residents via letters, flyers, and/or email.

The lead service coordinator will be responsible for reporting metrics on all services provided to residents under their umbrella (either by the staff on-site directly or through other providers who work with residents). See Reporting Requirements below for additional details.

Conducting a Needs Assessment

NYCHA has developed a standardized Social Service Needs Assessment to collect resident feedback on service, resource, and programming needs via surveys, community meetings, workshops, and other information-gathering tools. PACT partners are required to use the standardized tool to collect information from residents about their service needs or areas that require improvement at the development. The information collected in the Needs Assessment should inform the creation of the Social Services Plan and can inform the final service coordination model provided by the PACT partner team.

Outlined below are the requirements for conducting the Needs Assessment. When further customization of survey templates is necessary to meet a development's particular needs, PACT partners should work directly with NYCHA to draft an appropriate subset of questions from the standard tool.

Process and Requirements for Conducting and Analyzing Needs Assessments:

- NYCHA will provide the PACT partner with the standard needs assessment tool for their development/s. This will be either a senior-focused survey or a general family-oriented survey ([Appendix A1 & A2](#) are provided as PDFs in this document, NYCHA's portfolio planning team will provide your team with final copies to distribute)
- A minimum of 35%-50% of households should respond to any survey or participate in any meetings regarding social service provision
- The partner should plan to take at least two to three months to conduct their assessment, ensuring enough time to collect surveys and promote participation in meetings
- Outreach and communication:
 - Surveys should be mailed to residents in both English and Spanish



NEW YORK CITY HOUSING AUTHORITY

PACT SOCIAL SERVICE REQUIREMENTS

- All other languages should be made available at the property management office
- Residents should be able to mail and drop off surveys at their property management office
- Residents should be able to complete the survey online
- All materials must include return instructions, deadline date, and contact information for the partner team
- All materials should mention the entire PACT development team and associate the enhanced services and programming opportunities as a component of the PACT program
- NYCHA will provide all teams with a template cover page to accompany their survey tool ([Appendix B](#))
- Response collection and analysis:
 - Teams should use the standard questions and tool to build out an online version of the survey for their collection and analysis
 - PACT partners should share findings and provide summary-level analyses to key stakeholders, including NYCHA and residents throughout the pre-development process
 - Assessment findings should be included in the final Social Services Plan, including a narrative on how assessment findings shaped the final plan

The Social Services Plan

The PACT partner team must submit to NYCHA a detailed Social Services Plan. The Social Services Plan must be informed by a comprehensive Needs Assessment and describe how PACT partners plan to coordinate services across all developments in the project.

Expectations for what to include in the Social Services Plan are listed below. PACT partners must submit a draft Social Services Plan that follows the structure outlined below. NYCHA will review and comment before the Plan can be finalized. The final Social Services Plan must be submitted prior to the HUD RAD Financing Plan submission or Section 18 application.

Required Structure for Social Services Plans:

0. Cover Sheet
1. Vital Information Table ([see Appendix C](#))
2. Table of Contents
3. Introduction
 - Provide an introduction to the Social Services Plan highlighting its main features and stakeholders
4. Summary Results of the Resident Engagement Process



NEW YORK CITY HOUSING AUTHORITY

PACT SOCIAL SERVICE REQUIREMENTS

- Share a summary of the Needs Assessment, including a narrative on how assessment findings shaped the Social Services Plan
5. Social Service Program Overview and Approach
- Provide an introduction to the service coordination model and outline the roles of all known service providers;
 - Outline how relevant services will be coordinated for residents across all necessary providers and programs through the service coordination model;
 - Describe all resources to be provided across all developments;
 - Note how the PACT partners will preserve the services offered by existing provider(s) for the duration of their existing service contract(s) with City agencies; details on existing contracts and funding sources should be included. NYCHA can assist partners with introductions and fact finding for existing providers if needed.
 - Outline how the team will facilitate access to and share information about existing and new social services or community amenities and programming; and
 - Provide an Organizational Structure Chart
 - Provide an overview and timeline for the rehabilitation of any community facilities or details on how programs will be moved across the development/s
6. Detailed Social Service Programming Focus Areas:
- In this section, please list and provide detailed information requested below **for each Social Service Program** proposed in the Social Services Plan, including those services offered by existing providers.
 - a. **Program Name:** Please provide the name of the Social Service Program
 - b. **Program Description:** Please provide a detailed description of the Social Service Program
 - c. **Administering Entity:** Please provide the name of entity responsible for implementing and running this Social Service Program
 - d. **Target Audience (Participants):** Please provide the intended target audience for this Social Service Program.
 - e. **Location (Where services will be provided):** Please provide the intended location where this Social Service Program will be implemented. Be sure to identify where an intended location is on- or off-site from the Project Development.
 - f. **Point Person:** Please identify the person responsible for implementing this Social Service Program.
 - g. **Frequency (of service):** Please provide the frequency that this Social Service Program will be offered.



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PACT SOCIAL SERVICE REQUIREMENTS

- h. **Program Description:** Please provide a detailed description of this Social Services Program, its key features, and justify why this Social Services is needed.
- i. **Program Goal(s):** Please identify the intended benefit(s) this Social Service Program seeks to achieve.
- j. **Expected Outcomes:** Please identify the intended outcome(s) of this Social Service Program.
- k. **Metrics and Reporting:** Please propose metrics to measure Program Goal(s), which the main program coordinator will report back to NYCHA on a quarterly basis (see section on reporting later in this document). Please justify the appropriateness of each metric proposed (explain how each is a reasonable measure of the programming and services offered).
- l. **Frequency of Evaluation and Adjustment:** Please outline a proposed timeline for conducting additional assessments in the future and share how PACT partners will continue to incorporate resident feedback on an on-going basis.

7. Budget

- Propose a budget for the provision of all services and programs (see section on the budget later in this document).

8. Appendices

- Resumes and firm profiles of proposed social service providers
- Location map of where social services will be provided
- Methodology and full results of resident engagement (e.g., Social Services Needs Assessment Survey and community outreach meetings associated with the Social Service Needs Assessment process)
- Outline a proposed timeline for conducting additional assessments in the future and share how PACT partners will continue to incorporate resident feedback on an on-going basis.

Preserving Services with Existing Providers

In some cases, there are existing on-site social services providers at the properties. Some existing providers receive funding through one or more awarded contracts following a competitive procurement process with New York City agencies or entities (for example, New York City Health and Hospitals, the New York City Department of Youth and Community Development, the New York City Department of Education, or the New York City Department for the Aging), each with contract terms that include specific performance and insurance requirements. PACT partners will be provided with a list of existing providers and service contracts, including the name of the provider and City agency funder, if applicable. NYCHA's



NEW YORK CITY HOUSING AUTHORITY

PACT SOCIAL SERVICE REQUIREMENTS

Portfolio Planning and Resident Services, Partnerships, and Initiatives teams will coordinate an introduction to current providers after the initial kick-off meeting with NYCHA.

To the extent that there are existing providers, PACT partners must work with the providers and their City agency funders, if applicable, to ensure that services are not negatively impacted or otherwise interrupted for the duration of the existing service contracts, including any renewal or extension of the contract term. Each existing provider must remain in place for the duration of the existing service contract unless the City agency funder determines that the existing provider is not meeting service requirements under the existing service contract or any future renewal contract. In such event, the City agency funder has the right to assign a new social services provider to the affected property to assume the existing provider's obligations and rights under the existing service contract, or any future renewal contract.

The PACT partner will be expected to execute leases or partnership agreements with existing providers that reflect the agreed-upon and understood terms. If the PACT partner and NYCHA select existing providers to join the team as the lead service coordinator, the existing providers must be engaged to deliver new services in addition to the scope of their existing service contracts. These services must be resident-informed, as described above, and negotiated directly with NYCHA.

NYCHA may also have agreements with third party providers or City agencies to provide programmatic and/or maintenance support to gardens, farms, public art, parks, and other amenities located at the development. PACT partners should assume or acknowledge these agreements for the remainder of the term and ensure services are not negatively impacted. Continuations can be renegotiated directly with the third-party provider or City agency following conversion. PACT partners must participate in hand-off meetings between NYCHA, partner City agencies, and third-party providers to ensure continuity.

Through the Needs Assessment and in conversations with existing providers, PACT partners should also assess the existing conditions and physical needs of community facilities at the site and consider how PACT investments can improve current conditions. PACT partners should consider how to extend, support, or enhance the delivery of current services and programming when possible through physical investments in community facilities.

Proposed Budget

Social Services Plans must include a budget proposal to support the provision of services and programming over the long term. NYCHA's preliminary guidance is to assume (1) a one-time, up-front social service reserve of \$300 per unit and (2) an additional \$300 per unit in annual costs to fund social services on an ongoing basis, escalating at 3% annually. However, PACT partners should tailor their budget to the specific needs of the community and to ensure the successful implementation of their Social Services Plan.



NEW YORK CITY HOUSING AUTHORITY

PACT SOCIAL SERVICE REQUIREMENTS

The proposed budget should outline different program expenses against their annual total budget allocation and indicate the percentage of annual funding that will be used by each program. The proposed budget should also outline the number and titles of staff required to deliver programming and services, as well as other operational costs, such as supplies, technology needs, and staff training.

Reporting Requirements

The final Social Services Plan should include detailed metrics pertaining to social service utilization, participation, and outcomes. Metrics should match the programming and services offered. The lead service coordinator should outline goals for each metric on an annual basis. The lead service coordinator must report to NYCHA on a quarterly basis. This report should include a combination of quantifiable and qualitative updates based on the goals of the Social Services Plan. The lead service coordinator should assume the responsibility of collecting information from all providers to inform the quarterly reports.

Ongoing Assessments and Adjustments

The lead service coordinator should also plan for ongoing adjustments to the provision of services and programming based on resident input and their ability to meet the goals outlined in the Social Services Plan. The Social Services Plan should outline a proposed timeline for conducting additional assessments in the future and consider how resident feedback will inform the creation of new or the refinement of existing plans.

**Appendix A1: NYCHA Social Services Needs Assessment (SSNA)
“Family-Oriented Development Survey” Template**

NYCHA PACT Social Service Needs Assessment Survey



As your NYCHA Permanent Affordability Commitment Together (PACT) partner team, we are distributing this Social Service Needs Assessment to understand your household's social service needs. By completing this survey, you will help your social service coordinator and local organizations understand which services, opportunities, and programs are important for you and your household. This survey will take about 15 minutes of your time to complete.

This survey is optional. Your choice to take this survey or not will not negatively impact your housing, or participation in the Section 8 program.

PACT Partner Team
Logo Here

PACT Partner Team
1234 Street Name, City, NY 12345
(646) 123-4567 | PACTPartnerTeam@gmail.com



Today's Date (month/date/year): _____

Development Name: _____

About You and Your Household

This section asks for basic information about you and members of your household.

1. Please fill in your contact information below. (Optional)

Name: _____

Address: _____

Mobile Phone: _____ Home Phone: _____

Email Address: _____

2. How long have you lived at this development? Please select one response.

- ☐ Less than one year
- ☐ 1 to 4 years
- ☐ 5 to 9 years
- ☐ 10 to 14 years
- ☐ 15 or more years

3. Please select your age range from the list below. (Optional)

- ☐ 18-30
- ☐ 31-50
- ☐ 51-64
- ☐ 65 or older

4. Are you of Hispanic or Latino origin? (Optional)

- ☐ Yes
- ☐ No
- ☐ Prefer not to answer

■ **5. Which race(s) do you identify as?** *Please select all that apply. (Optional)*

- | | |
|---|--|
| <input type="checkbox"/> African American or Black | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> Asian | <input type="checkbox"/> More than one race |
| <input type="checkbox"/> Caucasian or White | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Native American or Alaska Native | <input type="checkbox"/> Other, please specify below: |
-

■ **6. Please select your gender from the list below.** *(Optional)*

- | | |
|--|---|
| <input type="checkbox"/> Female | <input type="checkbox"/> Transgender |
| <input type="checkbox"/> Male | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Gender Neutral / Non-Binary | <input type="checkbox"/> Other, please specify below: |
-

■ **7. Which languages are spoken in the household?** *Please select all that apply.*

- | | |
|---|---|
| <input type="checkbox"/> English | <input type="checkbox"/> Haitian Creole/French |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Chinese Mandarin/Cantonese | <input type="checkbox"/> Yiddish |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Bengali | |
-

■ **8. What is the highest level of education you have completed?**

Please select a response.

- | | |
|--|---|
| <input type="checkbox"/> Elementary school (Grades K-8) | <input type="checkbox"/> Graduate school/Master's |
| <input type="checkbox"/> High school/GED/High School Equivalency | <input type="checkbox"/> PhD program |
| <input type="checkbox"/> Associate degree | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Bachelor's degree | |

9. What is your current employment status? Please select a response.

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Full-time (40 hours/week) | <input type="checkbox"/> Student |
| <input type="checkbox"/> Part-time (less than 40 hours/week) | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Homemaker/Stay-at-home caretaker | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Self-employed | |

10. Please tell us about other members in your household. This will help us to better understand and meet your social service needs. (Optional)

Age of Household Members (not including yourself)

Age Range	Number of Household Members
Adults (age 18-64):	
Seniors (age 65 and older):	
Youth (age 13-17):	
Children (12-years and under):	

Gender of Household Members (not including yourself)

Gender	Number of Household Members
Female:	
Male:	
Gender Neutral / Non-Binary:	
Transgender:	
Prefer not to answer:	

Educational Attainment of Household Members (not including yourself)

Educational Attainment	Number of Household Members
Elementary/Middle School:	
High School/GED/H.S. Equivalency:	
Associate's Degree:	
Bachelor's Degree:	
Graduate School/Master's Degree:	
Ph.D. Program:	
Not Applicable:	

Employment Status of Household Members (not including yourself)

Employment Status	Number of Household Members
Full-Time (40 hours/week):	
Part-Time (less than 40 hours/week):	
Homemaker/Stay-at-home Caretaker:	
Self-Employed:	
Student:	
Retired:	
Unemployed (looking for work):	
Unemployed (not looking for work):	
Other (please specify):	
Not Applicable:	

11. Have you or any household members ever served in the U.S. Armed Forces, Reserves, or National Guard or otherwise qualify for veteran status? Please select a response.

- ☐ **Yes**
- ☐ **No**
- ☐ **Unsure**

Social Service Needs

The following section will help us understand the social service needs of you and your household organized by various topics areas.

Recreational Activities

12. Are you or any adults in your household interested in any of the following recreational programs? *Please select all that apply.*

- | | |
|--|--|
| <input type="checkbox"/> Mindfulness/Meditation Classes | <input type="checkbox"/> Individual Sports Clubs (running, biking, tennis, handball, etc.) |
| <input type="checkbox"/> Group Day Trips (museums, theaters, concerts, etc.) | <input type="checkbox"/> Social Events (lunch outings, picnics, block parties, etc.) |
| <input type="checkbox"/> Board Games Club | <input type="checkbox"/> Swim Classes |
| <input type="checkbox"/> Cultural Classes (art, dance, music, theater, etc.) | <input type="checkbox"/> Book Club |
| <input type="checkbox"/> Fitness Classes (yoga, Zumba, weight training, Pilates, etc.) | <input type="checkbox"/> Cooking and Nutrition Classes |
| <input type="checkbox"/> Nature Activities (hiking, nature walks, etc.) | <input type="checkbox"/> Community Gardening |
| <input type="checkbox"/> Group Sports (soccer, basketball, softball, etc.) | <input type="checkbox"/> Holiday Celebrations |
| | <input type="checkbox"/> N/A – not applicable |
| | <input type="checkbox"/> Other, please specify below: |
-

13. Which of the following recreational activities would the teenager(s) in your household most likely participate in? *Please select all that apply.*

- | | |
|--|---|
| <input type="checkbox"/> Board Game/Video Game Club | <input type="checkbox"/> Summer Learning Programs |
| <input type="checkbox"/> Social Clubs (LGBTQ+ club, faith-based club, book club, science club, etc.) | <input type="checkbox"/> Summer Weekend/Day Trips (hiking-outdoors, museums, concerts, amusement parks, etc.) |
| <input type="checkbox"/> Sports Programs (soccer, basketball, tennis, softball, PAL Sports League, etc.) | <input type="checkbox"/> After School Programs |
| <input type="checkbox"/> Social Events (movie night, dances, karaoke, etc.) | <input type="checkbox"/> Swim Classes |
| | <input type="checkbox"/> N/A – not applicable |
| | <input type="checkbox"/> Other, please specify below: |
-

14. Which of the following recreational activities would the child(ren) (12-years or younger) in your household most likely participate in?

Please select all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Child-Oriented Cultural Classes (art, dance, music, theater, etc.) | <input type="checkbox"/> Outdoor activities (playgrounds, nature walks, gardening, etc.) |
| <input type="checkbox"/> Child-Oriented Swim Classes | <input type="checkbox"/> After school programs |
| <input type="checkbox"/> Child-Oriented Social Clubs (dance club, book club, science club, etc.) | <input type="checkbox"/> N/A – not applicable |
| | <input type="checkbox"/> Other, please specify below: |

Educational & Technology Services

15. Are you or any adults in your household interested in any of the following educational programs or services? Please select all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Computer/technology workshops | <input type="checkbox"/> Small business training |
| <input type="checkbox"/> Nutrition and healthy cooking workshops | <input type="checkbox"/> Tech, web development or coding classes |
| <input type="checkbox"/> Pregnancy and baby care resources | <input type="checkbox"/> English as a Second Language (ESL) |
| <input type="checkbox"/> Self-defense training | <input type="checkbox"/> College admissions counseling |
| <input type="checkbox"/> CPR/First Aid training | <input type="checkbox"/> Homeownership classes |
| <input type="checkbox"/> GED/Adult Education Courses | <input type="checkbox"/> Parenting Skills |
| <input type="checkbox"/> Tax preparation assistance | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Financial Literacy/Personal Finance Courses | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Adult Education (GED/High School Equivalency etc.) | |

16. Which of the following educational programs or services would the teenager(s) in your household most likely participate in?

Please select all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Nutrition and healthy cooking workshops | <input type="checkbox"/> College admissions and preparedness workshops |
| <input type="checkbox"/> Financial Literacy/Personal Finance Courses | <input type="checkbox"/> Home economics classes (sewing, cooking, woodwork, basic plumbing, etc.) |
| <input type="checkbox"/> Tech/coding courses | <input type="checkbox"/> Pre-college courses |
| <input type="checkbox"/> Digital media skills (web design, graphic design, social media, video editing, etc.) | <input type="checkbox"/> Academic programs (tutoring, SAT/ACT test prep, homework help, etc.) |
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Self-defense training | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> CPR/First Aid training | <hr/> |
| <input type="checkbox"/> STEM programs (Science, Technology, Engineering and Math) | <hr/> |
| | <hr/> |

17. Which of the following educational programs or services would the child(ren) in your household most likely participate in?

Please select all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Early childhood learning | <input type="checkbox"/> STEM programs (Science, Technology, Engineering and Math) |
| <input type="checkbox"/> English as a Second Language (ESL) | <input type="checkbox"/> Self-defense training |
| <input type="checkbox"/> Academic programs (tutoring, SAT/ACT test prep, homework help, etc.) | <input type="checkbox"/> Computer Skills |
| <input type="checkbox"/> Digital media skills (web design, graphic design, social media, video editing, etc.) | <input type="checkbox"/> N/A – not applicable |
| | <input type="checkbox"/> Other, please specify below: |
| | <hr/> |
| | <hr/> |
| | <hr/> |

18. Does your household currently have reliable access to the internet, such as Wi-Fi, broadband, or ethernet? Please select a response.

- ☐ Yes
- ☐ No
- ☐ Unsure

19. Does your household currently have reliable telephone access, such as a cellphone/mobile phone, or landline? Please select a response.

- ☐ Yes
- ☐ No
- ☐ Unsure

20. Does your household currently have access to technology such as a computer, laptop, tablet and/or smartphone? Please select all that apply.

- ☐ Computer (desktop/laptop)
- ☐ Tablet
- ☐ Smartphone

☐ Other, please specify below:

Employment / Career Development Services

21. Are you or any adults in your household interested in the following employment or career development programs or services?

Please select all that apply.

- ☐ Small business training
- ☐ Certification training
- ☐ Job Search Skills
- ☐ Interview skills

- ☐ Resume Writing
- ☐ Career Coaching
- ☐ N/A – not applicable
- ☐ Other, please specify below:

22. Which of the following professional development programs or services would the teenager(s) in your household most likely participate in?
Please select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Volunteer work | <input type="checkbox"/> Resume Writing |
| <input type="checkbox"/> Internships | <input type="checkbox"/> Career Coaching |
| <input type="checkbox"/> Summer youth employment program | <input type="checkbox"/> Job Search Skills |
| <input type="checkbox"/> Community service | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Interview skills | <input type="checkbox"/> Other, please specify below: |

Household Needs

The following section will help us understand the unique concerns and priorities of you and your household.

Physical & Mental Health

23. Do all members of your household have health insurance?

- | | |
|---|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> No | <hr/> |
| <input type="checkbox"/> Some do, but not all | <hr/> |
| <input type="checkbox"/> Unsure | <hr/> |

24. Do you or any members of your household have any of the following health conditions? *Please select all that apply. (Optional)*

- | | |
|---|---|
| <input type="checkbox"/> Respiratory/Lung issues | <input type="checkbox"/> Alzheimer's disease/dementia |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Arthritis |
| <input type="checkbox"/> Heart conditions | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> High blood pressure/hypertension | <input type="checkbox"/> Cancer |
| <input type="checkbox"/> Severe allergies | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> HIV/AIDS | <hr/> |

25. Do you or any members of your household have any of the following mental health conditions? Please select all that apply. (Optional)

- | | |
|--|---|
| <input type="checkbox"/> Depression | <input type="checkbox"/> Self-harm |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Obsessive compulsive disorder (OCD) |
| <input type="checkbox"/> PTSD (post-traumatic stress disorder) | <input type="checkbox"/> Substance abuse (alcoholism, drug abuse, etc.) |
| <input type="checkbox"/> Bipolar disorder | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Post-partum depression | |
| <input type="checkbox"/> Schizophrenia | |

26. Are you or any members of your household interested in the following mental health support services? Please select all that apply. (Optional)

- | | |
|--|---|
| <input type="checkbox"/> Addiction and Substance Abuse | <input type="checkbox"/> Marriage Counseling |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Mindfulness Sessions |
| <input type="checkbox"/> Therapy (individual, group, family, behavioral, etc.) | <input type="checkbox"/> Other, please specify below: |

27. Do you or any members of your household have a home health aide, nurse, or another kind of caregiver that comes to your home on a regular basis? (Optional)

- ☐ Yes
- ☐ No
- ☐ Unsure

28. Is anyone in your household (including yourself) currently pregnant, planning to become pregnant, and/or breastfeeding? (Optional)

- ☐ Yes
- ☐ No
- ☐ Unsure
- ☐ Not Applicable (N/A)

29. Do any children or teenagers in your household have special health care needs? (Optional)

- ☐ Chronic health condition or physical disability
- ☐ A developmental or intellectual condition
- ☐ An emotional or behavioral condition

- ☐ Unsure
- ☐ Not Applicable (N/A)
- ☐ Other, please specify below:

Food Security

30. Are you or anyone in your household currently dealing with any of the following food insecurity issues? (Optional)

- ☐ Lack of healthy/nutritious food
- ☐ Inability to afford food
- ☐ Eating smaller meals
- ☐ Skipping meals (involuntarily)

- ☐ Going to bed hungry
- ☐ Unsure
- ☐ Not Applicable (N/A)
- ☐ Other, please specify below:

31. Is your household interested in receiving support from hunger-relief programs? (Optional)

- ☐ City Meals on Wheels
- ☐ Food banks
- ☐ Food pantries
- ☐ Free Summer Meals

- ☐ Unsure
- ☐ Not Applicable (N/A)
- ☐ Other, please specify below:

Financial Security

32. Are you or anyone in your household currently experiencing any of the following financial hardships? *(Optional)*

- | | |
|---|---|
| <input type="checkbox"/> Difficulty paying bills | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Difficulty paying rent | <input type="checkbox"/> Not Applicable (N/A) |
| <input type="checkbox"/> Recent lay-off or job loss | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Unexpected expenses | _____ |

Dependent Care Needs

33. Do you need daytime care services for anyone in your household, such as adult daycare, child daycare, or afterschool programs?

Please select all that apply. (Optional)

- | | |
|---|---|
| <input type="checkbox"/> Adult daycare | <input type="checkbox"/> Afterschool programs |
| <input type="checkbox"/> Senior daycare | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Child daycare/Babysitting services | _____ |

Veteran Needs

34. Is there a veteran in your household (including yourself) that needs assistance with any of the following? *Please select all that apply.*

- | | |
|--|--|
| <input type="checkbox"/> Connecting to Veteran organizations | <input type="checkbox"/> Medical benefits |
| <input type="checkbox"/> Physical Disability | <input type="checkbox"/> Mental Health Care |
| <input type="checkbox"/> Mental disability | <input type="checkbox"/> Pension |
| <input type="checkbox"/> Education and Training | <input type="checkbox"/> Reserve and Guard |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Special and limited benefits |
| <input type="checkbox"/> Health care | <input type="checkbox"/> Transition Assistance |
| <input type="checkbox"/> Healthcare for family members | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Housing | <input type="checkbox"/> VA claims appeals |
| <input type="checkbox"/> Life insurance | <input type="checkbox"/> Woman Veteran health services |
| <input type="checkbox"/> Medals and records | <input type="checkbox"/> Not Applicable (N/A) |

Additional Commentary

35. Is there anything else you would like to share about what you, your household, or your community needs?

Thank You!

We appreciate you taking the time to share valuable feedback for us to better understand you and your household's social service needs. For more information, questions, or concerns, please visit [insert social service coordinator address] [insert relevant website link] [Social Service Coordinator Hotline, etc.]

Instructions for Submitting Your Survey

Please submit your completed survey one of the following ways:

1. Management Office
2. Social Service Coordinator Office
3. Online
4. At the Next Community Meeting with the PACT Partner Team

*PACT Partner Team
Logo Here*

*PACT Partner Team
1234 Street Name, City, NY 12345
(646) 123-4567 | PACTPartnerTeam@gmail.com*



**Appendix A2: NYCHA Social Services Needs Assessment (SSNA)
“Senior-Oriented Development Survey” Template**

NYCHA PACT Social Service Needs Assessment Survey



As your NYCHA Permanent Affordability Commitment Together (PACT) partner team, we are distributing this Social Service Needs Assessment to understand your household's social service needs. By completing this survey, you will help your social service coordinator and local organizations understand which services, opportunities, and programs are important for you and your household. This survey will take about 15 minutes of your time to complete.

This survey is optional. Your choice to take this survey or not will not negatively impact your housing, or participation in the Section 8 program.

PACT Partner Team
Logo Here

PACT Partner Team
1234 Street Name, City, NY 12345
(646) 123-4567 | PACTPartnerTeam@gmail.com



Today's Date (month/date/year): _____

Development Name: _____

About You and Your Household

This section asks for basic information about you and members of your household.

1. Please fill in your contact information below. (Optional)

Name: _____

Address: _____

Mobile Phone: _____ Home Phone: _____

Email Address: _____

2. How long have you lived at this development? Please select one response.

- ☐ Less than one year
- ☐ 1 to 4 years
- ☐ 5 to 9 years
- ☐ 10 to 14 years
- ☐ 15 or more years

3. Please select your age range from the list below. (Optional)

- ☐ 18-30
- ☐ 31-50
- ☐ 51-64
- ☐ 65 or older

4. Are you of Hispanic or Latino origin? (Optional)

- ☐ Yes
- ☐ No
- ☐ Prefer not to answer

■ **5. Which race(s) do you identify as?** *Please select all that apply. (Optional)*

- | | |
|---|--|
| <input type="checkbox"/> African American or Black | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> Asian | <input type="checkbox"/> More than one race |
| <input type="checkbox"/> Caucasian or White | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Native American or Alaska Native | <input type="checkbox"/> Other, please specify below: |
-

■ **6. Please select your gender from the list below.** *(Optional)*

- | | |
|--|---|
| <input type="checkbox"/> Female | <input type="checkbox"/> Transgender |
| <input type="checkbox"/> Male | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Gender Neutral / Non-Binary | <input type="checkbox"/> Other, please specify below: |
-

■ **7. Which languages are spoken in the household?** *Please select all that apply.*

- | | |
|---|---|
| <input type="checkbox"/> English | <input type="checkbox"/> Haitian Creole/French |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Chinese Mandarin/Cantonese | <input type="checkbox"/> Yiddish |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Bengali | |
-

■ **8. What is the highest level of education you have completed?**

Please select a response.

- | | |
|--|---|
| <input type="checkbox"/> Elementary school (Grades K-8) | <input type="checkbox"/> Graduate school/Master's |
| <input type="checkbox"/> High school/GED/High School Equivalency | <input type="checkbox"/> PhD program |
| <input type="checkbox"/> Associate degree | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Bachelor's degree | |

9. What is your current employment status? Please select a response.

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Full-time (40 hours/week) | <input type="checkbox"/> Student |
| <input type="checkbox"/> Part-time (less than 40 hours/week) | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Homemaker/Stay-at-home caretaker | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Self-employed | |

10. Please tell us about other members in your household. This will help us to better understand and meet your social service needs. (Optional)

Age of Household Members (not including yourself)

Age Range	Number of Household Members
Adults (age 18-64):	
Seniors (age 65 and older):	
Youth (age 13-17):	
Children (12-years and under):	

Gender of Household Members (not including yourself)

Gender	Number of Household Members
Female:	
Male:	
Gender Neutral / Non-Binary:	
Transgender:	
Prefer not to answer:	

Educational Attainment of Household Members (not including yourself)

Educational Attainment	Number of Household Members
Elementary/Middle School:	
High School/GED/H.S. Equivalency:	
Associate's Degree:	
Bachelor's Degree:	
Graduate School/Master's Degree:	
Ph.D. Program:	
Not Applicable:	

Employment Status of Household Members (not including yourself)

Employment Status	Number of Household Members
Full-Time (40 hours/week):	
Part-Time (less than 40 hours/week):	
Homemaker/Stay-at-home Caretaker:	
Self-Employed:	
Student:	
Retired:	
Unemployed (looking for work):	
Unemployed (not looking for work):	
Other (please specify):	
Not Applicable:	

11. Have you or any household members ever served in the U.S. Armed Forces, Reserves, or National Guard or otherwise qualify for veteran status? Please select a response.

- ☐ **Yes**
- ☐ **No**
- ☐ **Unsure**

Social Service Needs

The following section will help us understand the social service needs of you and your household organized by various topics areas.

Recreational Activities

12. Are you or any adults in your household interested in any of the following recreational programs? Please select all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Mindfulness/Meditation Classes | <input type="checkbox"/> Individual Sports Clubs (running, biking, tennis, handball, etc.) |
| <input type="checkbox"/> Group Day Trips (museums, theaters, concerts, etc.) | <input type="checkbox"/> Social Events (lunch outings, picnics, block parties, etc.) |
| <input type="checkbox"/> Board Games Club | <input type="checkbox"/> Swim Classes |
| <input type="checkbox"/> Cultural Classes (art, dance, music, theater, etc.) | <input type="checkbox"/> Book Club |
| <input type="checkbox"/> Fitness Classes (yoga, Zumba, weight training, Pilates, etc.) | <input type="checkbox"/> Cooking and Nutrition Classes |
| <input type="checkbox"/> Nature Activities (hiking, nature walks, etc.) | <input type="checkbox"/> Community Gardening |
| <input type="checkbox"/> Group Sports (soccer, basketball, softball, etc.) | <input type="checkbox"/> Holiday Celebrations |
| | <input type="checkbox"/> N/A – not applicable |
| | <input type="checkbox"/> Other, please specify below: |
-

13. Are you or any seniors in your household interested in any of the following recreational programs? Please select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Bingo | <input type="checkbox"/> Senior Water Aerobics |
| <input type="checkbox"/> Dominos | <input type="checkbox"/> Walking clubs |
| <input type="checkbox"/> Cards/Bridge Club | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Low-impact sports clubs (jogging, biking, handball, pickleball, etc.) | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Senior Fitness Classes (yoga, Tai-Chi, chair exercises, etc.) | |
-
-
-

Educational & Technology Services

14. Are you or any adults in your household interested in any of the following educational programs or services? Please select all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Computer/technology workshops | <input type="checkbox"/> Small business training |
| <input type="checkbox"/> Nutrition and healthy cooking workshops | <input type="checkbox"/> Tech, web development or coding classes |
| <input type="checkbox"/> Pregnancy and baby care resources | <input type="checkbox"/> English as a Second Language (ESL) |
| <input type="checkbox"/> Self-defense training | <input type="checkbox"/> College admissions counseling |
| <input type="checkbox"/> CPR/First Aid training | <input type="checkbox"/> Homeownership classes |
| <input type="checkbox"/> GED/Adult Education Courses | <input type="checkbox"/> Parenting Skills |
| <input type="checkbox"/> Tax preparation assistance | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Financial Literacy/Personal Finance Courses | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Adult Education (GED/High School Equivalency etc.) | |

15. Are you or any seniors in your household interested in any of the following educational programs or services? Please select all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Fall-prevention workshops | <input type="checkbox"/> CPR/First Aid training |
| <input type="checkbox"/> Computer/technology workshops | <input type="checkbox"/> Financial Literacy/Personal Finance Courses |
| <input type="checkbox"/> English as a Second Language (ESL) | <input type="checkbox"/> GED/Adult Education Courses |
| <input type="checkbox"/> Chronic disease self-management workshops (arthritis, diabetes, high blood pressure/hypertension, etc.) | <input type="checkbox"/> Tax preparation |
| <input type="checkbox"/> Nutrition and healthy cooking workshops | <input type="checkbox"/> N/A – not applicable |
| <input type="checkbox"/> Self-defense training | <input type="checkbox"/> Other, please specify below: |

16. Does your household currently have reliable access to the internet, such as Wi-Fi, broadband, or ethernet? *Please select a response.*

- ☐ Yes
- ☐ No
- ☐ Unsure

17. Does your household currently have reliable telephone access, such as a cellphone/mobile phone, or landline? *Please select a response.*

- ☐ Yes
- ☐ No
- ☐ Unsure

18. Does your household currently have access to technology such as a computer, laptop, tablet and/or smartphone? *Please select all that apply.*

- | | |
|--|--|
| <input type="checkbox"/> Computer (desktop/laptop) | <input type="checkbox"/> Other, please specify below:

_____ |
| <input type="checkbox"/> Tablet | |
| <input type="checkbox"/> Smartphone | |

Employment / Career Development Services

19. Are you or any **adults** in your household interested in the following employment or career development programs or services?

Please select all that apply.

☐ Small business training

☐ Certification training

☐ Job Search Skills

☐ Interview skills

☐ Resume Writing

☐ Career Coaching

☐ N/A – not applicable

☐ Other, please specify below:

20. Are you or any **seniors** in your household interested in the following employment or career development programs or services?

Please select all that apply.

☐ NYC Older adult employment program

☐ Foster Grandparent Program

☐ Silver Stars/Silver Corps

☐ Civic Engagement Employment Service (ReServe) program

☐ Retirement coaching

☐ N/A – not applicable

☐ Other, please specify below:

Household Needs

The following section will help us understand the unique concerns and priorities of you and your household.

Physical & Mental Health

21. Do all members of your household have health insurance?

☐ Yes

☐ No

☐ Some do, but not all

☐ Unsure

☐ Other, please specify below:

22. Do you or any members of your household have any of the following health conditions? Please select all that apply. (Optional)

☐ Respiratory/Lung issues

☐ Asthma

☐ Heart conditions

☐ High blood pressure/hypertension

☐ Severe allergies

☐ HIV/AIDS

☐ Alzheimer's disease/dementia

☐ Arthritis

☐ Diabetes

☐ Cancer

☐ Other, please specify below:

■ **23. Do you or any members of your household have any of the following mental health conditions?** *Please select all that apply. (Optional)*

- | | |
|--|---|
| <input type="checkbox"/> Depression | <input type="checkbox"/> Self-harm |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Obsessive compulsive disorder (OCD) |
| <input type="checkbox"/> PTSD (post-traumatic stress disorder) | <input type="checkbox"/> Substance abuse (alcoholism, drug abuse, etc.) |
| <input type="checkbox"/> Bipolar disorder | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Post-partum depression | <hr/> |
| <input type="checkbox"/> Schizophrenia | <hr/> |

■ **24. Are you or any members of your household interested in the following mental health support services?** *Please select all that apply. (Optional)*

- | | |
|--|---|
| <input type="checkbox"/> Addiction and Substance Abuse | <input type="checkbox"/> Marriage Counseling |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Mindfulness Sessions |
| <input type="checkbox"/> Therapy (individual, group, family, behavioral, etc.) | <input type="checkbox"/> Other, please specify below: |
| | <hr/> |
| | <hr/> |

■ **25. Do you or any members of your household have a home health aide, nurse, or another kind of caregiver that comes to your home on a regular basis?** *(Optional)*

- ☐ Yes
- ☐ No
- ☐ Unsure

Food Security

26. Are you or anyone in your household currently dealing with any of the following food insecurity issues? *(Optional)*

- | | |
|--|---|
| <input type="checkbox"/> Lack of healthy/nutritious food | <input type="checkbox"/> Going to bed hungry |
| <input type="checkbox"/> Inability to afford food | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Eating smaller meals | <input type="checkbox"/> Not Applicable (N/A) |
| <input type="checkbox"/> Skipping meals (involuntarily) | <input type="checkbox"/> Other, please specify below: |
-

27. Is your household interested in receiving support from hunger-relief programs? *(Optional)*

- | | |
|---|---|
| <input type="checkbox"/> City Meals on Wheels | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Food banks | <input type="checkbox"/> Not Applicable (N/A) |
| <input type="checkbox"/> Food pantries | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Free Summer Meals | |
-

Financial Security

28. Are you or anyone in your household currently experiencing any of the following financial hardships? *(Optional)*

- | | |
|---|---|
| <input type="checkbox"/> Difficulty paying bills | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Difficulty paying rent | <input type="checkbox"/> Not Applicable (N/A) |
| <input type="checkbox"/> Recent lay-off or job loss | <input type="checkbox"/> Other, please specify below: |
| <input type="checkbox"/> Unexpected expenses | |
-

Dependent Care Needs

29. Do you need daytime care services for anyone in your household, such as adult daycare, child daycare, or afterschool programs?

Please select all that apply. (Optional)

☐ Adult daycare

☐ Afterschool programs

☐ Senior daycare

☐ Other, please specify below:

☐ Child daycare/Babysitting services

Veteran Needs

30. Is there a veteran in your household (including yourself) that needs assistance with any of the following? Please select all that apply.

☐ Connecting to Veteran organizations

☐ Medical benefits

☐ Physical Disability

☐ Mental Health Care

☐ Mental disability

☐ Pension

☐ Education and Training

☐ Reserve and Guard

☐ Employment

☐ Special and limited benefits

☐ Health care

☐ Transition Assistance

☐ Healthcare for family members

☐ Transportation

☐ Housing

☐ VA claims appeals

☐ Life insurance

☐ Woman Veteran health services

☐ Medals and records

☐ Not Applicable (N/A)

Additional Commentary

31. Is there anything else you would like to share about what you, your household, or your community needs?

Thank You!

We appreciate you taking the time to share valuable feedback for us to better understand you and your household's social service needs. For more information, questions, or concerns, please visit [insert social service coordinator address] [insert relevant website link] [Social Service Coordinator Hotline, etc.]

Instructions for Submitting Your Survey

Please submit your completed survey one of the following ways:

1. Management Office
2. Social Service Coordinator Office
3. Online
4. At the Next Community Meeting with the PACT Partner Team

*PACT Partner Team
Logo Here*

*PACT Partner Team
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NYCHA PACT Social Service Needs Assessment Survey



As your NYCHA Permanent Affordability Commitment Together (PACT) partner team, we are distributing this Social Service Needs Assessment to understand your household's social service needs. By completing this survey, you will help your social service coordinator and local organizations understand which services, opportunities, and programs are important for you and your household. This survey will take about 15 minutes of your time to complete.

This survey is optional. Your choice to take this survey or not will not negatively impact your housing, or participation in the Section 8 program.

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Appendix C: Vital Information Table (to be used at the beginning of the social service plan)

PACT Social Services Plan				
Development(s) Name: _____				
PACT Partner(s) Name: _____				
Lead Social Coordinator contact information: _____				
Social Service Partners:		Name	Social Service/Program	
	1.			
	2.			
	3.			
	4.			
	5.			
Existing Social Service Partners & Programs:		Name	Lease End Date	City Funding End Date
	1.			
	2.			
	3.			
	4.			
	5.			
Total Proposed Budget		\$:____ (overall)	\$:____ (per DU)	
Other Funding Sources	1.			
	2.			
Data Collected:				
Number of Surveys Distributed (a):				
Number of Surveys Received (b):				
Response Rate (b/a):				
Issues Affecting Resident Population:	1.			
	2.			
	3.			
	4.			
	5.			

Updated:

Prepared by: