



# HUD's Service Coordinators in Multifamily Housing Program Resource Guide



## Appendix C: Building Capacity for Virtual Service Coordination

Service coordinators typically have an office on the property and work with residents face to face. While fostering a trusting relationship with residents through in-person connections is fundamental for successful service coordination, there may be circumstances where the service coordinator needs to work from a location other than the property—in a manner referred to here as virtual service coordination—either on occasion or potentially for an extended period of time.<sup>1</sup>

In spring 2020, many properties had to abruptly transition to virtual service coordination in order to continue supporting residents while adhering to their state or locality’s social distancing guidelines in response to the COVID-19 pandemic. Other circumstances such as a weather emergency may also trigger the need for a virtual service coordination protocol. The purpose of this resource is to help property owners and managers prepare and plan for virtual service coordination, so that their service coordinators can effectively pivot to working virtually if and when circumstances warrant doing so. This resource covers four main topics:

1. Ensuring that Service Coordinators have the Technology and Equipment to Work Off-Site
2. Determining What Aspects of Service Coordination Can or Should be Done Virtually
3. Maintaining Connection with Residents
4. Using Technology to Engage with Residents

### Ensuring that Service Coordinators have the Technology and Equipment to Work Off-Site

Fundamental to the ability to provide virtual service coordination is having the necessary equipment to do the job effectively while maintaining resident confidentiality. In order to be able to perform all aspects of service coordination virtually, the service coordinator needs a secure computer that can be used in the off-site location and that meets the same data security standards as would be required on site.

In most cases, the property owner/manager will need to provide this equipment to the service coordinator and support its secure set-up (including secure internet connectivity) in the off-site location.<sup>2</sup> If the service coordinator wishes to use videoconferencing software to interact with residents and partners, the property owner/manager may need to provide support on selecting an application and guidelines for how to maintain resident confidentiality when using a web cam.

If the property owner/manager is not able to provide the service coordinator with a computer for off-site use, it does not mean that the service coordinator cannot work virtually at all. The scope of what the service coordinator can do will be more limited, but in the height of the COVID-19 pandemic, service coordinators who did not have access to the appropriate computer equipment off-site continued to serve residents by making regular telephone calls to residents. They used these calls to assess residents’ needs, provide referrals, and reduce residents’ social isolation.

It is important for service coordinators to continue documenting resident interactions when working virtually to ensure complete and accurate records and to comply with HUD reporting requirements. For example, service coordinators should document their regular check-ins with residents, even if they take place over the phone.

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<sup>1</sup> At the time of this writing, HUD-assisted properties that use grant funds or operating funds for their service coordinator program are not authorized to increase the overall cost of the service coordinator program to enable virtual service coordination.

<sup>2</sup> Properties planning an equipment upgrade in their service coordinator program should consider device mobility, as well as encryption standards, firewalls, and data backup software to maintain security at off-site work locations.

Service coordinators should also ensure records are stored in a secure location. HUD recommends using electronic records whenever possible. However, if the service coordinator maintains any type of paper files and wishes to access those off-site, the property owner/manager will need to consider the security risks associated with moving those files and, at a minimum, furnish the service coordinator with a secure filing cabinet in the off-site location for storage and a locked bag for transportation.

When engaging with residents virtually, service coordinators also have a responsibility to maintain resident confidentiality, unless the resident gives them explicit permission to share the information with others. Working virtually does not alleviate this requirement. [Chapter 4 of the Resource Guide](#) provides confidentiality standards.

While digital technologies have their own systems to protect users' confidentiality, service coordinators should consider other actions to manage the privacy of video calls. Establishing guidelines for the environments in which calls should be conducted (avoiding public places, common areas, etc. if possible) and whether residents will have other people with them during calls will help reduce privacy concerns.

If residents begin working with the service coordinator during an extended period of virtual service coordination, service coordinators may need to adapt their standard consent form to a virtual format. For example, service coordinators may want to get consent via email or text message. The service coordinator may also consider requesting the resident call and leave a voicemail with their consent, and the coordinator can save the audio recording. Regardless of the method, service coordinators should both save the record of consent (such as the email, text message, voicemail) and make a note documenting the consent in resident's progress notes. If verbal consent is obtained, the service coordinator should complete the release form, note verbal authorization was given on the signature line, and add the form to the resident's file. Upon return to normal business practices, the service coordinator should attempt to get the release form signed by the resident.

### Quality Assurance

It is strongly encouraged that all service coordinators use a quality assurance provider to provide feedback around clinical concerns as well as guidance that can minimize liability to the service coordinator and the property, regardless of whether working virtually or on-site.

## Determining What Aspects of Service Coordination Can or Should be Done Virtually

When planning for virtual service coordination, the property owner/manager and service coordinator should discuss which parts of the service coordinator's job could be done virtually, as well as which parts might benefit from a virtual approach under some circumstances.

Consider the core areas of the service coordinator role, as described in [Chapter 2 of the Resource Guide](#) and highlighted in the text box on page three. Keeping in mind that all of these activities assume a pre-established relationship of trust and familiarity with residents based on in-person interactions, functionally all of these activities can be done virtually, assuming that the service coordinator has access to the appropriate secure technology in the off-site location.

Some functions might lend themselves more readily to off-site work, such as connecting with the aging services network and maintaining a resource directory, updating records related to residents' receipt of services, or researching the public benefits to which residents may be entitled and completing paperwork on their behalf. Regularly doing some of this type of work off-site could help improve work/life balance for service coordinators, increasing productivity and reducing turnover without compromising the quality of services to residents.

Providing educational or preventative health programs and services is also difficult to do virtually. While many programs can be offered in a virtual format, residents may be less interested in learning that way. Service coordinators generally find that attendance at programming is lower when there is no social aspect, and it can be difficult to generate a sense of community virtually.

Residents' access to and ability to use virtual meeting technology is another challenge, discussed further below. When virtual programming may not be a good fit, traditional printed educational materials, such as newsletters, may be the next best alternative to in-person programming.

Building community partnerships may be more difficult to accomplish virtually, especially if the service coordinator is used to building relationships through in-person meetings, but it is certainly possible. Many service coordinators are used to maintaining these relationships through telephone calls.

Assessing resident needs and motivating residents to follow-through on their wellness plan is perhaps the most challenging core function to do virtually but is critically important to helping residents to live safely and independently. Many service coordinators find they are most successful when they meet with residents in-person and see great importance in being able to observe residents in the building as they go about their daily lives.

There are also specific challenges with working with residents virtually. For example, service coordinators may not have up-to-date contact information for residents; residents may not have phones or be willing to receive calls from an unknown number; residents may need the service coordinator to read out government forms; and/or residents may receive items in the mail that the service coordinator needs to help them interpret. Service coordinators may need to find a secure method to share confidential documents or information with residents and others when working virtually.

Despite these many challenges, if the service coordinator is expected to be off-site for an extended period of time, they must develop a plan for maintaining connection with residents virtually. Combating social isolation is an important part of the service coordinator's work, as well as making sure that residents can access needed supportive services.

## Maintaining Connection with Residents

Developing a plan to keep in touch with residents to continue to help them meet their needs and to identify new needs that might arise is critical in the event a service coordinator must work virtually for longer than a day or two. In the event a service coordinator must work virtually for an extended time, service coordinators should develop a plan for reaching out to all residents via regular check-ins in the resident's preferred format (phone calls, video calls, etc.). The goals of check-ins are: (1) for the service coordinator to learn about any risks to the resident's health and well-being that the service coordinator could help address, (2) for the resident to know the service coordinator is still working and accessible during the virtual period, and (3) for the service coordinator to aid residents in understanding local advisories and safety orders.

The *Sample Check-in Schedule* below provides an example of how to conduct check-in calls with all residents over a week. This schedule would need to be adapted depending on the number of residents at the property and the service coordinator's work hours. Depending on the number of residents, it may not be feasible to reach out to all residents on a weekly basis. If there are too many residents to contact all directly, or if residents complain that they are being

### Service Coordinator Core Functions

1. Conducting comprehensive, non-clinical assessments of residents for wellness and social needs.
2. Helping residents to identify, access, and coordinate services.
3. Monitoring the receipt and follow through of services, including encouraging and motivating residents to engage with providers and participate in their own care/services management.
4. Proactively developing and arranging educational or preventative health programs and services.
5. Developing and sustaining partnerships with local agencies and organizations serving older adults.
6. Maintaining an up-to-date resource directory with all local service providers.

called too often, the service coordinator may want to prioritize the proactive check-in calls to those residents known to be the most frail or to have the weakest social support network.

For guidance identifying residents with higher risk of having negative outcomes linked with COVID-19, the American Association of Service Coordinators created a vulnerability tool. The tool is available on the [AASC website](#).

Before working virtually, the service coordinator may want to disseminate letters or flyers to residents telling them how they can contact the service coordinator and the hours the service coordinator will be available. What is important is that the service coordinator approaches the outreach plan systematically and tracks their interactions with residents, to help ensure that no resident who needs help is left behind during the period of virtual service coordination.

### **Sample Check-in Schedule for Virtual Service Coordination**

<b>Schedule</b>	<b>Group</b>
Monday	Check in with residents on floor 1 OR Check in with residents with last names A–G
Tuesday	Check in with residents on floors 2 & 3 OR Check in with residents with last names H–M
Wednesday	Check in with residents on floor 4 OR Check in with residents with last names N–S
Thursday	Check in with residents on floors 5 OR Check in with residents with last names T–Z
Friday	Follow up with all residents with whom you were not able to connect

As part of the check-in calls, service coordinators should consider asking residents questions about their physical health, access to their doctors and prescriptions, access to food, emotional health, and the level of support they receive from friends and family to help with their daily activities. These may be questions that the service coordinator would not ask explicitly if they could see the resident in person but may be critical in a virtual situation.

Virtual service coordination triggered by a public health emergency might not only prevent the service coordinator from working on-site. Physical distancing recommendations could also prevent other service providers from coming on site and restrict the extent that residents can interact with each other. This puts residents at increased risk for social isolation, loneliness, and depression. In such a case, the service coordinator's work becomes more challenging—in addition to figuring out how to maintain contact with individual residents, the coordinator will also be concerned about how best to support residents' needs for socialization and how to maintain essential group programming such as exercise classes. Service coordinators may wish to look for innovative ideas shared online from aging services groups, service coordinator support networks, and similar organizations.

When making referrals for services, the service coordinator also needs to consider how the resident will access the services in a virtual environment. For example, if a resident needs food assistance and the service coordinator has identified a resource for free grocery delivery, the service coordinator needs to make sure the resident knows how to use that service. Ordering online groceries won't work for a resident who does not have a computer or is not comfortable using the internet. Similarly, telehealth services may be a challenge for residents even if they have a computer or smartphone. There will be an extra step for the service coordinator to ensure that the resident can access the service if they will have to do so in a new way.

## **Using Technology to Engage with Residents**

In all of their work with residents, whether in-person or virtually, service coordinators should aim to provide access to their services in the mode that is preferable to the resident. Even if the service coordinator is on site, some residents

may prefer to communicate by telephone rather than in-person for a variety of reasons, including privacy concerns and difficulties leaving their apartments. As part of planning for virtual engagement, service coordinators should endeavor to learn residents' preferred methods of engagement and use that when possible. Including this information as part of the resident profile (in the case management system) will ensure it is available to the service coordinator when they need it. For example, if a service coordinator is working virtually for two days a week, they could prioritize in-person check-ins while they are in the office with those residents who prefer to meet in person and contact the other residents by phone when they are off site.

It might take time to learn residents' preferences for the mode of communication, and these preferences might be different in "normal" times from times when physical distancing is required. Resident preferences for communication will likely reflect a combination of the resident's access to technology, comfort level with technology, literacy level, language and cultural preferences, among other factors. Lack of internet access, computer devices, or financial resources to purchase sufficient cell phone minutes are other limiting factors. (It is important for the service coordinator not to make assumptions about residents and technology.) Resident preferences are likely to vary widely across the property, so service coordinators will need to do some research before planning for virtual service coordination.

Today's technology offers many different ways for people to connect virtually, including telephone calls, correspondence via email and computer chat functions, texting, one-on-one video calls, group video conferencing sessions, and social media broadcast tools. It is unlikely that one size will fit all. Residents will likely fall into different groups as far as access to and comfort with technology, indicating the need for multiple approaches tailored to each resident's preferred method of communication and outreach. As part of preparing for a potential crisis situation, service coordinators should consider connecting with an organization that provides technical assistance and training for residents' digital literacy.

Service coordinators will also benefit from understanding residents' access to technology and technological literacy for planning virtual programs that address health, wellness, and social isolation. While training may help improve base levels of comfort with technology, service coordinators should take a person-centered approach to determining the best way to incorporate virtual services and programs at a property and create programming with the least digitally savvy resident in mind.

If the service coordinator's assessment reveals that lack of internet access at the property or within individual units is preventing residents from connecting to the resources they need, the service coordinator should work with the property owner or manager to see if the issue can be addressed. HUD encourages property owners and agents to make their properties internet ready.

Similar to telephone service, broadband or internet fees for individual units may not be included in tenant rent charges or utility allowances for properties receiving project-based rental assistance; however, low-income tenants may be eligible for low-cost internet services. Interested owners and tenants should contact local internet service providers.

Service coordinators who develop a familiarity with the technological platforms required for virtual services and programming, including telehealth services, and who understand their residents' technological capacity and resources, will be a step ahead in circumstances that require the use of those virtual services. The best scenario is one in which residents have had training, support, and time to be able to take advantage of new technology. Service coordinators are advised to invest time in developing user-friendly informational materials about the technology and in providing one-on-one assistance to residents.