FALMOUTH HOUSING AUTHORITY
Proposed Annual Plan for Fiscal Year 2027
For State-Aided Public Housing

The Annual Plan is a document compiled by housing authority staff in advance of each new fiscal year. The plan serves as both a tool for the Local Housing Authority (LHA) to reflect upon the prior fiscal year, and as an opportunity to develop a clear and transparent plan that builds on successes, identifies needs, and corrects any issues that have arisen in prior years. Additionally, the Annual Plan is an important tool for tenants, who may use the document to better understand the operations and needs of their housing authority, advocate for changes to policies and procedures, access data about the housing authority, and participate in their housing authority's governance.

In addition to the physical document, the Annual Plan is also a process of public engagement. Throughout the Annual Plan process, the LHA executive director or their designee will be expected to review the Plan with any Local Tenant Organizations (LTO's) and Resident Advisory Board (RAB) before the LHA presents the plan to the LHA Board of Commissioners; make a draft available for review to all residents and the general public; post on the website and make a copy available to each LTO at least 30 business days before the public hearing; hold a hearing on the document; and collect, integrate, and report back on substantive comments. Additionally, the Board will read, offer recommendations, and approve the Annual Plan in advance of its submission to EOHLC.

The law that mandates the Annual Plan is An Act Relative to Local Housing Authorities, Massachusetts General Laws, Chapter 121B Section 28A. The regulation that expands upon Section 28A is 760 CMR 4.16. The regulations that address Local Tenant Organization (LTO) and resident participation in the Annual Plan are 760 CMR 6.09 (3)(h) and 760 CMR 6.09(4)(a)(4).

The FALMOUTH HOUSING AUTHORITY's Annual Plan for their 2027 fiscal year includes the following components:

1. Overview and Certification
2. Capital Improvement Plan (CIP)
3. Maintenance and Repair Plan
4. Operating Budget
5. Narrative responses to Performance Management Review (PMR) findings
6. Policies
7. Waivers
8. Glossary
9. Other Elements, which may include:
    a. Approval documents and any Public Comments
    b. Tenant Satisfaction Survey
    c. Performant Management Review report
    d. Other documents added by LHA

State-Aided Public Housing Developments

The following table identifies the state-aided public housing units with developments of more than 8 units listed separately. Units in developments of 8 or fewer units are aggregated as noted. Units that the LHA provides to assist clients of the Department of Mental Health (DMH), the Department of Developmental Services (DDS), or other agencies are also aggregated separately.

Dev No	Type	Development Name	Num Bldgs	Year Built	Dwelling Units
667-01	Elderly	MAYFLOWER	4	1956	24
667-02	Elderly	SALT SEA	7	1960	30
	Family	Family units in smaller developments	25		25
	Other	Other Special Occupancy units	1		8
Total			37		87

Massachusetts Rental Voucher Program (MRVP)

The Massachusetts Rental Voucher Program (MRVP) is a state-funded program that provides rental subsidies to low-income families and individuals. In most cases, a “mobile” voucher is issued to the household, which is valid for any market-rate housing unit that meets the standards of the state sanitary code and program rent limitations. In some cases, vouchers are “project-based” into a specific housing development; such vouchers remain at the development if the tenant decides to move out.

FALMOUTH HOUSING AUTHORITY manages 38 MRVP vouchers.

Federally Assisted Developments

FALMOUTH HOUSING AUTHORITY also manages Federally-assisted public housing developments and/or federal rental subsidy vouchers serving 801 households.

LHA Central Office

FALMOUTH HOUSING AUTHORITY
115 Scranton Ave. Falmouth, MA 02540

Bobbi Richards, Executive Director
Phone: 508-548-1977
Email: brichards@falmouthhousing.org

LHA Board of Commissioners

	Role	Category	From	To
Patricia Favulli	Member		05/15/2021	07/31/2026
Kathleen Haynes	Member		09/13/2021	06/30/2026
Stephen Patton	Chair		05/27/2019	05/31/2027
Hannah Vanderscheuren	Member		02/09/2026	05/19/2026

Plan History

The following required actions have taken place on the dates indicated.

REQUIREMENT		DATE COMPLETED
A.	Advertise the public hearing on the LHA website.	6/1/2026
B.	Advertise the public hearing in public postings.	6/1/2026
C.	Notify all LTOs or RAB (if there is one) of the hearing and provide access to the Proposed Annual Plan.	N/A
D.	Post draft AP for tenant and public viewing.	6/4/2026
E.	Hold quarterly meeting with LTO or RAB to review the draft AP. (Must occur before the LHA Board reviews the Annual Plan.)	N/A
F.	Annual Plan Hearing. Hosted by the LHA Board, with a quorum of members present. (For Boston, the Administrator will host the hearing.)	7/29/2026
G.	Executive Director presents the Annual Plan to the Board.	7/29/2026
H.	Board votes to approve the AP. (For Boston Housing Authority, the Administrator approves and submits the AP.)	7/29/2026

Certification

CERTIFICATION OF LHA USER AUTHORIZATION FOR EOHLC CAPITAL SOFTWARE AND HOUSING APPLICATIONS

I, Bobbi Richards, Executive Directorof the FALMOUTH HOUSING AUTHORITY, certify on behalf of the Housing Authority that I have conducted an annual review of all FALMOUTH HOUSING AUTHORITY users of EOHLC Capital Software applications and Housing Applications and that all current LHA users are authorized to use the systems and have the appropriate level of user access based on their job responsibility. I approve all system access and access levels for all FALMOUTH HOUSING AUTHORITY users.

This certification applies to the following applications:

- Capital Planning System (CPS)
- Consolidated Information Management System (CIMS)
- Cap Hub
- EOHLC Housing Management Systems
- CHAMP

CERTIFICATION FOR SUBMISSION OF THE ANNUAL PLAN

I, Bobbi Richards, Executive Director of the FALMOUTH HOUSING AUTHORITY, certify on behalf of the Housing Authority that: a) the above actions all took place on the dates listed above; b) all facts and information contained in this Annual Plan are true, correct and complete to the best of my knowledge and belief and c) that the Annual Plan was prepared in accordance with and meets the requirements of the regulations at 760 CMR 4.16 and 6.09.

The Board and Executive Director further certify that LHA operations and all LHA Board-adopted policies are in accordance with M.G.L. c. 121B and all Massachusetts state-aided public housing regulations, including, but not limited to 760 CMR 4.00; 5.00; 6.00; 8.00; and 11:00, as well as adhere to Department-promulgated guidance.

Date of certification: 7/31/2026

The Executive Office of Housing and Livable Communities (EOHLC) completed its review of this Annual Plan (AP) on . Review comments have been inserted into the plan.

Capital Improvement Plan (CIP) Description

What Is the Capital Improvement Plan?

The Capital Improvement Plan (CIP) is a five-year plan that outlines major repairs and improvements to housing authority properties. It describes each project's scope, estimated cost, and timeline, while reflecting the Local Housing Authority's prioritization of its most critical needs, particularly those related to resident health and safety. The plan also identifies how projects may be funded and when they are anticipated to take place, based on the Massachusetts Executive Office of Housing and Livable Communities (EOHLC) fiscal year (July 1 through June 30).

How Projects Are Funded Each Year

Each year, every Local Housing Authority (LHA) receives a Formula Funding Award from EOHLC. This annual award provides the primary source of funding for new projects included in the CIP. While funding levels may vary, it is generally reasonable to anticipate that similar award amounts will be available over the next two years, which helps inform project planning and scheduling. LHAs may also apply for additional "special awards" from EOHLC for specific projects that meet certain criteria, such as emergency repairs, regulatory compliance, or energy and water conservation improvements.

Why Plans and Costs May Change

The CIP is a planning document and must be submitted to EOHLC for review and approval. While the plan reflects current cost estimates, project budgets often increase between the time they are planned and when construction begins. As a result, available funding may not go as far as originally anticipated, and some projects may need to be adjusted, delayed, or completed in phases.

Why Project Schedules Can Shift

Because the CIP is updated each year, project schedules and priorities may change over time. In particular, previously unidentified conditions or urgent repair needs may arise after the plan is developed; due to their impact on health, safety, or building integrity, these issues may take precedence over projects that were previously scheduled. When this occurs, the plan may be updated through CIP Revision.

To better understand how a plan has changed—including which projects were advanced, delayed, or added—it is helpful to compare the current year's CIP with the prior year's CIP. This comparison can show how EOHLC funding decisions and plan revisions have affected project timing and priorities.

Other Funding Sources

LHAs may sometimes secure other sources of funding and assistance that you will note in their CIP, such as: Community Preservation Act (CPA) funding, Community Development Block Grant (CDBG) funding, Local Affordable Housing Trust Funds (AHTF), HOME grants, income from leasing a cell tower on their property, savings from net meter credit contracts with solar developers, utility rebates and contracted work from utility providers. However, not all of these funding sources are available every year, or in all communities.

The CIP includes the following parts:

1. A list of existing projects approved in last year's CIP Plan or added to the plan through CIP Revision during the year.
2. A list of planned capital projects showing spending per fiscal year.
3. 'Narrative Questions' with a variety of additional information.

Active and Proposed Projects with Projected Spending by Fiscal Year

Active Projects			
Project #	**Project Title**	**Development**	**Total Development Cost**
096103	VUI 189 Old Barnstable Rd.		$335,702.00
096112	AIP: 667 Routine Turnovers		$10,800.00
096072	Screen doors, bulkhead and window screens	BAYBERRY HOUSE	$5,000.00
096086	ARPA TAR & FF 38 Marshall Drive-Vacant Unit Turnover		$186,841.92
096090	Roof Replacement Project		$30,960.00
096091	VUI 130 Edgewater West		$238,141.61
096092	Kitchen Rehab Project		$125,975.04
096096	VUI 20 Madeline Rd		$201,491.46
096099	Windows & Painting at Salt Sea	SALT SEA	$592,637.09
096100	ARPA FF Basement/Boiler Room Stairwell Retaining Wall Repair	MAYFLOWER	$67,742.00
096101	VUI 44 Carolyn Ln		$213,620.47
096104	Site Drainage & Crawlspace Waterproofing	MAYFLOWER	$636,225.00
096105	Tree Trimming & Removal 705/667-1	MAYFLOWER	$21,324.00
096106	SUST Replace Gas Ranges with Electric Ranges 667-1	MAYFLOWER	$137,356.00
096107	Additional Parking Spaces	MAYFLOWER	$9,900.00
096108	Replace Gas Ranges with Electric Ranges 667-2	SALT SEA	$16,994.00
096109	Roof Replacement Project		$22,850.00
096111	Vacant Unit Rehab Unit 2A 667-1	MAYFLOWER	$49,155.00
096113	ARPA FF and SUS Bathroom Exhaust Fans 667-1/667-2	MAYFLOWER	$222,897.90
096114	Storm Drainage & Basement Waterproofing 705-A		$51,000.00
096115	Vacant Unit Turnover 123 Maravista Ave. - task force		$111,471.80
096117	Family Housing Smoke & Carbon Monoxide Detector Updates		$51,000.00
096118	Building Ventilation Upgrades & Indoor Humidity Control 667-1	MAYFLOWER	$10,000.00
096119	EMG Boiler Repair 667-2 BLDG. D	SALT SEA	$0.00
096120	Vacant Unit Turnover 28 Milton St.		$0.00
Total			$3,349,085.29

Proposed Projects			
FY2027		**Available Formula Funding:**	**$218,176.88**
Project Title	**Development**	**Total Development Cost**	**Special Award(s) Requested**
Earmark Funding: Window Replacement 667-1	MAYFLOWER	$414,009.00	
Fire Sprinkler System Compliance Upgrade - Bayberry House	BAYBERRY HOUSE	$11,410.00	
Vacant Unit Turnover 42 Jamie Ln	42 JAMIE LANE	$152,166.00	$152,166.00
Total		$577,585.00	$152,166.00

Proposed Projects		
FY2028	**Anticipated Formula Funding:**	**$218,176.88**
Project Title	**Development**	**Total Development Cost**
Flooring Replacement (Bayberry)	BAYBERRY HOUSE	$101,820.00
2nd Floor Bathroom Renovation - Bayberry	BAYBERRY HOUSE	$88,582.00
Handicap Accessible Ramp Reasonable Accommodation 38 Marshall Dr.	38 MARSHALL DRIVE	$14,715.00
Total		$205,117.00

Proposed Projects		
FY2029	**Anticipated Formula Funding:**	**$218,176.88**
Project Title	**Development**	**Total Development Cost**
Siding, Windows, & Door Replacement 28 Milton	28 MILTON STREET	$248,253.00
Total		$248,253.00

Years 4 and 5 (reflect estimated annual planning amounts)		
FY2030 and FY2031		
Project Title	**Development**	**Total Development Cost**
Replace wood shingles	SALT SEA	$761,668.00
Building Envelope Upgrade 667-1	MAYFLOWER	$805,285.00
Window & Door Replacement 42 Jamie Ln.	42 JAMIE LANE	$46,252.00
Total		$1,613,205.00

The 'Narrative Questions' with Additional Information

1. Project Closeout

Have you reviewed in progress projects, contacted your PM to close out old projects, and recirculated unused funds? Please explain why or why not.

Answer: No

Explanation: FHA has no active projects to close.

2. Request for Additional Funding

Request additional funding from EOHLC by going to the project's detail page and adding a comment that includes the funding type and requested amount. Upload any relevant attachments at the bottom of this form. Do not include requests already approved in your latest CIP.

3. Overall Goals of the Capital Improvement Plan

What do you plan to achieve with this year's CIP plan and how do the projects you've selected support this goal?

Explanation: This LHA has many high priority projects that will begin to address its the needs at select 705 Family housing units including vacancies and continue to address aging components at its 667-1, 667-2 and 689-1 developments.

The Service Provider for 689-1 Bayberry House has requested that the FHA replace flooring throughout the house, stating that they have failed annual inspections for their MA State Licensing Certifications due to the conditions. This project has been added to FY27 and is considered a high priority.

4. Changes from the Previous CIP

Aside from completing projects that were listed in your previous CIP and adding new projects in the new planning year(s), in what way does your new CIP differ from your previous CIP?

Explanation: No changes.

5. Requirements from previous CIP approval

A. Approval Requirements

Did your previous CIP Approval Letter include conditions to be satisfied when implementing the CIP projects or conditions to be included in your new CIP?

Answer: No

6. Project Priorities

Does your CIP only include high priority capital projects (Priority 1 and 2 projects)? If no, explain your rationale for including lower priority projects.

Answer: Yes

7. High Priority Deficiencies

Are there any high priority capital deficiencies (priority 1 or 2 projects) in your CPS Backlog that you could not fit in your year 1 or 2 CIP plan? If yes, provide an explanation and the plan to address the deficiencies. Make sure to go through the CPS Backlog and update priorities when necessary.

Answer: No

8. Accessibility

Are you aware of any accessibility deficiencies in your portfolio (units, common areas, and sites)? If yes, describe the deficiencies and list the projects in this CIP that will address them.

Answer: Yes

Explanation: There are no accessible units in this LHA's portfolio.

9. Special Needs Development

A. DMH/DDS Developments

LHAs must meet with each service provider on an annual basis to discuss the physical condition and necessary repairs of each of the DDS/DMH developments (167 or 689). Does your LHA have one or more DDS/DMH developments? If yes, provide details from the service provider input.

Answer: Yes

B. DMH/DDS Projects

Does your plan include projects for the DMH/DDS developments recommended by this service provider? If no, provide an explanation. Include input from the service provider staff for expanding the DMH/DDS set aside.

Service Provider Input Completion Date: 07/23/2025

Answer: Yes

10. Sustainability Program

Are you requesting Sustainability Funding for any of your projects?

Answer: No

11. Solar Initiatives

Does your current CIP contain roof replacement projects?

Answer: No

12. Resilience

Are any of your developments flagged for weather vulnerabilities in CPS? For example, sea-level rise/storm surge, rainfall flooding, and extreme heat.

Answer: Yes

If yes, do the projects in this CIP planned at these developments incorporate resilient design elements into the initial design plans and costs? If no, please explain.

Answer: No

Explanation: Resilient design elements are not a factor with FHA priority projects.

13. Fossil Fuels

PHN 2024-11 stipulates that EOHLC Capital Funds cannot be used to install new fossil fuel-fired equipment, barring a few exceptions. This includes natural gas, propane, and heating oil.

Will fossil fuel-fired equipment be installed as a part of any project in this CIP?

Answer: No

14. Vacant Units

Please list the projects in this CIP submission that are tied to reoccupying vacant units. If there are none, write none.

Explanation: Project #096-705-0N-001-25-2323: Vacant Unit Turnover & Building Envelope Upgrades 28 Milton St.

15. EOHLC/RCAT Assistance

Has EOHLC or RCAT staff provided you with assistance developing this CIP? If yes, who were the EOHLC or RCAT staff involved?

Answer: Yes

Explanation: Kyle Moore SE RCAT

16. Certification Statement

I certify that this is the complete and accurate list of projects that I will be submitting to the Board for approval as part of the Annual Plan process.

If there are any additions, deletions, or modifications to this list of projects resulting from the Board or LTO/public meeting, I will promptly notify my EOHLC Project Manager and RCAT Project Manager and make the necessary changes.

Answer: Yes

17. Other Comments

Comments: FHA thanks RCAT for their assistance on the CIP. The Board approved the FY27 CIP.

Maintenance and Repair Plan

Maintenance Objective

The goal of good property maintenance at a public housing authority is to serve the residents by assuring that the homes in which they live are decent, safe, and sanitary.

About This Maintenance and Repair Plan

This Maintenance & Repair Plan consists of several subsections describing maintenance systems followed by charts showing typical preventive maintenance, routine maintenance, and unit inspection tasks and schedules. These subsections are:

a. **Classification and Prioritization of Maintenance Tasks** - Defines and prioritizes types of work to be accomplished by maintenance staff and vendors. Explains how the housing authority is expected to respond to work orders (tasks or requests) based on the work order classification.
b. **Emergency Response System** - Defines what constitutes an emergency and how to notify staff of an emergency.
c. **Normal Maintenance Response System** - How to contact the maintenance staff for a non-emergency request.
d. **Work Order Management** - Description of the housing authority's system for managing work orders (tasks and requests).
e. **Maintenance Plan Narrative & Policy Statement** - Self-assessment, basic information, and goals for the coming year, along with a description of the housing authority's maintenance program.
f. **Preventive Maintenance Schedule** - A listing and schedule of tasks designed to keep systems and equipment operating properly, to extend the life these systems and equipment, and to avoid unexpected breakdowns.
g. **Routine Maintenance Schedule** - A listing and schedule of ordinary maintenance tasks such as mopping, mowing, raking, and trash collection required to keep the facilities in good condition.
h. **Unit Inspections** - Scheduling of annual unit inspections.

Classification and Prioritization of Maintenance Tasks

Maintenance items are tracked as "work orders" and are classified in the following categories. They are prioritized in the order listed. The following classifications and prioritization are required by the Executive Office of Housing and Livable Communities (EOHLC).

I. **Emergencies** - Emergencies are only those conditions which are **immediately threatening** to the life or safety of our residents, staff, or structures.
   - Goal: initiated with 24 to 48 hours.

II. **Vacancy Refurbishment** - **Work necessary to make empty units ready for new tenants.**
   - After emergencies, the refurbishment of vacancies for immediate re-occupancy has the highest priority for staff assignments. **Everyday a unit is vacant is a day of lost rent.**
   - **Goal: vacancy work orders are completed within 30 calendar days or if not completed within that timeframe, LHA has a waiver**.

III. **Preventive Maintenance** - Work which must be done to **preserve and extend the useful life** of various elements of your physical property and avoid emergency situations.
   - A thorough Preventive Maintenance Program and Schedule that deals with all elements of the physical property is provided later in the document.
   - The Preventive Maintenance Program is reviewed and updated annually and as new systems and facilities are installed.

IV. **Programmed Maintenance** - Work which is important and is completed to the greatest extent possible within time and budget constraints. Programmed maintenance is grouped and scheduled to make its completion as efficient as possible. Sources of programmed maintenance include:
   - Routine Work includes those tasks that need to be done on a regular basis to keep our physical property in good shape. (Mopping, Mowing, Raking, Trash, etc.)
   - Inspections are the other source of programmed maintenance.
     ◊ Inspections are visual and operational examinations of parts of our property to determine their condition.
     ◊ All dwelling units, buildings and sites must be inspected at least annually.
     ◊ **Goal: Inspection-generated work orders are completed within 30 calendar days from the date of inspection, OR if cannot be completed within 30 calendar days, are added to the Deferred Maintenance Plan or the Capital Improvement Plan in the case of qualifying capital repairs (unless health/safety issue)**.

V. **Requested Maintenance** - Work which is requested by residents or others, does not fall into any category above, and should be accomplished as time and funds are available.
   - Requests from residents or others for maintenance work which does not fall into one of the other categories has the lowest priority for staff assignment.
   - **Goal: Requested work orders are completed in 14 calendar days from the date of tenant request or if not completed within that timeframe (and not a health or safety issue), the task is added and completed in a timely manner as a part of the Deferred Maintenance Plan and/or CIP.**

Emergency Request System

For emergency requests call the numbers listed here. Qualifying emergency work requests are listed below.

METHOD	CONTACT INFO.	TIMES
Call Answering Service	508-548-1977	24 Hrs. will page on-call maintenance
Call LHA at Phone Number	508-548-1977	M-F 9AM - 4:30PM (W 9-12PM)
Other		

See attached **Preventative Maintenance Plan** for more details.

List of Emergencies - Emergencies are those conditions which are immediately threatening to the life or safety of our residents, staff, or structures. The following is a list of typical conditions that warrant an emergency response. If there is an emergency condition whether or not enumerated on this list please notify the office or answering service at the numbers listed above. If you have any questions regarding this list or other matters that may constitute an emergency, please contact the FALMOUTH HOUSING AUTHORITY main office.

QUALIFYING EMERGENCY WORK REQUESTS
Fires of any kind (Call 911)
Gas leaks/ Gas odor (Call 911)
No electric power in unit
Electrical hazards, sparking outlets
Broken water pipes, flood
No water/ unsafe water
Sewer or toilet blockage
Roof leak
Lock outs
Door or window lock failure
No heat
No hot water
Snow or ice hazard condition
Dangerous structural defects
Inoperable smoke/CO detectors, beeping or chirping
Inoperable refrigerator

Normal Maintenance Request Process

Make normal (non-emergency) maintenance requests using the following methods:

METHOD	CONTACT INFO.	TIMES
Text Phone Number		
Call Answering Service	508-548-1977	24 Hrs. will page on-call maintenance
Call Housing Authority Office	508-548-1977	M-F 9AM - 4:30PM (W 9-12PM)
Submit Online at Website		
Email to Following Email		
Other		

Work Order Management

A. EOHLC review of this housing authority's operations shows that the authority uses the following system for tracking work orders: PHA Web

B. We do track deferred maintenance tasks in our work order system.

C. Our work order process includes the following steps:

Step	Description	Checked steps are used by LHA
1	Maintenance Request taken/submitted per the standard procedures listed above for the Emergency Request System and the Normal Maintenance Request Process.	☑
2	Maintenance Requests logged into the work system	☑
3	Work Orders generated	☑
4	Work Orders assigned	☑
5	Work Orders tracked	☑
6	Work Orders completed/closed out	☑
7	Maintenance Reports or Lists generated	☑

D. Additional comments by the LHA regarding work order management:

Maintenance Plan Narrative

Following are FALMOUTH HOUSING AUTHORITY's answers to questions posed by EOHLC.

A. Narrative Question #1: How would you assess your Maintenance Operations based on feedback you've received from staff, tenants, EOHLC's Performance Management Review (PMR) & Agreed Upon Procedures (AUP), and any other sources?

   The Falmouth Housing Authority's Maintenance Department has continued to provide essential maintenance services despite significant operational challenges during the past year, including staffing turnover, vacancies within the maintenance workforce, increased work order volume, and the demands associated with maintaining an aging housing portfolio. Feedback received from tenants, staff, vendors, and EOHLC through the PMR and AUP processes has identified both strengths and areas requiring improvement.

   (Answer continued in Attachment below)

B. Narrative Question #2: What changes have you made to maintenance operations in the past year?

   During the past year, several operational changes have been implemented to improve efficiency, communication, accountability, and overall service delivery within the Maintenance Department.

   One of the most significant changes has been the implementation of regular daily maintenance meetings. These meetings allow staff to review work assignments, prioritize urgent repairs, discuss safety concerns, coordinate resources, and identify potential obstacles before they impact service delivery. The meetings have also provided an opportunity for staff to share feedback regarding operational challenges and recommend process improvements. This collaborative approach has improved communication among staff and helped management better allocate resources based on current needs.

   (Answer continued in Attachment below)

C. Narrative Question #3: What are your maintenance goals for this coming year?

   The Maintenance Department has established several goals for the coming year that focus on improving efficiency, compliance, customer service, asset preservation, and overall operational performance.

   The primary goal is to achieve and maintain full staffing levels within the department. Adequate staffing is critical to reducing work order completion times, improving preventive maintenance efforts, completing inspections more efficiently, and supporting vacancy turnover activities.

Once staffing levels are stabilized, the department intends to further reduce outstanding work orders and improve response times for routine maintenance requests.

(Answer continued in Attachment below)

D. Maintenance Budget Summary

The budget numbers shown below are for the consolidated budget only. They do not include values from supplemental budgets, if any.

	Total Regular Maintenance Budget	Extraordinary Maintenance Budget
Last Fiscal Year Budget	$186,319.00	$98,651.00
Last Fiscal Year Actual Spending	$208,565.00	$103,731.00
Current Fiscal Year Budget	$236,400.00	$25,415.00

E. Unit Turnover Summary

# Turnovers Last Fiscal Year	9
Average time from date vacated to make unit "Maintenance Ready"	22 days
Average time from date vacated to lease up of unit	118 days

F. Anything else to say regarding the Maintenance Plan Narrative?

Attachments

These items have been prepared by the FALMOUTH HOUSING AUTHORITY and appear on the following pages:

Preventive Maintenance Schedule - a table of preventive maintenance items showing specific tasks, who is responsible (staff or vendor), and the month(s) they are scheduled

Deferred Maintenance Schedule - a table of maintenance items which have been deferred due to lack of resources.

FALMOUTH HOUSING AUTHORITY

PREVENTIVE MAINTENANCE PROGRAM

State-Aided Housing Programs: Chapter 667, Chapter 689, and Chapter 705

Print-Ready Operating Copy

Effective Date	_____
Prepared By	Maintenance Department
Reviewed By	_____
Approved By	_____
Revision Date	_____
Document Owner	Maintenance Director / Executive Director

Binder Instructions: Print one master copy for the maintenance office and one working copy for each development or program group. File completed checklists behind the relevant weekly, monthly, quarterly, semi-annual, or annual section. Retain completed work orders, inspection records, deficiency logs, and asset updates with this program for EOHLC PMR readiness and annual capital planning.

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6. 6. Monthly Preventive Maintenance Checklist
7. 7. Quarterly Preventive Maintenance Checklist
8. 8. Semi-Annual Preventive Maintenance Checklist
9. 9. Annual Preventive Maintenance Checklist
10. 10. Annual Unit Interior Inspection Form
11. 11. Equipment and Asset Inspection Forms
12. 12. Deficiency Tracking Log
13. 13. Asset Useful Life and Replacement Planning
14. 14. Annual PM Summary and Certification
15. 15. Reference Documents
16. 16. Emergency Requests and Deferred Maintenance Classification

1. Program Purpose and Scope

This Preventive Maintenance Program establishes a routine, documented maintenance system for Falmouth Housing Authority state-aided properties under Chapter 667, Chapter 689, and Chapter 705. The program is intended to preserve property assets, improve resident safety, reduce emergency repairs, support capital planning, and maintain a clear maintenance record for management review and EOHLC PMR readiness.

Program Goals

- Complete scheduled preventive maintenance on time.
- Inspect and maintain life-safety systems before failures occur.
- Identify unit, building, site, and equipment deficiencies early.
- Link inspection results to work orders, deficiency logs, and capital planning.
- Maintain asset records for major equipment and building components.
- Support annual review of conditions, priorities, and replacement schedules.

Program Coverage

Program	Property Type	PM Scope
Chapter 667	Elderly housing	Units, common areas, mechanical systems, life safety, grounds, accessibility components.
Chapter 689	Special needs housing	Units, common areas, life safety, accessibility, mechanical systems, interior and exterior components.
Chapter 705	Family housing	Units, kitchens, bathrooms, appliances, site safety, grounds, parking, play areas if applicable.

2. Document Control and Recordkeeping

Each preventive maintenance activity should be documented by a scheduled work order, checklist, inspection form, or contractor report. Completed documents should be stored by date, development, building, asset, and frequency. Deficiencies should be transferred to the work order system and reviewed until completion.

Required Record Fields

Development		**Building**	
Unit / Area		**Date**	
Start Time		**End Time**	
Assigned To		**Supervisor**	
Work Order Number		**Inspection Frequency**	
Weather Conditions		**Resident Notification Needed**	

Record Retention Checklist

Task / Item	Complete	N/A	Notes / Corrective Action
Completed PM work orders are filed by date and development.	[ ]	[ ]	
Failed inspection items are entered into the deficiency tracking log.	[ ]	[ ]	
Corrective work orders are created for failed items.	[ ]	[ ]	
Asset records are updated after repair, replacement, or condition change.	[ ]	[ ]	
Contractor service reports are attached to the asset record.	[ ]	[ ]	
Monthly PM completion totals are reviewed by the Maintenance Director.	[ ]	[ ]	
Annual PM summary is signed and retained with board or management records.	[ ]	[ ]	

3. Roles and Responsibilities

Position	Core Preventive Maintenance Responsibilities
Executive Director / Designee	Approves program, reviews annual PM summary, supports budget and capital planning.
Maintenance Director	Owns PM schedule, assigns tasks, reviews completion, tracks deficiencies, updates asset inventory, prepares annual summary.
Maintenance Mechanic	Performs mechanical, plumbing, electrical, building, and unit PM tasks; records asset data and corrective actions.
Maintenance Laborer / Grounds Staff	Performs site, grounds, common area, trash, snow, and basic inspection tasks; reports hazards and deficiencies.
Property Manager / Occupancy Staff	Coordinates notices, resident access, unit inspection scheduling, resident follow-up, and file documentation.
Contractors / Vendors	Perform contracted inspections, testing, servicing, and repairs; provide written service reports and recommendations.

Priority Order for Maintenance Response

Priority	Examples	Documentation
Emergency	No heat, active leak, electrical hazard, sewer backup, life safety issue.	Emergency work order and supervisor notification.
Vacancy Turnover	Unit preparation, safety corrections, code items, cleaning.	Turnover checklist and work order.
Preventive Maintenance	Scheduled weekly, monthly, quarterly, semi-annual, and annual tasks.	PM checklist and scheduled work order.
Programmed / Deferred Maintenance	Larger repairs, planned replacements, capital projects.	Deficiency log, asset inventory, capital plan.
Routine Work Orders	Resident service requests and routine repairs.	Standard work order system.

4. Preventive Maintenance Schedule Overview

Frequency	Primary Areas	Responsible Party	Required Output
Weekly	Life safety checks, boiler/mechanical room checks, common areas, laundry rooms, grounds, parking areas, sidewalks.	Maintenance staff	Weekly checklist and corrective work orders.
Monthly	Fire alarm panel review, smoke/CO detector checks where applicable, generators, HVAC, water heaters, plumbing, electrical, common area lighting.	Mechanic / vendor as assigned	Monthly PM work orders and equipment records.
Quarterly	Roofs, gutters, downspouts, windows, doors, foundations, drainage, exterior lighting, pest control review.	Maintenance Director / mechanic / vendor	Quarterly inspection form and deficiency log.
Semi-Annual	Spring and fall seasonal maintenance, heating startup, winterization, gutter cleaning, landscape review, storm readiness.	Maintenance team / vendor	Seasonal checklist and supervisor review.
Annual	100 percent unit inspections, major equipment service, asset inventory review, capital planning update, annual PM summary.	Maintenance Director / property management / vendor	Annual inspection forms, asset updates, annual certification.

5. Weekly Preventive Maintenance Checklist

Week Ending		**Development**	
Building / Area		**Assigned To**	
Work Order Number		**Supervisor**	
Start Time		**End Time**	

Life Safety - Weekly

Task / Item	Complete	N/A	Notes / Corrective Action
Emergency lighting visually checked for damage and charging indicators.	[ ]	[ ]	
Exit signs illuminated and visible.	[ ]	[ ]	
Fire extinguisher cabinets and access unobstructed.	[ ]	[ ]	
Fire doors close and latch properly.	[ ]	[ ]	
Common area smoke / CO devices appear intact and unobstructed.	[ ]	[ ]	
Emergency egress routes are clear of storage and trip hazards.	[ ]	[ ]	

Mechanical and Utility Areas - Weekly

Task / Item	Complete	N/A	Notes / Corrective Action
Boiler room is clean, accessible, and free of improper storage.	[ ]	[ ]	
Boiler temperature and pressure appear within normal operating range.	[ ]	[ ]	
No visible leaks at boilers, pumps, valves, piping, or water heaters.	[ ]	[ ]	
Circulator pumps operate without unusual noise or vibration.	[ ]	[ ]	
Domestic hot water system appears to be operating normally.	[ ]	[ ]	
Sump pump operation visually checked where applicable.	[ ]	[ ]	

Common Areas and Units - Weekly

Task / Item	Complete	N/A	Notes / Corrective Action
Hallways, stairs, and common rooms inspected for lighting, cleanliness, and hazards.	[ ]	[ ]	
Laundry rooms inspected for leaks, lint, drainage, and equipment damage.	[ ]	[ ]	
Trash / recycling areas inspected and corrected as needed.	[ ]	[ ]	
Handrails, guardrails, and door hardware visually checked.	[ ]	[ ]	
Community room exits and pathways remain clear.	[ ]	[ ]	
Vacant units checked for security, heat, leaks, and hazards.	[ ]	[ ]	

Grounds and Site - Weekly

Task / Item	Complete	N/A	Notes / Corrective Action
Grounds walk-through completed for litter, hazards, and unauthorized storage.	[ ]	[ ]	
Parking lot checked for potholes, lighting concerns, debris, and drainage issues.	[ ]	[ ]	
Sidewalks and walkways checked for trip hazards.	[ ]	[ ]	
Site lighting visually checked after dark when feasible.	[ ]	[ ]	
Play areas or family site amenities inspected if applicable.	[ ]	[ ]	
Seasonal hazards identified, including ice, snow, branches, and storm debris.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	

6. Monthly Preventive Maintenance Checklist

Month		**Development**	
Building / Area		**Assigned To**	
Work Order Number		**Supervisor**	
Start Time		**End Time**	

Fire and Life Safety - Monthly

Task / Item	Complete	N/A	Notes / Corrective Action
Fire alarm panel status reviewed; trouble or supervisory signals documented.	[ ]	[ ]	
Common area smoke detectors tested or visually checked per device type and code requirements.	[ ]	[ ]	
Common area CO detectors tested or visually checked per device type and code requirements.	[ ]	[ ]	
Emergency lights tested and failures entered into work order system.	[ ]	[ ]	
Exit signs inspected for illumination and damage.	[ ]	[ ]	
Fire extinguishers checked for charge, tag, damage, and access.	[ ]	[ ]	
Fire doors, stair doors, and rated doors inspected for closure and obstruction.	[ ]	[ ]	

HVAC and Heating - Monthly

Task / Item	Complete	N/A	Notes / Corrective Action
Boiler operating condition reviewed and abnormal readings documented.	[ ]	[ ]	
Burner area inspected for odor, soot, noise, flame irregularity, or visible damage.	[ ]	[ ]	
Expansion tank, relief valve, backflow, and makeup water components visually checked.	[ ]	[ ]	
Pumps, motors, belts, bearings, and couplings inspected where applicable.	[ ]	[ ]	
HVAC filters checked and replaced where scheduled.	[ ]	[ ]	
Exhaust fans checked for operation and cleaned as needed.	[ ]	[ ]	
Thermostats and temperature complaints reviewed for trends.	[ ]	[ ]	

Plumbing - Monthly

Task / Item	Complete	N/A	Notes / Corrective Action
Water heaters inspected for leaks, corrosion, venting, pressure relief piping, and temperature setting.	[ ]	[ ]	
Common area plumbing fixtures inspected for leaks and proper drainage.	[ ]	[ ]	

Task / Item	Complete	N/A	Notes / Corrective Action
Main shutoff valves, isolation valves, and visible piping checked for access and leaks.	[ ]	[ ]	
Floor drains checked for blockage, odor, or dry traps where applicable.	[ ]	[ ]	
Backflow devices and mixing valves checked for tag status or service needs.	[ ]	[ ]	
Water intrusion complaints and prior leak areas reviewed for recurrence.	[ ]	[ ]	

Electrical and Generator - Monthly

Task / Item	Complete	N/A	Notes / Corrective Action
Electrical panels accessible and free of storage.	[ ]	[ ]	
Panel directories and labels present and legible.	[ ]	[ ]	
Common area lighting inspected and lamps replaced as needed.	[ ]	[ ]	
GFCI devices in common areas tested where applicable.	[ ]	[ ]	
Exterior receptacles and covers inspected where accessible.	[ ]	[ ]	
Generator exercised and operating hours recorded if applicable.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	

7. Quarterly Preventive Maintenance Checklist

Quarter		**Development**	
Building / Area		**Assigned To**	
Work Order Number		**Supervisor**	
Weather		**Inspection Date**	

Roof and Drainage - Quarterly

Task / Item	Complete	N/A	Notes / Corrective Action
Roof surface inspected from safe access points; damage or ponding documented.	[ ]	[ ]	
Flashing, penetrations, vents, caps, and edge metal inspected.	[ ]	[ ]	
Roof drains, scuppers, gutters, and downspouts checked and cleaned as needed.	[ ]	[ ]	
Evidence of leaks or ceiling stains reviewed inside building.	[ ]	[ ]	
Warranty or contractor follow-up needs documented.	[ ]	[ ]	
Roof asset condition rating updated if condition changed.	[ ]	[ ]	

Building Envelope - Quarterly

Task / Item	Complete	N/A	Notes / Corrective Action
Exterior walls, siding, trim, masonry, and caulking inspected.	[ ]	[ ]	
Windows checked for broken glass, failed seals, locks, screens, and water intrusion.	[ ]	[ ]	
Exterior doors checked for closers, locks, weatherstripping, thresholds, and security.	[ ]	[ ]	
Foundation and crawlspace areas checked for cracks, settlement, pests, or water entry.	[ ]	[ ]	
Balconies, railings, steps, ramps, and handrails inspected for safety.	[ ]	[ ]	
Exterior penetrations sealed and weatherproofed as needed.	[ ]	[ ]	

Site Infrastructure and Pest Review - Quarterly

Task / Item	Complete	N/A	Notes / Corrective Action
Catch basins and drainage pathways inspected for blockage or standing water.	[ ]	[ ]	
Sidewalks, ramps, curbs, and parking areas inspected for trip hazards and pavement defects.	[ ]	[ ]	
Retaining walls, fencing, signs, and site structures inspected.	[ ]	[ ]	
Exterior lighting poles and fixtures inspected for damage and operation.	[ ]	[ ]	
Trees inspected for dead limbs, storm damage, and building contact.	[ ]	[ ]	
Pest activity inspected in trash areas, foundations, kitchens, and mechanical spaces.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	

8. Semi-Annual Preventive Maintenance Checklist

Season		**Development**	
Building / Area		**Assigned To**	
Work Order Number		**Supervisor**	
Weather		**Inspection Date**	

Spring Maintenance

Task / Item	Complete	N/A	Notes / Corrective Action
Spring roof and gutter inspection completed after winter season.	[ ]	[ ]	
Gutters, downspouts, and roof drains cleaned as needed.	[ ]	[ ]	
Storm damage, water intrusion, and pavement heaving documented.	[ ]	[ ]	
Landscape cleanup completed and drainage swales cleared.	[ ]	[ ]	
Irrigation system started and checked if applicable.	[ ]	[ ]	
Tree hazards reviewed and trimming needs documented.	[ ]	[ ]	
Exterior painting, caulking, and sealant needs identified.	[ ]	[ ]	
Air conditioning or cooling equipment started and serviced where applicable.	[ ]	[ ]	

Fall Maintenance

Task / Item	Complete	N/A	Notes / Corrective Action
Heating system startup completed before heating season.	[ ]	[ ]	
Boiler safety controls, pumps, valves, and thermostats checked.	[ ]	[ ]	
Freeze protection reviewed in crawlspaces, attics, basements, and vacant units.	[ ]	[ ]	
Exterior hose bibs shut down and drained where applicable.	[ ]	[ ]	
Fall gutter cleaning and roof drain clearing completed.	[ ]	[ ]	
Snow and ice equipment, supplies, and contractor contacts reviewed.	[ ]	[ ]	
Storm windows, door sweeps, weatherstripping, and sealing needs checked.	[ ]	[ ]	
Generator, emergency equipment, and winter emergency contacts reviewed.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	

9. Annual Preventive Maintenance Checklist

Year		**Development**	
Program		**Prepared By**	
Review Date		**Supervisor**	
Board / Management Review Date		**Next Review Due**	

Annual Program Checklist

Task / Item	Complete	N/A	Notes / Corrective Action
100 percent occupied unit inspections scheduled and completed.	[ ]	[ ]	
Vacant units inspected and turnover issues documented.	[ ]	[ ]	
Annual fire alarm inspection completed by qualified contractor where applicable.	[ ]	[ ]	
Annual sprinkler / standpipe / fire protection inspection completed where applicable.	[ ]	[ ]	
Annual boiler service completed, including combustion analysis where applicable.	[ ]	[ ]	
Annual water heater service and review completed.	[ ]	[ ]	
Annual generator service or load-bank testing completed where applicable.	[ ]	[ ]	
Elevator inspections and service records reviewed for Chapter 667 sites where applicable.	[ ]	[ ]	
Annual roof inspection completed and warranty issues documented.	[ ]	[ ]	
Annual electrical review completed for panels, lighting, GFCIs, and hazards.	[ ]	[ ]	
Annual pest control review completed and trends reviewed.	[ ]	[ ]	
Annual accessibility and trip hazard review completed.	[ ]	[ ]	
All major assets reviewed for condition, useful life, and replacement year.	[ ]	[ ]	
Deferred maintenance and capital planning lists updated.	[ ]	[ ]	
Annual PM completion summary prepared and signed.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	
Executive Director / Designee		**Date**	

10. Annual Unit Interior Inspection Form

Development		**Building**	
Unit Number		**Resident Name**	
Inspection Date		**Inspection Time**	
Inspector		**Resident Present**	
Notice Date		**Work Order Number**	
Program		**Follow-up Needed**	

Life Safety and Resident Safety

Task / Item	Complete	N/A	Notes / Corrective Action
Smoke detector present, operational, unobstructed, and within service life.	[ ]	[ ]	
CO detector present, operational, unobstructed, and within service life.	[ ]	[ ]	
Emergency egress routes clear.	[ ]	[ ]	
No improper storage, blocked exits, or obvious fire hazards.	[ ]	[ ]	
Electrical cords and resident-owned equipment do not create visible hazards.	[ ]	[ ]	
Housekeeping concerns documented and referred as needed.	[ ]	[ ]	

Interior Building Components

Task / Item	Complete	N/A	Notes / Corrective Action
Entry door, locks, hinges, peephole, and weatherstripping in good condition.	[ ]	[ ]	
Interior doors and hardware operate properly.	[ ]	[ ]	
Walls and ceilings free of water damage, cracks, and mold indicators.	[ ]	[ ]	
Flooring secure and free of trip hazards.	[ ]	[ ]	
Windows operate, lock, and have intact glass and screens where applicable.	[ ]	[ ]	
Lighting, switches, outlets, and GFCIs operate safely.	[ ]	[ ]	
Heating system, thermostat, radiators, baseboard, or vents operate properly.	[ ]	[ ]	
Ventilation adequate; bathroom and kitchen fans operate where installed.	[ ]	[ ]	

Kitchen

Task / Item	Complete	N/A	Notes / Corrective Action
Refrigerator operates and seals are intact.	[ ]	[ ]	
Range / oven operates and anti-tip device is present where applicable.	[ ]	[ ]	
Kitchen sink, faucet, drain, and shutoff valves operate and do not leak.	[ ]	[ ]	
Cabinets, drawers, hinges, and countertops secure and serviceable.	[ ]	[ ]	
Caulking at sink and countertop intact.	[ ]	[ ]	
Signs of pests, leaks, or excessive moisture documented.	[ ]	[ ]	

Bathroom

Task / Item	Complete	N/A	Notes / Corrective Action
Toilet secure, flushes properly, and does not leak.	[ ]	[ ]	
Bathroom sink, faucet, drain, and shutoff valves operate and do not leak.	[ ]	[ ]	
Tub / shower drains properly and fixtures operate.	[ ]	[ ]	
Caulking and grout intact; mold or mildew documented.	[ ]	[ ]	
Ventilation fan or window operates where applicable.	[ ]	[ ]	
Grab bars, accessible fixtures, and resident-specific accommodations checked where applicable.	[ ]	[ ]	

Unit Deficiencies Requiring Work Order

Location	Deficiency	Priority	Work Order Number
Location	Deficiency	Priority	Work Order Number

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	

11. Equipment and Asset Inspection Forms

Use the following forms for major assets. Complete the asset information fields whenever equipment is serviced, inspected, repaired, or replaced. Transfer updated information to the master asset inventory.

Development		**Building**	
Asset Location		**Asset ID**	
Equipment Type		**Manufacturer**	
Model Number		**Serial Number**	
Install Date		**Warranty Expiration**	
Expected Useful Life		**Estimated Replacement Year**	

General Equipment Inspection

Task / Item	Complete	N/A	Notes / Corrective Action
Equipment operating normally at time of inspection.	[ ]	[ ]	
No visible leaks, corrosion, broken parts, or unsafe conditions.	[ ]	[ ]	
Noise, vibration, odor, or temperature concern documented if present.	[ ]	[ ]	
Safety devices, guards, covers, and clearances checked.	[ ]	[ ]	
Maintenance completed according to manufacturer or vendor recommendation.	[ ]	[ ]	
Filters, belts, lubrication, cleaning, or consumables completed as applicable.	[ ]	[ ]	
Contractor service report received and filed if vendor completed work.	[ ]	[ ]	
Condition rating updated in asset inventory.	[ ]	[ ]	
Replacement recommendation documented if asset is near end of useful life.	[ ]	[ ]	

Boiler / Heating Plant

Task / Item	Complete	N/A	Notes / Corrective Action
Combustion analysis completed by qualified person where applicable.	[ ]	[ ]	
Burner cleaned and operating safely.	[ ]	[ ]	
Heat exchanger, venting, and combustion air reviewed.	[ ]	[ ]	
Safety controls and relief valves checked.	[ ]	[ ]	
Circulator pumps, expansion tank, low-water cutoff, and pressure reducing valve checked.	[ ]	[ ]	
Operating pressure and temperature recorded.	[ ]	[ ]	
Leaks, corrosion, or abnormal noises documented.	[ ]	[ ]	
Recommended replacement year reviewed.	[ ]	[ ]	

Water Heater / Domestic Hot Water

Task / Item	Complete	N/A	Notes / Corrective Action
Tank or heat exchanger inspected for leaks and corrosion.	[ ]	[ ]	
Temperature and pressure relief valve discharge piping checked.	[ ]	[ ]	
Venting and combustion air checked where applicable.	[ ]	[ ]	
Temperature setting verified.	[ ]	[ ]	
Mixing valve, recirculation pump, and related controls reviewed where applicable.	[ ]	[ ]	
Recommended replacement year reviewed.	[ ]	[ ]	

Generator

Task / Item	Complete	N/A	Notes / Corrective Action
Generator exercised and operating hours recorded.	[ ]	[ ]	
Oil, coolant, belts, hoses, battery, charger, and block heater reviewed where applicable.	[ ]	[ ]	
Fuel level and fuel condition checked.	[ ]	[ ]	
Automatic transfer switch and alarms reviewed.	[ ]	[ ]	
Load-bank or vendor service report filed if applicable.	[ ]	[ ]	
Recommended replacement year reviewed.	[ ]	[ ]	

Fire Alarm System

Task / Item	Complete	N/A	Notes / Corrective Action
Fire alarm panel normal, with trouble or supervisory conditions documented.	[ ]	[ ]	
Annual vendor inspection report filed.	[ ]	[ ]	
Communication path tested by vendor where applicable.	[ ]	[ ]	
Battery date and replacement needs reviewed.	[ ]	[ ]	
Device deficiencies entered into work order or contractor follow-up list.	[ ]	[ ]	
Recommended panel replacement year reviewed.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	

12. Deficiency Tracking Log

Use this log to track deficiencies discovered during preventive maintenance inspections. Each item should have a priority, responsible person, target date, and completion date. Emergency items should also be handled through the emergency work order process.

Date Found	Development	Building / Unit	Deficiency	Priority	Assigned To	Work Order #	Target Date	Completed Date

13. Asset Useful Life and Replacement Planning

Useful life ranges are planning estimates. Actual replacement timing should be based on inspection results, condition, parts availability, code requirements, resident impact, energy performance, and funding availability.

Asset / Component	Typical Planning Life	PM Notes
Asphalt shingle roof	20 to 25 years	Inspect quarterly and after major storms.
EPDM / low-slope roof	20 to 30 years	Keep drains clear and document ponding.
Boiler	25 to 30 years	Annual service; track combustion and parts history.
Domestic water heater	10 to 15 years	Inspect monthly; track leaks, corrosion, and temperature issues.
Circulator pump	10 to 15 years	Inspect noise, leaks, and vibration.
Generator	20 to 25 years	Monthly exercise; vendor service and battery review.
Fire alarm panel	15 to 20 years	Annual vendor testing; review parts support.
Smoke detector	10 years	Replace by manufacturer date or code requirement.
CO detector	7 to 10 years	Replace by manufacturer date or code requirement.
Refrigerator	12 to 15 years	Track service calls and energy performance.
Electric range	15 to 20 years	Verify anti-tip device and controls.
Kitchen cabinets	20 to 25 years	Track water damage and hardware failure.
Flooring - LVT / VCT	15 to 25 years	Track trip hazards and unit turnover needs.
Windows	25 to 35 years	Track failed seals, water intrusion, locks, and screens.
Exterior doors	25 years	Track security, weatherstripping, and hardware.
Parking lots	15 to 20 years	Inspect quarterly; coordinate sealcoating and drainage.
Sidewalks	20 to 25 years	Track trip hazards and accessibility concerns.

Condition Rating Guide

Condition Rating	Action
90 to 100 percent	Continue routine preventive maintenance.
75 to 89 percent	Monitor and plan minor repairs.
50 to 74 percent	Budget replacement or major repair.
25 to 49 percent	Add to capital plan priority list.
Below 25 percent	Plan immediate replacement or corrective action.

14. Annual PM Summary and Certification

Fiscal Year		**Prepared By**	
Date Prepared		**Development(s)**	
Total PM Work Orders Scheduled		**Total PM Work Orders Completed**	
Open Deficiencies		**Capital Items Added**	

Measure	Target	Actual	Notes
Unit inspections completed	100 percent		
Annual boiler service completed	100 percent		
Annual fire alarm testing completed	100 percent		
PM completion rate	95 percent or greater		
Emergency response compliance	100 percent		
Annual asset review completed	100 percent		
Capital plan update completed	Annual		

Annual Review Confirmations

Task / Item	Complete	N/A	Notes / Corrective Action
PM schedule reviewed and updated for next year.	[ ]	[ ]	
Open deficiencies reviewed and assigned target dates.	[ ]	[ ]	
Asset inventory updated for new equipment and replacements.	[ ]	[ ]	
Capital planning list updated based on condition ratings and remaining useful life.	[ ]	[ ]	
Contractor reports filed with asset records.	[ ]	[ ]	
Management reviewed annual summary and corrective actions.	[ ]	[ ]	

Completed By		**Date**	
Start Time		**End Time**	
Supervisor Review		**Date**	
Executive Director / Designee		**Date**	

15. Reference Documents

The following references should be maintained with the master copy of this program. Local updates, EOHLC notices, vendor manuals, code changes, and contractor recommendations should be reviewed annually and incorporated into the next revision.

Reference	Use in This Program
EOHLC Public Housing Notice PHN 2025-06	Preventive Maintenance Planning Year Criteria; planning-year review of administrative components of LHA preventive maintenance programs.
EOHLC Performance Management Review (PMR)	PMR program information for monitoring LHA operations, regulatory compliance, guidance, and corrective action planning.
PHN 2022-10 Revised PMR Maintenance Metrics	Maintenance operations and physical condition metrics referenced for LHA maintenance practices.
FHA internal maintenance records	Completed work orders, inspections, asset records, deficiency logs, and capital planning documents.

16. Emergency Requests and Deferred Maintenance Classification

This section establishes the classification rules for emergency requests and deferred maintenance. The purpose is to ensure that life-safety, resident habitability, security, and property-damage risks are addressed immediately, while non-emergency capital or planned repair items are documented, prioritized, funded, and tracked through completion.

Classification rule: If a condition creates an immediate or imminent threat to life, health, safety, security, habitability, accessibility, or major property damage, it must be labelled Emergency. It may not be labelled Deferred Maintenance until the immediate hazard has been corrected or made safe.

16.1 Work Order Classification Summary

Work Order Type	Use This Label When	Required Response / Tracking	Examples
Emergency	Immediate or imminent threat to resident health, safety, security, habitability, accessibility, essential utilities, or significant property damage.	Create work order immediately; dispatch/mitigate same day; document date/time received, response, stabilization, completion, photos, and follow-up work orders. Target completion or safe temporary correction: within 24 to 48 hours whenever possible.	No heat during heating season, no hot water, sewage backup, active flooding, exposed wiring, gas odor, failed smoke/CO detector, blocked egress, broken entry lock, elevator entrapment.
Tenant Requested / Routine	Resident-requested repair that does not create immediate danger or habitability loss.	Enter as tenant requested or routine; assign target date; track completion and resident communication.	Leaking faucet without active damage, appliance issue without hazard, loose cabinet hinge, screen repair, minor drywall repair.
Preventive Maintenance	Scheduled task intended to preserve assets, reduce breakdowns, and prevent emergency conditions.	Schedule by weekly/monthly/quarterly/semi-annual/annual cycle; close with checklist and findings.	Boiler PM, generator test, roof inspection, filter changes, gutter cleaning.
Inspection Work Order	Deficiency identified during annual unit inspection, common area inspection, PM inspection, or supervisor inspection.	Create inspection work order linked to the inspection record; prioritize based on risk.	Unit inspection deficiency, common area lighting, trip hazard, plumbing concern.
Vacancy / Turnover	Work required to return a vacant unit to safe, sanitary, rentable condition.	Track start date, completion date, materials, labor, and readiness date.	Paint, cleaning, flooring, appliance replacement, code repairs.
Deferred Maintenance / Capital Planning	Known repair or replacement need that is not an immediate emergency after any required temporary safety measure, and requires scheduling, procurement, funding, contractor work, seasonal timing, or capital planning.	Record in Deferred Maintenance Log with risk level, reason deferred, interim control, estimated cost, funding source, target completion date, and monthly/quarterly review.	Roof replacement planning, boiler replacement planning, parking lot resurfacing, window replacement, cabinet replacement, major drainage project.

16.2 Emergency Request Definition

An Emergency Request is any maintenance condition that requires immediate action because it threatens, or is likely to threaten, resident life safety, health, security, habitability, accessibility, essential services, or property integrity. Emergency requests include conditions that could cause injury, fire, carbon monoxide exposure, flooding, sewer exposure, loss of required heat/hot water, loss of required electrical service, blocked egress, or inability to secure a dwelling or building.

- Emergency work orders must be opened immediately when reported by a resident, staff member, contractor, alarm company, public safety agency, or inspection finding.
- The first objective is to make the condition safe. A permanent repair should be completed immediately when possible; when not possible, a temporary safe correction must be documented and a follow-up work order must be opened.
- Emergency classification remains in place even when the final repair requires parts, vendor scheduling, insurance review, procurement, or capital funding.
- Emergency requests must not be downgraded to routine or deferred solely because the repair is costly, complex, or inconvenient.

16.3 Emergency Response Standards

Step	Required Action	Documentation Required	Target
1. Intake/Triage	Receive call, resident report, alarm, inspection finding, or staff observation. Confirm location, resident contact, unit/building, and immediate risk.	Date/time received; person reporting; property; unit/location; description; triage decision.	Immediately upon receipt.
2. Dispatch	Assign maintenance staff or emergency vendor. Notify supervisor for life-safety, utility, security, flooding, sewer, or major equipment failure.	Assigned to; time dispatched; contractor contacted if applicable.	Same day; after-hours dispatch when needed.
3. Stabilize/Make Safe	Stop leak, isolate power/gas/water, restore heat/hot water where possible, clear egress, secure door/window, provide temporary protection, or relocate/coordinate assistance if occupancy is unsafe.	Actions taken; photos; parts used; resident notification; whether temporary or permanent.	As soon as practical; do not wait for routine scheduling.
4. Complete or Create Follow-up	Complete permanent repair when possible. If not possible, create follow-up work order and classify remaining scope as routine, inspection, PM, capital, or deferred maintenance only after hazard is controlled.	Completion date/time; follow-up work order number; reason not complete; target date.	Target completion or safe temporary correction within 24 to 48 hours whenever possible.
5. Supervisor Review	Review emergency work order for correct classification, timeliness, documentation, resident communication, and follow-up.	Supervisor initials/date; notes; deferred log entry if applicable.	Next business day or weekly work order review.

16.4 Conditions Requiring Emergency Classification

Category	Label as Emergency When	Examples	Not Emergency Unless...
Life Safety / Fire / CO	There is actual or suspected fire, smoke, gas odor, CO alarm, failed smoke/CO detector, fire alarm trouble affecting protection, or emergency lighting/exit sign failure affecting egress.	Gas odor; CO alarm; sparking outlet; smoke detector removed or not working; fire alarm panel trouble; emergency light failure in required egress path.	Routine battery replacement may be PM/routine only if detector remains compliant and operational.
Heating	No heat, insufficient heat, boiler failure, or heating system failure during heating season or during weather conditions that create resident health/safety risk.	No heat call; failed circulator affecting a unit/building; boiler lockout; frozen pipes caused by heat failure.	Non-critical thermostat adjustment or comfort complaint with compliant temperatures may be routine.
Hot Water / Potable Water	No hot water, unsafe hot water condition, no potable water, water pressure failure affecting essential use, or equipment failure affecting multiple units.	Water heater failure; failed mixing valve causing scald risk; no domestic water; pump failure.	Minor fixture issue with adequate hot/cold water available may be routine.
Plumbing / Sanitary	Sewage backup, only toilet inoperable, active leak causing damage or slip/electrical risk, burst pipe, failed sump/sewer ejector, or unsanitary condition affecting habitability.	Sewer backup in tub; water through ceiling; burst pipe; active leak near electrical equipment; no usable toilet.	Slow drain, dripping faucet, or secondary toilet issue may be routine unless escalating.
Electrical	Power outage, exposed energized wiring, burning smell, sparking, overloaded/unsafe panel, failed required lighting in egress areas, or electrical condition with fire/shock risk.	Arcing outlet; panel overheating; no power to unit; exposed wire; failed stairwell lighting.	Single light fixture or outlet outage may be routine if no hazard and required lighting remains.

Category	Label as Emergency When	Examples	Not Emergency Unless...
Security	Resident cannot secure unit, building entry cannot be secured, broken accessible window/door creates entry risk, or security condition places resident at immediate risk.	Broken lock; exterior door will not latch; ground-floor broken window; unit door damaged by forced entry.	Cosmetic door damage or non-security hardware issue may be routine.
Egress / Accessibility	Exit, stair, hallway, ramp, elevator, or accessible route is blocked, unsafe, or unavailable for a resident who needs it to enter/exit safely.	Blocked exit; failed handrail; unsafe stair tread; elevator entrapment; snow/ice blocking accessible path.	Minor non-egress wear may be routine or deferred.
Water Intrusion / Weather Event	Active roof/window/wall leak, flooding, storm damage, fallen tree, or water condition threatens residents, building systems, or continued occupancy.	Roof leaking into unit; flooded mechanical room; tree on building; storm-damaged door/window.	Planned roof replacement or historical leak with no active intrusion may be deferred/capital.
Mechanical Room / Critical Equipment	Critical equipment failure affects heat, hot water, electrical service, fire protection, domestic water, sewage, or building operation.	Boiler down; water heater down; generator failure during outage; fire pump issue; sewage ejector failure.	End-of-life equipment that remains safe and operational may be deferred/capital.
Pest / Environmental	Condition presents immediate health/safety risk, widespread infestation, contamination, or unsafe exposure.	Rodent activity in common mechanical room; bedbug infestation requiring urgent response; suspected hazardous material exposure.	Routine pest monitoring may be PM or routine service.

16.5 Deferred Maintenance Definition

Deferred Maintenance is a documented repair, replacement, or capital need that is known to the Authority but is scheduled for a future date because it does not require immediate emergency action after any required make-safe work has been completed. Deferred items typically require funding, procurement, design, contractor scheduling, seasonal timing, board approval, or inclusion in the Capital Improvement Plan.

Deferred maintenance is a tracking and capital-planning category, not a reason to delay an emergency, code-required, or resident safety repair.

- Deferred maintenance must be entered in the Deferred Maintenance Log and reviewed at least monthly by maintenance leadership and at least annually during capital planning.
- Each deferred item must identify the reason for deferral, risk level, interim control, estimated cost, funding source, target completion date, and responsible person.
- If a deferred item deteriorates and creates an immediate safety, habitability, security, or property-damage risk, it must be reclassified as Emergency and addressed immediately.

16.6 Conditions Requiring Deferred Maintenance Classification

Label as Deferred Maintenance When	Required Conditions	Examples	Required Documentation
Replacement is needed but system is still safe and operational.	No immediate life-safety/habitability risk; system can be monitored through PM.	Boiler past useful life but operating safely; water heater nearing replacement; generator replacement planning.	Asset ID, condition rating, remaining useful life, replacement year, estimated cost.
Repair exceeds routine maintenance scope or budget.	Temporary safe condition is in place; work requires contractor, procurement, or capital funding.	Roof replacement; parking lot resurfacing; drainage project; siding repairs.	Scope summary, estimate, funding source, target completion date.
Work should be bundled or scheduled by season.	Delay does not create unsafe conditions; interim controls are adequate.	Exterior painting; gutter replacement; landscape/drainage improvements; paving.	Reason for seasonal timing and review date.
Unit or interior components are worn but functional.	No trip hazard, sanitary issue, security issue, or code violation requiring immediate correction.	Cabinet replacement planning; worn but secure flooring; countertop replacement; window replacement for failed seals.	Unit/location, condition score, planned replacement cycle.

Label as Deferred Maintenance When	Required Conditions	Examples	Required Documentation
Inspection identifies condition that needs monitoring.	Condition is stable; preventive action or monitoring schedule is documented.	Minor foundation crack; aged roof membrane with no active leak; non-critical concrete scaling.	Inspection source, photos, monitoring frequency, trigger for escalation.

16.7 Items That Must Not Be Deferred Until Made Safe

Condition	Required Classification	Reason
No heat or insufficient required heat during heating season.	Emergency	Essential habitability and resident health/safety issue.
No hot water or unsafe water temperature condition.	Emergency	Essential sanitary/habitability requirement and scald/burn risk if unsafe.
Sewage backup, no usable toilet, or unsanitary plumbing failure.	Emergency	Immediate sanitary and health hazard.
Active leak, flooding, burst pipe, or water intrusion causing damage.	Emergency	Immediate property damage, mold, slip, and electrical risk.
Exposed wiring, sparking, burning smell, electrical outage, or shock/fire risk.	Emergency	Immediate life-safety and fire risk.
Failed smoke detector, CO detector, fire alarm, required emergency lighting, or blocked egress.	Emergency	Life-safety protection or safe exit is impaired.
Broken lock, entry door failure, or window failure preventing secure occupancy.	Emergency	Security and resident safety issue.
Unsafe stair, railing, ramp, elevator entrapment, or blocked accessible route.	Emergency	Fall, entrapment, egress, or accessibility risk.
Board of Health, Fire Department, Building Department, or EOHLC condition requiring immediate correction.	Emergency or Highest Priority	External order or code condition overrides routine scheduling.

16.8 Deferred Maintenance Priority Levels

Priority	Risk Level	Use When	Review Frequency	Target Planning Window
DM-1 High	High operational risk but currently made safe.	Temporary repair in place; failure likely to affect habitability, safety, or major asset condition if not addressed.	Monthly until resolved.	0 to 12 months or next available funding/procurement cycle.
DM-2 Medium	Moderate risk or lifecycle replacement need.	Asset is aging, repairs are increasing, condition is fair/poor, or replacement is needed to avoid future emergency.	Quarterly.	1 to 3 years.
DM-3 Low	Low risk / planned capital improvement.	Condition is stable and mostly lifecycle, efficiency, cosmetic, or modernization related.	Semi-annually or annually.	3 to 5 years or capital plan cycle.

16.9 Classification Decision Tree

1. Does the condition create immediate or imminent risk to life, health, safety, security, habitability, accessibility, essential utilities, or major property damage? If yes, label Emergency.

2. Can the condition be made safe today with a temporary repair or control? If yes, complete make-safe work under the Emergency work order and open a follow-up work order for permanent correction.

3. Was the deficiency found during a scheduled inspection? If yes, label Inspection and set priority based on risk, unless the condition meets Emergency criteria.

4. Is the work a scheduled recurring task intended to prevent breakdown or extend asset life? If yes, label Preventive Maintenance.

5. Is the work resident-requested and non-emergency? If yes, label Tenant Requested or Routine and assign a target completion date.

6. Is the work related to turning a vacant unit? If yes, label Vacancy or Turnover.

7. Does the item require planned funding, procurement, contractor scheduling, seasonal timing, or capital replacement, and is it safe to schedule later? If yes, label Deferred Maintenance and enter it in the Deferred Maintenance Log.

8. If conditions change, reclassify immediately. Deferred items that become unsafe must be elevated to Emergency.

16.10 Required Work Order Fields for Emergency Requests

- Work order number and classification: Emergency.
- Property, building, unit/common area, and exact location.
- Date/time received, date/time dispatched, date/time arrived, date/time made safe, and completion date/time.
- Description of emergency condition and who reported it.
- Assigned staff/vendor and supervisor notified.
- Immediate actions taken to stabilize the condition.
- Resident notifications, access notes, and after-hours contacts.
- Photos, readings, alarm status, equipment tag information, or other evidence as applicable.
- Parts/materials/labor used and contractor invoices if applicable.
- Follow-up work order number when permanent repair remains open.
- Supervisor review and closure approval.

16.11 Required Fields for Deferred Maintenance Log

Field	Required Entry	Field	Required Entry
Deferred Item ID	Unique tracking number.	Source	Inspection, PM, work order, CNA, resident request, staff observation, vendor report.
Development/Property	667, 689, 705, Salt Sea, Choate, 705 house address, or other property.	Location	Building, mechanical room, unit, common area, site feature.
Asset ID	Link to asset log when applicable.	Deficiency Description	Clear description of condition and required repair/replacement.
Emergency Screen	Confirm not an active emergency or note make-safe action taken.	Reason Deferred	Funding, procurement, design, contractor, seasonal, bundling, capital planning.
Risk/Priority	DM-1, DM-2, or DM-3.	Interim Control	Temporary repair, monitoring, signage, barriers, PM check, resident notice.
Estimated Cost	Budget estimate or vendor quote.	Funding Source	Operating, Formula Funding, CIP, insurance, grant, other.
Target Date	Planned completion or capital year.	Responsible Person	Maintenance Director, mechanic, property manager, vendor.
Review Date	Monthly/quarterly/annual review date.	Status	Open, funded, in procurement, scheduled, complete, escalated.

16.12 Quick Reference: Common Conditions and Correct Labels

Condition	Emergency?	Routine / Requested?	Deferred?	Classification Notes
No heat during heating season or unsafe low unit temperature.	Yes	No	No	Emergency until heat is restored or safe temporary heat/relocation plan is documented.
Boiler past useful life but operating safely.	No	No	Yes	Deferred/capital item with PM monitoring and replacement year.
Active roof leak into occupied space.	Yes	No	No	Emergency make-safe; follow-up roof repair may become deferred/capital after leak is controlled.
Roof near end of useful life with no active leak.	No	No	Yes	Deferred/capital replacement planning.

Condition	Emergency?	Routine / Requested?	Deferred?	Classification Notes
Smoke/CO detector missing, expired, or not operating.	Yes	No	No	Emergency life-safety correction.
Dripping faucet with no damage.	No	Yes	No	Tenant requested/routine unless leak is active and damaging.
Sewer backup into unit or common area.	Yes	No	No	Emergency sanitary condition; remediation required.
Parking lot surface worn but safe.	No	No	Yes	Deferred/capital paving project.
Trip hazard in walkway or unit flooring.	Usually	Maybe	Only after made safe	Emergency or high-priority inspection item if fall risk is immediate. Deferred only after temporary safe correction.
Broken exterior entry lock or unit door cannot secure.	Yes	No	No	Emergency security issue.
Cabinet doors worn but functional.	No	Maybe	Yes	Routine repair or deferred replacement based on condition.
Generator failure during outage or required emergency power need.	Yes	No	No	Emergency; replacement planning may follow after emergency stabilized.
Generator old but passes tests.	No	No	Yes	Deferred/capital replacement planning and PM monitoring.
Elevator entrapment or elevator out of service where it blocks accessible route.	Yes	No	No	Emergency response and vendor dispatch.
Window seal failure/fogging but window operates and locks.	No	Maybe	Yes	Routine or deferred based on replacement plan.

16.13 Supervisor Review and Audit Controls

- Maintenance Director or designee shall review emergency work orders weekly for correct classification, completion, and follow-up.
- Deferred Maintenance Log shall be reviewed monthly for DM-1 items, quarterly for DM-2 items, and annually during capital planning for all items.
- All deferred items must be connected to a work order, inspection finding, asset log entry, CNA item, vendor recommendation, or capital plan line item.
- Completed emergency work orders should not be closed without documenting whether permanent repairs were completed or whether a follow-up work order remains open.
- Conditions noted by a public safety official, inspector, Board of Health, Fire Department, Building Department, or EOHLC representative must be prioritized according to the order/inspection requirement.

16.14 Approval and Annual Review

Reviewed By		**Title**	
Review Date		**Program Year**	
Emergency Criteria Reviewed	Yes / No	**Deferred Maintenance Log Reviewed**	Yes / No
Updates Required	Yes / No	**Board Review Required**	Yes / No
Signature		**Date**	

Updated Reference Notes for Section 16

- EOHLC, PHN 2025-06 Preventive Maintenance Planning Year Criteria - administrative components of LHA preventive maintenance planning and PMR planning-year review.
- EOHLC/DHCD, PHN 2022-10 Revised PMR Maintenance Metrics - LHA work order types and maintenance metrics.
- EOHLC PMR Updates 2025 Cycle - review of inspection reports and work orders, including emergency, vacancy, inspection, preventive maintenance, and tenant-requested work orders.
- 105 CMR 410.000, Massachusetts State Sanitary Code, Chapter II: Minimum Standards of Fitness for Human Habitation - minimum housing standards for health, safety, and well-being.
- Mass.gov Guidance on Housing Code Temperature Requirements - heating season and minimum temperature requirements for residential dwellings.

End of preventive maintenance program.

A. Narrative Question #1: How would you assess your Maintenance Operations based on feedback you've received from staff, tenants, DHCD (PMR & AUP), and any other sources?

The Falmouth Housing Authority's Maintenance Department has continued to provide essential maintenance services despite significant operational challenges during the past year, including staffing turnover, vacancies within the maintenance workforce, increased work order volume, and the demands associated with maintaining an aging housing portfolio. Feedback received from tenants, staff, vendors, and EOHLC through the PMR and AUP processes has identified both strengths and areas requiring improvement.

Positive feedback has consistently reflected the dedication of maintenance staff, responsiveness to emergency situations, and the department's commitment to maintaining safe and habitable housing for residents. Staff have demonstrated flexibility in responding to changing priorities, including vacancy turnovers, emergency repairs, inspections, and modernization projects. Tenants have expressed appreciation for staff professionalism and willingness to address urgent concerns.

At the same time, feedback from PMR reviews, internal assessments, and resident comments identified opportunities to improve work order timeliness, documentation, tracking systems, inspection follow-up, and communication regarding repair schedules. Staffing shortages contributed to delays in some routine and non-emergency maintenance activities. To address these challenges, the Authority increased the use of qualified outside contractors and vendors to supplement staff resources and maintain service levels while recruitment efforts were underway.

A significant challenge facing the Authority is the age and condition of the housing stock and the limited funding available to address major capital needs. Many deficiencies identified during PMR reviews involve building systems and infrastructure that require substantial capital investment rather than routine maintenance. While the Authority has consistently identified these needs through Capital Improvement Plans (CIP), PMR findings, Capital Needs Assessments, and annual assessments, funding for many emergency and high-priority capital projects remains unavailable or insufficient. This creates frustration for both staff and residents, as the Authority may receive findings related to conditions that have already been documented and submitted for funding consideration but remain unaddressed due to resource limitations rather than a lack of planning or effort.

The Authority recognizes and appreciates EOHLC's support; however, the current funding environment presents significant challenges for local housing authorities operating older state-aided developments throughout Massachusetts. The cost of maintaining and modernizing aging housing stock continues to increase while available capital resources remain limited. As a result, the Authority has begun evaluating long-term strategies to preserve and improve its housing portfolio, including whether certain developments may be better served through alternative funding structures available under federal programs and opportunities afforded through the Faircloth Amendment. There does not appear to be sufficient funding statewide to fully address the accumulated capital needs associated with aging public

housing portfolios, and this remains one of the most significant obstacles to long-term preservation efforts.

Overall, while the department acknowledges that improvements are needed in several operational areas, we believe we have continued to provide effective maintenance services under difficult circumstances. The PMR process has provided valuable guidance, and management is committed to implementing corrective actions that strengthen accountability, improve efficiency, and enhance service delivery to residents. At the same time, meaningful long-term improvements will require continued investment in the aging housing infrastructure that serves some of the Commonwealth's most vulnerable residents.

B. Narrative Question #2: What changes have you made to maintenance operations in the past year?

During the past year, several operational changes have been implemented to improve efficiency, communication, accountability, and overall service delivery within the Maintenance Department.

One of the most significant changes has been the implementation of regular daily maintenance meetings. These meetings allow staff to review work assignments, prioritize urgent repairs, discuss safety concerns, coordinate resources, and identify potential obstacles before they impact service delivery. The meetings have also provided an opportunity for staff to share feedback regarding operational challenges and recommend process improvements. This collaborative approach has improved communication among staff and helped management better allocate resources based on current needs.

Additional efforts have focused on improving communication between maintenance staff, administration, and residents. Greater emphasis has been placed on tracking work orders, monitoring vacancy turnover activities, and coordinating vendor services to ensure repairs are completed in a timely manner. The Authority has also increased the use of outside contractors when necessary to address workload demands and specialized repairs that could not be completed efficiently with available staffing resources.

The department has begun reviewing existing procedures and identifying opportunities to develop standardized operating procedures (SOPs) for recurring maintenance activities. This process includes evaluating inspection procedures, procurement practices, inventory management, preventive maintenance schedules, and vacancy turnover processes. Management has also increased oversight of maintenance operations through regular discussions with administrative staff to review priorities, monitor progress, and address concerns as they arise.

In response to observations made through the PMR process, the Authority has also focused on improving documentation practices, ensuring maintenance records are more complete and consistent, and strengthening communication regarding inspection findings and corrective actions. These efforts are intended to improve accountability and create a clearer record of work performed.

The Authority has significantly increased engagement with EOHLC's Facilities Management Department and has worked closely with the RCAT Division to identify priorities, address operational concerns, and develop long-term strategies for preserving the portfolio. These collaborative efforts have resulted in several projects moving forward, including the receipt of forward-funded modernization resources for portions of the Chapter 705 portfolio. The Authority appreciates these investments and the support provided by EOHLC staff.

At the same time, these projects have highlighted the extent of deferred capital needs that have accumulated over several decades. Recent modernization efforts have demonstrated that the cost to renovate and return a single Chapter 705 unit to a modern, habitable standard can exceed $200,000 per unit. While these investments are necessary and beneficial to residents, they also illustrate the magnitude of unmet capital needs throughout the portfolio. Furthermore, forward-funding future modernization projects may create budgetary challenges in later years as resources are expended in advance of future allocations.

The Authority continues to believe that funding limitations remain the single greatest barrier to addressing many of the deficiencies and improvement opportunities identified through the PMR process. While operational changes, improved management practices, enhanced documentation, and increased oversight can improve efficiency and accountability, many of the most significant issues identified within the portfolio ultimately require capital investment rather than procedural changes. The Authority remains committed to working collaboratively with EOHLC to identify funding opportunities and develop sustainable strategies that preserve the housing stock for future generations.

While additional improvements remain necessary, these operational changes and collaborative efforts have created a stronger foundation for future success and have helped position the department for continued improvement. Management remains committed to building a culture of accountability, communication, and continuous improvement that supports both staff and residents. In addition, the Authority is actively engaged in a long-term capital preservation strategy for its state-aided housing portfolio. This effort is ongoing and is being developed in accordance with EOHLC guidance and priorities, while incorporating input from residents, RCAT staff, Facilities Management staff, and local stakeholders to ensure that preservation plans are comprehensive, realistic, and responsive to the needs of both current and future residents.

C. Narrative Question #3: What are your maintenance goals for this coming year?

The Maintenance Department has established several goals for the coming year that focus on improving efficiency, compliance, customer service, asset preservation, and overall operational performance.

The primary goal is to achieve and maintain full staffing levels within the department. Adequate staffing is critical to reducing work order completion times, improving preventive maintenance efforts, completing inspections more efficiently, and supporting vacancy turnover activities. Once staffing levels

are stabilized, the department intends to further reduce outstanding work orders and improve response times for routine maintenance requests.

Another major goal is to strengthen work order management and tracking systems to ensure repairs are documented, assigned, completed, and closed in a timely and consistent manner. The department also plans to improve vacancy turnover procedures by implementing standardized processes that allow units to be prepared for occupancy more efficiently while maintaining quality standards and reducing vacancy days.

The Authority intends to develop and implement written Standard Operating Procedures (SOPs) for maintenance staff and contractors. These procedures will establish consistent expectations, improve accountability, support employee training, and ensure compliance with applicable regulations and Authority policies. Staff training will be expanded to reinforce these procedures and promote best practices in maintenance operations, safety, inspections, customer service, and regulatory compliance.

Additional goals include improving procurement practices to obtain materials and supplies more efficiently and cost-effectively, strengthening preventive maintenance programs, enhancing communication between maintenance and administrative departments, and conducting regular management meetings to review performance metrics, identify challenges, and implement continuous improvements.

The Authority will continue implementation of its long-term capital preservation strategy for the state-aided portfolio. This effort is already underway and is being conducted in partnership with EOHLC, RCAT, Facilities Management staff, residents, and other stakeholders to ensure that future investments align with preservation needs, resident priorities, operational sustainability, and available funding opportunities. The Authority recognizes that preserving aging public housing assets requires a multi-year approach and remains committed to developing a comprehensive roadmap for the future of its portfolio.

Ultimately, the department's goal is to create a proactive maintenance program that provides high-quality service to residents, maintains the Authority's physical assets, preserves the useful life of buildings and systems, and supports full compliance with EOHLC requirements and industry best practices. The Authority recognizes that achieving these goals will require not only operational improvements but also continued investment in the aging infrastructure that serves residents across the portfolio.

Falmouth Housing Authority
Deferred Work Order Report

Filter Criteria Includes: 1) Program: (20)-Massachusetts State 667 2) Project: (20) 667-1 Mayflower/Choate Lane, (20) 667-2 Salt Sea 3) Types: All Types
4) Deferred Reason: N/A 5) Employee: All, 6) Completed Date: 7/1/2025 to 6/4/2026

Work Order Number	Completed Date/Time	Deferred Reason	Deferred Type
57521	3/31/2026 12:00 AM	Possible upcoming kitchen project NOT FUNDED	Capital Improvement Plan
57643	5/26/2026 12:00 AM	Drainage project and unit upgrades FUNDED	Capital Improvement Plan

FUNDED PROJECT# 096104

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Annual Operating Budget

The tables on the following pages show the approved budget and actual income and spending per budget account (row) for the fiscal year ending 6/30/2025. It also shows the approved budget for the current year (2025) if there is one, and the percent change from last year's spending to this year's approved budget. The final column shows the current approved amount for each account divided by the number of housing units and by 12 months to show the amount per unit per month (PUM). The chart does not show a draft budget for the coming fiscal year as that will typically be developed in the final month of the fiscal year.

The budget format and accounts are mandated by the Executive Office of Housing and Livable Communities (EOHLC). For a better understanding of the accounts and discussion of special situations see the notes following the budget tables and the "Definitions of Accounts" at the end of this section.

The LHA maintains a consolidated budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by the LHA. It does not maintain separate budgets for each development.

Operating Reserve

The LHA's operating reserve is the amount of funds that an LHA sets aside to sustain itself during lean years, or to remedy urgent health and safety concern or address deferred maintenance items. In addition, while EOHLC approves a fixed non-utility operating budget level for every LHA (called the Allowable Non-Utility Expense Level, or ANUEL), LHAs can propose a budget that exceeds that level, with the additional cost to be funded from the Operating Reserve, as long as the reserve will still remain above the minimum threshold set by EOHLC.

EOHLC defines a full (100%) Operating Reserve (OR) amount to be equal to one-half of the previous year's operating expenses and requires LHAs to maintain a minimum OR of 35% of this amount to cover any unplanned but urgent needs that may arise during the year and that can't be funded by the operating budget. If the reserve is between 20% and 35% of the full level, the LHA must obtain prior written approval from EOHLC to spend reserve funds, unless the expense is to resolve a health and safety issue. If the reserve is below the 20% level, the LHA can only spend OR funds on health and safety issues. In both cases, the LHA should address the health and safety issue immediately but must retroactively inform EOHLC and obtain its approval.

The FALMOUTH HOUSING AUTHORITY operating reserve at the end of fiscal year 2024 was $229,295.00, which is 63.86% of the full reserve amount defined above.

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by FALMOUTH HOUSING AUTHORITY						
REVENUE						
Account Number	Account Class	2024 Approved Revenue Budget	2024 Actual Amounts Received	2025 Approved Revenue Budget	% Change from 2024 Actual to 2025 Budget	2025 Dollars Budgeted Per Unit per Month
3110	Shelter Rent -Tenants	477,517.00	484,686.00	457,158.00	-5.70%	482.23
3111	Shelter Rent - Tenants - Fraud/Retroactive	0.00	0.00	0.00	0.00%	0.00
3115	Shelter Rent -Federal Section 8\MRVP One-time Leased up Rev.	0.00	0.00	0.00	0.00%	0.00
3190	Nondwelling Rentals	0.00	0.00	0.00	0.00%	0.00
3400	Administrative Fee - MRVP	0.00	0.00	0.00	0.00%	0.00
3610	Interest on Investments - Unrestricted	5,625.00	6,168.00	5,625.00	-8.80%	5.93
3611	Interest on Investments - Restricted	0.00	1,258.00	0.00	-100.00%	0.00
3690	Other Revenue	23,000.00	24,056.00	23,000.00	-4.40%	24.26
3691	Other Revenue - Retained	18,000.00	13,144.00	18,000.00	36.90%	18.99
3692	Other Revenue - Operating Reserves	0.00	0.00	0.00	0.00%	0.00
3693	Other Revenue - Energy Net Meter	0.00	0.00	0.00	0.00%	0.00
3801	Operating Subsidy - EOHLC (4001)	156,019.00	127,262.00	318,633.00	150.40%	336.11
3802	Operating Subsidy - MRVP Landlords	0.00	0.00	0.00	0.00%	0.00
3803	Restricted Grants Received	0.00	0.00	0.00	0.00%	0.00
3920	Gain/Loss From Sale/Disp. of Prop.	0.00	0.00	0.00	0.00%	0.00
3000	TOTAL REVENUE	680,161.00	656,574.00	822,416.00	25.30%	867.53

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by FALMOUTH HOUSING AUTHORITY

EXPENSES

Account Number	Account Class	2024 Approved Revenue Budget	2024 Actual Amounts Received	2025 Approved Revenue Budget	% Change from 2024 Actual to 2025 Budget	2025 Dollars Budgeted Per Unit per Month
4110	Administrative Salaries	129,978.00	42,741.00	142,232.00	232.80%	150.03
4120	Compensated Absences	0.00	1,105.00	0.00	-100.00%	0.00
4130	Legal	36,500.00	40,228.00	15,000.00	-62.70%	15.82
4140	Members Compensation	0.00	0.00	0.00	0.00%	0.00
4150	Travel & Related Expenses	572.00	0.00	572.00	100.00%	0.60
4170	Accounting Services	7,232.00	6,696.00	7,584.00	13.30%	8.00
4171	Audit Costs	11,227.00	11,227.00	11,227.00	0.00%	11.84
4180	Penalties & Interest	0.00	0.00	0.00	0.00%	0.00
4190	Administrative Other	24,186.00	47,602.00	24,186.00	-49.20%	25.51
4191	Tenant Organization	0.00	0.00	0.00	0.00%	0.00
4100	TOTAL ADMINISTRATION	209,695.00	149,599.00	200,801.00	34.20%	211.82
4310	Water	16,711.00	19,008.00	19,958.00	5.00%	21.05
4320	Electricity	40,777.00	32,363.00	35,599.00	10.00%	37.55
4330	Gas	34,354.00	30,175.00	33,193.00	10.00%	35.01
4340	Fuel	0.00	0.00	0.00	0.00%	0.00
4360	Net Meter Utility Debit/Energy Conservation	0.00	0.00	0.00	0.00%	0.00
4390	Other	40,152.00	35,664.00	37,447.00	5.00%	39.50
4391	Solar Operator Costs	0.00	0.00	0.00	0.00%	0.00
4392	Net Meter Utility Credit (Negative Amount)	0.00	0.00	0.00	0.00%	0.00
4300	TOTAL UTILITIES	131,994.00	117,210.00	126,197.00	7.70%	133.12

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by FALMOUTH HOUSING AUTHORITY

EXPENSES

Account Number	Account Class	2024 Approved Revenue Budget	2024 Actual Amounts Received	2025 Approved Revenue Budget	% Change from 2024 Actual to 2025 Budget	2025 Dollars Budgeted Per Unit per Month
4410	Maintenance Labor	94,102.00	82,287.00	103,400.00	25.70%	109.07
4420	Materials & Supplies	33,955.00	42,073.00	48,000.00	14.10%	50.63
4430	Contract Costs	58,262.00	84,205.00	85,000.00	0.90%	89.66
4510	Insurance	37,561.00	32,944.00	38,594.00	17.20%	40.71
4520	Payment in Lieu of Taxes	0.00	0.00	0.00	0.00%	0.00
4540	Employee Benefits	96,404.00	84,523.00	89,597.00	6.00%	94.51
4541	Employee Benefits - GASB 45	0.00	-44,050.00	0.00	-100.00%	0.00
4542	Pension Expense - GASB 68	0.00	0.00	0.00	0.00%	0.00
4570	Collection Loss	0.00	9,579.00	0.00	-100.00%	0.00
4571	Collection Loss - Fraud/Retroactive	0.00	0.00	0.00	0.00%	0.00
4580	Interest Expense	0.00	0.00	0.00	0.00%	0.00
4590	Other General Expense	0.00	0.00	0.00	0.00%	0.00
4500	TOTAL GENERAL EXPENSES	133,965.00	82,996.00	128,191.00	54.50%	135.22
4610	Extraordinary Maintenance	98,651.00	103,731.00	25,415.00	-75.50%	26.81
4611	Equipment Purchases - Non Capitalized	15,849.00	18,186.00	13,109.00	-27.90%	13.83
4612	Restricted Reserve Expenditures	0.00	0.00	0.00	0.00%	0.00
4715	Housing Assistance Payments	0.00	0.00	0.00	0.00%	0.00
4801	Depreciation Expense	0.00	69,925.00	0.00	-100.00%	0.00
4600	TOTAL OTHER EXPENSES	114,500.00	191,842.00	38,524.00	-79.90%	40.64
4000	TOTAL EXPENSES	776,473.00	750,212.00	730,113.00	-2.70%	770.16

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by FALMOUTH HOUSING AUTHORITY						
SUMMARY						
Account Number	Account Class	2024 Approved Revenue Budget	2024 Actual Amounts Received	2025 Approved Revenue Budget	% Change from 2024 Actual to 2025 Budget	2025 Dollars Budgeted Per Unit per Month
3000	TOTAL REVENUE	680,161.00	656,574.00	822,416.00	25.30%	867.53
4000	TOTAL EXPENSES	776,473.00	750,212.00	730,113.00	-2.70%	770.16
2700	NET INCOME (DEFICIT)	-96,312.00	-93,638.00	92,303.00	-198.60%	97.37
7520	Replacements of Equip. - Capitalized	0.00	4,134.00	0.00	-100.00%	0.00
7540	Betterments & Additions - Capitalized	0.00	7,200.00	0.00	-100.00%	0.00
7500	TOTAL NONOPERATING EXPENDITURES	0.00	11,334.00	0.00	-100.00%	0.00
7600	EXCESS REVENUE OVER EXPENSES	-96,312.00	-104,972.00	92,303.00	-187.90%	97.37

Explanation of Budget Accounts

The following explains how each of the line items is to be prepared.

3110: Shelter Rent: The shelter rent projection should be based on the current rent roll plus anticipated changes expected from annual rent re-determinations or as a result of regulatory amendments.

3111: Shelter Rent – Tenants - Fraud/Retroactive: This account should be used for the reporting of total rent receipts from residents due to unreported income. These are often called fraud or retroactive balances. In cases where deficit LHAs discover, pursue cases, and have entered into a written fraud/retroactive re-payment agreement **with a present or former tenant who did not report income,** the LHA will be allowed to retain two-thirds of the funds recovered. One third of the total dollar amount recovered should be included in the LHA's quarterly or year-end Operating Statement as Shelter Rent, account #3111, and two-thirds of this total dollar amount should be included in Other Revenue-Retained, account #3691.

3115: Shelter Rent - Section 8: This account applies only to those developments receiving support through the federal government's Housing and Urban Development (HUD) Section 8 New Construction and/or Substantial Rehab Programs.

3190: Non-Dwelling Rental: This account should be credited with the rents, other than tenants rents reported in line 3110 and 3115, including charges for utilities and equipment, billed to lessees of non-dwelling facilities as well as apartments rented for non-dwelling purposes, such as social service programs.

3400: Administrative Fee- MRVP/AHVP: This account should be credited with Administrative Fees to be received for the MRVP/AHVP Program. The MRVP/AHVP administrative fee is $50.00 per unit per month, as of July 1, 2020.

3610: Interest on Investments – Unrestricted: This account should be credited with interest earned on unrestricted administrative fund investments.

3611: Interest on Investments – Restricted: This account should be credited with interest earned on restricted administrative fund investments. For example, an LHA may receive a grant whose use is restricted to a specific purpose, and the interest income earned on that grant may also be restricted to the same purpose.

3690: Other Operating Revenues: This account should be credited with income from the operation of the project that cannot be otherwise classified. Income credits to this account include, but are not limited to, penalties for delinquent payments, rental of equipment, charges for use of community space, charges to other projects or programs for the use of central office management and maintenance space, commissions and profits from vending machines, including washing machines, and certain charges to residents for additional services, materials, and/or repairs of damage caused by neglect or abuse in accordance with the Department's regulations on lease provisions..

3691: Other Revenue – Retained: This account should be credited with certain miscellaneous revenue to be retained by the LHA, and which is not used to reduce the amount of operating subsidy the LHA is due. The most common examples for this account is receipts for the rental of roof antennas to cell phone providers and net meter credits earned on electricity bills from Net Meter Power Purchase Agreements (PPA's). Generally, surplus LHAs may retain 100% of these savings and deficit LHAs may retain 25% of the savings, with the 75% balance used to offset its need for operating subsidy. However, for the period 7/1/16 through 6/30/20, all deficit LHAs may keep 100% of the net meter credit savings, while they can keep 50% effective 7/1/2020.

3692: Other Revenue - Operating Reserves: This account should be credited with funds that LHAs plan to utilize from their operating reserve accounts in excess of the Allowable Non-Utility Expense Level (ANUEL). To be approvable, LHA must maintain the EOHLC prescribed operating reserve minimum level after deducting the amount budgeted. The only exception to this is when the expenses are for health and safety issues.

3693: Other Revenue – Net Meter: This account should normally be credited with 75% of the total net meter credit savings realized by a deficit LHA, while surplus LHAs with net meter credit savings would enter $0 here. Savings are calculated as the value of the net meter credits appearing on the LHA's electric bills (or, in some cases, paid in cash to the LHA by their utility company), minus the cost of the payments made to the solar power developer under their Power Purchase Agreement (PPA). Deficit LHAs normally may retain 25% of the savings. That amount should be included as Other Revenue – Retained on line #3691. However, please note that for the period 7/1/16 through 6/30/20 all LHAs may retain 100% of their total net meter credit savings, and should report those savings as Other Revenue – Retained on line #3691. LHAs can keep 50% of savings effective 7/1/2020.

3801: Operating Subsidy – EOHLC (400-1): This account represents all state-funded operating subsidy to be received and or to be earned for the fiscal year. At the end of each fiscal year, this account will be adjusted in the operating statement to equal the actual subsidy earned by the LHA.

3802: Operating Subsidy – MRVP/AHVP Landlords:

The credit balance in this account represents the anticipated total receipts from EOHLC during the fiscal year for housing assistance payments to landlords. At the end of each fiscal year this account will be adjusted to equal the actual subsidy earned.

3920: Gain/Loss from Sale or Disposition of Property (Capitalized or Non-Capitalized): The debit or credit balance of this account represents the following items: a) Cash proceeds from the sale of property that was either: 1) non-capitalized; or 2) capitalized and has been fully depreciated, and b) Realized gain or loss from the sale or disposition of capitalized properly that has not been fully depreciated.

4110: Administrative Salaries: This account should be charged with the gross salaries of LHA personnel engaged in administrative duties and in the supervision, planning, and direction of maintenance activities and operating services during the operations period. It should include the salaries of the executive director, assistant executive director, accountants, accounting clerks, clerks, secretaries, project managers, management aides, purchasing agents, engineers, draftsmen, maintenance superintendents, and all other employees assigned to administrative duties.

4120: Compensated Absences: The debit balance in this account represents the actual cost incurred during the fiscal year for vacation, paid holidays, vested sick leave and earned compensatory time. This account includes both the direct compensated absences cost and associated employer payroll expenses (employment taxes, pension cost, etc.).

4130: Legal Expense: This account should be charged with retainers and fees paid to attorneys for legal services relating to the operation of the projects.

4140: Compensation to Authority Members: A local authority may compensate its members for performance of their duties and such other services as they may render to the authority in connection with its Chapter 200 development(s). Compensation for any other program is not authorized. Because of this, LHAs must base such compensation only on the actual rent receipts for these developments plus a prorated share of other operating receipts of funds on a per unit basis. The precise amount that members may be compensated is defined by statute to a maximum of $40 per member per day, and $50 for the chairperson per day. The total of all compensation to all board members is not to exceed two percent (2%) of actual gross income of Chapter 200 developments in any given year, consistent with the approved budget amount. In no case shall the payment of compensation exceed $12,500 annually for the chairperson, or $10,000 for any member other than the chairperson. Please note the statute requires the member to perform housing authority business in order to receive compensation.

4150: Travel and Related Expense: Legitimate travel expenses incurred by board members and staff in the discharge of their duties for any **state-aided program** are reimbursable from this account, as consistent with Department policy.

4170: Contractual Accounting Services: Fees for accounting services that are provided routinely and are contracted for on an annual basis. Only accounting services performed on a contractual basis (fee accountant) should be included in this item. Full or part-time LHA accounting staff that provides routine accounting services should be included in Account 4110, Administrative Salaries.

4171: Audit Costs: This account includes the state program's prorated share of audit fees paid to an Independent Public Accountant (IPA). The procurement of an IPA is necessary to satisfy the Federal Government's audit requirements. Costs for these services should be shared with all state and federal programs of LHA. **Audit costs are to be absorbed within the ANUEL.** The new Agreed Upon procedures (AUP) audit costs for state-assisted public housing programs should also be included in this account.

4180: Penalties and Interest: Any expenses incurred from penalties, fees, and interest paid on delinquent accounts shall be included in this line item.

4190: Administrative Other: This account is provided for recording the cost of administrative items for which no specific amount is prescribed in this 4100 group of accounts. It includes, but is not limited to, the cost of such items as: reports and accounting forms; stationery and other office supplies; postage; telephone services; messenger service; rental of office space; advertising for bids; publications; membership dues; collection agency & court costs, training costs; management fees, and fiscal agent fees.

4191: Tenant Organization: LTO Funding by the LHA. Upon request the LHA shall fund all LTOs in a city or town at the annual rate of $25.00 per state-aided public housing unit occupied or available for occupancy by residents represented by such LTO(s) or an annual total of $500.00 prorated among all such LTO(s), whichever is more. For more information on the creation and funding of LTOs see 760 CMR 6.09.

4310: Water: This account should be charged with the cost of water and sewer charges purchased for all purposes.

4320: Electricity: This account should be charged with the total cost of electricity purchased for all purposes. Many LHAs have entered into Net Meter Credit Power Purchase Agreements (PPA's). In these deals, an LHA executes a contract with a solar power developer who constructs and owns an off- site solar electricity- generating site. In exchange for contracting to purchase a percentage of the solar power produced, the LHA receives a credit on its utility electric bill for each KWH purchased or in some cases receives a direct cash payment from their utility company. Please ensure that the amount charged to this account is the total cost of electricity BEFORE any reductions due to the receipt of net meter credits.

4330: Gas: This account should be charged with the cost of gas (natural, artificial, or liquefied) purchased for all purposes.

4340: Fuel: This account should be charged with the cost of coal, fuel oil, steam purchased, and any other fuels (except electricity and gas) used in connection with Local Housing Authority operation of plants for the heating of space or water supplied to tenants as a part of rent.

4360: Net Meter Utility Debit/Energy Conservation: This account is to be charged with costs incurred for energy conservation measures.

4390: Other Utilities: This account should be charged with the cost of utilities which are not provided for in accounts 4310 through 4360. In addition, for all quarterly or year-end operating statements 9/30/20 or later, and all budgets 6/30/21 or later, please use this line to record the total net meter credits earned as reported in Line 4392, MINUS the Solar Operator Costs reported in Line 4391, with the result expressed as a positive number. For example, if you reported -$20,000 in Net Meter Utility Credits in Line 4392 and $15,000 in Solar Operator Costs in Line 4391, you would subtract the $15,000 reported on Line 4391 from the -$20,000 reported on Line 4392, and post the remainder of $5,000 on Line 4360, as a positive number. This number essentially represents the "net" savings the LHA earned from its net meter credit contract.

4391: Solar Operator Costs: Many LHAs have entered into Net Meter Credit Power Purchase Agreements (PPA's). In these deals, an LHA executes a contract with a solar power developer who constructs and owns an off-site solar electricity-generating site. The LHA makes regular (usually monthly) payments to the developer for its contracted share of the solar electricity produced by the site. Those payments should be entered in this account.

4392: Net Meter Utility Credit (Negative Amount): As noted in account #4391 above, many LHAs have executed Net Meter Credit Power Purchase Agreements (PPA's). In exchange for contracting to purchase a percentage of the solar power produced, the LHA receives a credit on its utility electric bill for each KWH purchased from the developer, which reduces the balance on its electric bill, or, in some cases, the credits are paid in cash to the LHA by the utility company. The total gross amount of the net meter credits that appear on the LHA's utility bills should be carried in this account and entered as a negative number. In cases where credits are paid in cash to the Host LHA, the net balance after paying out the amounts due the participating housing authorities, should also be carried in this account and entered as a negative number.

4410: Maintenance Labor: This account should be charged with the gross salaries and wages, or applicable portions thereof, for LHA personnel engaged in the routine maintenance of the project.

4420: Materials & Supplies: This account should be charged with the cost of materials, supplies, and expendable equipment used in connection with the routine maintenance of the project. This includes the operation and maintenance of automotive and other movable equipment, and the cost of materials, supplies, and expendable equipment used in connection with operating services such as janitorial services, elevator services, extermination of rodents and household pests, and rubbish and garbage collection.

4430: Contract Costs: This account should be charged with contract costs (i.e. the cost of services for labor, materials, and supplies furnished by a firm or by persons other than Local Authority employees) incurred in connection with the routine maintenance of the project, including the maintenance of automotive and other movable equipment. This account should also be charged with contract costs incurred in connection with such operating services as janitorial services, fire alarm and elevator service, extermination of rodents and household pests, rubbish and garbage collection, snow removal, landscape services, oil burner maintenance, etc.

4510: Insurance: Includes the total amount of premiums charged all forms of insurance. Fire and extended coverage, crime, and general liability are handled by EOHLC on a statewide basis. All other necessary insurance policies include: Workers' Compensation, boiler, vehicle liability and owner, etc.

4520: Payments in Lieu of Taxes:

This account should be charged with all payments in lieu of taxes accruing to a municipality or other local taxing body.

4540: Employee Benefits: This account should be charged with local housing authority contributions to employee benefit plans such as pension, retirement, and health and welfare plans. It should also be charged with administrative expenses paid to the State or other public agencies in connection with a retirement plan, if such payment is required by State Law, and with Trustee's fees paid in connection with a private retirement plan, if such payment is required under the retirement plan contract.

Employee benefits are based upon a given percentage of the total payroll; therefore, the total amount approved in this account will be based on the approved budgeted salaries representing the state's fair share.

4541: Employee Benefits - GASB 45: This line covers "Other Post-Employment Benefits" (OPEB). Of the total benefits offered by employers to attract and retain qualified employees, some benefits, including salaries and active-employee healthcare are taken while the employees are in active service, whereas other benefits, including post-employment healthcare and other OPEB are taken after the employees' services have ended. Nevertheless, both types of benefits constitute compensation for employee services. In accordance with required accounting practices, this amount is not projected in the budget (and is therefore blank) but the estimated future costs of this item is carried in the operating statement.

4542: Pension Expense – GASB 68: The primary objective of GASB 68 Statement is to improve accounting and financial reporting for pension costs. It also improves information provided by state and local governmental employers about financial support for pensions that is provided by other entities. As with account 4541 above, in accordance with required accounting practices, this amount is not projected in the budget (and is therefore blank) but the estimated future costs of this item is carried in the operating statement.

4570: Collection Loss: The balance in this account represents the estimated expense to cover unexpected losses for tenant rents. Note: Do not include losses from fraud/retroactive balances here. Report them in Account 4571 – Collection Loss – Fraud/Retroactive.

4571: Collection Loss – Fraud/Retroactive: The balance in this account represents the estimated expense to cover unexpected losses for tenant rents due to unreported income, i.e. fraud/retroactive balances.

4580: Interest Expense: The debit balance in this account represents the interest expense paid and accrued on loans and notes payable. This debt can be from operating borrowings or capital borrowings.

4590: Other General Expense: This account represents the cost of all items of general expenses for which no specific account is prescribed in the general group of accounts.

4610: Extraordinary Maintenance – Non-Capitalized: This account should be debited with all *costs* (labor, materials and supplies, expendable equipment (such as many tools or routine repair parts), and contract work) of repairs, replacements (but not replacements of non-expendable equipment), and rehabilitation of such a substantial nature that the work is clearly not a part of the routine maintenance and operating program. The items charged to this account should not increase the useful life or value of the asset being repaired. These items are not capitalized and are not added as an increase to fixed assets at the time of completion. Nor are these items depreciated. An example of this would be scheduled repainting of apartments.

4611: Equipment Purchases – Non-Capitalized: This account should be debited with the costs of equipment that does not meet the LHA's criteria for capitalization. Because these items are being expended when paid, they should not be categorized as a fixed asset and therefore will not be depreciated. These items include stoves, refrigerators, small tools, most computers and software, etc.

The budget is a planning tool and as our portfolio ages it is essential that LHAs evaluate their properties annually and plan for extraordinary maintenance. To that end EOHLC very strongly recommends that for all 400-1 operating budgets, depending on the age of the portfolio and condition, LHAs spend between $100 and $500 a year per unit in Extraordinary Maintenance, Equipment Purchases, Replacement of Equipment, and Betterments & Additions to ensure that the aging public housing stock is preserved.

4715: Housing Assistance Payments: This account should be debited with all housing assistance payments paid to landlords for the MRVP program on a monthly basis.

4801: Depreciation Expense: This account should be debited with annual fixed asset depreciation expenses as determined by the LHA's capitalization policy.

7520: Replacement of Equipment – Capitalized: This account should be debited with the acquisition cost (only the net cash amount) of non-expendable equipment purchased as a replacement of equipment of substantially the same kind. These items, such as vehicles, computers, or furniture, meet the LHA's criteria for capitalization and will also be added to fixed assets and therefore depreciated over the useful life.

7540: Betterments & Additions – Capitalized: This account should be debited with the acquisition cost (only the net cash amount) of non-expendable equipment and major non-routine repairs that are classified as a betterment or addition. These items meet the LHA's criteria for capitalization and will also be added to fixed assets and therefore depreciated over the useful life of the asset. Examples are: major roof replacement, structural repairs such as siding, or major paving work.

In accordance with GAAP accounting, inventory purchases (Replacement of Equipment and Betterments & Additions) are distinguished between capitalized and non-capitalized items. Any inventory or equipment purchase greater than $5,000 is required by EOHLC to be capitalized, inventoried and depreciated. Any inventory or equipment purchase costing $1,000 to $4,999 should be inventoried by LHA staff for control purposes only but is not subject to capitalization or depreciation, it is, however, required to be expensed when the items are paid for. An LHA's inventory listing should include both capitalized and non-capitalized items of $1,000 and more, as well as all refrigerators and stoves of any value. All items that appear on the inventory listing should be tagged with a unique identification number, and all refrigerators and stoves (regardless of value) should be tagged. LHAs may adopt a capitalization policy that capitalizes inventory purchases at a lesser amount than the $5,000 requirement (i.e. $1,000 - $4,999); however, no capitalization policy can have an amount higher than $5,000. Any inventory or equipment purchases costing $0 to $999 are to be expensed when paid for.

Narrative Responses to the Performance Management Review (PMR) Findings

The Performance Management Review conducted by the Department of Housing and Community Development (EOHLC) for the LHA fiscal year resulted in the following ratings. Criteria which received a 'Corrective Action' rating show both a reason for the rating and a response by the LHA. The reason indicates the LHA's understanding of why they received the rating, while the responses describe their goals and the means by which they will meet or improve upon the performance-based assessment standards established by EOHLC in the PMR. When the PMR rating is 'Operational Guidance', the LHA may have responded, but was not required to.

Category: Management

Criterion: Occupancy Rate - the percentage of units that are occupied on monthly report.

Rating: No Findings

Criterion: Tenant Accounts Receivable (TAR) - the percentage of uncollected rent and related charges owed by tenants to the local housing authority (LHA), out of the total amount of rent and related costs charged to tenants.

Rating: Operational Guidance

Criterion: Certifications and Reporting Submissions - timely submission of statements and certifications

Rating: Operational Guidance

Criterion: Completion of mandatory online board member training

Rating: Corrective Action

Reason: FHA does not agree with this finding and formally appealed the rating. FHA's records demonstrate that the Board of Commissioners satisfied the applicable training requirements during the review period. Documentation supporting compliance was submitted as part of the appeal, including an email from Joyce Taylor, EOHLC, confirming that the Board met the mandatory training requirement. This information was provided directly to the Housing Specialist responsible for the review. FHA routinely places Commissioner training reminders on quarterly Board meeting agendas to reinforce compliance

expectations and emphasize the importance of timely completion of required training. FHA believes this finding does not accurately represent Board compliance during the review period.

Response: Although FHA believes this rating was issued in error and that the Board was in compliance with the training requirement, FHA reviewed its procedures for maintaining and reporting Commissioner training records. Training certificates, completion records, and EOHLC correspondence are maintained in a centralized location to facilitate future reviews. Commissioner training remains a recurring item on quarterly Board meeting agendas to remind Commissioners of training obligations and reinforce the importance of compliance. FHA will continue to monitor training requirements, provide reminders regarding upcoming obligations, maintain supporting documentation, and work collaboratively with EOHLC to ensure training records are accurately reflected during future PMR reviews.

Criterion: Annual Plan Submitted - Annual Plan (AP) submitted on time

Rating: No Findings

Criterion: Staff completed relevant certifications or trainings

Rating: No Findings

Category: Financial

Criterion: Adjusted Net Income - a measure of overspending or underspending.

Rating: Corrective Action

Reason: FHA received this rating because Adjusted Net Income did not meet the benchmark established by EOHLC during the review period. The Authority believes this result was influenced by several operational and financial factors, including increased maintenance and repair costs, staffing challenges, inflationary pressures affecting materials and contracted services, and expenditures necessary to maintain an aging housing portfolio. Many developments within the portfolio require significant investment to remain safe, habitable, and compliant with applicable standards. FHA has also experienced increased costs associated with emergency repairs and addressing deficiencies identified through inspections and capital planning efforts. The Authority's financial decisions were made to preserve housing quality, protect residents, and address critical operational needs despite limited available resources.

Response: Since receiving the rating, FHA has continued its established financial management practices through regular budget monitoring, expenditure reviews, and coordination among administration, maintenance staff, RCAT, EOHLC Facilities Management, and its fee accountant. FHA has increased the frequency of financial review meetings with its fee accountant to evaluate expenditures, monitor trends, and support informed budgetary decisions. The Authority also reviews vendor relationships and associated costs to ensure services remain necessary, cost-effective, and aligned with operational priorities. FHA continues to incorporate PMR findings, Capital Needs Assessments, and Capital Improvement Plans into financial planning efforts. In addition, FHA agreed to participate in a new EOHLC initiative utilizing a specialized team from Taunton to perform labor-intensive vacancy turnovers, reducing costs and preserving local maintenance resources for other priorities.

Criterion: Current Operating Reserve as a percentage of total maximum reserve level.

Rating: No Findings

Category: Capital Spending

Criterion: Timely spending of capital funds awarded under the Formula Funding program

Rating: No Findings

Category: CHAMP

Criterion: Paper applications are available, received and entered into CHAMP

Rating: Corrective Action

Reason: FHA received this rating based on a determination that a CHAMP processing procedure related to an incomplete application was not followed exactly as expected. FHA appealed this finding after consultation with CHAMP Technical Support and review of the system record confirmed that the workflow sequence and associated timestamps did not disadvantage the applicant or alter the applicant's position on the waiting list. FHA acknowledged that a specific procedural step was not completed in the expected sequence; however, no applicant harm occurred and waiting list integrity was maintained. FHA's appeal was denied, despite evidence demonstrating that the applicant was not adversely affected. FHA believes the finding reflects a procedural issue rather than a failure of application availability, acceptance, or waiting list administration.

Response: Regardless of the appeal outcome, FHA implemented additional internal controls to promote consistency in CHAMP processing. These measures include a written CHAMP Incomplete Application Checklist, supervisory quality control reviews, and staff refresher training regarding application processing requirements. FHA assigned the Assistant Director to receive additional CHAMP training from the system vendor and to conduct biweekly reviews of CHAMP and other state-required data entries. The Assistant Director also communicates regularly with the Housing Specialist regarding questions, concerns, and challenging data entry situations. Since the PMR, both the State Clerk and Assistant Director have participated in multiple CHAMP, policy, and compliance-related trainings. FHA will continue staff training, quality control reviews, and ongoing monitoring to ensure compliance and maintain waiting list integrity.

Criterion: Vacancies are recorded correctly and occupied using CHAMP

Rating: Operational Guidance

Criterion: Fair Housing Policies Uploaded

Rating: No Findings

Category: Facility Management - Inspection Standards and Practices

Criterion: 100% of units inspected during FYE under review

Rating: No Findings

Criterion: Unit inspection reports create, track, and report work orders for inspection repairs, and inspection WOs completed within 30 days or add to DM / CIP

Rating: Corrective Action

Reason: FHA received this rating because the PMR identified deficiencies in the creation, tracking, and documentation of work orders associated with inspection findings. While 100% of required unit inspections were completed during the review period, the review identified opportunities to improve consistency in the administrative creation, tracking, documentation, and closure of certain inspection-related work orders. FHA recognizes the importance of accurate work order management and has taken steps to improve consistency in these processes while continuing to ensure that inspection deficiencies are addressed in a timely manner and documented in accordance with EOHLC requirements.

Response: Since receiving the rating, FHA requested and received training from EOHLC Facilities Management staff regarding vacancy turnovers, move-ins, work order creation, data entry, and work order processing requirements. FHA's former Maintenance Administrative Assistant transferred to another position within the Authority, and a new Maintenance Administrative Assistant was hired in May 2026 and is currently receiving training. Daily maintenance meetings are conducted to review work orders, inspection findings, priorities, and completion status. Additional oversight has been implemented to ensure inspection-related work orders are properly created, tracked, documented, and closed. FHA is also developing standardized procedures for work order processing and will continue staff training, quality control reviews, and monitoring to improve compliance and documentation consistency.

Criterion: Unit inspection reports accurately reflect necessary repairs

Rating: Corrective Action

Reason: FHA received this rating based on a determination that certain unit inspection reports did not fully reflect all repairs identified during the PMR review process. FHA contracts with an independent third-party inspection company to conduct unit inspections in order to provide objectivity and consistency in the inspection process. The Authority relied upon those inspection reports during the review period and believed they accurately documented observed conditions and necessary repairs. While FHA believes the third-party inspection reports reasonably reflected observed conditions, the Authority recognizes the importance of ensuring inspection reports consistently identify, document, and communicate all repair needs. FHA has worked with Facilities Management staff and its inspection contractor to better understand PMR expectations and improve consistency between inspection findings, work order documentation, and repair tracking.

Response: Since receiving the rating, FHA requested and received onsite technical assistance from EOHLC Facilities Management staff regarding inspections, vacancy turnovers, work order processing, and maintenance documentation. During this visit, Facilities Management staff reviewed an ideal vacant unit turnover process, discussed work order data entry requirements, preventative maintenance scheduling, work order creation standards, and methods for prioritizing deferred maintenance items when funding is limited. FHA has also worked with its independent third-party inspection contractor to improve consistency between inspection findings, repair documentation, and work order tracking. A new Maintenance Administrative Assistant was hired in May 2026 and is receiving training on work order processing and documentation requirements. FHA will continue staff training, quality control reviews, and oversight to improve consistency, compliance, and reporting accuracy.

Category: Facility Management - Vacancy Turnover Standards and Practices

Criterion: Work orders created for every vacancy and completed within 30 days (or waiver requested)

Rating: Corrective Action

Reason: FHA received this rating based on a determination that certain vacancy turnover work orders were not completed within the applicable timeframe or supported by approved waiver documentation. While FHA worked to return units to service as quickly as possible, some units required substantial repairs or modernization work beyond routine turnover activities. The PMR identified opportunities to improve documentation, tracking, and waiver procedures associated with vacancy turnover work orders. FHA recognizes the importance of maintaining complete records and ensuring vacancy turnover activities are properly documented, tracked, and supported by appropriate waiver requests when additional time is necessary to complete required work.

Response: Since receiving the rating, FHA requested and received onsite technical assistance from EOHLC Facilities Management staff regarding vacancy turnovers, work order processing, and documentation requirements. Facilities Management staff reviewed best practices for vacancy work orders, turnover timelines, repair prioritization, and waiver procedures. FHA implemented additional oversight through daily maintenance meetings and regular review of open turnover activities. FHA also implemented

improved tracking of vacancy turnover timelines and waiver requests to better document units requiring extended repair periods. FHA will continue staff training, monitoring, and quality control efforts to improve vacancy turnover tracking, documentation, and compliance.

Criterion: Vacancy turnover work orders accurately reflect necessary repairs

Rating: No Findings

Category: Facility Management - Preventive Maintenance Standards and Practices

Criterion: LHA Preventive Maintenance Plan accurately reflects all necessary work to maximize life of LHA components

Rating: Operational Guidance

Category: Facility Management - Work Order Types and Systems

Criterion: All emergency work orders are created, tracked, reported and completed within 48 hours

Rating: No Findings

Criterion: All requested work orders are created, tracked, reported and completed within 14 days or added to DM/CIP

Rating: No Findings

Additional comments regarding the PMR:

Additional Comments:

FHA appreciates the PMR process and the opportunity to identify areas for operational improvement. However, FHA remains concerned that there is no clearly published PMR appeal process, identified appeal

authority, or established escalation procedure for disputed findings. As a result, FHA submitted its appeal to the same Housing Specialist responsible for the original determinations because no alternative review process could be located. FHA believes any process that may result in corrective actions, strike letters, or increased oversight should include a transparent appeal mechanism with published procedures, defined timelines, and review by a neutral party independent of the original determination. FHA continues to believe certain appealed findings were not fully supported by the facts presented and respectfully requests reconsideration of those items.

Explanation of PMR Criteria Ratings

CRITERION	DESCRIPTION
Management	
Occupancy Rate	The rating is calculated using the following formula: (Total Number of Occupied units on Monthly Report divided by (Total Number of Units Minus Units that Received a Waiver Minus Number of Units Vacant less than 30 days on Monthly Report) • "No Findings" : Occupancy Rate is at or above 98% • Operational Guidance: Occupancy rate is at 95% up to 97.9% • Corrective Action: Adjusted occupancy rate is less than 95%
Tenant Accounts Receivable (TAR)	This criterion calculates the percentage of uncollected rent and related charges owed by starting with the amount reported by the LHA, as uncollected balances for the TAR (Account 1122 from the Balance Sheet) minus Normal Repayment Agreements* divided by Shelter (Tenant) Rent (account 3110 from the Operating Statement) • "No Findings" : At or below 2% • "Operational Guidance": More than 2% , but less than 5% • "Corrective Action": 5% or more
Certifications and Reporting Submissions	Housing authorities are required to submit 4 quarterly vacancy certifications by end of the month following quarter end; 4 quarterly operating statements and 4 Tenant Accounts Receivable (TAR) reports within 60 days of quarter end. • "No Findings": At least 11 of the required 12 reports were submitted and at least 9 were submitted on time. • "Operational Guidance": Less than 11 of the required 12 reports were submitted and/or less than 9 were submitted on time.
Board Member Training	Percentage of board members that have completed the mandatory online board member training. • "No Findings" : 80% or more completed training • "Operational Guidance" : 60-79.9% completed training • "Corrective Action" : <60 % completed training
Staff Certifications and Training	Each LHA must have at least one staff member complete a relevant certification or training During the fiscal year. The number of required trainings varies by LHA size. • No Findings: LHAs completed the required number of trainings Corrective Action: LHAs have not completed any trainings
Annual Plan (AP) Submitted	Housing authorities are required to submit an annual plan every year. • "No Findings" =Submitted on time • "Operational Guidance" =Up to 45 days late • "Corrective Action" =More than 45 days late

CRITERION	DESCRIPTION
CHAMP	
Paper applications	Paper applications are available, received and entered into CHAMP • No Findings: Paper applications are available; And paper applications are date and time stamped correctly; And 90% of new paper applications are entered into CHAMP within 15 calendar days of date/time stamp; And 2% or less of new paper applications are entered more than 30 days after date/time stamp • Operational Guidance: Paper applications are available; And paper applications are date and time stamped and entered correctly; And 75% - 89% of new paper applications are entered into CHAMP within 15 calendar days; And 3% - 5% of new paper applications are entered more than 30 days after date/time stamp • Corrective Action: Paper applications are not available; Or the LHA has failed to date and time stamp paper applications and/or failed to enter them correctly; Or Less than 75% of new paper applications are entered into CHAMP within 15 calendar days of date/time stamp; Or more than 5% of new paper applications are entered more than 30 days after date/time stamp
Vacancies occupied using CHAMP	Vacancies are recorded correctly and occupied using CHAMP • No Findings: All vacancies during the fiscal year are recorded in EOHLC's Housing Applications Vacancy System within 30 days; And the housed Applicant ID and Pull List ID match between EOHLC's Housing Applications Vacancy System and CHAMP for unit occupied during the fiscal year, excluding administrative transfers; And 25% or less of occupied units have data entry errors • Operational Guidance: All vacancies during the fiscal year are recorded in EOHLC's Housing Applications Vacancy System, all vacancies are not recorded within 30 days; Or the Housed Applicant ID and Pull List ID match between EOHLC's Housing Applications Vacancy System and CHAMP for units occupied during the fiscal year, excluding administrative transfers; And greater than 25% of occupied units have data entry errors • Corrective Action: All vacancies during the fiscal year are not recorded in EOHLC's Housing Applications Vacancy System; Or the Housed Applicant ID and Pull List ID do not match (or data is missing) between EOHLC's Housing Applications Vacancy System and CHAMP for units occupied during the fiscal year, excluding administrative transfers

CRITERION	DESCRIPTION
Financial	
Adjusted Net Income	The Adjusted Net Income criterion calculation starts with an LHA's Net Income and subtracts Depreciation, GASB 45 (Retirement Costs), GASB 68 (Retirement Costs), Extraordinary Maintenance (maintenance expense outside of routine/ordinary expenses), and Equipment Purchases – Non Capitalized. This Adjusted Net Income amount is then divided by the Total Expenses of the LHA. If this Adjusted Net Income amount is positive, it means underspending and if it is negative it means overspending. Underspending Rating: • "No Findings" : 0 to 9.9% • "Operational Guidance": 10 to 14.9% • "Corrective Action": 15% or higher Overspending Rating: • "No Findings" : 0 to -4.9% • "Operational Guidance": -5% to -9.9% • "Corrective Action": -10% or below
Operating Reserves	Current Operating Reserve as a percentage of total maximum reserve level. Appropriate reserve level is buffer against any unforeseen events or expenditures. • "No Findings" :35%+ of maximum operating reserve • "Operational Guidance": 20% to 34.9% of maximum operating reserve • "Corrective Action": <20% of maximum operating reserve
Capital Planning	
Capital Spending	Under the Formula Funding Program (FF), authorities receive undesignated funds to spend on projects in their Capital Improvement Plan. They are rated on the percentage of available funds they have spent over a three-year period • "No Findings" = at least 80% • "Operational Guidance" = At least 50% • "Corrective Action" = Less than 50%
Health & Safety	
Health & safety violations	EOHLC has observed conditions at the LHA's developments and reported health and safety violations. The LHA has certified the number of corrected violations in each category.

CRITERION	DESCRIPTION
Facility Management – Inspection Standards and Practices	
100% Unit Inspections	All units inspected at LHA during FY under review • No Findings: 100% of units inspected • Corrective Action: Less than 100% of units inspected
LHA Inspections Reports/Work Orders	Unit inspection reports create, track, and report work orders for inspection repairs, and inspection WOs completed within 30 days or add to DM/CIP • No Findings: All inspection work orders/lease violations are created, tracked, and reported; And non-health and safety work orders for inspection repairs/lease violations are completed within 30 days or added to DM/CIP; And health and safety work orders for inspection repairs/lease violations are addressed within 48 hours • Operational Guidance: All health and safety inspection work orders/lease violations are created, tracked, reported and completed within 48 hours; And LHA fail to create, track, or report no more than 1 or 2 (based on LHA size) non-EHS (exigent health and safety) deficiencies; Or LHA failed to complete any non-EHS work orders/lease violations appropriately • Corrective Action: Any EHS work orders/lease violations not created, tracked, reported, or completed; Or 1 of the following: LHA failed to create, track or report a) More than 1 non-EHS deficiency (small LHA); b) More than 2 non-EHS deficiencies (Medium/Large)
Accuracy of LHA Inspections	Unit inspection reports accurately reflect necessary repairs • No Findings: c.667 unit has less than 2 EHS deficiencies and c.200/705 unit has less than 3 EHS deficiencies • Operational Guidance: c.667 unit has 2 EHS deficiencies or c.200/705 has 3 EHS deficiencies • Corrective Action: c.667 has equal to or greater than 3 EHS deficiencies or c.200/705 unit has equal to or greater than 4 EHS deficiencies
Facility Management – Preventative Maintenance Standards and Practices	
LHA Preventative Maintenance Schedule Accuracy and Implementation of Preventative Schedules	LHA preventative maintenance schedule accurately reflects all necessary work to maximize the life of LHA components • No Findings: c.667 unit less than 2 EHS deficiencies and c.200/705 less than 3 EHS deficiencies • Operational Guidance: c.667 2 EHS deficiencies or c.200/705 3 EHS deficiencies • Corrective Action: c.667 equal to or greater than 3 EHS deficiencies or c.200/705 equal to or greater than 4 EHS deficiencies

CRITERION	DESCRIPTION
Facility Management – Vacancy Turnover Standards and Practices	
Vacancy Turnover Work Orders	Work orders created for every vacancy and completed within 30 days (or waiver requested) • No Findings: Vacancy work orders are created, tracked and reported for every unit and reflect all work in unit; And Vacancy work orders are Maintenance Ready in <=30 days for c.667 units or <=45 days for c.200/705 units or have approved waiver • Operational Guidance: Vacancy work orders are created, tracked and reported for every unit; And work orders do not reflect all work completed in unit; Or vacancy work orders are Maintenance Ready in 31-45 days for c.667 and 46-60 days for c.200/705 and no approved waiver • Corrective Action: Vacancy work orders are not created, tracked and reported for every unit; Or vacancy work orders are Maintenance Ready in >45 days for c.667 and >60 days for c.200/705 and have no approved waiver
Accuracy and Standard of Vacancy Turnovers	Vacancy turnover work orders accurately reflect necessary repairs • No Findings: c.667 unit less than 2 EHS deficiencies and c.200/705 less than 3 EHS deficiencies • Operational Guidance: c.667 2 EHS deficiencies or c.200/705 3 EHS deficiencies • Corrective Action: c.667 equal to or greater than 3 EHS deficiencies or c.200/705 equal to or greater than 4 EHS deficiencies
Work Order Types and Systems	
Emergency Work Orders	All emergency work orders are created, tracked, reported and completed within 48 hours • No Findings: All emergency work orders under review are created, tracked, reported and completed within 48 hours • Operational Guidance: All emergency work orders completed within 48 hours; Less than 100% but greater than or equal to 80% of work orders under review are correctly created, tracked and reported administratively • Corrective Action: Not all emergency work orders are completed within 48 hours; Or less than 80% of work orders under review are correctly created, tracked and reported administratively
CRITERION	**DESCRIPTION**
Requested Work Orders	All requested work orders are created, tracked, reported and completed within 14 days or added to DM/CIP • No Findings: All requested work orders under review are created, tracked, and reported; All work is complete within 14 days or added to DM/CIP • Operational Guidance: All requested work orders completed within 14 days or added to DM/CIP; And less than 100% of work orders under review are correctly created, tracked and reported • Corrective Action: Not all requested work orders are completed within 14 days or added to DM/CIP

Policies

The following policies are currently in force at the FALMOUTH HOUSING AUTHORITY:

Policy	Last Ratified by Board Vote	Notes
*Capitalization Policy	12/9/2015	
*Fair Housing Marketing Plan	3/31/2026	
*Grievance Policy	11/10/1998	
*Language Access Plan	3/31/2026	
*Personnel Policy	6/16/2020	Union Contract
*Procurement Policy	11/18/2015	
*Reasonable Accommodations Policy	3/31/2026	
*Rent Collection Policy	9/14/1993	Rent Collection/Death of Tenant
Credit/Debit Card Policy	8/18/2017	Agency Credit Card Use Policy
Criminal Offender Records Information (CORI) Policy	12/31/2025	
Maintenance and Other Charges	4/13/2016	Maintenance/Preventative Maintenance Policy
Other – Define in the 'Notes' column	4/20/2021	Vehicle Policy
Other – Define in the 'Notes' column	4/20/2021	Personal Leave for Non-Union Staff Policy
Other – Define in the 'Notes' column	9/12/1995	Policy on Late Rent
Other – Define in the 'Notes' column	11/13/2013	Cellular Telephone Policy
Other – Define in the 'Notes' column	2/28/2017	Mission Statement (Revision)
Other – Define in the 'Notes' column	4/11/2017	Key Policy
Other – Define in the 'Notes' column	5/29/2018	Weapons Policy
Other – Define in the 'Notes' column	5/29/2019	Trampoline & Pool Policy
Other – Define in the 'Notes' column	8/30/2022	Change Order approval policy and procedure
Other – Define in the 'Notes' column	5/27/2026	Wage Match for State Housing Tenants Policy
Other – Define in the 'Notes' column	11/19/2025	Revised Tenant Handbook policy on ACH draft payments
Other – Define in the 'Notes' column	8/14/2018	Compensatory Time for Management Policy
Other – Define in the 'Notes' column	4/15/2015	Air Conditioner Installation Policy
Other – Define in the 'Notes' column	5/13/2013	Drug Free Workplace Policy
Other – Define in the 'Notes' column	4/24/2018	Breastfeeding Accommodation Policy
Other – Define in the 'Notes' column	4/24/2018	MA Pregnancy Non Discrimination & Accommodation Policy
Other – Define in the 'Notes' column	8/22/2019	Media Policy
Other – Define in the 'Notes' column	2/18/2020	Nepotism Policy

Other – Define in the 'Notes' column	2/18/2020	Mobile Device Policy
Other – Define in the 'Notes' column	6/12/2018	Office Closure Policy
Other – Define in the 'Notes' column	12/9/2015	Whistleblower Policy
Other – Define in the 'Notes' column	4/20/2021	Infectious Disease - COVID 19 Policy
Parking	4/11/2017	
Records Conservation and Disposal Policy	7/14/2020	Records Retention
Sexual Harassment Policy	4/24/2018	Sexual Harassment Prohibition Policy
Smoking Policy	12/19/2022	Establishment of a Designated Smoking Area
Travel Policy	1/13/2016	

* Starred policies are required by EOHLC. Policies without a "Latest Revision" date are not yet in force. The list of policies has been provided by the LHA and has not been verified by EOHLC.

Waivers

FALMOUTH HOUSING AUTHORITY has received the following waivers from EOHLC's regulations. This list does not include vacancy waivers, pet waivers, or any waivers that would release personally identifiable tenant or applicant data.

Description	Reason	Date Approved by EOHLC	Date Expired

*The list of waivers has been provided by the LHA and has not been verified by EOHLC.

Glossary

ADA: Americans with Disabilities Act. Often used as shorthand for accessibility related issues or improvements.

AHVP: Alternative Housing Voucher Program

Alternative Housing Voucher Program provides rental vouchers to disabled applicants who are not elderly and who have been determined eligible for Chapter 667 (elderly and disabled) housing.

Allowable Non-Utility Expense Level (ANUEL) is the amount of non-utility expense allowed for each local housing authority based upon the type(s) of housing programs administered.

ANUEL: Allowable Non-Utility Expense Level

AP: Annual Plan

Annual Plan: A document prepared by each Local Housing Authority, incorporating the Capital Improvement Plan (CIP), Maintenance and Repair Plan, Budget, responses to the Performance Management Review, and other elements.

Cap Share is the amount of Formula Funding spending approved by EOHLC for each year.

Capital Funds: Funds provided by EOHLC to an LHA for the modernization and preservation of state-aided public housing, including Formula Funds and Special Capital Funds.

Capital Needs Assessment, similar to the CIP, often used for developments in the Section 8 New Construction/Substantial Rehabilitation program. Such developments are generally not eligible for state capital funds and therefore do not participate in the CIP process. However, to track their ongoing capital needs and plan for construction projects to address those needs, they often conduct a CNA to determine when building systems will wear out and need to be replaced, and what replacement will cost, so they can plan the ensure that the necessary funding will be available

Capital Projects are projects that add significant value to an asset or replace building systems or components. Project cost must be greater than $1000.

CIMS a web-based software system used for creating CIP's and Annual Plans. For the CIP, the CIMS program allows the LHA to prioritize, select and schedule projects, assign funding sources and direct project spending to specific fiscal years to create a CIP that is consistent with the LHA's FF award amount and FF cap shares, plus any additional funding resources the LHA has identified. The LHA submits its CIP and EOHLC conducts its review of the LHA's CIP in CIMS. For the Annual Plan CIMS imports data from other EOHLC systems and combines that with data entered by the LHA.

CIP: A Capital Improvement Plan (CIP) is a five (5) year plan which identifies capital projects, provides a planning scope, schedule and budget for each capital project and identifies options for financing and implementing the plan. The contents of a CIP are limited to available resources. An approved CIP is required in order to receive Formula Funds.

CNA: Capital Needs Assessment

CPS EOHLC's transparent Web-based capital planning system that catalogues the condition of every building and site in the statewide public housing portfolio, providing LHAs with detailed technical information to make strategic long-term capital investments. It includes a Facility Condition Index (FCI) for every development that compares the value of expired components of a development relative to its replacement cost.

Deferred Maintenance is maintenance, upgrades, or repairs that are deferred to a future budget cycle or postponed for some other reason. Sometimes it is referred to as extraordinary maintenance.

Deficit housing authority: a housing authority whose income (mainly from rent) does not cover all its normal operating costs in its approved operating budget, and which therefore operates at a deficit and requires operating subsidy from EOHLC.

EOHLC: Massachusetts Executive Office of Housing and Livable Communities

Extraordinary Maintenance: see the description for budget line 4610 in the Explanation of Budget Accounts in the Budget Section of this Annual Plan.

FF: Formula Funding

Formula Funding is state bond funding allocated to each LHA according to the condition (needs) of its portfolio in comparison to the entire state-aided public housing portfolio.

FYE: Fiscal Year End

HHA Administrative Fee is the fee paid to an HHA from the RCAT Program budget.

HHA: Host Housing Authority for the RCAT program.

Host Housing Authority (HHA). An LHA selected by the Department to employ and oversee an RCAT.

HUD: U.S. Department of Housing and Urban Development

LHA: Local Housing Authority

LTO: Local Tenants Organization

Management and Occupancy Report: This is an annual HUD review process that is used to evaluate the performance of developments in various HUD housing programs, including the Section 8 New Construction/Substantial Rehabilitation program, which some LHAs operate. It is similar to the state PMR process in that it evaluates LHA performance on variety of financial, housing quality, and other standards

Massachusetts Rental Voucher Program (MRVP) is a state-funded program that provides rental subsidies to low-income families and individuals.

MOR: Management and Occupancy Report

MRVP: Massachusetts Rental V EOHLC's annual review of each housing authority's performance. It pulls together data on the authority's occupancy rates, tenant accounts receivables, accounts payable, budget variance, operating reserve, capital improvement plan submission, capital spending, annual inspections and work order and maintenance systems to identify and address areas of strength and areas for development. Its goal is to allow EOHLC and the LHA to take a deep dive into the data, lift up best practices, and work together towards improving operations voucher Program.

PMR: Performance Management Review

RCAT: Regional Capital Assistance Team

Regional Capital Assistance Team: One of three organizations employed at HHAs designated by the Department to carry out the RCAT Program.

Sec.8 NC/SR (or S8NCSR): Section 8 New Construction and Substantial Rehabilitation

Section 8 New Construction and Substantial Rehabilitation (Sec.8 NC/SR): This term refers to a federal HUD housing program operated at a small number of state public housing developments whose construction was funded by state grants, but whose ongoing operating costs are supported by project-based subsidies from HUD's federal Section 8 program, rather than from state public housing operating funds.

Special Awards: In addition to allocations to each LHA, EOHLC has created limited set aside funds to provide for extreme emergency or code compliance needs which are beyond the capacity of an LHA's current FF balance.

Surplus housing authority: a housing authority whose income (mainly from rent) covers all its normal operating costs in its approved operating budget, and which therefore operates at a surplus and does not require operating subsidy from EOHLC.

Attachments

The following items have been uploaded as attachments to this Annual Plan.

- . Performance Management Review
- . Cover sheet for tenant satisfaction surveys
- . Public Comments and LHA Responses

Falmouth Housing Authority
115 Scranton Ave
Falmouth, MA 02540

FALMOUTH HOUSING AUTHORITY

EXTRACT OF BOARD ACTION

(508) 548-1977 Tel
(508) 457-7573 Fax
www.falmouthhousing.org

BOARD OF COMMISSIONERS MEETING
Wednesday, July 29, 2026 **4:30 PM - Virtual Meeting**
Zoom Access:
Join Zoom Meeting: https://us02web.zoom.us/j/89062884820
Meeting ID: 890 6288 4820 Audio Dial-In: 1-646-558-8656

Resolution No. 2027-001
Approval of the FY2027 State Public Housing Annual Plan and Capital Improvement Plan

At a duly called Public Hearing of the Board of Commissioners of the Falmouth Housing Authority held on **July 29, 2026**, the Board reviewed the proposed FY2027 State Public Housing Annual Plan and Capital Improvement Plan (CIP), prepared in accordance with the requirements of the Massachusetts Executive Office of Housing and Livable Communities (EOHLC).

The Executive Director reported that the Authority conducted the required public outreach process, including public notices, tenant mailings, website postings, robocall notifications, and opportunities for public review and comment. The public hearing was conducted in accordance with EOHLC requirements. No substantive public comments or requested amendments were received prior to Board consideration.

Following the Public Hearing, the Board of Commissioners considered the proposed FY2027 State Public Housing Annual Plan and Capital Improvement Plan.

VOTED:
That the Board of Commissioners hereby approves the **FY2027 State Public Housing Annual Plan and Capital Improvement Plan**, as presented, and authorizes the Executive Director to execute and submit all documents required by the Massachusetts Executive Office of Housing and Livable Communities (EOHLC) to implement this action.

Roll Call Vote
Ayes: 3 (Patton, Haynes, Lemay)
Nays: None
Absent: 1 (Vanderscheuren) **Vote: 3-0-1 (Approved Unanimously)**

CERTIFICATION
I hereby certify that the foregoing is a true extract of the action taken by the Board of Commissioners of the Falmouth Housing Authority at its Public Hearing held on **July 29, 2026**, and that said vote remains in full force and effect.

Signed:
Bobbi Richards, M.A.
Executive Director (Retiring)/ Recording Officer

Resident Surveys – Background

Since 2016 DHCD has been working with the Center for Survey Research (CSR) at the University of Massachusetts Boston to survey residents in the state public housing units it oversees. The surveys are confidential, mailed directly to residents, and returned to CSR by mail (or, starting in 2019, completed on-line). CSR surveys residents of elderly/disabled units (also known as Chapter 667) and family units (also known as Chapter 200 and Chapter 705).

During each round all units are mailed surveys, with one exception: in the case of the twelve housing authorities with more than 225 c.200 family units, a randomly selected group of 225 units was surveyed at each housing authority. This group was determined to be large enough to generate statistically useful results. In both rounds, responses from c.200 and c.705 residents are always combined.

Round One Surveys (2016 – 2018)

In Round One of the surveys, CSR surveyed residents of elderly/disabled units (c.667) in three groups in the Fall of 2016, 2017 and 2018. CSR surveyed residents of family units (c.705 and c.200) in the Spring of 2016. (Note: there are many more c.667 units, so they were broken down into three groups).

Round Two Surveys (2019 – 2022)

Round Two of the surveys began in 2019. CSR surveyed about one-third of the elderly/disabled units in Fall 2019, Fall 2021, and Fall 2022. CSR surveyed all family units in Fall 2020.

Round Three Surveys (2023 – 2027)

Round Three of the surveys began in 2023. CSR surveyed about one-third of the elderly/disabled units and one-third of family units in Fall 2023.

FALMOUTH HOUSING AUTHORITY

Performance Management Review (PMR) Report

Fiscal Year End 6/30/2025

*For a detailed report of the Performance Management Review (PMR), please contact the Local Housing Authority

Executive Office of Housing and Livable Communities (EOHLC)

PMR Desk Audit Ratings Summary Official Published PMR Record

For a detailed report of the Performance Management Review (PMR), please contact the Local Housing Authority

Housing Authority	FALMOUTH HOUSING AUTHORITY
Fiscal Year Ending	Jun 2025
Housing Management Specialist	Melanie Loveland-Hale
Facilities Management Specialist	Todd Lawson

Criteria	Score/Rating			
	Management			
Occupancy Rate	**c.667**	**c.705**	**c.200**	**Cumulative**
	No Findings	No Findings	Not Applicable	No Findings
Tenant Accounts Receivable (TAR)	**c.667**	**c.705**	**c.200**	**Cumulative**
	Operational Guidance	No Findings	No Findings	Operational Guidance
Board Member Training	Corrective Action			
Certifications and Reporting Submissions	Operational Guidance			
Annual Plan	No Findings			
	Financial			
Adjusted Net Income	Corrective Action			
Operating Reserves	No Findings			

Report Date: 12/23/2025 14:33:20

EXECUTIVE OFFICE OF HOUSING AND LIVABLE COMMUNITIES (EOHLC)
Staff Certification & Training Rating

LHA Name	FALMOUTH HOUSING AUTHORITY
FYE	Jun 2025
HMS Name	Melanie Loveland-Hale
FMS Name	Todd Lawson

Criteria	Rating
Staff Certification and Training	No Findings

Report Date: 12/23/2025 14:33:20

EXECUTIVE OFFICE OF HOUSING AND LIVABLE COMMUNITIES (EOHLC)
CFA Submission

LHA Name	FALMOUTH HOUSING AUTHORITY
FYE	Jun 2025
HMS Name	Melanie Loveland-Hale
FMS Name	Todd Lawson

CFA Submission

Rating: No Findings

Recommendations: 1. No Recommendations

EXECUTIVE OFFICE OF HOUSING AND LIVABLE COMMUNITIES (EOHLC)
PMR Desk Audit Recommendations Report

LHA Name	FALMOUTH HOUSING AUTHORITY
FYE	Jun 2025
HMS Name	Melanie Loveland-Hale
FMS Name	Todd Lawson

Occupancy

Rating All: No Findings
Rating 667: No Findings
Rating 705: No Findings
Rating 200: Not Applicable

1. No Recommendations

Tenant Accounts Receivable (TAR)

Rating All: Operational Guidance
Rating 667: Operational Guidance
Rating 705: No Findings
Rating 200: No Findings

1. Report to credit bureau when resident has vacated unit with past due rent balance.
2. Properly enter repayment agreements into TAR reporting to EOHLC.
3. HMS and LHA discussed the housing authority's efforts to collect rents and enter into repayment agreements; HMS recommends LHA continue its efforts.

Board Member Training

Rating: Corrective Action

1. Include a list of Board members who have not completed the training on the monthly Board meeting agenda
2. Periodically check the Trackstar system to ensure 80% of the Board is trained.

Certifications and Reporting Submissions

Rating: Operational Guidance

1. Submit all four quarterly vacancy certifications by the end of the month following the quarter end.
2. Submit all four quarters of Tenants Accounts Receivables (TAR) application within 60 days of quarter end.
3. Submit all four quarterly operating statements within 60 days of the quarter end.
4. Set a recurring appointment in your email calendar to keep track of reporting dates and deadlines.
5. Review the schedule of Certification and Submissions in PHN 2022-06 Calendar of Submissions and Certifications monthly to see if there are submissions or certifications needed in the upcoming month.

Annual Plan Submission

Rating: No Findings

1. No Recommendations

Adjusted Net Income/Revenue

Rating: Corrective Action

Revenue

1. No Recommendations

Expense

Salaries

1. No Recommendations

Legal

1. No Recommendations

Utilities

1. No Recommendations

Maintenance

1. No Recommendations

Other

1. Work with fee accountant to review and monitor spending in relation to PMR-ANI criteria.

Operating Reserve

Rating: No Findings

1. No Recommendations

EXECUTIVE OFFICE OF HOUSING AND LIVABLE COMMUNITIES (EOHLC)

CHAMP Close Out Report

Official Published PMR Record

LHA Name	FALMOUTH HOUSING AUTHORITY
FYE	Jun 2025
HMS Name	Melanie Loveland-Hale
FMS Name	Todd Lawson

CHAMP Criteria 1a

Rating: No Findings

Recommendations: 1. No Recommendations

CHAMP Criteria 1b

Rating: Corrective Action

Recommendations: 1. Enter CHAMP application information as it is received and enter the date and timestamp recorded. Incomplete applications should be saved in CHAMP.
2. Audit/review date and time stamp to ensure they are clearly readable.

CHAMP Criteria 1c

Rating: No Findings

Recommendations: 1. No Recommendations

CHAMP Criteria 2a

Rating: Operational Guidance

Recommendations: 1. Create a tracking system and staff accountability to ensure that all vacancies are recorded in the EOHLC Housing Apps Vacancy Reporting System within 30 days of the vacancy date.
2. Create a tracking system and staff accountability to ensure that you are entering vacancy data correctly within 30 days.
3. Establish reoccurring calendars reminders to help ensure vacancy data is entered into the EOHLC Housing Apps Vacancy Reporting System within 30 days.

CHAMP Criteria 2b

Rating: No Findings

Recommendations: 1. No Recommendations

CHAMP Criteria 3a

Rating: No Findings

Recommendations: 1. No Recommendations

CHAMP Criteria 3b

Rating: No Findings

Recommendations: 1. Ensure that tenant selection staff apply the 1 in 5 Minority Placement Rate for family housing during fiscal year 2026.

CHAMP Criteria 3c

Rating: No Findings

Recommendations: 1. No Recommendations

EXECUTIVE OFFICE OF HOUSING AND LIVABLE COMMUNITIES (EOHLC)
PMR Physical Condition Report
For any questions on your FMS PMR Ratings, please contact your FMS.

LHA Name	FALMOUTH HOUSING AUTHORITY
FYE	Jun 2025
HMS Name	Melanie Loveland-Hale
FMS Name	Todd Lawson

Criteria 1: 100% of units inspected during FYE under review

Rating: No Findings

Recommendations:
1. Ensure that work orders are created, tracked, and completed for all Health and Safety deficiencies
2. Ensure that all work orders for all Health and Safety deficiencies are completed in the appropriate timeframe
3. Ensure that all work orders are completed in the appropriate timeframe or appropriately added to the DM/CIP

Criteria 2: Unit inspection Reports create, track, and report Work Orders for inspection repairs, and Work Orders are completed within 30 days or added to DM/CIP

Rating: Corrective Action

Recommendations:
1. Ensure that work orders are created, tracked, and completed for all Health and Safety deficiencies
2. Ensure that all work orders for all Health and Safety deficiencies are completed in the appropriate timeframe
3. Ensure that all work orders are completed in the appropriate timeframe or appropriately added to the DM/CIP

Criteria 3: Unit Inspection Reports accurately reflect necessary repairs

Rating: Corrective Action

Recommendations:
1. No Recommendations

Criteria 4: Work Orders created for every vacancy and completed within 30 days (or waiver requested)

Rating: Corrective Action

Recommendations:
1. Ensure that all work required for a Vacancy Turn Over is recorded in a Vacancy Turn Over Work Order
2. Vacancy turnovers should be completed within 30 calendar days or less. If cannot complete work within 30 days, LHA should contact Housing Management Specialist for a waiver. Use Online Vacancy System to Apply for Waivers (see PHN 2013 - 07) for Waiver Types (if waiver-eligible) See Handout G

Criteria 5: Vacancy Turnover Work Orders accurately reflect necessary repairs

Rating: No Findings

Recommendations: 1. No Recommendations

Criteria 6: LHA Preventive Maintenance Plan accurately reflects all necessary work to maximize life of LHA components

Rating: Operational Guidance

Recommendations: 1. Create preventive maintenance plan that is specific to each LHA development rather than authoritywide

Criteria 7: All emergency work orders are created, tracked, reported and completed within 48 hours

Rating: No Findings

Recommendations: 1. No Recommendations

Criteria 8: All requested work orders are created, tracked, reported and completed within 14 days or added to DM/CIP

Rating: No Findings

Recommendations: 1. No Recommendations

Criteria 9: LHA Provide a Preventive Maintenance Schedule of Work and Work Orders that encompasses 12 months and meets all criteria as outlined in PHN 2022-10

Rating: Corrective Action

Recommendations:
1. Ensure that work orders created as part of PM plan are labeled correctly as “re-occuring,” or “preventive maintenance.”
2. Ensure that work orders are created for all PM items even if a contractor conducts the work
3. Refer to PHN 2025-06 for assistance with preventive maintenance plan guidelines and specific criteria to be included in LHA PM plan
4. Ensure that the schedule of work developed by your LHA encompasses twelve (12) months and be comprehensive, by development, describing the necessary task and citing the frequency and the party responsible for completing the required work
5. Ensure that the LHA preventive maintenance schedule contains the six (6) core components as outlined in Public Housing Notice 2022-10
6. Ensure that your LHA preventive maintenance plan includes all life safety systems scheduled maintenance (i.e.- elevator inspections, fire sumps/sprinklers/suppression, emergency lighting, fire hydrant testing, alarm systems, security cameras, etc.)
7. Ensure that new or upgraded mechanical/system components are added to your annual PM plan regularly, and have applicable work orders at regular intervals as outlined in PHN 2025-06

Health & Safety Deficiencies

Inspection reports were provided to the LHA at the time of the EOHLC site visit. Health and safety deficiencies were identified during the PMR Inspection. These items must be completed or initiated within 48 hours. Following completion of these health and safety deficiencies, the Executive Director must login to the FMS software application and certify, by electronic signature, that all health and safety deficiencies have been completed. Please contact your assigned FMS for further assistance.