

<b>Streamlined Annual PHA Plan (HCV Only PHAs)</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 02/29/2016</b>
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**Purpose.** The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

**Applicability.** Form HUD-50075-HCV is to be completed annually by **HCV-Only PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, Small PHA, or Qualified PHA do not need to submit this form. Where applicable, separate Annual PHA Plan forms are available for each of these types of PHAs.

**Definitions.**

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both of the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments if administering both programs, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceeds 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment, and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceeds 550, and that was designated as a standard performer in the most recent PHAS and SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined, and is not PHAS or SEMAP troubled.

<b>A.</b>	<b>PHA Information.</b>																																						
A.1	<p><b>PHA Name:</b> _____ Rhode Island Housing and Mortgage Finance Corporation _____ <b>PHA Code:</b> <u>RI901</u></p> <p><b>PHA Plan for Fiscal Year Beginning:</b> (MM/YYYY): <u>07/2018</u></p> <p><b>PHA Inventory</b> (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)  <b>Number of Housing Choice Vouchers (HCVs)</b> <u>1920</u></p> <p><b>PHA Plan Submission Type:</b> <input checked="" type="checkbox"/> Annual Submission <input type="checkbox"/> Revised Annual Submission</p> <p><b>Availability of Information.</b> In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan, but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at the main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website.</p> <p><i>Interested parties may obtain a copy of the 5-Year and Annual PHA Plans by visiting Rhode Island Housing's website at <a href="http://www.rihousing.com">www.rihousing.com</a> or they may make an appointment by calling the Rhode Island Housing Division of Leased Housing and Rental Services at 401-429-1483 to view or receive a copy of these documents at Rhode Island Housing's Offices, located at 44 Washington Street, Providence, RI 02903.</i></p> <p><input type="checkbox"/> <b>PHA Consortia:</b> (Check box if submitting a joint Plan and complete table below)</p> <table border="1" data-bbox="165 1381 1453 1873"> <thead> <tr> <th data-bbox="165 1381 440 1434">Participating PHAs</th> <th data-bbox="440 1381 571 1434">PHA Code</th> <th data-bbox="571 1381 870 1434">Program(s) in the Consortia</th> <th data-bbox="870 1381 1144 1434">Program(s) not in the Consortia</th> <th data-bbox="1144 1381 1453 1434">No. of Units in Each Program</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program																														
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<b>B.</b>	<b>Annual Plan.</b>
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**B.1**

**Revision of PHA Plan Elements.**

(a) Have the following PHA Plan elements been revised by the PHA since its last Annual Plan submission?

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| Y                                   | N                                   |  |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Housing Needs and Strategy for Addressing Housing Needs.   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.                 |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Financial Resources.   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Rent Determination.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Operation and Management.  |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Informal Review and Hearing Procedures.  |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Homeownership Programs.  |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements. |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Substantial Deviation.   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Significant Amendment/Modification.  |

(b) If the PHA answered yes for any element, describe the revisions for each element(s):

**Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions**

- The PHA will specifically identify areas of poverty and minority concentration in its next HCV Administrative Plan revision, expected to be adopted by the Board of Directors in March 2018
- The PHA will no longer automatically deny admission where a family member was previously terminated by a public housing authority
- Student eligibility policies in the Administrative Plan have been revised to comply with current regulations

**Operation and Management**

- The PHA plans to implement biennial inspections across its entire portfolio to increase efficiency (PIH Notice 2016-05)
- The PHA has adopted an Emergency Transfer Plan as required by VAWA 2013

<b>B.2</b>	<b>New Activities</b>
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(a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?

- |                                     |                          |                         |
|-------------------------------------|--------------------------|-------------------------|
| Y                                   | N                        |                         |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Project Based Vouchers. |

(b) If this activity is planned for the current Fiscal Year, describe the activities. Provide the projected number of project-based units and general locations, and describe how project-basing would be consistent with the PHA Plan.

Rhode Island Housing plans to utilize the flexibility provided under HOTMA to project-base up to an additional 10 percent of its authorized units to create additional housing supply for vulnerable populations as feasible opportunities arise and subject to budgetary constraints. Ideally, several of these developments will be based in high-opportunity communities in order to affirmatively further fair housing.

<b>B.3</b>	<b>Most Recent Fiscal Year Audit.</b>
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(a) Were there any findings in the most recent FY Audit?

- |                          |                                     |                          |
|--------------------------|-------------------------------------|--------------------------|
| Y                        | N                                   | N/A                      |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

(b) If yes, please describe:

<b>B.4</b>	<b>Civil Rights Certification</b>
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[Form HUD-50077](#), *PHA Certifications of Compliance with the PHA Plans and Related Regulations*, must be submitted by the PHA as an electronic attachment to the PHA Plan.

<p><b>B.5</b></p>	<p><b>Certification by State or Local Officials.</b></p> <p><a href="#">Form HUD 50077-SL</a>, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
<p><b>B.6</b></p>	<p><b>Progress Report.</b></p> <p>Provide a description of the PHA’s progress in meeting its Mission and Goals described in its 5-Year PHA Plan.</p> <p>2015-2020 GOALS</p> <ul style="list-style-type: none"> <li>• <b>Use the Housing Choice Voucher Program (HCVP) to further HUD’s Opening Doors initiative to end homelessness.</b></li> </ul> <p>Opening Doors, Rhode Island’s strategic Plan to Prevent and End Homelessness outlines a program to significantly transform the provision of services to homeless in Rhode Island. The plan seeks to sharply decrease the number of people experiencing homelessness and the length of time people spend homeless. It proposes to finish the job of ending chronic homelessness in five years and to prevent and end all homelessness among veterans in the state in the same time period.</p> <p><i>In calendar years 2016 and 2017, 100% of new admissions to the HCVP program were homeless households. This preference continues to carry the highest weight and the PHA expects to continue to serve homeless households with the majority of its HCVP resources.</i></p> <p>As another measure to further this goal, Rhode Island Housing adopted a new local preference in the prior fiscal year for families “moving up” from Permanent Supportive Housing to the HCV program. The “move-up” preference is part of a larger effort among Rhode Island Housing and community services providers to increase housing opportunities for homeless families and individuals. By moving families from supportive housing into the HCV program, additional supportive housing opportunities will be created for currently homeless households. As of December 2017, Rhode Island Housing has issued 9 vouchers under these programs and continues to receive referrals from participating service providers.</p> <ul style="list-style-type: none"> <li>• <b>Work with other Public Housing Authorities to create a more streamlined process for applying for assistance, possibly creating a universal application and waiting list</b></li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>• <b>Work with other Public Housing Authorities to open our waiting lists simultaneously so applicants have an opportunity to apply to as many waiting lists as possible.</b></li> </ul> <p>The Public Housing Association of Rhode Island (PHARI) selected Rhode Island Housing via a competitive RFP process to administer a statewide Centralized Housing Choice Voucher Wait List Portal. The Centralized Wait List Portal represents a single point of entry for applicants wishing to apply for assistance from one or more participating PHAs. In recent years, the Department of Housing and Urban Development has encouraged the use of a Centralized Wait List.</p> <p>The use of a Centralized Wait List Portal affords Rhode Island Housing and its clients the following benefits:</p> <ol style="list-style-type: none"> <li>1. Ease of application process for applicants who may apply to the Housing Choice Voucher program of any or all participating housing authorities in the state through an online application process (with exceptions for reasonable accommodations).</li> <li>2. Eliminate the administrative burden of periodically closing and opening of the Housing Choice Voucher waiting list.</li> <li>3. Increase housing opportunities for families who will now have the option of applying for assistance throughout the state through a one-time application process.</li> </ol> <p><i>Rhode Island Housing successfully opened the Centralized Wait List Portal on December 17, 2017, with 18 agencies participating throughout the state, and several others are anticipated to join in the coming year.</i></p> <ul style="list-style-type: none"> <li>• <b>Perform better owner outreach by beginning owner information presentations throughout the state.</b></li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>• <b>Better utilize state and federal funds to provide residents with a more solid support system that not only includes housing, but other services as well.</b></li> </ul> <p>The PHA’s two Housing Stabilization Specialists (each an “HSS”) have advanced this goal significantly. Since inception of the HSS program in Summer 2016, they have assisted 90 tenants in locating units, and prevented 120 potential terminations through a combination of mediation and referral services. These staff members have also begun to conduct informational presentations to owner groups throughout the state about the advantages of participating in the HCV program and steps that Rhode Island Housing has taken to streamline operations.</p>

<b>B.7</b>	<p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) provide comments to the PHA Plan?</p> <p>Y    N  <input type="checkbox"/>   <input checked="" type="checkbox"/></p> <p>(a) If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>
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## Instructions for Preparation of Form HUD-50075-HCV Annual PHA Plan for HCV Only PHAs

**A. PHA Information.** All PHAs must complete this section. ([24 CFR §903.23\(4\)\(e\)](#))

**A.1** Include the full **PHA Name**, **PHA Code**, **PHA Type**, **PHA Fiscal Year Beginning** (MM/YYYY), **Number of Housing Choice Vouchers (HCVs)**, **PHA Plan Submission Type**, and the **Availability of Information**, specific location(s) of all information relevant to the public hearing and proposed PHA Plan.

**PHA Consortia:** Check box if submitting a Joint PHA Plan and complete the table. ([24 CFR §943.128\(a\)](#))

**B. Annual Plan.** All PHAs must complete this section. ([24 CFR §903.11\(c\)\(3\)](#))

**B.1 Revision of PHA Plan Elements.** PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the “yes” box. If an element has not been revised, mark “no.”

**Housing Needs and Strategy for Addressing Housing Needs.** Provide a statement addressing the housing needs of low-income, very low-income families who reside in the PHA’s jurisdiction and other families who are on the Section 8 tenant-based waiting list. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income), (ii) elderly families and families with disabilities, and (iii) households of various races and ethnic groups residing in the jurisdiction or on the waiting list based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. ([24 CFR §903.7\(a\)\(1\)](#) and [24 CFR §903.7\(a\)\(2\)\(i\)](#)). Provide a description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. [24 CFR §903.7\(a\)\(2\)\(ii\)](#)

**Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.** A statement of the PHA’s policies that govern resident or tenant eligibility, selection and admission including admission preferences for HCV. ([24 CFR §903.7\(b\)](#))

**Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA’s anticipated resources, such as PHA HCV funding and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources. ([24 CFR §903.7\(c\)](#))

**Rent Determination.** A statement of the policies of the PHA governing rental contributions of families receiving tenant-based assistance, discretionary minimum tenant rents, and payment standard policies. ([24 CFR §903.7\(d\)](#))

**Operation and Management.** A statement that includes a description of PHA management organization, and a listing of the programs administered by the PHA. ([24 CFR §903.7\(e\)\(3\)\(4\)](#)).

**Informal Review and Hearing Procedures.** A description of the informal hearing and review procedures that the PHA makes available to its applicants. ([24 CFR §903.7\(f\)](#))

**Homeownership Programs.** A statement describing any homeownership programs (including project number and unit count) administered by the agency under section 8y of the 1937 Act, or for which the PHA has applied or will apply for approval. ([24 CFR §903.7\(k\)](#))

**Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements.** A description of any PHA programs relating to services and amenities coordinated, promoted, or provided by the PHA for assisted families, including those resulting from the PHA’s partnership with other entities, for the enhancement of the economic and social self-sufficiency of assisted families, including programs provided or offered as a result of the PHA’s partnerships with other entities, and activities under section 3 of the Housing and Community Development Act of 1968 and under requirements for the Family Self-Sufficiency Program and others. Include the program’s size (including required and actual size of the FSS program) and means of allocating assistance to households. ([24 CFR §903.7\(l\)\(i\)](#)) Describe how the PHA will comply with the requirements of section 12(c) and (d) of the 1937 Act that relate to treatment of income changes resulting from welfare program requirements. ([24 CFR §903.7\(l\)\(iii\)](#)).

**Substantial Deviation.** PHA must provide its criteria for determining a “substantial deviation” to its 5-Year Plan. ([24 CFR §903.7\(r\)\(2\)\(i\)](#))

**Significant Amendment/Modification.** PHA must provide its criteria for determining a “Significant Amendment or Modification” to its 5-Year and Annual Plan. Should the PHA fail to define ‘significant amendment/modification’, HUD will consider the following to be ‘significant amendments or modifications’: a) changes to rent or admissions policies or organization of the waiting list; or b) any change with regard to homeownership programs. See guidance on HUD’s website at: [Notice PIH 1999-51](#). ([24 CFR §903.7\(r\)\(2\)\(ii\)](#))

If any boxes are marked “yes”, describe the revision(s) to those element(s) in the space provided.

**B.2 New Activity.** If the PHA intends to undertake new activity using Housing Choice Vouchers (HCVs) for new Project-Based Vouchers (PBVs) in the current Fiscal Year, mark “yes” for this element, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake this activity, mark “no.” ([24 CFR §983.57\(b\)\(1\)](#) and Section 8(13)(C) of the United States Housing Act of 1937.

**Project-Based Vouchers (PBV).** Describe any plans to use HCVs for new project-based vouchers. If using PBVs, provide the projected number of project-based units and general locations, and describe how project-basing would be consistent with the PHA Plan.

**B.3 Most Recent Fiscal Year Audit.** If the results of the most recent fiscal year audit for the PHA included any findings, mark “yes” and describe those findings in the space provided. ([24 CFR §903.11\(c\)\(3\)](#), [24 CFR §903.7\(p\)](#))

**B.4 Civil Rights Certification.** Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulation*, must be submitted by the PHA as an electronic attachment to the PHA Plan. This includes all certifications relating to Civil Rights and related regulations. A PHA will be considered in compliance with the AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction’s initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction. ([24 CFR §903.7\(o\)](#))

**B.5 Certification by State or Local Officials.** Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, including the manner in which the applicable plan contents are consistent with the Consolidated Plans, must be submitted by the PHA as an electronic attachment to the PHA Plan. ([24 CFR §903.15](#))

**B.6 Progress Report.** For all Annual Plans following submission of the first Annual Plan, a PHA must include a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year PHA Plan. ([24 CFR §903.11\(c\)\(3\)](#), [24 CFR §903.7\(r\)\(1\)](#))

**B.7 Resident Advisory Board (RAB) comments.** If the RAB provided comments to the annual plan, mark “yes,” submit the comments as an attachment to the Plan and describe the analysis of the comments and the PHA’s decision made on these recommendations. ([24 CFR §903.13\(c\)](#), [24 CFR §903.19](#))

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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the Annual PHA Plan. The Annual PHA Plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA’s operations, programs, and services, and informs HUD, families served by the PHA, and members of the public for serving the needs of low- income, very low- income, and extremely low- income families.

Public reporting burden for this information collection is estimated to average 4.5 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality