



# 2010-2014 Strategic Plan

This document includes Narrative Responses to specific questions that grantees of the Community Development Block Grant, HOME Investment Partnership, Housing Opportunities for People with AIDS and Emergency Shelter Grants Programs must respond to in order to be compliant with the Consolidated Planning Regulations.

## GENERAL

### Executive Summary

The Executive Summary is required. Include the objectives and outcomes identified in the plan and an evaluation of past performance.

3-5 Year Strategic Plan Executive Summary:

Overall, within Hamilton County, costs burden rather than the availability of standard housing units is the primary problem faced by lower income renter households, with cost burden and to a lesser degree, physical deficiencies being a problem for owner occupants. Housing overcrowdedness is primarily a problem for large families, particularly in the rental market.

Hamilton County generally has an adequate supply of housing to meet the needs of its residents, but lower and moderate income residents of the County do have affordability issues in accessing that housing. During the next 5 years, Hamilton County will focus its resources on bridging the affordability gap. Some resources will also be used to build new housing for seniors and other rental housing that is rebuilt from blighted and demolished properties. Also, handicapped accessibility for low-income renters will be considered for funding.

The City of Cincinnati/Hamilton County Continuum of Care will continue to develop and implement a single, coordinated, inclusive homeless assistance system which supports all homeless persons in their movement from homelessness to economic stability and affordable permanent housing within a supportive community.

The County's objective of providing for the availability/accessibility of decent housing will be met by focusing on the need for shelter beds for homeless men, and improving access to agencies serving the homeless.

The County's objective of providing for the affordability of decent housing will be met by focusing on the need for home repairs by owner occupants, affordable rental housing for low income and formerly homeless renters, financial assistance to low to moderate income home buyers, counseling and small grants to help homeowners avoid foreclosure and concentrated code enforcement in selected areas of the County.

The County's objective of providing for the availability/accessibility of suitable living environments will be met by focusing on the need for repairs of deteriorating streets and

sidewalks, improvement to the physical infrastructure and public facilities to make them accessible to the handicapped, a variety of social services for low to moderate income persons, facilities and services targeted to senior citizens, and providing access to health services to low to moderate income persons.

The County's objective of providing for affordable suitable living environments will be met by focusing on the need of low to moderate income County residents for food, clothing and other support services.

The County's objective of providing for the sustainability of a suitable living environment will be met by focusing on the need for revitalizing community facilities particularly in neighborhood business districts, construction or repair of recreational facilities, and the demolition of deteriorated structures county wide.

The County's objective of providing for the availability/accessibility of economic opportunity will be met by focusing on the need for remediation of environmental hazards in brownfields throughout the County.

An evaluation of past performance under this plan shows progress in meeting the identified priorities of bridging the affordability gap in rental housing, making homeownership more accessible and affordable, providing scarce resources across many communities of Hamilton County to benefit low-moderate income populations, and making the continuum of care for homeless and chronically homeless more accessible, comprehensive, and cohesive.

## Strategic Plan

Due every three, four, or five years (length of period is at the grantee's discretion) no less than 45 days prior to the start of the grantee's program year start date. HUD does not accept plans between August 15 and November 15.

### Mission:

The mission of the Community Development Department is to provide quality housing, community and economic development opportunities to disadvantaged families and individuals in Hamilton County in accordance with the federal rules and regulations and for purposes as directed by the Board of County Commissioners.

In response to regulation by the Department of Housing and Urban Development, Hamilton County has prepared a Consolidated Plan for Fiscal Years 2010 through 2014, with an action plan for FY10, beginning March 1, 2010 and ending February 28, 2011. The Consolidated Plan for Hamilton County consists of several parts. The **Strategic Plan** (this document) describes the institutional structure of the County, how the process for updating the plan is managed, Citizen Participation and Monitoring, Housing and Community Development needs analysis, Strategies and Objectives to address those needs, Barriers to Affordable Housing and how those barriers will be addressed, Homeless needs and strategies and objectives to address those needs, and other needs and analysis. The period to be addressed in the Strategic Plan is for the 5 years from March 1, 2010 through February 28, 2015. The **Action Plan** describes all project

activities that will be undertaken with 2010 funding from the Community Development Block Grant Program, the HOME Investment Partnerships Program, and the Emergency Shelter Grant Program. The **Analysis of Impediments to Fair Housing** is updated in conjunction with the overall update of the 5 Year Consolidated Plan. The **Fair Housing Action Plan** is updated each year to address the needs identified in the Analysis of Impediments.

## General Questions

1. Describe the geographic areas of the jurisdiction (including areas of low income families and/or racial/minority concentration) in which assistance will be directed.
2. Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA) (91.215(a)(1)) and the basis for assigning the priority (including the relative priority, where required) given to each category of priority needs (91.215(a)(2)). Where appropriate, the jurisdiction should estimate the percentage of funds the jurisdiction plans to dedicate to target areas.
3. Identify any obstacles to meeting underserved needs (91.215(a)(3)).

3-5 Year Strategic Plan General Questions response:

1. The Hamilton County Consolidated Plan jurisdiction includes 28 municipalities and 12 unincorporated townships. Geographically, the vast majority of Hamilton County communities participate in the CDBG program, representing approximately 97% of the County's population (2000 US Census). Only seven out of 48 county jurisdictions are not participating in this plan. (See Map 1)

Hamilton County covers a large geographic area with topography varying from steep hillsides to rolling farmland. The City of Cincinnati is by far the largest jurisdiction in the area with a population of approximately 332,000, and encompasses the south-central portion of Hamilton County. The other cities, villages, and townships are dotted across the county following rivers, natural topography, and major roads reaching into suburban areas. More than some other urban areas in Ohio, Cincinnati is virtually surrounded by smaller jurisdictions-some with less than 1,000 residents. Although many of them are small, the residents and leaders of these communities take pride in where they live and are historically fiercely independent of one another. This fragmented geography makes coordinated, county-wide planning and program execution extremely challenging. However, over the past several years leaders in many of these smaller communities have begun cooperative agreements with Hamilton County, civic organizations, and one another to deal with cross-jurisdiction issues and service sharing.

Hamilton County enjoys a diverse economic base, which lends some stability to the area. The decline of historic manufacturing firms over the last several decades within the County-including machine tool and automobile companies-resulted in a large loss of well-paying blue collar jobs. The local decline of these industries mirrors a similar decline in manufacturing employment nationally, as does the replacement of some of these jobs with service-sector ones. Growth of jobs in the service industry, health care, finance, and government provides alternate employment opportunities and tax base though not necessarily in the same communities and demographics.

Prior to World War II, Cincinnati enjoyed steady population growth as did the surrounding communities. This growth peaked in 1950 for Cincinnati with approximately 500,000 residents, and for the overall County in 1970 with just under one million residents. Today, Hamilton County is the population and employment center for a 13-county metropolitan area that includes approximately two million people. Until the recent recession, vibrant growth and property development characterized many neighboring counties, leading to a sprawling development pattern where land development is not matched with population growth.

US Census data indicates that the highest concentrations of minority population are within Cincinnati south of State Route 562, and along the I-75/Reading Road corridor leading northeast out of the city. The highest minority concentrations outside Cincinnati include historically black neighborhoods including Lincoln Heights and West College Hill. Several older suburban communities have increasing numbers of minority residents resulting from out-migration from Cincinnati and Hamilton County. Median household incomes and poverty rates roughly parallel patterns of minority concentration, with the poorer neighborhoods located inside Cincinnati and the wealthiest in eastern Hamilton County. (See Map 2)

2. Because Hamilton County qualifies as an Urban County, its entitlement size depends on the demographics of participating local jurisdictions. In order to distribute CDBG funds among participating jurisdictions, the County considers how the demographics of each jurisdiction factor into the formula HUD uses to calculate the County's overall entitlement, the community development priorities in each jurisdiction, the quality of projects proposed, and how the needs of each jurisdiction compare to the entire urban county. To assist with this process, Hamilton County prepares a three-year funding plan for each jurisdiction that is synchronized to the period of their Cooperation Agreement.

County wide activities, including planning, program administration, critical and emergency housing repairs, emergency food and services, homeless services, homeless shelter operations, demolition, and foreclosure prevention counseling, typically account for 50% of the funded activities during a three-year funding plan.

3. In developing project activities, the primary obstacle in meeting under-served needs is availability of resources. CDBG funding from HUD for Hamilton County has remained level funded in spite of increased needs. Also, some needs are not met because of choices to fund one set of priority needs over another.

### Homeless Section

1. The Homeless Section of the 2010-2014 Consolidated Plan has been developed for both the City of Cincinnati and Hamilton County, Ohio as part of the Continuum of Care for the Homeless (CoC) program of the combined jurisdictions. The CoC process is managed jointly with the City of Cincinnati and Hamilton County.

2. The **Continuum of Care (CoC)** process is a *single, coordinated and inclusive process* for priority setting and decision making. Annually, funding is applied for from HUD and received directly by the applicant organizations. All organizations who provide housing and/or services for the homeless within the jurisdiction participate in the CoC process (40 plus agencies, 200 different programs) In addition, representatives of local

government, state government, community foundations, the Cincinnati Police Department, local business leaders, and other non-profit and neighborhood groups are also full participants in the process and in the assignment of relative priority for the purpose of the annual CoC application to HUD.

3. The lack of enough permanent supportive housing and the lack of funding to provide adequate services to move persons out of homelessness remain obstacles to meeting the needs of the underserved.

### **Managing the Process (91.200 (b))**

1. Lead Agency. Identify the lead agency or entity for overseeing the development of the plan and the major public and private agencies responsible for administering programs covered by the consolidated plan.
2. Identify the significant aspects of the process by which the plan was developed, and the agencies, groups, organizations, and others who participated in the process.
3. Describe the jurisdiction's consultations with housing, social service agencies, and other entities, including those focusing on services to children, elderly persons, persons with disabilities, persons with HIV/AIDS and their families, and homeless persons.

\*Note: HOPWA grantees must consult broadly to develop a metropolitan-wide strategy and other jurisdictions must assist in the preparation of the HOPWA submission.

3-5 Year Strategic Plan Managing the Process response:

The Hamilton County Board of Commissioners delegates responsibility for the preparation of the Consolidated Plan to the Department of Community Development. The Community Development Department is also charged with implementing the CDBG, HOME, and ESG programs, including the development of Contracts with outside agencies and the coordination of bids and contracts let by local units of government. Recently, with the award of the new funding for the Neighborhood Stabilization (NSP) Program, Homeless Prevention and Rapid Re-Housing (HPRP) Program, and CDBG-R (Stimulus) Program, the Department has taken on additional responsibility for administering these Programs and funding under the required regulations and accompanying time restrictions.

For this updated 5 year Plan, staff from the Hamilton County Planning and Zoning Department assisted in updating data and narratives used in this Plan. In the fall of 2008, the County formulated its 3 year Plan for CDBG, HOME, and ESG by soliciting applications from its 40 participating cities, villages, and townships, for projects needed for those communities. At the same time, the County's Community Development Advisory Committee (CDAC) met several times to review the needs and proposed activities for Countywide projects. These recommendations were then presented to, and eventually adopted by, the County Commissioners, for inclusion in the 2009 Action Plan and the existing Consolidated Plan. As a result of the 3 year planning process used by

the Department, the funding for years 2010 and 2011 have also been formulated, and will be used as a basis for determining final projects to be funded for the upcoming 2010 year.

In order to assess the needs that exist within Hamilton County, the Community Development Department consulted with various housing, homeless, social services, fair housing, elderly and disability agencies, as well as the Housing Authority, to both gather data and identify service gaps. In addition, the Community Development Advisory Committee met at least 2 times in 2009 to review current plans, and to advise on information for this new Plan.

The Community Development Department has been consulting with local and regional agencies and institutions regarding the ongoing needs of the subject population of this Plan. Specifically, regarding assisted housing, health services, social and fair housing services, and services for elderly, disabled, and those with HIV/AIDS, the Department has met with CMHA, the Affordable Housing Advocates (a division of Cincinnatians for Affordable Housing), the Hamilton County Health Department, People Working Cooperatively, Housing Opportunities Made Equal, FreeStore/FoodBank, Norwood Service League, the Norwood Health Department, Skyline Community Center, West College Hill Neighborhood Services, Caracole, the Center for Independent Living Options, Living Arrangements for the Developmentally Disabled, and Resident Home Corporation. Consultations regarding homeless and chronically homeless needs have included the Homeless to Homes Steering Committee and subcommittees, Homeless Clearinghouse, Mt. Airy Shelter, Hamilton County Job and Family Services, HMIS Advisory Committee, the Partnership Center, and Continuum of Care community meetings. Consultations with other local and regional organizations have included the Hamilton County Regional Planning Commission, the Hamilton County Development Company, the Hamilton County Department of Job and Family Services, the City of Cincinnati Departments of Community Development and Planning, and various community based housing groups.

### Homeless Section

1. The lead entity for overseeing the development of the homeless section of the Consolidated Plan is the Cincinnati/Hamilton County Continuum of Care for the Homeless, Inc. (CoC, Inc.). The CoC, Inc. is responsible for facilitation of the year-round planning, coordination and program implementation processes for homeless housing and services within the jurisdiction and facilitation of the annual grant application process to HUD and other collaborative grant initiatives. Hamilton County assumes primary responsibility for funding/contracting with the CoC, Inc. to provide planning, implementation and oversight.

2. For the first time in our region, a plan for ending homelessness used actual data of homeless persons in the community. In 2008, a Steering Committee and five subcommittees consisting of local experts in the homeless services field, local funders, community stakeholders including representatives of service providers, government agencies, NGO's, businesses, and faith-based organizations, convened to undertake a comprehensive planning approach for homeless individuals. The recommendations of the Steering Committee, or the *Homeless to Homes* plan, are incorporated into the Homeless sections of the 2010 – 2014 Consolidated Plan that pertain to homeless individuals.

The process included two “homeless think tanks”, focus groups designed exclusively to empower the homeless to provide input on what works/what needs to change in the community. One homeless think tank is conducted annually as a part of the general CoC process, but two additional think tanks were convened especially for homeless individuals for the purposes of the *Homeless to Homes* plan.

Separately, the Family Shelter Partnership Program (FSPP) undertook its own planning process, the results of which have likewise been incorporated into the Homeless Section of the 2010 – 2014 Consolidated Plan.

3. The Cincinnati/Hamilton County CoC uses an inclusive, community process to set local priorities and allocate HUD funding for new and renewal programming. This process has been inclusive of social service agencies serving the homeless or addressing related issues (e.g. poverty), Hamilton County Job and Family Services (Adult Protective Services, Child Protective Services, etc.), all local Family Shelters which serve homeless households with children, agencies which provide Permanent Supportive Housing (to those who are homeless and disabled), and local HIV services organizations (Stop AIDS, Caracole, etc.)

### **Citizen Participation (91.200 (b))**

1. Provide a summary of the citizen participation process.
2. Provide a summary of citizen comments or views on the plan.
3. Provide a summary of efforts made to broaden public participation in the development of the consolidated plan, including outreach to minorities and non-English speaking persons, as well as persons with disabilities.
4. Provide a written explanation of comments not accepted and the reasons why these comments were not accepted.

\*Please note that Citizen Comments and Responses may be included as additional files within the CPMP Tool.

3-5 Year Strategic Plan Citizen Participation response:

1. To solicit citizen input in the development of the Consolidated Plan, Hamilton County adopted a Citizen Participation Plan as outlined in Exhibit 1. That Plan provided for two tracks whereby local communities identified needs, priorities, and projects at a neighborhood level, and countywide needs were identified by a separate process managed by the Community Development Department. The County held a public meeting in August, 2009, in conjunction with the first Community Development Advisory Committee meeting for the 2010 – 2014 Consolidated Plan. The County also held two public hearings, the first on November 9, 2009 to discuss needs and priorities within Hamilton County. The second public hearing was held on December 2, 2009 by the Board of County Commissioners, during which a draft of the Consolidated Plan was presented with specific emphasis on the activities and projects to be funded during fiscal year 2010. As a result of those hearings, and other comments, a final draft of the

Consolidated Plan was completed on December 4, 2009 and made available for public comment between December 4, 2009 and January 4, 2010.

2. There were no comments received at the Public Hearing held on November 9, 2009, two comments received at the Public Hearing held on December 2, 2009, and one comment received during the 30 day comment period ending January 4, 2010. A summary of the comments received are appended to this plan, as exhibited in Appendix I.

3. All public notices related to the Action Plan process are printed in the Cincinnati Enquirer and the Cincinnati Herald, an African American owned newspaper, which has as its readership a large African-American population. Outreach to non-English speaking population was not specifically made. However, outreach to persons with disabilities was made and general announcements about the Consolidated Plan were made at meetings of the Affordable Housing Advocates, which include representatives of agencies that serve disabled populations, non-English speaking populations and minority populations. Announcements were also made through the Affordable Housing Advocates e-mail list-serve, which reaches populations unable to attend the meetings. Information was also posted on the Department's web site.

4. All comments received were accepted and incorporated into the final draft of this plan.

### **Institutional Structure (91.215 (i))**

1. Explain the institutional structure through which the jurisdiction will carry out its consolidated plan, including private industry, non-profit organizations, and public institutions.
2. Assess the strengths and gaps in the delivery system.
3. Assess the strengths and gaps in the delivery system for public housing, including a description of the organizational relationship between the jurisdiction and the public housing agency, including the appointing authority for the commissioners or board of housing agency, relationship regarding hiring, contracting and procurement; provision of services funded by the jurisdiction; review by the jurisdiction of proposed capital improvements as well as proposed development, demolition or disposition of public housing developments.

3-5 Year Strategic Plan Institutional Structure response:

1. Hamilton County works with a number of agencies, consisting of public institutions and non-profit organizations, in delivering community development and housing services to the residents of the County. The following paragraphs will discuss the several organizations that the County continues to work with and how they contribute to the implementation of the Consolidated Plan.

The County funds the Hamilton County Development Company (HCDC), a private non-profit corporation, for general county-wide economic development planning. HCDC in turn administers SBA Programs, State of Ohio Programs, EDA Programs, and

Enterprise Agreements throughout the County. HCDC has close working relationships with private industry, businesses, developers, and service agencies that facilitate coordination of economic development activities within Hamilton County. Because of the range of effective tools that the Hamilton County Development Company has available to it, Community Development Block Grant Funds are not usually invested in economic development activities within the County.

The County also contracts with People Working Cooperatively (PWC), a non-profit organization which provides critical home repairs, energy conservation, and maintenance services to low-income, elderly and disabled residents within the Greater Cincinnati region. By contracting with PWC, the County is able to provide both emergency and small repairs to very low income homeowners throughout Hamilton County. This partnership nicely complements the Water and Sewer Tap and Repairs Program administered directly by Hamilton County.

In addition to the non-profit mentioned above, the County also contracts with Homesteading and Urban Redevelopment Corporation (HURC), a non-profit organization which provides support to the County's 15 NSP communities in acquiring foreclosed properties through the National Community Stabilization Trust. This organization has also contracted with specific community's in the County to aid in implementing the NSP program within those areas.

Cincinnati Housing Partners, a non-profit housing and community development organization, is yet another agency the County partners with. By contracting with CHP, the County is able to provide affordable rehabbed and newly constructed homes to Hamilton County residents in Lockland, North College Hill, and St. Bernard.

The County also cooperates with the City of Cincinnati. The City and the County work together on regional issues that are common to both jurisdictions. These include homeless services through the Continuum of Care, the Analysis of Impediments study, and the NSP2 application that was submitted to HUD on July 17<sup>th</sup>, 2009.

Recently, in 2009, the County was able to apply for a grant from the Ohio EPA, for repair or replacement of Home Sewage Treatment Systems for low-income households. This grant was obtained through cooperation with The County's Health District, which notified the County of the opportunity, assisted in the application process, and assisted in the Program delivery.

Over the past 3 years, informational meetings have been held between the Jurisdictions in Southwest Ohio who administer the CDBG and HOME Programs. In addition, meetings have been held in Cincinnati by the Ohio Department of Development to receive input from the Southwest Ohio Economic Development Agencies. The Community Development Department continues to be interested in other regional meetings which strive to increase education and cooperation between entities. The County also contracts with a number of non-profit social service delivery agencies that are both experienced and well placed in meeting the needs of Hamilton County residents. These agencies include: Goodwill for housing placement for homeless veterans, the FreeStore for food and other materials for low income persons, and the Mt. Airy Center for providing shelter to homeless men. Hamilton County believes that these institutional relationships are an effective way to serve the needs of Hamilton County residents within the confines of available budget resources.

The County has had discussions with faith based organizations like Habitat for Humanity, but it does not currently fund any faith based group. The County remains open to that possibility, and does provide CD application packets to all organizations that request them.

The County also works closely with the Cincinnati Metropolitan Housing Authority in the delivery and coordination of assisted housing with the County. As the County runs a tenant based rental assistance program, modeled after the Housing Choice Voucher Program, using HOME funds, the agencies work with each other in coordinating policies such as setting a common payment standard, utility allowances, and rent reasonableness policies. The Housing Authority has also been the recipient of County HOME money in the past that has been used to develop scattered site publicly owned housing throughout participating jurisdictions of Hamilton County.

2. While there are unmet needs within Hamilton County, we have not identified any significant gaps in the delivery system provided by the institutions within Hamilton County. One improvement that could be made in the delivery of scattered site, tenant based assistance, is regular meetings and coordination of policies, where possible, of all providers of tenant based assistance, including the Housing Authority, the City and County, Excel Development, and the various agencies that administer the Shelter Plus Care Certificates. A common set of policies, where possible, would provide less confusion for private Landlords who participate in these programs.

A strength in the delivery systems are the regular meetings of the Affordable Housing Advocates (AHA), which bring together various providers of housing and services, for monthly updates and information. The annual meeting of AHA also provides a timely educational seminar to the community.

3. The Housing Authority under State law is a separately chartered entity responsible to a Board of Directors, not to any political subdivision. The Board of Hamilton County Commissioners appoint one of the five members to the Housing Authority Board. The County works with the Housing Authority in joint efforts regarding applications for funding, and the County signs off on Consistency with the Consolidated Plan documents. The County is also responsible for overseeing and signing off on the Environmental Review for County-located projects the Housing Authority undertakes throughout the year. In these regards, the County is aware of the projects that go forward. The County is not involved in any aspects of hiring, contracting, or procurement with the Housing Authority, unless a specific project is funded by the County.

### Homeless Section

1. The CoC planning process is a coordinated, collaborative effort by the City of Cincinnati, Hamilton County, the Greater Cincinnati Coalition for the Homeless, and the CoC Working Groups under the umbrella of the 501(c)3 –Cincinnati/Hamilton County Continuum of Care for the Homeless, Inc. (CoC, Inc.). The CoC, Inc. is the lead agency registered with HUD for the CoC annual grant application process and is the entity responsible for the submission of Exhibit 1. Over the course of the Consolidated Plan period this entity will also assume the responsibility for financial management of the grants pursuant to changes regulated by HUD.

2. A clear strength of the system is its inclusive nature. The **Continuum of Care (CoC)** process is a *single, coordinated and inclusive process* for priority setting and decision making. All organizations who provide housing and/or services for the homeless within the jurisdiction participate in the CoC process (40 plus agencies, 200 different programs) In addition, representatives of local government, state government, community foundations, the Cincinnati Police Department, local business leaders, and other non-profit and neighborhood groups are also full participants in the process and in the assignment of relative priority for the purpose of the annual CoC application to HUD.

Between October 2008 and March 2009, the CoC developed a new comprehensive plan for how to better serve homeless individuals in Cincinnati/Hamilton County. The Homeless to Homes Plan summarizes recommendations made by local and national experts in the homeless services field, local funders, and community stakeholders including representatives of service providers, government agencies, NGOs, businesses, and faith-based organizations. The process for developing the plan constituted the first time in our region that a plan for ending homelessness used actual data of homeless persons in the community; real numbers, real ages, and real special needs became a foundation for the work. Because this plan was created using a “blank slate” problem solving method, it reflects what the steering committee and working subcommittees believe are the best of what could and should happen for homeless single individuals in the community.

The plan represents a significant shift in the ways our community responds to those who are homeless. The Homeless to Homes report responds to the need for a new, comprehensive plan that changes how our community provides homeless housing and services, how homeless individuals are expected to respond, and how public and private funding systems can work cooperatively and with a clear emphasis to support the initiatives of this plan.

The prioritization of the Homeless to Homes recommendation is not yet complete, but the following recommendations are likely to be the first implementation steps, as they directly address gaps in the current system:

- Increase the number of Transitional Housing beds.
- Increase the number of Permanent Supportive Housing units.
- Development of a Central Access System to be used by homeless households to access emergency shelter, housing, and services.
- Decreasing the ratio of case managers to clients so as to provide a higher level of services.
- Restructure the current number of emergency shelter beds so as to better meet the needs of emergency shelter residents.
- Improve access to services through increased collaboration and coordination between CoC homeless services and the Mental Health and Recovery Services Board.
- Divert homeless people away from incarceration and toward transitional housing.

## Monitoring (91.230)

1. Describe the standards and procedures the jurisdiction will use to monitor its housing and community development projects and ensure long-term compliance with program requirements and comprehensive planning requirements.

3-5 Year Strategic Plan Monitoring response:

The Hamilton County Department of Community Development has all monitoring responsibilities for the Community Development Block Grant, HOME, ESG, NSP, and HPRP Programs. Prior to issuing payment for any good or service funded under the various programs, the County verifies that the good or service has been provided and that the various program requirements have been met. The County assumes total responsibility for most federal requirements including environmental reviews, labor standards, bidding and contract requirements. In addition, the Hamilton County staff directly monitors subrecipients on an annual basis to assure compliance with federal regulations. The County also collects information on the utilization of minority businesses in conformance with the minority business outreach requirements that the County has established.

More detailed information specifically regarding CDBG projects is as follows:

Monitoring of projects in the cities, townships, and villages who participate in the CDBG program will vary depending on the type of project.

#### Infrastructure projects

The Labor Standards Representative (LSR) will consult with the community representative before the project is bid, to explain the bidding process, Davis Bacon requirements, etc. A Bid packet will be sent out when the community is ready to bid out the project. The bid packet contains all the information the community needs to adhere to Federal and CDBG requirements.

When the project is ready to be awarded, the LSR will attend the Pre-Construction meeting, to advise all parties involved of the Federal requirements, and to advise them of our involvement during the project.

During construction, payrolls will be monitored by the LSR. Occasionally, the LSR may do an on-site interview of workers to monitor the Davis Bacon requirements. The LSR, or other staff of the Department, may visit the construction site to monitor progress of the work.

Bills may be submitted during the construction work, and will be paid by the Department after review by the LSR and the Director or Program Manager. Final bills will only be paid if all payrolls and other paperwork have been submitted properly.

A final visit will be made to the site of the work after completion, some time during that next year. A picture will be taken to include in the project file. In some cases, if a site visit is not possible, the picture can be received from a Community representative.

#### Acquisition projects

The Labor Standards Representative (LSR) will consult with the community representative before the project is bid, to explain the bidding process, Davis Bacon requirements, etc. A Bid packet will be sent out when the community is ready to bid out the project. The bid packet contains all the information the community needs to adhere to Federal and CDBG requirements.

A representative of the Department will stay in touch with the Community representative to monitor progress in bidding and awarding of the contract for purchase. Once the purchase has been made, the Community will send the certification and request for payment to the Department, along with verifying information, to request payment be made to either the Seller or reimbursement to the Community.

A representative of the Department may request an appointment with the Community to view the property acquired, and take a picture for the project file.

### Public Service Projects

Consultation with the Community representative and the Agency representative will be made before the contract is awarded, to discuss the scope of service and budget for the contract. The contract may be executed between the Community and the Agency, between HCCD and the Agency, or with all 3 parties, depending on the relationship.

Once the project starts, ongoing desk monitoring of the project will occur through approval of bills, telephone conversations, review of monthly or quarterly reports from the Agency, and occasional meetings. Projects that have been ongoing for several years and have no findings will be monitored in the field approximately every 2 years. Newer projects or projects with performance issues will be monitored in the field no less than every year.

### Rehab/repair projects

Once the project starts, ongoing desk monitoring of the project will occur through approval of bills, telephone conversations, review of reports from the Community, and occasional meetings. Projects that have been ongoing for several years and have no findings will be monitored in the field approximately every 2 years. Newer projects or projects with performance issues will be monitored in the field no less than every year.

HOME projects follow monitoring guidelines set up to adhere to the regulations of the HOME Program. That ensures that projects are reviewed yearly for occupied status and income eligibility, and every 1, 2, or 3 years for HQS acceptability.

NSP and CDBG-R projects are monitored as identified in the procedures for CDBG projects, except that time constraints on these programs require more frequent and additional monitoring and oversight.

## **Priority Needs Analysis and Strategies (91.215 (a))**

1. Describe the basis for assigning the priority given to each category of priority needs.
2. Identify any obstacles to meeting underserved needs.

3-5 Year Strategic Plan Priority Needs Analysis and Strategies response:

The basis for assigning priorities to needs is discussed under the CDBG, HOME and ESG narratives. In general, needs of low income households are higher than those of moderate income households. In addition, those needs that are best addressed by Federal Programs because of a lack of local available resources are rated higher than needs that can be met with local, state or other resources.

As is the case in all communities, local needs are much greater than available resources. Therefore the greatest obstacle to meeting unmet needs and unserved populations is fiscal.

### **Lead-based Paint (91.215 (g))**

1. Estimate the number of housing units that contain lead-based paint hazards, as defined in section 1004 of the Residential Lead-Based Paint Hazard Reduction Act of 1992, and are occupied by extremely low-income, low-income, and moderate-income families.
2. Outline actions proposed or being taken to evaluate and reduce lead-based paint hazards and describe how lead based paint hazards will be integrated into housing policies and programs, and how the plan for the reduction of lead-based hazards is related to the extent of lead poisoning and hazards.

3-5 Year Strategic Plan Lead-based Paint response:

1. Hamilton County estimated the number of housing units that contain lead-based paint using GIS software, Census income data, and local property information. The attached map illustrates lower income areas outside the City of Cincinnati. These include Census block groups with moderate income families (50%-80% MFI), low-income families (30%-50% MFI), and extremely low-income families (less than 30% MFI). Median family income in Hamilton County was \$53,449 according to the 2000 Census.

This information was cross-referenced with the location of residences built prior to 1979. The available structure age data does not account for whether a building is a single-family or multiple-family residence. Using this method, Hamilton County estimates that 43,800 residential structures in lower-income areas outside of Cincinnati could have lead-based paint hazards.

2. A large percentage of the County's housing stock was built before 1973 and lead-based paint is a widespread problem throughout Cincinnati and older suburban communities. Hamilton County follows all applicable federal and state regulations for lead-based paint testing and mitigation. All housing renovation projects that use any Federal funds are inspected for deteriorated paint, and the appropriate entity or certified Inspector inspects and approves projects prior to occupancy. The HOME funded Tenant Based Assistance Program follows the applicable regulations for units occupied by children under six years of age.

Programs directly administered by Hamilton County that are most likely to involve lead-based paint include the Neighborhood Stabilization Program, and HOME funded programs such as the Housing Rehabilitation undertaken by the CHDO funds, and the Tenant Based Rental Assistance Program.

The General Health District conducts investigations into lead poisoning of children, lead risk assessments for property owners, and free lead testing. They also provide HEPA vacuum rental and other information for contractors and others doing home repair work. In 2009, free lead trainings were offered by the University of Cincinnati, through a grant they obtained. These trainings were offered to contractors to become certified to be Lead Assessors, or to become certified to oversee Lead Paint Abatement activities.

## HOUSING

### Housing Needs (91.205)

\*Please also refer to the Housing Needs Table in the Needs.xls workbook

1. Describe the estimated housing needs projected for the next five year period for the following categories of persons: extremely low-income, low-income, moderate-income, and middle-income families, renters and owners, elderly persons, persons with disabilities, including persons with HIV/AIDS and their families, single persons, large families, public housing residents, victims of domestic violence, families on the public housing and section 8 tenant-based waiting list, and discuss specific housing problems, including: cost-burden, severe cost-burden, substandard housing, and overcrowding (especially large families).
2. To the extent that any racial or ethnic group has a disproportionately greater need for any income category in comparison to the needs of that category as a whole, the jurisdiction must complete an assessment of that specific need. For this purpose, disproportionately greater need exists when the percentage of persons in a category of need who are members of a particular racial or ethnic group is at least ten percentage points higher than the percentage of persons in the category as a whole.

3-5 Year Strategic Plan Housing Needs response:

Based on CHAS Data derived from the 2000 Census, in all income brackets the primary problem experienced is cost of housing rather than availability or design of units. Larger families experience overcrowding problems, and people with disabilities have accessibility problems in some housing units. Disabled persons and people suffering from AIDS can experience higher need from lack of income if their disability does not allow them to work.

#### *Extremely Low Income Bracket (less than 30% MFI)*

More than three-quarters of the people in this income bracket have housing needs problems. Among renters, the most need is in the small family, elderly, and other household categories. Among homeowners, the most need is in the elderly category.

*Low-Income Bracket (30-50% MFI)*

Cost of housing is the predominant housing need in this income bracket. Among renters, the most need is in the small family, other family, and elderly categories. Among homeowners, the most need is in the elderly and small family categories.

*Moderate Income Bracket (50-80% MFI)*

Among renters in this income bracket, the most need is in the small family, other family, and elderly categories. Among homeowners, all family categories have needs.

Portions of the black and Hispanic population have higher housing needs compared with the general population because of their lower income status, often due to lower paying jobs held by these populations.

The Non-Homeless Special Needs Table included with this Plan identifies 45,265 Special Need Households that also have identified Housing Needs. Public Housing Residents are identified with a low priority with the assumption that they already reside in decent, safe and sanitary housing. Hamilton County will utilize available Federal Housing money to meet a portion of the housing needs of these subpopulations. Specifically, Hamilton County has and will continue to fund a Tenant Based Assistance Program utilizing HOME Funds that is targeted specifically to Special Need populations, including some specifically devoted to homeless. In this effort, Hamilton County partners with Special Need Agencies who assist clients with TBA applications for housing assistance and provide continued supportive services to clients assisted with the TBA Grants.

## **Priority Housing Needs (91.215 (b))**

1. Identify the priority housing needs and activities in accordance with the categories specified in the Housing Needs Table (formerly Table 2A). These categories correspond with special tabulations of U.S. census data provided by HUD for the preparation of the Consolidated Plan.
2. Provide an analysis of how the characteristics of the housing market and the severity of housing problems and needs of each category of residents provided the basis for determining the relative priority of each priority housing need category.

Note: Family and income types may be grouped in the case of closely related categories of residents where the analysis would apply to more than one family or income type.

3. Describe the basis for assigning the priority given to each category of priority needs.
4. Identify any obstacles to meeting underserved needs.

3-5 Year Strategic Plan Priority Housing Needs response:

1. Based on CHAS Data derived from the 2000 Census, Hamilton County's housing market generally has enough units to supply both owner and tenant demand. The cost of these units is the primary concern. Owners and renters in the elderly, small family, and

other family categories have higher housing needs than other family types. Based on this analysis, additional federal assistance from the Housing Choice Voucher Program is needed within Hamilton County. Other programs offering scattered site tenant based housing assistance, or other project-based subsidized housing units are also needed to address the critical problem of affordability. Anecdotally, we know that there is a need for more senior rental housing, and some new housing is needed to replace blighted and vacant rental housing.

2. In assigning Housing Priority Needs, Hamilton County considered the absolute number of people requiring assistance in each of the income brackets, family type categories, tenure types, and the severity of need. From this analysis, families at or below 50% of area median income are considered high-priority need and those above this income level are a lower-priority need.

3. When the 2000 census became available for the 2005 – 2009 Consolidated Plan, the Housing Advisory Board assigned priority needs based on an analysis of the census data. Generally, the higher priorities were assigned to those categories which had larger numbers, which had a need for Community Development funding, were eligible for these funds based on regulations related to CDBG and HOME, and had no other obvious source of primary funds. As the census data has not yet been updated, the priority needs were not updated for this Strategic Plan. This process will be undertaken in earnest once the 2010 census data becomes available.

4. The primary obstacle in meeting under-served needs is availability of resources. CDBG funding from HUD for Hamilton County has remained level funded in spite of increased needs. Also, some needs are not met because of choices to fund one set of priority needs over another.

## **Housing Market Analysis (91.210)**

\*Please also refer to the Housing Market Analysis Table in the Needs.xls workbook

1. Based on information available to the jurisdiction, describe the significant characteristics of the housing market in terms of supply, demand, condition, and the cost of housing; the housing stock available to serve persons with disabilities; and to serve persons with HIV/AIDS and their families. Data on the housing market should include, to the extent information is available, an estimate of the number of vacant or abandoned buildings and whether units in these buildings are suitable for rehabilitation.
2. Describe the number and targeting (income level and type of household served) of units currently assisted by local, state, or federally funded programs, and an assessment of whether any such units are expected to be lost from the assisted housing inventory for any reason, (i.e. expiration of Section 8 contracts).
3. Indicate how the characteristics of the housing market will influence the use of funds made available for rental assistance, production of new units, rehabilitation of old units, or acquisition of existing units. Please note, the goal of affordable housing is not met by beds in nursing homes.

3-5 Year Strategic Plan Housing Market Analysis responses:

1. Hamilton County's housing market was stable during the first half of the 21<sup>st</sup> century with steady average and median sale price increases of 3 – 4.5% each year and a healthy inventory of homes on the market. With the downturn of the economy in 2006 and the following surge of foreclosures, Hamilton County's average and median home prices have decreased each year, with the largest decrease of 8.2% seen in 2008. This decrease in home values from \$185,662 in 2005 to \$155,357 in 2009 and the increase in foreclosures has led to a significant rise in the number of vacant and abandoned units. The supply of homes on the market far exceed the demand of buyers and now we are met with an overabundance of housing units, many in need of rehabilitation. The estimated 2008 population of 851,494 for Hamilton County is a 0.7% increase from the 2000 population of 845,302; so essentially, little growth is happening and definitely not enough to keep up with the supply of housing.

The cost of housing in Cincinnati and Hamilton County continues to be very affordable compared to the national average. According to the ACCRA Cost of Living Survey, the United States average for the cost of housing is 100.0, while the 2008 average for the Greater Cincinnati Region is 84.7. The rental market is also very affordable with a median rent of \$600 and an average rent of \$550. These fair market rents are at the same level as the high HOME rent and the low HOME rent. Regardless of these statistics, there is still a critical need for more affordable housing in Hamilton County.

The condition of the housing stock in Hamilton County is hard to assess due to the lack of adequate data on the number of "abandoned units". While the 2000 Census provides data on the number of vacant units, it does not report on the number of vacant units that are also abandoned. In addition, few of the County's forty participating units of government track abandoned units, or could assess if they are suitable for rehabilitation. One measure that does provide insight into the issue of abandoned homes is the foreclosure crisis occurring across the Country. Hamilton County has seen a steady increase of foreclosure filings and Sheriff's Sale listings since 2004. According to the Working in Neighborhoods report, "The Crisis Next Door," the number of foreclosure filings was 47% higher in 2008 than in 2004, and the number of properties listed for Sheriff's Sale has increased 84% over the same period. The cumulative effect on homeownership over the last five years is considerable: 14,304 properties were lost to foreclosure between 2004 and 2008 in Hamilton County. This rise in foreclosures inevitably has led to a visible rise in the number of vacant and abandoned units.

In Hamilton County, persons with HIV/AIDS and persons with disabilities are supported by the social service network, including agencies that provide housing. Many of these agencies provide services matching people with special housing needs to available units in the area. Many housing programs for special needs populations use existing housing for tenant based subsidies. In some cases, where physical accessibility is needed, the housing stock needs to be retrofitted.

2. The Federal Government is responsible for funding a majority of assisted housing in Hamilton County. Programs and units funded through the federal government are as follows: Section 8 Housing Choice Voucher Program, which includes tenant-based rental assistance and a homeownership program; Section 8 Project Based Vouchers; privately owned Section 8 Project Based subsidies, HOPE VI, HOME Tenant Based Rental Assistance for persons with disabilities; Shelter Plus Care Certificates, and the Supportive Housing Program. As of 2008, the number of public housing units within the

county is 485; the number of project-based vouchers is 1460 and the number of tenant-based vouchers is 3508.

The Section 8 Housing Choice Voucher and Project Based Voucher programs are targeted to persons who have an annual income that is 50% or less of the area median income. Project-based vouchers are being used to expand assisted housing opportunities into more low poverty areas and to address the needs of special-needs populations. The HOME Tenant Based Rental Assistance is targeted to low-income persons with disabilities. The Shelter Plus Care program provides rental assistance for hard-to-serve homeless persons with disabilities.

Of the federal programs, Hamilton County has a limited number of family and elderly units assisted under Project Based Programs. We expect owners of these properties with few exceptions, to maintain the Project Based Status. The few exceptions that may convert to market rate or be lost to the inventory due to fiscal problems will not negatively impact the overall assisted housing market. Historically, units that have been lost through conversion or distress have been vouchered out with those tenants readily absorbed into the market place.

Of greatest concern within Hamilton County is the overall funding level for the Housing Choice Voucher Program. It is expected that tight federal budgets for the foreseeable future will continue this trend. While the rate of attrition will guarantee that no one currently receiving assistance loses that assistance, it is likely that the overall number of people assisted will decrease and family contributions to rental costs will increase in the future.

The State of Ohio provides funding for one program within Hamilton County. The Ohio Department of Mental Health provides capital funds and rental assistance funds to Excel Development Company to operate some units, and in other cases provide tenant based subsidies to private owners for over 500 scattered site apartments throughout the County. Persons active in the Hamilton County Mental Health and Recovery Services Board mental health system are eligible to receive assistance after it is determined that the applicant can maintain independent living. This program works very similar to the Section 8 Housing Choice Voucher Program.

Local organizations that are dedicated to special needs populations, including mental health and MRDD, provide limited housing assistance to their clientele. These include Living Arrangements for the Developmentally Disabled (LADD) and Resident Home Corporation (RHC).

3. Because Hamilton County has an adequate supply of both rental and owner occupied units, the County will focus its available resources in making those units affordable to low income County residents. In addition, a limited number of housing repair and rehab dollars will be devoted to maintaining the quality of the current housing stock. Due to the increase in vacant and abandoned housing units as a result of the foreclosure problem, Hamilton County has budgeted over \$700,000 in Neighborhood Stabilization Program funds for demolition related activities and over \$1.5 million for rehabilitation activities. Hamilton County is budgeting for some gap financing assistance for the production of new rental units for elderly and/or disabled populations, as well as to support LIHTC projects, and other federally assisted housing projects, as housing for these populations has not kept up with demand, and/or is still not affordable to many low-moderate income

residents. The County will also provide some funding for new homeownership units using HOME CHDO funds.

### **Specific Housing Objectives (91.215 (b))**

1. Describe the priorities and specific objectives the jurisdiction hopes to achieve over a specified time period.
2. Describe how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan.

3-5 Year Strategic Plan Specific Housing Objectives response:

As previously described in the Housing Market Analysis, Hamilton County has an adequate supply of housing to meet the needs of its residents, other than accessible housing for elderly and disabled, but lower and moderate income residents of the County have affordability issues in accessing housing. During the next 5 years, Hamilton County will focus its resources on bridging the affordability gap. With very limited State and Local resources, Federal programs will be the primary vehicle for meeting identified needs during the 5 years covered by this plan. Public Housing and Voucher programs will cover the largest part of the need, with Hamilton County using a limited number of Community Development Block Grant dollars to support emergency and critical housing repairs and a majority of its HOME dollars to fund a Tenant Based Assistance Program that assists persons with disabilities and formerly homeless families transitioning to permanent housing. HOME funds may also provide gap financing for new rental units for elderly and/or disabled populations or for replacement rental housing for families, or in support of other federally funded assisted housing projects. The County will also provide some funding for new homeownership units using HOME CHDO funds. Finally, the County will set aside some HOME funds to fund an accessibility Program for low-income renters.

### **Needs of Public Housing (91.210 (b))**

In cooperation with the public housing agency or agencies located within its boundaries, describe the needs of public housing, including the number of public housing units in the jurisdiction, the physical condition of such units, the restoration and revitalization needs of public housing projects within the jurisdiction, and other factors, including the number of families on public housing and tenant-based waiting lists and results from the Section 504 needs assessment of public housing projects located within its boundaries (i.e. assessment of needs of tenants and applicants on waiting list for accessible units as required by 24 CFR 8.25). The public housing agency and jurisdiction can use the optional Priority Public Housing Needs Table (formerly Table 4) of the Consolidated Plan to identify priority public housing needs to assist in this process.

3-5 Year Strategic Plan Needs of Public Housing response:

The following information is from CMHA's *Annual Plan for the Fiscal Year 2009*. The Cincinnati Metropolitan Housing Authority (CMHA) has an inventory of 5,293 public housing units. CMHA has 10,500 Housing Choice Vouchers (HCV). There are 1,192

families on the public housing waiting list. The majority of these are extremely low income (less than 30% AMI) (82.54%) African American (85.57%) families with children (60.82%). There are 9,214 families on the Section 8 tenant-based assistance waiting list. Most of these are also extremely low income (76.56%) African American (94.83%) families with children (73.58%). The waiting lists maintained by CMHA, especially the waiting list for HCV, most of which is scattered site housing, demonstrates the immense need for affordable housing, especially for those at the lowest income levels.

## **Public Housing Strategy (91.210)**

1. Describe the public housing agency's strategy to serve the needs of extremely low-income, low-income, and moderate-income families residing in the jurisdiction served by the public housing agency (including families on the public housing and section 8 tenant-based waiting list), the public housing agency's strategy for addressing the revitalization and restoration needs of public housing projects within the jurisdiction and improving the management and operation of such public housing, and the public housing agency's strategy for improving the living environment of extremely low-income, low-income, and moderate families residing in public housing.
2. Describe the manner in which the plan of the jurisdiction will help address the needs of public housing and activities it will undertake to encourage public housing residents to become more involved in management and participate in homeownership. (NAHA Sec. 105 (b)(11) and (91.215 (k))
3. If the public housing agency is designated as "troubled" by HUD or otherwise is performing poorly, the jurisdiction shall describe the manner in which it will provide financial or other assistance in improving its operations to remove such designation. (NAHA Sec. 105 (g))

3-5 Year Strategic Plan Public Housing Strategy response:

The following goals and objectives were identified by CMHA in the *Annual Plan for the Fiscal Year 2009*:

- Improve Public Housing Management: (PHAS score) Continue to Improve PHAS score and return to High Performer Status Improve Voucher management: (SEMAP score)
- Continue to Improve SEMAP score and maintain High Performer Status
- Increase customer satisfaction: Ongoing
- Concentrate on efforts to improve specific management functions:
  - Train staff concerning SEMAP, PHAS, and other HUD regulations.
  - Review existing policies and procedures to incorporate all necessary requirements and if warranted, develop written recommendations for policy revisions to the Board of Commissioners.
  - Increase employee training to improve working knowledge of systems and processes.
  - Develop working standards and processes that are consistent in each office.
  - Procure and implement a document imaging program throughout the agency.

- Procure and implement the use of handheld inspection devices for the Housing Management Division.
- Procure and implement the use of electronic handheld work order devices for the 10 percent of the maintenance staff.
- Review current delivery of services to measure their effectiveness.
- Reduce the amount of time it takes to respond and make routine repairs requested by customers.
- Achieve 98% occupancy rate in elderly communities.
- Promote resident and resident organization activities in the areas of resident organization, board training, leadership training, fire safety, child safety, and health.
- CMHA continues to provide training to staff and Board Commissioners relative to any new or revised policy or procedure mandated by HUD.
- Submit an Elderly Designation Plan for Regal Manor and Baldwin Grove.
- Renovate or modernize public housing units:
  - Implement the Capital Fund Program schedule.
  - CMHA will perform routine maintenance to assure that units are within UPCS compliance.
  - CMHA will implement a sound preventive maintenance program to help extend the useful life of all systems and equipment.
  - Design a data base using Microsoft Access for the Modernization Department that will track projects, create product life expectancy tables, queries, forms, and reports to aid the agency in efficient use of Capital Funds.
  - Complete 100% of scheduled fiscal year renovation projects on budget and on schedule.
  - Identify staffing levels needed to address maintenance issues and PHAS Physical.
  - Management Scores through predictive and preventive preservation strategies.
  - Complete an up to date Physical Needs Assessment of the agencies properties to help identify widespread/ systemic deficiencies

Hamilton County is supportive of the plans of the Housing Authority, and will try to work with the agency on as many initiatives as possible.

### **Barriers to Affordable Housing (91.210 (e) and 91.215 (f))**

1. Explain whether the cost of housing or the incentives to develop, maintain, or improve affordable housing are affected by public policies, particularly those of the local jurisdiction. Such policies include tax policy affecting land and other property, land use controls, zoning ordinances, building codes, fees and charges, growth limits, and policies that affect the return on residential investment.
2. Describe the strategy to remove or ameliorate negative effects of public policies that serve as barriers to affordable housing, except that, if a State requires a unit of general local government to submit a regulatory barrier assessment that is substantially equivalent to the information required under this part, as determined by HUD, the unit of general local government may submit that

assessment to HUD and it shall be considered to have complied with this requirement.

### 3-5 Year Strategic Plan Barriers to Affordable Housing response:

Because Hamilton County primarily has used existing housing stock for affordable housing needs, local policies such as land use controls, zoning, or growth limits has not affected assisted housing development in the past. This applies to both owner occupied and rental housing. Public housing developed in Hamilton County in recent years has consisted of purchase of existing units to add to the public housing inventory

One difficulty in development of new construction of affordable housing has been in requests for zoning amendments. For these projects, as it is new development, zoning or land use restrictions can create barriers to affordable housing. One recent example is the land use change requested by a non-profit developer hoping to site a HUD Section 202 building in Springfield Township. The change was not approved by the Township Trustees, and consequently the project must be sited elsewhere. It is hoped that another site will be secured so that the project will go forward.

There are various other public policies related to zoning and land use that create barriers to affordable housing. Some communities in Hamilton County having zoning ordinances that do not allow for multi-family housing or mixed-use districts. Affordable housing units are more likely to be built in multi-family and mixed-used developments. In addition, zoning ordinances may prescribe minimum lot sizes and setbacks which necessitate the need for larger lots. Larger lots drive up the cost of housing, making it less affordable, and essentially eliminates high-density housing options.

As much of the affordable housing developed using Community Development funds has been redevelopment or use of existing properties, there hasn't been a strategy to focus on the barriers identified above. Other barriers, not identified as caused by public policies, but caused more by public perception, is being addressed, and can be seen in more detail in the Fair Housing Action Plan.

## HOMELESS

### Homeless Needs (91.205 (b) and 91.215 (c))

\*Please also refer to the Homeless Needs Table in the Needs.xls workbook

Homeless Needs— The jurisdiction must provide a concise summary of the nature and extent of homelessness in the jurisdiction, (including rural homelessness and chronic homelessness where applicable), addressing separately the need for facilities and services for homeless persons and homeless families with children, both sheltered and unsheltered, and homeless subpopulations, in accordance with Table 1A. The summary must include the characteristics and needs of low-income individuals and children, (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered. In addition, to the extent information is available, the plan must include a description of the nature and extent of homelessness by racial and ethnic group. A quantitative analysis is not required. If a jurisdiction provides estimates of the at-risk

population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates.

3-5 Year Strategic Plan Homeless Needs response:

The Homeless Section of the Consolidated Plan has been developed for both the City of Cincinnati and Hamilton County, Ohio as part of the Continuum of Care for the Homeless (CoC) program of the combined jurisdictions. Pursuant to HUD’s guidance and the communities method of conducting planning and facilitating processes for homeless, the jurisdictions have standardized elements contained in the Consolidated Plan and the Continuum of Care Plan housing and services, linking the two documents and plans, and thereby reducing duplication of effort and mainstreaming resources.

The CoC maintains the Homeless Management Information System (HMIS), utilizing VESTA® software as the data base for all homeless housing and service delivery information within the jurisdiction. The Cincinnati/Hamilton County HMIS program has 100% community participation – meaning data on all persons within all street outreach programs, all emergency shelter beds, all transitional housing beds, all permanent supportive housing beds and many specialized services (funded by HUD and privately funded) are included in HMIS/VESTA. Thus statistical information reported on homelessness within the jurisdiction generated from HMIS/VESTA has a high degree of accuracy.

Needs data was generated from HMIS/VESTA for the calendar year 2008. During that year 8,372 persons became homeless in Cincinnati and were serviced within a CoC program. Regardless of how many times a person was served by a program or how many programs that person entered they were only counted as one individual-generating an unduplicated participation count.

- All recorded persons in street outreach– 1,162
- All recorded persons who utilized an emergency shelter bed – 6,055
- All recorded persons who utilized a transitional housing bed – 1,117
- All recorded persons who utilized a permanent supportive housing bed - 1,653
- Unduplicated count of persons who utilized any one or more of the following: street outreach, emergency shelter and/or transitional housing - 7,221
- Unduplicated count of persons who utilized any one or more of the following: street outreach emergency shelter, transitional housing and permanent supportive housing - 8,372

Of the 7,221 persons served in outreach, shelter or transitional housing (those who are counted in the annual homeless count for HUD) their **household types** break out as follows:

Individual adult male	3,312	45.9%
Individual adult female	1,113	15.4%
Unaccompanied youth	693	9.6%
Adults in families with child(ren)	737	10.2%
Children in families with adults	1,366	18.9%

### Racial demographics

Federal standards emphasize self-reporting or self-identification as the preferred method of collecting data on race and ethnicity. Clients may select as many races as are applicable. Of the 7,221 homeless persons race was identified as follows:

Black/African American	4,997
White	1,944
White, Black/African American	113
Black/African American, American Indian/Alaskan Native	43
American Indian/Alaskan Native	34
Asian	15
Native Hawaiian/Pacific Islander	14
White, American Indian/Alaskan Native	14
Other multiracial	15
Unknown/client refused	32

Additionally 101 of the person's identified above identified a Hispanic/Latino ethnicity. Of those, only 21 persons were identified as non-English speaking.

### Families with Children (2,103 homeless children and adults in families):

- The number of families was 690;
- Single female heads of household: 86%;
- Single male heads of household: 4%;
- Families with more than one adult: 10%;
- Of the adults in homeless families – 33% were victims of domestic violence.

### Chronically Homeless:

By federal definition a chronically homeless person is an unaccompanied individual with a disabling condition who has either been continuously homeless for more than one year or who has had at least four episodes of homelessness in the past three years.

- Of those persons served in street outreach and/or emergency shelter programs, 1,685 met the chronic homeless definition.
- These chronically homeless persons (who make up 34% of all sheltered adults) accounted for almost one half of the bed-nights utilized in emergency shelters in 2008
- The special needs/disabling conditions of those chronically homeless individuals were:

Alcohol abuse	1,145	68%
Drug abuse	1,133	67%
Mental illness	961	57%
HIV	60	3%
Physical/sensory disability	534	31%
Developmental/cognitive disability	191	11%

- Many chronically homeless persons have more than one special need/disabling condition. A full 45% are dually diagnosed with both substance abuse (drug and/or alcohol) and mental illness.

Within Hamilton County, according to 2008 US Census Bureau figures, 13% of the county lives in poverty and within the City of Cincinnati itself that number rises to 21.9% of the population.

Further poverty statistics indicate:

Children below poverty level:

Cincinnati, Ohio:  36.0%

State:  18.1%

Poverty rate among high school graduates not in families:

Cincinnati:  20.8%

Ohio:  17.1%

Poverty rate among people who did not graduate high school not in families:

Cincinnati:  46.4%

Ohio:  37.0%

Poverty rate among disabled males:

Cincinnati:  24.5%

Ohio:  13.8%

Disability rate in this city among poor males (it is 20.0% among residents who are not classified as poor):

Cincinnati:  28.7%

Ohio:  13.8%

Poverty rate among disabled females:

Cincinnati:  31.0%

Ohio:  18.7%

Disability rate in this city among poor females (it is 20.5% among residents who are not classified as poor):

Cincinnati:  31.1%

Ohio:  18.7%

Renting rate in this city among poor and not poor residents:

Residents below poverty level:  88.4%

Residents above poverty level:  54.0%

Each of these demographics, without regard to the current economic conditions, are indicators of households “at-risk of homelessness” .

The 2009 Point-in-Time Count, conducted on January 29, 2009 identifies the following persons as homeless on that night:

<b>POINT-IN-TIME January 29, 2009</b>	<b>Sheltered</b>		<b>Unsheltered</b>	<b>Total</b>
	<b>Shelter</b>	<b>Transitional Housing</b>		
<b>Part 1: Homeless Population</b>				
1. Number of Families with Children	55	59	0	114
1a. Total Number of Persons in Families with Children	169	190	0	359
2. Number of Households without Children	517	221	35	769
2a. Number of Persons in Households without Children	517	221	35	769
<b>Total Persons (1a + 2a)</b>	686	411	35	1,132
<b>Part 2: Homeless Subpopulations</b>	<b>Sheltered</b>		<b>Unsheltered</b>	<b>Total</b>
a. Chronically Homeless		262	6	268
b. Severely Mentally Ill		234		
c. Chronic Substance Abuse		410		
d. Veterans		139		
e. Persons with HIV/AIDS		19		
f. Victims of Domestic Viol.		201		
g. Unaccompanied Youth (under age 18)		6		
Note: In the 48 hours prior to the street count, Cincinnati received 8 inches of snow and the low temperature was 19 degrees. For the first time, since the CoC began point-in-time counts in the late 1990's, weather conditions led the City of Cincinnati to open a Cold Shelter on the night of the count, possibly impacting the unsheltered number.				

**Facilities and Services for Homeless Families with Children:**

Facilities and services for homeless families begin in the emergency shelter system of the CoC. Since 1999 the family shelters have been part of a partnership program that has enabled them to:

- Share data and case planning across agencies
- Increase case management capability and competencies

- Forge a partnership with Hamilton County Job and Family Services to increase access and timely processing of all mainstream benefits/resources for families.
- Jointly develop the Central Access Point as the way for families to enter the system.
- Reduced recidivism rates
- Collaborate on a family homeless prevention program (one of 5 funded demonstrations in the state)
- Collaborate on a new Rapid Re-housing for Families (one of 23 funded demonstrations in 2008 CoC competition the country)

As is the norm across the county, family homelessness increases in the summer months and tends to decrease over the winter months, therefore, the Point in Time numbers taken in January show the lowest level of family shelter usage. At that low level 201 of the family beds available in the community, 84% were occupied. However, if that Point in Time would have been taken in July the family shelters would be 100% occupied, often with families waiting to gain admission to shelter. Data from the Central Access Point indicates the increasing number of families seeking emergency shelter is due to economic conditions and apartment foreclosures.

Considering the data and the efforts currently underway within the family system the following goals have been established:

1. MAINTAIN THE CURRENT LEVEL OF 201 PERMANENT SHELTER BEDS. With the exception of the domestic violence facilities (currently under renovation to increase its capacity by 9 beds), it is the continued belief of all persons involved in planning for family homelessness that permanent emergency shelter beds should not be added to the system.
2. INCREASE TEMPORARY EMERGENCY SHELTER BEDS FOR SEASONAL OVERFLOW AND BECAUSE OF POOR ECONOMIC CONDITIONS. A non-permanent emergency shelter system such as a hotel program may need to be established if the trend for the increasing need for emergency shelter beds for families continues, and the Hamilton County Department of Job and Family services cannot sustain the emergency hotel program previously operated by the department.
3. DECREASE THE LENGTH OF STAY WITHIN THE EMERGENCY SHELTER SYSTEM. The family shelters have refocused their energies to rapidly move families from the emergency shelter system into housing, thereby decreasing the amount of bed nights utilized in shelter.
  - a. The Rapid Re-housing for Families programs should be carefully monitored for success rates both in decreasing the length of stay within the shelter system and ensuring that recidivism rates do not rise as a result.
4. CREATE NEW SCATTERED-SITE TRANSITIONAL HOUSING BEDS FOR FAMILIES. A new rapid re-housing or scattered-site transitional housing program for families must be established to increase the ability of the shelter to move families from shelter to transitional housing (especially in light of decreasing opportunities for employment based on current conditions).
  - a. Implement the new Rapid Re-housing for Families program granted in 2008 by the CoC effectively providing an additional 60 units (180 bed) of transitional housing

- b. Increase the number of “short-term” transitional units (6 to 9 month average) by 50 units (150 beds) over a five year period.
  - c. Increase the number of “longer-term” transitional housing (9 months to 2 years) for moderate to difficult family placement by 30 units (90 beds) over the five years.
5. CREATE NEW PERMANENT SUPPORTIVE HOUSING OPTIONS FOR FAMILIES. With the federal definitional change of chronic homelessness to include families, it will be possible within the next five years to create new PSH opportunities for families where the primary head-of-household is disabled and the family has experienced multiple episodes of homelessness.
- a. Create 20 new PSH units (60 beds) for chronically homeless families.
  - b. Increase coordination with public housing and other federal programs to increase the supply of housing subsidies available for homeless families.

### **Facilities and Services for Single Homeless Individuals:**

In late 2008 the City of Cincinnati issued Ordinance 0347-2008 authorizing the CoC to develop a comprehensive strategic plan to ensure single homeless individuals have access to appropriate shelter facilities and comprehensive services which facilitate their movement from shelter to permanent housing. Over a six month period over 90 individuals participated in an intensive planning process. The completed plan, called the Homeless to Homes Plan, was accepted by both the City of Cincinnati and Hamilton County and provides the details for specific goal elements listed here that are relevant to the Consolidated Plan:

1. MAINTAIN THE CURRENT LEVEL OF EMERGENCY SHELTER BEDS, DECREASE THE CONCENTRATION OF SHELTER BEDS SO AS TO BETTER SERVE HOMELESS INDIVIDUALS, AND DECREASE THE LENGTH OF STAY IN SHELTER. Intensive work was done utilizing Homeless Management Information System data to determine the extent of the need and types of persons sheltered by age, sex, and disabilities. The results of that work documented that the current number of emergency shelter beds should be maintained, but that persons within the shelter system need to be provided with a higher level of service in order to facilitate movement from homelessness to permanent housing.
  - a. Separate homeless single women’s shelter beds from single men’s beds.
  - b. Decrease the concentration of emergency shelter beds.
  - c. Decrease the ratio of case managers to clients to 1:10.
2. INCREASE THE NUMBER OF TRANSITIONAL HOUSING BEDS. Increasing the number transitional housing beds for single individuals will support the flow of persons out of emergency shelter and decrease the length of stay in shelter.
  - a. Increase the number of transitional housing beds for single individuals by 191 new beds over the five year period.
  - b. Utilize the bed type mix as identified in the Homeless to Homes Plan as the recommended level of units for each subpopulation.
3. INCREASE THE NUMBER OF PERMANENT SUPPORTIVE HOUSING UNITS AVAILABLE Increasing the number of permanent supportive housing units will decrease the number of chronically homeless persons in the community. An increase of 1,020 units over the next 5 years is recommended as the overall target.
  - a. Develop 125 site-based PSH units

- b. Develop an additional 79 scattered-site PSH units
  - c. Create one PSH group home for the extremely long-term homeless women in the system.
4. MAINTAIN THE CURRENT LEVEL OF COORDINATION AND SERVICES FOR OUTREACH TO STREET HOMELESS PERSONS AND INCREASE THE LEVEL FOR YOUNG ADULTS AND PERSONS WITH SUBSTANCE ABUSE ISSUES
- a. Expand the facility and services within Anthony House, an outreach and engagement center for young adults.
  - b. Increase the street outreach services for persons with substance abuse.

**Improve access into service/facilities:**

1. MAINTAIN AND EXPAND THE CENTRAL ACCESS POINT (CAP) The CAP program is currently designed to enable homeless families to gain access to emergency shelter or family homelessness prevention services. It is recommended that the CAP program be expanded to include the coordination and flow of single homeless individuals as well.
2. CREATE A PROGRAM/SYSTEM FOR HOMELESS INDIVIDUALS TO ACCESS INFORMATION AND REFERRAL SERVICES APPROPRIATE TO THEIR NEEDS Long identified as a need by Cincinnati's homeless population as a "homeless concierge" service – a place homeless persons could go to get connected with information and referral services. This recommendation was incorporated into the Homeless to Homes plan. The Information/Referral service should be connected with either an individual shelter or the Central Access Point.

**Priority Homeless Needs**

1. Using the results of the Continuum of Care planning process, identify the jurisdiction's homeless and homeless prevention priorities specified in Table 1A, the Homeless and Special Needs Populations Chart. The description of the jurisdiction's choice of priority needs and allocation priorities must be based on reliable data meeting HUD standards and should reflect the required consultation with homeless assistance providers, homeless persons, and other concerned citizens regarding the needs of homeless families with children and individuals. The jurisdiction must provide an analysis of how the needs of each category of residents provided the basis for determining the relative priority of each priority homeless need category. A separate brief narrative should be directed to addressing gaps in services and housing for the sheltered and unsheltered chronic homeless.
2. A community should give a high priority to chronically homeless persons, where the jurisdiction identifies sheltered and unsheltered chronic homeless persons in its Homeless Needs Table - Homeless Populations and Subpopulations.

3-5 Year Strategic Plan Priority Homeless Needs response:

1. As mentioned above, the Homeless to Homes Plan summarizes recommendations made by local and national experts in the homeless services field, local funders, and community stakeholders including representatives of service providers, government agencies, NGOs, businesses, and faith-based organizations. The process for developing the plan constituted the first time in our region that a plan for ending homelessness used

actual data of homeless persons in the community; real numbers, real ages, and real special needs became a foundation for the work. Because this plan was created using a “blank slate” problem solving method, it reflects what the steering committee and working subcommittees believe are the best of what could and should happen for homeless single individuals in the community.

The plan represents a significant shift in the ways our community responds to those who are homeless. The Homeless to Homes report responds to the need for a new, comprehensive plan that changes how our community provides homeless housing and services, how homeless individuals are expected to respond, and how public and private funding systems can work cooperatively and with a clear emphasis to support the initiatives of this plan.

As mandated by Cincinnati City Council on May 21, 2009, the Cincinnati/Hamilton County Continuum of Care for the Homeless, Inc. has seated the Homeless to Homes Transition Team, which has the task of prioritizing for implementation the over 50 recommendations within the Homeless to Homes Plan. This prioritization is ongoing, but should be completed and reported to the City, County, and community in December 2009 and will classify recommendations as follows:

- High Priority Recommendations- implementation to be begun in Year 1
- Years 2-3 Recommendations
- Years 4-5 Recommendations

Though the prioritization is not complete, the following items appear to be likely High Priority recommendations:

- Increase the number of Transitional Housing beds.
- Increase the number of Permanent Supportive Housing units.
- Development of a Central Access System to be used by homeless households to access emergency shelter, housing, and services.
- Decreasing the ratio of case managers to clients so as to provide a higher level of services.
- Restructure the current number of emergency shelter beds so as to better meet the needs of emergency shelter residents.
- Improve access to services through increased collaboration and coordination between CoC homeless services and the Mental Health and Recovery Services Board.
- Divert homeless people away from incarceration and toward transitional housing.

2. A community should give a high priority to chronically homeless persons where the jurisdiction identifies sheltered and unsheltered chronic homeless persons in its Homeless Needs Table - Homeless Populations and Subpopulations

As mandated by Cincinnati City Council on May 21, 2009, the Cincinnati/Hamilton County Continuum of Care for the Homeless, Inc. has seated the Homeless to Homes Transition Team, which has the task of prioritizing for implementation the over 50 recommendations within the Homeless to Homes Plan. This prioritization will classify recommendations as follows:

- High Priority Recommendations- implementation to be begun in Year 1
- Years 2-3 Recommendations

- Years 4-5 Recommendations

This prioritization is ongoing, but should be completed and reported to the City, County, and community in December 2009.

## **Homeless Inventory (91.210 (c))**

The jurisdiction shall provide a concise summary of the existing facilities and services (including a brief inventory) that assist homeless persons and families with children and subpopulations identified in Table 1A. These include outreach and assessment, emergency shelters and services, transitional housing, permanent supportive housing, access to permanent housing, and activities to prevent low-income individuals and families with children (especially extremely low-income) from becoming homeless. The jurisdiction can use the optional Continuum of Care Housing Activity Chart and Service Activity Chart to meet this requirement.

3-5 Year Strategic Plan Homeless Inventory response:

See 2009 Homeless Housing Inventory Chart (attached as Appendix II)

## **Homeless Strategic Plan (91.215 (c))**

1. Homelessness— Describe the jurisdiction's strategy for developing a system to address homelessness and the priority needs of homeless persons and families (including the subpopulations identified in the needs section). The jurisdiction's strategy must consider the housing and supportive services needed in each stage of the process which includes preventing homelessness, outreach/assessment, emergency shelters and services, transitional housing, and helping homeless persons (especially any persons that are chronically homeless) make the transition to permanent housing and independent living. The jurisdiction must also describe its strategy for helping extremely low- and low-income individuals and families who are at imminent risk of becoming homeless.
2. Chronic homelessness—Describe the jurisdiction's strategy for eliminating chronic homelessness by 2012. This should include the strategy for helping homeless persons make the transition to permanent housing and independent living. This strategy should, to the maximum extent feasible, be coordinated with the strategy presented Exhibit 1 of the Continuum of Care (CoC) application and any other strategy or plan to eliminate chronic homelessness. Also describe, in a narrative, relationships and efforts to coordinate the ConPlan, CoC, and any other strategy or plan to address chronic homelessness.
3. Homelessness Prevention—Describe the jurisdiction's strategy to help prevent homelessness for individuals and families with children who are at imminent risk of becoming homeless.
4. Institutional Structure—Briefly describe the institutional structure, including private industry, non-profit organizations, and public institutions, through which the jurisdiction will carry out its homelessness strategy.

5. Discharge Coordination Policy—Every jurisdiction receiving McKinney-Vento Homeless Assistance Act Emergency Shelter Grant (ESG), Supportive Housing, Shelter Plus Care, or Section 8 SRO Program funds must develop and implement a Discharge Coordination Policy, to the maximum extent practicable. Such a policy should include “policies and protocols for the discharge of persons from publicly funded institutions or systems of care (such as health care facilities, foster care or other youth facilities, or correction programs and institutions) in order to prevent such discharge from immediately resulting in homelessness for such persons.” The jurisdiction should describe its planned activities to implement a cohesive, community-wide Discharge Coordination Policy, and how the community will move toward such a policy.

3-5 Year Homeless Strategic Plan response:

See also Appendix III, Homeless Population Goals and Objectives, for additional goals and objectives for the 5 Year Consolidated Plan.

1. Cincinnati and Hamilton County are leaders in services for the homeless in many ways, nevertheless there are still opportunities to better serve homeless single men and women. Shelters currently provide a place to stay and facilities that meet basic needs. However, the shelters struggle with the number of homeless people entering the system on a daily basis. The shelters face many challenges to providing best practice services that support an exit from homelessness. Beyond the shelter system, three other items were identified as contributing factors to homelessness: 1) the availability of appropriate housing (especially for special needs subpopulations) to facilitate their exit from the streets or shelters; 2) the accessibility of mental health and substance abuse services for all those in need to address the special issues that precipitate or perpetuate their homelessness; and 3) the funding to sustain efforts to make significant and lasting improvements to the system. Additionally, agencies serving the homeless are challenged to increase communication and resolve conflicts with their host neighborhoods in more proactive and productive ways.

2. The City of Cincinnati, Hamilton County and the CoC have consistently utilized the Consolidated Plan as the process and document for strategies and planning to address homelessness, including chronic homelessness. On October 8, 2008 City Council approved Ordinance 0347-2008 which directed the CoC to “immediately address the inadequacy of the current provision of services for single homeless individuals in the City of Cincinnati, and to put in place a comprehensive plan to implement such services.” Further, the ordinance states “the plan must ensure that as a critical segment of the homeless community, single homeless men and women, will have access to safe, appropriate shelter facilities and that such facilities will provide comprehensive services necessary for homeless individuals to obtain and maintain housing.” The plan was completed in March of 2009 and adopted by both Cincinnati City Council and Hamilton County Board of County Commissioners. Pursuant to the plan’s recommendations, the city and county administration will incorporate the Homeless to Homes plan as the basis for the Homeless/Special Needs section on homeless individuals within the 2010-2014 Consolidated Plan.

The recommendations and strategies from Homeless to Homes that are now being incorporated into the Consolidated Plan relating to ending chronic homelessness are as follows:

1. Reconfigure the emergency shelter beds for single individuals into smaller bed configurations that provide a higher level of services to residents; provide more intensive case management services that support individual development; develop and follow through with case plans that move them quickly from homelessness into housing.
  2. Create a “safe walk-in shelter” with a limited number of beds to provide emergency refuge for single men or women would cannot or will not engage with workers to develop a case plan.
3. The jurisdiction was selected in 2007 to undergo an evaluated state prevention program for homeless families. With that program as well as the Homeless Prevention and Rapid Re-housing Program (HPRP) stimulus funds, and normal community emergency assistance activities, the CoC has created the foundation for homeless prevention activities.

HPRP, the CoC and the United Way of Greater Cincinnati (UW) collaborated and they are using the UW funded Emergency Assistance centers plus one faith-based Emergency Assistance center as the Prevention Providers. The UW current funding within the agencies will be used for staffing while HPRP funds will provide direct financial assistance. Using a transformative prevention model, clients are provided both case management and prevention funds in sufficient quantities to make a sustainable difference in the households ability to sustain housing. The CoC has incorporated the HMIS (VESTA system) to acquire all data and pay all bills, in a consolidated administrative effort and as an outcome based measurement system. A sub- grant arrangement with the Legal Aid Society of Greater Cincinnati is being used to provide legal assistance as needed to prevent homelessness.

The City HPRP funds will provide: 74% of the direct financial assistance for Prevention, the salary of the back end financial management person to pay all bills and account for all funds and will provide all of their funds towards the RRH program. The County will provide: the balance of the direct financial assistance for Prevention; support Legal Services efforts to prevent homelessness; and support the Central Access Point “hotline” as a designated access call line for prevention and RRH for families.

4. The CoC planning process is a coordinated, collaborative effort by the City of Cincinnati, Hamilton County, the Greater Cincinnati Coalition for the Homeless, and the CoC Working Groups under the umbrella of the 501(c)3 –Cincinnati/Hamilton County Continuum of Care for the Homeless, Inc. (CoC, Inc.). The CoC, Inc. is the lead agency registered with HUD for the CoC annual grant application process and is the entity responsible for the submission of Exhibit 1. Over the course of the Consolidated Plan period this entity will also assume the responsibility for financial management of the grants pursuant to changes regulated by HUD.

The community leadership team, now known as the Homeless Clearinghouse, includes staff and members of: the City of Cincinnati Department of Community Development, Hamilton County Community Development Department, the Greater Cincinnati Coalition for the Homeless (GCCH), an elected representative liaison from each of the CoC Working Groups, as well as Executive Directors of four CoC-funded agencies. The Homeless Clearinghouse is staffed by the CoC, Inc. The Homeless Clearinghouse provides process oversight for the CoC, Inc. Board of Directors.

The purpose of the Homeless Clearinghouse is to:

1. Plan and coordinate community influence on systemic decisions affecting the homeless.
2. Uphold the elements of the Consolidated Plans that affect homelessness.
3. Identify and support the utilization of all sources of funds and other resources used to improve the quality of life for homeless persons and/or to end homelessness.

Planning itself occurs through the inclusive CoC process. The Working Groups of the CoC are groups focused on specific populations of homeless persons and/or specific types of providers. CoC Working Groups meet on a regular basis to address service-related issues. The Working Groups include not only the appropriate service/housing providers but also homeless persons, including those from the subpopulations identified in the committee's action plan, and system organizations that have an effect/influence over the target issue (e.g. welfare department, substance abuse board, social security, etc.) The groups report quarterly to the Homeless Clearinghouse. This system has provided the community with an improved level of coordination, community involvement and the ability to assure efforts in the community are not duplicated.

Working Group	Focus Area	Prime Activities
Family Shelter Partnership Program (FSPP)	Families in shelter	Coordinating quality case management Coordinating mainstream resources (TANF, FS, CHIP, Medicaid, Child Care, Children's Protective)
Homeless Individuals Task Force (HIT Force)	Homeless single individuals & chronically homeless	In process of being changed to correspond with Homeless to Homes planning and implementation efforts.
Homeless Outreach Group (HOG)	Street Homeless & chronically homeless	Coordinating outreach efforts Increasing access to housing/services directly from the streets
HMIS Advisory Committee	HMIS Quality and Integrity	Oversight of HMIS policies, procedures, system usage. Coordinates activities with the HMIS Lead Agency – The Partnership Center, Ltd.
Transitional Housing Group	SHP Transitional Housing	Promoting best TH practice efforts.
Permanent Housing Group	SHP Permanent Housing for the Disabled	Promoting best PSH service practice efforts.
PSH Development	Providing comprehensive planning and support to site based PSH	Coordination of site, development, funding among developers to implement PSH housing recommended in Homeless to Homes.
Shelter Plus Care	SPC excellence	Promoting best practices among SPC providers.

To ensure there are not duplicate efforts in coordination and planning, the City of Cincinnati contracts, on a year-round basis for the CoC, Inc. to manage both the Continuum and all other funding and administrative support for homeless services (including SPC, ESG and HOPWA), and the homeless section of the Consolidated Plan.

#### Planning/Coordination

- Maintain an “inclusive planning process”
- Facilitate Consolidated Planning and monitoring process (homeless section) for the City/County
- Facilitate Homeless to Homes Implementation
- Facilitate processes to include the voice of homeless persons in planning
- Maintain and staff the community planning/coordination body: *Homeless Clearinghouse*.
- Manage relationship with the Ohio Interagency Council on Homelessness and Housing.

#### Data Gathering/Sharing

- Manage contract with HMIS Lead Agency to ensure:
  - All homeless counts - as required by HUD or other community initiatives are completed with HMIS data
  - Provide data to local/state/federal governments and community providers to use
  - Provide the linkage for HMIS data government reporting
- Maintain and staff the *HMIS Advisory Committee*

#### Funding Coordination and Development

- Facilitate annual CoC process and grant submission to HUD
- Facilitate annual City-ESG process and coordinate grant requirements with the City
- Monitor funding, as required by funding source(s)
- Coordinate activities to support/develop community funding initiatives with HUD and other federal, state, local resources

#### Service Delivery System Intervention

- Monitor program outcomes and performance measures established by HUD and community processes.
- Facilitate/support initiatives that improve access to mainstream resources/services for the homeless
- Provide support for the creation of partnership initiatives/programs
- Provide support/coordination for CoC Working groups including whose focus is:
  - Provision of direct service for a specific population of homeless persons
  - Network information
  - Information sharing among providers
  - Gaps identification (directed to CoC planning and/or GCCH advocacy)

5. Discharge Planning activities are coordinated with the appropriate State level departments through the Interagency Council on Homelessness and Housing. The following documents the protocol established for each required discharge plan area:

#### Foster Care

Each public children's service agency (PCSA) shall provide appropriate services and support to former foster care recipients. The services and supports are to compliment the young adult's own efforts and shall be available until the young adult's twenty-first birthday. Independent living services available to young adults aged eighteen to twenty-one include: daily living skills, assistance in obtaining a diploma or GED, entering post secondary education or training, career exploration, vocational training, job placement and retention, preventative health activities, financial, housing, employment, education and self-esteem counseling, drug and alcohol abuse prevention and treatment.

An agency may use up to 30% of its federal allocation for room and board for the emancipated youth up to age 21, which includes assistance with rent, deposit, utilities, or utility deposits.

Each county's protocol may be different as Ohio is a state supervised, county administered state. If a child is 16 years or older and is likely to remain in care the agency must have a written independent living plan to achieve self-sufficiency developed within thirty days of the completion of an assessment. The plan should be based upon the assessment and include input from the youth, the youth's case manager, the caregiver, and significant others in the youth's life. The independent living plan should be reviewed at least every ninety days thereafter until the agency's custody is terminated.

A review of the state protocol at the local level (Cincinnati/Hamilton County) through the Hamilton County Department of Job and Family Service (HCJFS) indicates that assessments are completed on all foster teens as prescribed above at age 16 or as they come into custody, using the Daniel Memorial Assessing and Contracting with Youth tool which provides for not only the assessments but the follow-up planning. The HCJFS After Care Worker is responsible for devising an individual plan for each emancipated youth, including housing plans. HCJFS is the PCSA responsible for the implementation of the policy at the local level.

#### Health Care

The Ohio General Assembly has enacted laws governing the transfer and discharge of residents in nursing homes (NHs) and residential care facilities (RCFs) [Ohio Revised Code (ORC) section 3721.16], adult care facilities (ACFs) [ORC section 3722.14], and community alternative homes (CAH)[ORC section 3724.10]. As the licensing agency for these facilities, the Department of Health promulgated Chapter 3701-16 of the Ohio Administrative Code (OAC) that further expounds on the transfer and discharge rights of NH and RCF residents and OAC rules 3701-20-24 (ACF) and 3701-16, 23 (CAH). The Department ensures that these provider types follow the appropriate regulations regarding transfer, discharge, or both, by reviewing documentation that the facility has initiated discharge planning and that alternatives have been explored and exhausted prior to discharge.

Although Ohio does not license hospitals, ODH as the State Survey Agency for Medicare, surveys hospitals for compliance with Medicare certification regulations related to resident discharge rights 42 CFR 482.13 and discharge planning, 42 CFR 482.43 which establish hearing rights for premature discharge and requirements for planning for patients' needs after discharge.

Locally, a protocol does exist for discharge of homeless persons from hospitals. The hospitals within Cincinnati and Hamilton County have joined together to fund the CoC's

Center for Respite Care which was specifically designed for homeless individuals who were treated in the hospital and need additional medical support. The protocol developed and utilized throughout the hospitals in the area for admission to Respite requires the hospital to: a) have the hospital social worker provide referral information to Respite; b) Respite admissions staff evaluates patient data to determine if respite care is appropriate; c) hospital staff provides relevant medical background documentation (history, diagnosis, medical notes, discharge summary and treatment plan); d) hospital discharges to Respite with a 30 day supply of all prescribed medications and transports the patient to Respite. Respite has on staff, a trained Front Line Homeless Worker who then works with the patient to secure income and housing.

### Mental Health Care

It is the policy of ODMH that homeless shelters are not appropriate living arrangements for persons with mental illness. Patients being discharged from ODMH Behavioral Health Organizations/Hospitals are not to be discharged to a shelter or to the street.

Community Support Network (CSN) programs are required to have appropriately approved emergency housing plans in place in the event their clients undergo unexpected residential change. These entities, in conjunction with the responsible or contracting Board or agency, must exhaust all reasonable efforts to locate suitable housing options for patients being discharged. Patients in ODMH BHOs shall not be discharged to homeless shelters and clients in an ODMH CSN program shall not be removed or relocated from community housing options to homeless shelters unless the responsible board or contract agency has been involved in the decision making process and it is the expressed wish of the affected person and other placement options have been offered to the affected person and refused. When a discharge or relocation to a homeless shelter occurs under these guidelines, the reasons shall be thoroughly documented in the person's chart and reviewed via the BHOs quality improvement process. Persons may not be discharged or relocated to homeless shelters for the convenience of staff, as a punitive measure, or for expediency. ODMH BHO policies shall be consistent with this directive.

The Hamilton County Mental Health Board is in compliance with this directive. Locally, a system of "quick access" beds, within apartments has been developed to support the above policy and protocol. The Quick Access beds are shown on the Housing Inventory as a method of tracking persons and ensuring discharge to shelters does not occur.

### **Emergency Shelter Grants (ESG)**

(States only) Describe the process for awarding grants to State recipients, and a description of how the allocation will be made available to units of local government.

3-5 Year Strategic Plan ESG response:

Not Applicable.

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## COMMUNITY DEVELOPMENT

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## **Community Development (91.215 (e))**

\*Please also refer to the Community Development Table in the Needs.xls workbook

1. Identify the jurisdiction's priority non-housing community development needs eligible for assistance by CDBG eligibility category specified in the Community Development Needs Table (formerly Table 2B), – i.e., public facilities, public improvements, public services and economic development.
2. Describe the basis for assigning the priority given to each category of priority needs.
3. Identify any obstacles to meeting underserved needs.
4. Identify specific long-term and short-term community development objectives (including economic development activities that create jobs), developed in accordance with the statutory goals described in section 24 CFR 91.1 and the primary objective of the CDBG program to provide decent housing and a suitable living environment and expand economic opportunities, principally for low- and moderate-income persons.

NOTE: Each specific objective developed to address a priority need, must be identified by number and contain proposed accomplishments, the time period (i.e., one, two, three, or more years), and annual program year numeric goals the jurisdiction hopes to achieve in quantitative terms, or in other measurable terms as identified and defined by the jurisdiction.

3-5 Year Strategic Plan Community Development response:

Because of the diverse nature of Hamilton County, the non-housing Community Development needs within the County are also diverse. Despite the diversity, some common elements are present. First, there's a need for public infrastructure reconstruction throughout most of the County. There are also neighborhood Social Service needs that aren't adequately addressed through United Way Agencies or other sources of funding. Beyond these broad categories there are specific needs within communities, such as constructing Senior Citizen Centers for expanding older populations or moving residents out of flood prone areas that address specific quality of life issues in communities that make up Hamilton County. Due to the overabundance of blighted abandoned buildings, demolition has become a priority need for the County. The County also has needs in the Economic Development and Job Training areas that are addressed with non-Community Development Block Grant Funds, hence, they are not considered priorities for this Plan. The range of needs and the strategies to address those needs are more fully described later in this narrative. The County considered a number of factors including absolute need, relative need, availability of alternative funds and programs, and local preferences in assigning high, medium and low priorities to activity categories. Those identified as high needs rated high in the criteria, while those that rated low had adequate programmatic and funding sources from non-Block Grant Programs.

The primary obstacle to meeting underserved needs is fiscal. There are an adequate number of programs and agencies in place to meet needs within Hamilton County but

the resources are insufficient to meet all the identified needs. Hence, the County and Local communities set priorities in expending scarce Community Development Block Grant Funds.

The table labeled Community Development Needs in the needs.xls file identifies short and long-term Community Development Goals for the 2010 - 2014 project years. Also, the summaries.xls document identifies a summary of the objectives for the next year.

### **Antipoverty Strategy (91.215 (h))**

1. Describe the jurisdiction's goals, programs, and policies for reducing the number of poverty level families (as defined by the Office of Management and Budget and revised annually). In consultation with other appropriate public and private agencies, (i.e. TANF agency) state how the jurisdiction's goals, programs, and policies for producing and preserving affordable housing set forth in the housing component of the consolidated plan will be coordinated with other programs and services for which the jurisdiction is responsible.
2. Identify the extent to which this strategy will reduce (or assist in reducing) the number of poverty level families, taking into consideration factors over which the jurisdiction has control.

3-5 Year Strategic Plan Antipoverty Strategy response:

A number of governmental and non-profit agencies operate programs within Hamilton County to reduce dependency and poverty among County residents. Primary among those agencies is the Hamilton County Department of Job and Family Services, which offers a wide array of educational and training programs to assist poverty level households in acquiring the training, education and skills needed to obtain and hold jobs. The Cincinnati-Hamilton County Community Action Agency operates Head Start Programs, an adult education GED Program, the Community Services Block Grant (CSBG) Program, Weatherization Programs, and other programs to assist their low income clientele. In addition to these programs that provide broad based assistance to poor families, there are also two programs operated in Hamilton County that tie antipoverty efforts to the housing stock. First, the Transitional Housing Project developed within Hamilton County utilizing HOME funds attempts to comprehensively address all the needs of homeless families residing in the complex. The families are eligible to remain in the transitional housing for a period up to two years, during which the non-profit operator of the facility provides counseling and appropriate referrals for social services, education, and training. At the end of the two year period, it is hoped that the families will be able to move back into the private housing market. Second, the Cincinnati Metropolitan Housing Authority operates a Family Self Sufficiency Program that provides an individualized five to seven year program of support services to move families from dependency to independence.

### **Low Income Housing Tax Credit (LIHTC) Coordination (91.315 (k))**

1. (States only) Describe the strategy to coordinate the Low-income Housing Tax Credit (LIHTC) with the development of housing that is affordable to low- and

moderate-income families.

3-5 Year Strategic Plan LIHTC Coordination response:

Not Applicable. This relates to state programs only.

## NON-HOMELESS SPECIAL NEEDS

### **Specific Special Needs Objectives (91.215)**

1. Describe the priorities and specific objectives the jurisdiction hopes to achieve over a specified time period.
2. Describe how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan.

3-5 Year Non-homeless Special Needs Analysis response:

Over the next 5 years Hamilton County hopes to meet some of the housing and supportive service needs of a portion of the special need population who are not currently served. Hamilton County will be using relatively few Consolidated Plan resources to meet the needs identified in the Non-Homeless Needs Table. It is hoped that private developers will propose Housing Tax Credit Projects to serve the housing needs of the lower income population, and HUD Section 202 projects for the elderly. It is also hoped that other funding, both local, state and Federal, can be obtained for these and other projects to serve low-moderate income populations, including special needs populations. The County will support these applications. The primary resource that will be used to meet both housing and support service needs of the special needs populations will be State of Ohio and Hamilton County Tax Levy proceeds that are targeted within the County to special needs populations including Mental Health, Substance Use disorder, and Developmentally Disabled populations. Caracole coordinates most of the HIV/AIDS assistance within the County. During the next 5 years we expect this pattern of resource allocation to continue.

### **Non-homeless Special Needs (91.205 (d) and 91.210 (d)) Analysis (including HOPWA)**

\*Please also refer to the Non-homeless Special Needs Table in the Needs.xls workbook.

1. Estimate, to the extent practicable, the number of persons in various subpopulations that are not homeless but may require housing or supportive services, including the elderly, frail elderly, persons with disabilities (mental, physical, developmental, persons with HIV/AIDS and their families), persons with alcohol or other drug addiction, victims of domestic violence, and any other categories the jurisdiction may specify and describe their supportive housing needs. The jurisdiction can use the Non-Homeless Special Needs Table (formerly Table 1B) of their Consolidated Plan to help identify these needs.

\*Note: HOPWA recipients must identify the size and characteristics of the

population with HIV/AIDS and their families that will be served in the metropolitan area.

2. Identify the priority housing and supportive service needs of persons who are not homeless but may or may not require supportive housing, i.e., elderly, frail elderly, persons with disabilities (mental, physical, developmental, persons with HIV/AIDS and their families), persons with alcohol or other drug addiction by using the Non-homeless Special Needs Table.
3. Describe the basis for assigning the priority given to each category of priority needs.
4. Identify any obstacles to meeting underserved needs.
5. To the extent information is available, describe the facilities and services that assist persons who are not homeless but require supportive housing, and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing.
6. If the jurisdiction plans to use HOME or other tenant based rental assistance to assist one or more of these subpopulations, it must justify the need for such assistance in the plan.

3-5 Year Non-homeless Special Needs Analysis response:

The Non-Homeless Special Needs Table included with this Plan identifies 45,265 Special Need Households that also have identified Housing Needs. Hamilton County assigned a medium priority to meeting the needs of the subsets identified with the exception of Public Housing Residents. Public Housing Residents are identified with a low priority with the assumption that they already reside in decent, safe and sanitary housing. The Supportive Service Needs of Non-Homeless Special Needs households total 15,652 and Hamilton County has assigned a low priority to meeting these supportive service needs. There is a broad network of public and private agencies within Hamilton County that focus on both the Housing Needs and particularly the Supportive Service Needs of the Special Needs populations. These agencies include The Council on Aging, The Mental Health and Recovery Services Board, The Department of Job and Family Services, The Developmental Disabilities Board, The Center for Independent Living Options, LADD, and Caracole, among others. Although these agencies do not and cannot meet all the needs of their target client groups, the number of agencies and their diverse funding mechanisms assure that a substantial portion of the need will be met. Accordingly, Hamilton County will not devote any significant portion of its HUD resources to meeting the Service Needs of these populations. Hamilton County will however utilize available Federal Housing money to meet a portion of the housing needs of these subpopulations. Specifically, Hamilton County has and will continue to fund a Tenant Based Assistance Program utilizing HOME Funds that is targeted specifically to Special Need populations, including some specifically devoted to homeless. In this effort, Hamilton County partners with Special Need Agencies who assist clients with TBA applications for housing assistance and provide continued supportive services to clients assisted with the TBA Grants.

Hamilton County is not the recipient of HOPWA funding. The State of Ohio administers HOPWA funds for non-HOPWA entitled areas, including Hamilton County.

## **Housing Opportunities for People with AIDS (HOPWA)**

\*Please also refer to the HOPWA Table in the Needs.xls workbook.

1. The Plan includes a description of the activities to be undertaken with its HOPWA Program funds to address priority unmet housing needs for the eligible population. Activities will assist persons who are not homeless but require supportive housing, such as efforts to prevent low-income individuals and families from becoming homeless and may address the housing needs of persons who are homeless in order to help homeless persons make the transition to permanent housing and independent living. The plan would identify any obstacles to meeting underserved needs and summarize the priorities and specific objectives, describing how funds made available will be used to address identified needs.
2. The Plan must establish annual HOPWA output goals for the planned number of households to be assisted during the year in: (1) short-term rent, mortgage and utility payments to avoid homelessness; (2) rental assistance programs; and (3) in housing facilities, such as community residences and SRO dwellings, where funds are used to develop and/or operate these facilities. The plan can also describe the special features or needs being addressed, such as support for persons who are homeless or chronically homeless. These outputs are to be used in connection with an assessment of client outcomes for achieving housing stability, reduced risks of homelessness and improved access to care.
3. For housing facility projects being developed, a target date for the completion of each development activity must be included and information on the continued use of these units for the eligible population based on their stewardship requirements (e.g. within the ten-year use periods for projects involving acquisition, new construction or substantial rehabilitation).
4. The Plan includes an explanation of how the funds will be allocated including a description of the geographic area in which assistance will be directed and the rationale for these geographic allocations and priorities. Include the name of each project sponsor, the zip code for the primary area(s) of planned activities, amounts committed to that sponsor, and whether the sponsor is a faith-based and/or grassroots organization.
5. The Plan describes the role of the lead jurisdiction in the eligible metropolitan statistical area (EMSA), involving (a) consultation to develop a metropolitan-wide strategy for addressing the needs of persons with HIV/AIDS and their families living throughout the EMSA with the other jurisdictions within the EMSA; (b) the standards and procedures to be used to monitor HOPWA Program activities in order to ensure compliance by project sponsors of the requirements of the program.
6. The Plan includes the certifications relevant to the HOPWA Program.

3-5 Year Strategic Plan HOPWA response:

Not Applicable.

### **Specific HOPWA Objectives**

1. Describe how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan.

3-5 Year Specific HOPWA Objectives response:

Not Applicable.

### **OTHER NARRATIVE**

Include any Strategic Plan information that was not covered by a narrative in any other section.

The updated Analysis of Impediments to Fair Housing Choice was conducted by Housing Opportunities Made Equal in May, 2009. The resulting Analysis, and Hamilton County's Fair Housing Action Plan to address the identified impediments, are a part of the 5 Year Consolidated Plan.