

APPENDIX I

Summary of Citizen Comments on the Consolidated Plan and/or Action Plan and City's Response

The City encourages citizen comments on the Consolidated Plan and the Annual Action Plan, and offers the community the opportunity to provide input at two public hearings on the Plan, one held during the Plan development process on September 20, 2004, and one before City Council during the HUD-required 30-day public comment period, which will be April 16, 2005. The 30-day public comment period on the Draft Plan begins on Monday, April 4 and will end on Wednesday, May 4, 2005.

A summary of the comments received during the Plan development process and the City's response to those comments follows.

The first public hearing was held by staff from the City's Office of Housing, Department of Human Services and Department of Mental Health, Mental Retardation and Substance Abuse on September 20, 2004 at 7 p.m. at the Lee Center. The purpose of the first public hearing was to obtain the community's input on housing, homeless and community and economic development needs prior to the preparation of the Plan. One speaker attended the hearing.

Ryan Lovett representing Catholic Charities of the Diocese of Arlington, asked a number of questions for clarification. His comments centered on the City's zoning requirements, which he felt could be barriers to the development of affordable housing. He recommended a density bonus for the inclusion of affordable housing in new developments. Staff explained that the City currently has a provision in its zoning code that allows for additional density in exchange for affordable housing. The City's Master Plan defines areas where additional density can be proposed. Outside those areas, the City tries to minimize the impact of new development by limiting density to amounts consistent with the surrounding areas. The City has approved several recent residential projects with density bonuses that will produce 13 additional affordable sales units, in addition to other new units in developments without using the density bonus provision.

Written comments were received from the **Homeless Services Coordinating Committee**. They proposed their five top priorities for the new Plan:

- establish a 12-bed Safe Haven
- develop a 25-30 bed single room occupancy facility (SRO)
- establish a six-bed set-aside in an existing facility for homeless persons requiring medical attention
- add 1.5 full time equivalent mental health counselors for evenings/weekends at homeless shelters

- establish partnerships and identify resources for additional permanent housing for homeless persons

The City included each of those priorities in the new Consolidated Plan. The Safe Haven project received operating funds from HUD after the Committee's comments were written. The City had already approved capital funds for the project. It should be operational in early FY 2007. The other priorities are included in the Plan without a specific commitment to location or funding. The City will consider specific proposals on a case-by-case basis.

Written comments were also received from **Ed Rea, Executive Director of the Arlington/Alexandria Coalition for the Homeless (AACH)**. Mr. Rea expressed his organization's concern that HUD funding for transitional housing has not kept pace with inflation or declined, forcing AACH to cut the number of transitional units for Alexandria families from 18 to 10. He requested that the City provide funds to restore those lost from other sources. The new Plan contains a goal to increase the number of transitional beds, though without a City funding commitment. AACH has subsequently applied to the City's Housing Trust Fund for monies to restore part of the lost capacity. That application is still pending.

During the Plan development process, other citizens and organizations sent comments or met with staff to discuss their requests.

Nancy Carson and James Hoben of Housing Action, a citizen advocacy organization that promotes affordable housing, met with staff and presented written comments. Their points included:

- establish a dedicated funding source for the Housing Trust Fund
- provide real estate tax relief to owners of set-aside and Habitat for Humanity-developed units
- preserve and expand affordable housing, both rental and sales
- establish specific affordable housing goals and targets
- fund a consultant-led community process to address affordable housing needs and set goals and priorities, to be completed in FY 2006

The first issue is being considered by City Council in the context of the FY 2006 budget process. Options include using new revenue from the real estate recordation tax and dedicating a portion of the City's property tax to affordable housing. Council will not decide on these options until May, 2005.

The second issue is being handled by the City's Office of Real Estate Assessment and is discussed in Section of the Consolidated Plan. The Director of Real Estate Assessments believes that an administrative solution can be found to address this issue.

The third and fourth bullets are addressed in the Consolidated Plan, with specific goals for the development and preservation of affordable rental and sales housing.

The final issue, a consultant-led planning process, has been proposed and will be considered in the context of the FY 2006 budget process.

Paula Riley, Executive Director of the Alexandria Economic Development Partnership (AEDP), met with staff to request that the business assistance loan program be reinstated. Staff explained that the former program was terminated for lack of participation. Although no funding is recommended for this activity in City FY 2006, it is possible that such a program could be reconsidered in the future, subject to the availability of funds.

Finally, staff from the **Boys and Girls Club of Alexandria** met with City staff to request funding for further renovations to its facility. Such funding requests would be addressed by issuing a competitive request for proposals, if funding became available.

A second public hearing on the Action Plan for City FY 2005 was held by City Council at its regular City Council public hearing on Saturday, April 16, 2005. **Nancy Carson and Robert Eiffert of Housing Action** stated that the goal of developing or preserving 500 units is not enough, and that there is a need for a dedicated revenue stream in addition to the recordation tax monies included in the City Manager's Proposed FY 2006 Budget. In addition, Ms. Carson called for a vision study, to include a survey of public properties and properties owned by faith institutions.

The City recognizes that the need for affordable units exceeds the 500 units included in the Consolidated Plan, but at the same time recognizes the high cost of developing or preserving affordable units. The stated goal is not intended to set a cap on the number of units that will be preserved or developed over the next five years; additional units may be provided to the extent possible with available resources. With regard to dedicated revenues, the City Council approved the dedication of one cent on the real property tax rate for affordable housing beginning in FY 2006, and allocated \$889,815 in recordation tax revenues for affordable housing in FY 2006. While the City did not allocate funding for the visioning study recommended by Housing Action, staff will work to identify best practices for providing affordable housing, and will also work with Housing Action and the Alexandria Interfaith Association to explore possibilities for creating affordable opportunities using land owned by faith institutions.

APPENDIX II

HUD TABLES

HUD Table 1A
Homeless and Special Needs Populations

Continuum of Care: Housing Gap Analysis Chart

		Current Inventory	Under Development	Unmet Need/ Gap
Individuals				
Beds	Emergency Shelter	140	0	0
	Transitional Housing	47	0	4
	Permanent Supportive Housing	25	0	34
	Total	212	0	38
Persons in Families With Children				
Beds	Emergency Shelter	100	0	0
	Transitional Housing	46	0	5
	Permanent Supportive Housing	10	0	0
	Total	156	0	5

Continuum of Care: Homeless Population and Subpopulations Chart*

Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
1. Homeless Individuals	104 (N)	36 (N)	73 (N)	213 (N)
2. Homeless Families with Children	16 (N)	33 (N)	0 (N)	49 (N)
2a. Persons in Homeless Families with Children	53 (N)	148 (N)	0 (N)	201 (N)
Total (lines 1 + 2a)	157 (N)	184 (N)	73 (N)	414 (N)
Part 2: Homeless Subpopulations	Sheltered		Unsheltered	Total
1. Chronically Homeless	40 (N)			
2. Seriously Mentally Ill	14 (N)			
3. Chronic Substance Abuse	55 (N)			
4. Veterans	19 (N)			
5. Persons with HIV/AIDS	2 (N)			
6. Victims of Domestic Violence	13 (N)			
7. Youth	0 (N)			

* An "N" designation indicates that the data shown was derived from the City's homeless enumeration (also called the point-in-time count). Other possible sources of data on homeless persons are administrative records ("A"), statistically reliable samples ("S") or estimates ("E").

**Table 1B
Special Needs (Non-Homeless) Populations**

SPECIAL NEEDS SUBPOPULATIONS	Priority Need Level High, Medium, Low, No Such Need	Unmet Need	Dollars to Address Unmet Need	Goals
Elderly				
Frail Elderly	High	480	Not Yet Determined	100
Severe Mental Illness	Medium	28	\$1,196,215	28
Developmentally Disabled	Medium	23	\$722,839	23
Physically Disabled				
Persons w/ Alcohol/Other Drug Addictions	Medium	28	\$260,968	28
Persons w/HIV/AIDS	High	25	\$276,000	10
Other				
TOTAL		584	\$2,456,022	189

HUD TABLE 2A
Priority Housing Needs Summary Table*

PRIORITY HOUSING NEEDS (households)		Priority Need Level** High, Medium, Low		Unmet Need***	Goals (Households Assisted)
Renter	Small Related (2-4 persons)	0-30%	M	1,444	Annual: 0 5-Year: 0
		31-50%	H	1,370	Annual: 5(A), 5(B) 5-Year: 50
		51-80%	H	1,060	Annual: 5(A), 9(B) 5-Year: 70
	Large Related (5 or more persons)	0-30%	M	440	Annual: 0 5-Year: 0
		31-50%	H	443	Annual: 1(A), 1(B) 5-Year: 15
		51-80%	H	330	Annual: 1(A), 1(B) 5-Year: 10
	Elderly (1 or 2 person households where at least one member is at least 62 years of age)	0-30%	M	773	Annual: 0 5-Year: 0
		31-50%	M	369	Annual: 0 5-Year: 0
		51-80%	M	215	Annual: 0 5-Year: 0
	All Other (includes single-person households)	0-30%	M	1,645	Annual: 0 5-Year: 0
		31-50%	H	1,853	Annual: 2(A), 3(B) 5-Year: 25
		51-80%	H	1,404	Annual: 2(A), 6 (B) 5-Year: 40
	Owner	0-30%	H	853	Annual: 4 (C) 5-Year: 20
		31-50%	H	859	Annual: 4 (C) 5-Year: 20
		51-80%	H	817	Annual: 4 (C) 5-Year: 20
Special Needs	0-80%	H	1,968	Annual: 14(D), 3(C) 12(E, starting FY2007) 5-Year: 144	
Total Goals					5-Year: 409
Total 215 Goals					Annual: 44 (A,B,C) 5-Year: 220
Total 215 Renter Goals					Annual: 41(A,B) 5-Year: 205
Total 215 Owner Goals					Annual: 3(C) 5-Year: 15

Federally-funded NEW (not continuing) assistance only: A-Housing Development/Preservation Assistance C-Home Rehabilitation/Repair D-Supportive Housing E-Safe Haven B-Home Purchase

* As required by HUD, priority levels assigned in this table reflect the likelihood that federal funds will be used alone or in conjunction with non-federal funds to address the housing needs of the specified target group during the Consolidated Plan period
 ** Percentages are percentage of area median income used to reflect the following income categories as defined in Table A: extremely low-income (0-30%), low-income (31-50%) and moderate-income (51-80%). As described in the Introduction, the upper limit for the moderate-income category is less than 80% of area median income.
 *** Needs data presented in this table is based on HUD tabulations of data from the 2000 U.S. Census (see Table H in Section II of the Consolidated Plan document).

HUD Table 2C
Summary of Specific Housing/Community Development Objectives

Obj #	Specific Objectives	Performance Measure	Expected Units
RENTAL HOUSING OBJECTIVES			
1	Preserve and maintain the existing supply of 1,150 public housing and replacement public housing units for households at or below HUD's moderate-income limits.	Units	Annual: 1,150 5-Year: 1,150
2	Subject to the availability of resources, preserve and maintain the existing supply of approximately 2,114 privately-owned rental units with project-based assistance available to households at or below HUD's moderate-income limits.	Units	Annual: 2,114 5-Year: 2,114
3	Provide tenant-based rental housing subsidies to an estimated 1,700 households per year that are at or below HUD's moderate-income limits.	Households	Annual: 1,700 5-Year: 1,700 per year
4	Provide 500 rental housing units affordable to households at or below the limit used for the Low Income Housing Tax Credit Program of 60% of area median income through new development or preservation of existing affordable market rate rental housing.	Units	Annual: 100 5-Year: 500
5	Secure 50 affordable rental units in new developments pursuant to the City's Affordable Housing Policy.	Units	Annual: 10 5-Year: 50
OWNER HOUSING OBJECTIVES			
1	Provide financial assistance to 250 households meeting income and other eligibility criteria to secure ownership housing.	Units	Annual: 50 5-Year: 250
2	Educate 2,250 prospective low- and moderate-income homebuyers on the home purchase process.	Households	Annual: 450 5-Year: 2,250
3	Provide no-interest rehabilitation loans to 50-75 homeowner households with incomes at or below HUD's moderate-income limits.	Units	Annual: 10 5-Year: 50-75
4	Provide modest, free repairs or renovations to 200 owner-occupied housing units for households at or below HUD's moderate-income limits.	Units	Annual: 40 5-Year: 200
5	Reduce the property tax burden for an estimated 700 income-eligible households per year to promote housing affordability.	Households	Annual: 700 5-Year: 700 per year
COMMUNITY DEVELOPMENT OBJECTIVES			
1	The City's Code Enforcement Bureau undertakes aggressive monitoring of properties throughout the City for compliance with building, fire and maintenance code.	City-wide	City-wide
INFRASTRUCTURE OBJECTIVES			
1	Address ADA requirements regarding wheelchair ramps at intersections throughout the City.	City-wide	City-wide
PUBLIC FACILITIES OBJECTIVES			
1	Provide recreational and cultural programming to residents in areas of the City with high concentrations of households with incomes at or below HUD's moderate-income limits through the operation of three recreation centers.	Facilities	Annual: 3 5-Year: 3 per year
PUBLIC SERVICES OBJECTIVES			
1	Maintain or improve the physical and/or psychosocial functioning of 450 elderly and frail elderly City residents per year.	Persons	Annual: 450 5-Year: 450 per year
2	Provide an estimated 55,000 taxi and wheelchair accessible van trips each year through paratransit programs.	Trips	Annual: 55,000 5-Year: 55,000 per year
ECONOMIC DEVELOPMENT OBJECTIVES			
1	Provide job training to citizens including persons with incomes at or below HUD's moderate-income limits.	People	Annual: 2,000 5-Year: 10,000
OTHER OBJECTIVES			

HUD Table 1C
Summary of Specific Homeless/Special Needs Objectives

Obj #	Specific Objectives	Performance Measure	Expected Units
HOMELESS OBJECTIVES			
1	Provide a Safe Haven facility to shelter homeless persons with mental illness and possibly a co-occurring substance abuse problem, including the chronically homeless, who are unable to conform to standard emergency shelter, transitional housing and supportive housing programs.	Facilities	Annual: Not Applicable 5-Year: 1
2	Provide 21 facility-based and 40 tenant-based transitional housing placements per year.	Households	Annual: 61 5-Year: 61 per year
3	Identify resources to increase transitional housing capacity to former caseload levels by adding 8 placement options.	Households	Annual: Not Applicable 5-Year: 8
4	Develop affordable housing for single adults with incomes at or below HUD's extremely low-income limit (e.g., single room occupancy or SRO style housing).	Facilities	Annual: Not Applicable 5-Year: 1
SPECIAL NEEDS OBJECTIVES			
1	Develop or support the development of an assisted living facility which can accommodate elderly persons with incomes at or below HUD's moderate-income limits who are unable to live independently in the community.	Facilities	Annual: Not Applicable 5-Year: 1
2	Improve living conditions for 225 elderly homeowners with incomes at or below HUD's moderate-income limits occupying ownership units with physical defects and/or that are in need of accessibility modifications.	Units	Annual: 45 5-Year: 225
3	Relieve the housing cost burden for over 900 income-eligible elderly renters and/or homeowners per year.	Households	Annual: 900 5-Year: 900 per year
4	Improve living conditions for eight non-elderly disabled homeowners with incomes at or below HUD's moderate-income limits occupying ownership units with physical defects and/or that are in need of accessibility modifications.	Units	Annual: 2 5-Year: 8
5	Support accessibility modifications in 15 existing privately-owned rental housing units occupied by disabled renters with incomes at or below HUD's moderate-income limits.	Units	Annual: 3 5-Year: 15
6	Relieve housing cost burden for 70 income-eligible non-elderly disabled renters and/or homeowners per year.	Households	Annual: 70 5-Year: 70 per year
7	Continue to provide a continuum of residential treatment services to individuals with mental health, mental retardation and/or substance abuse problems.	Persons	Annual: 239 5-Year: 239 per year
8	Develop four new group homes with an estimated total capacity of 24 beds to provide permanent residential treatment services for persons with mental health, mental retardation and/or substance abuse problems.	Units	Annual: Not Applicable 5-Year: 4
9	Develop 15 supervised apartments with an estimated total capacity of 45 beds to provide permanent residential treatment services for persons with mental health, mental retardation and/or substance abuse problems.	Units	Annual: Not Applicable 5-Year: 15
10	Provide 10 tenant-based rental vouchers through the Section 8 Housing Choice Voucher Program to enable more individuals with mental health, mental retardation and/or substance abuse problems to secure affordable permanent supportive housing within the City.	Households	Annual: 10 5-Year: 10 per year
11	Maintain 10 tenant-based rental housing vouchers to provide rent subsidies to income-eligible persons living with HIV/AIDS and their families.	Households	Annual: 10 5-Year: 10 per year

APPENDIX III

**ALEXANDRIA REDEVELOPMENT AND HOUSING AUTHORITY
- PHA AGENCY PLAN, 2005-2009**

ARHA

PHA - AGENCY PLAN 2005-2009

ARHA Board of Commissioners:

*A. Melvin Miler, ARHA Board Chairman
Carlyle C. Ring Jr., ARHA Board Vice Chairman
Ruby J. Tucker
Peter H. Lawson
Carter D. Flemming
Linda D. Cheatham
Leslie B. Hagan
Fletcher S. Johnston
Richard J. Blade*

*By: William M. Dearman, C.E.O.
Date published: 7/25/2004 & 9/12/2004*

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VA004a01 – DECONCENTRATION PLAN

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VA004d01 – CAPITAL FUND 2002, P & E

VA004e01 – CAPITAL FUND 2003, P & E

VA004f01 – CAPITAL FUND 2003, P & E

VA004g01 – CAPITAL FUND 2004, P & E

PHA BOARD CERTIFICATION

CERTIFICATION BY LOCAL OFFICAL

HUD CERTIFICATION OF TRANSMISSION

VA004v01 - AGENCY PLAN 2005-2009

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

PHA Plans

5 Year Plan for Fiscal Years 2005 - 2009
Annual Plan for Fiscal Year 2005

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHA Name: Alexandria Redevelopment and Housing Authority

PHA Number: VA004

PHA Fiscal Year Beginning: (01/2005)

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2005 - 2009
[24 CFR Part 903.5]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies: ARHA has reduced vacancies down to 2-3% and has maintained this rate for a number of months.
 - Leverage private or other public funds to create additional housing opportunities: Request money from City to assist with Section 8 Housing Assistance Payment
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score). This year the PHAS score increased from 78 to 85.
 - Improve voucher management: (SEMAP score) This year the SEMAP score increased from 71 to 81
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (public housing finance;)
 - Renovate or modernize public housing units: Glebe Park.
 - Demolish or dispose of obsolete public housing: Jefferson Village and Glebe Park

- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program: Collaborate with the City to use State grant funding and City down payment assistance to further ARHA policies for homeownership.
- Implement public housing or other homeownership programs: Collaborate with the City to use State grant funding and City down payment assistance to further ARHA policies for homeownership.
- Implement public housing site-based waiting lists: Chatham Square
- Convert public housing to vouchers:
- Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: HOPE VI initiative.
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements: Ladrey Highrise
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families: through the Section 3 initiative, 12 residents have secured employment.
- Provide or attract supportive services to improve assistance recipients' employability: residents are involved in training through City Joblink.
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below):
Family Self Sufficiency (FSS) program.

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: HOPE VI initiative will increase number of accessible units by 21.
 - Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2005
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**
- Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Alexandria Redevelopment & Housing Authority (ARHA) is one of the nations oldest public housing authorities. Established in 1939, ARHA is currently governed by a nine member Board of Commissioners. The City Council of Alexandria appoints the board members, including one resident representative. The Chief Executive Officer, William M. Dearman, handles day-to-day operations aided by a professional staff of more that eighty full and part-time employees.

This document serves the ARHA as its annual plan for the period beginning January 1, 2005 and extending to December 31, 2005. In accordance with the 1998 Quality in Housing and Work Responsibility Act (QHWRA), this document, along with the 5-Year Plan, was made available for public view on July 25, 2004, and September 12, 2004, 56 and 8 days respectively, prior to the public hearing that was held on September 20, 2004.

The 2004 fiscal year has been a productive one. Phase I of the HOPE VI closed in January and the phase II is scheduled to close in November. Construction commenced on the 152 phase I units in November 2003; the 52 public housing units will begin turning over in December of 2004 and the project will be fully leased and occupied by December of 2005. The 100 market rate units are 80% sold out with prices starting at \$800,000 and going as high as \$1.7 million. Construction is scheduled to begin November 15 on the 48 phase II units.

ARHA will also be adding a new chapter to the ACOP, which is a trespass barment policy.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a SEPARATE file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration
- FY 2000 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program.	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually, use as many lines as necessary)	(Specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact" Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ability	Size	Location
Income <= 30% of AMI	3,611						
Income >30% but <=50% of AMI	3,753						
Income >50% but <80% of AMI	2,864						
Elderly	1,448						
Families with Disabilities	175						
Race/Ethnicity	68,889 or 53.7%						
Race/Ethnicity African American	28,463 or 22.2%						
Race/Ethnicity Hispanic	18,882 or 14.7%						
Race/Ethnicity Asian & Pacific Islander	7,299 or 5.7%						
Native American	255 or 0.02%						
Other and Multiple Races	4,495 or 3.5%						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year: 2000 – 2005, Table 2A
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)
Gazette Packet September 30, 2004, pg; 3 Welcome from Mayor William D. “Bill” Euille.

B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List

06/02/04

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)
 If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	1384		205
Extremely low income <=30% AMI	1206	87.14%	
Very low income (>30% but <=50% AMI)	167	12.07%	
Low income (>50% but <80% AMI)	11	0.79%	
Families with children	1130	81.65%	
Elderly families	38	2.74%	
Families with Disabilities	247	17.85%	
Race/ethnicity (White)	94	6.79%	
Race/ethnicity (African American)	944	68.21%	
Race/ethnicity (Asian)	28	2.02%	
Race/ethnicity (Indian)	11	0.79%	
Ethnicity (Spanish)	139	10.04%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)? 36 months

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes

Housing Needs of Families on the Waiting List

06/31/04

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing + Elderly/Disabled
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)
 If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	1128		314
Extremely low income <=30% AMI	1023	90.69%	
Very low income (>30% but <=50% AMI)	94	8.33%	
Low income (>50% but <80% AMI)	11	0.98%	
Families with children	942	83.51%	
Elderly families	186	16.48%	
Families with Disabilities	61	5.41%	
Race/ethnicity (White)	146	12.94%	
Race/ethnicity (African American)	788	69.86%	
Race/ethnicity (Asian)	11	0.98%	
Race/ethnicity (Indian)	35	3.10%	
Ethnicity (Spanish)	148	13.12%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	523	46.37%	101
2 BR	331	29.34%	145
3 BR	218	19.33%	50
4 BR	55	4.88%	6
5 BR	1	0.09%	12
5+ BR			

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)? 19 months

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes, the elderly/disabled list remains open.

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development: ARHA did not lose PH housing through mixed finance development but chose to replace 1 for 1.
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required: Security deposit program.
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program: Criminal checks
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below):
Combine Section 8 tenant based waiting list with owners moderate rehabilitation list.

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below):
Pursue Homeownership opportunities.

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below):
Both Section 8 and Public Housing waiting lists have over 85% of the families with incomes at or below 30% of A.M.I.

Family Unification Program (FUP) from model court referrals (70 units)
Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI
 Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work: Allowances for families that pay alimony and child support.
- Other: (list below):
Use of flat rent in public housing
Family Unification Program (FUP) from model court referrals (70 units).

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:
 Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:
 Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)
Of the 100 new HOPE VI units, 21 will be accessible under the Uniform Federal Accessibility Standards or adaptable under 504. This percent will be equipped for hearing/site impaired.

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below):
Utilize bilingual staff to communicate in both verbal and written forms.
Advertise in all major and local ethnic newspapers.

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them in locating those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below):
Continue to push HUD for answer to ARHA request to utilize reserves for security deposit payments

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below): Limited stock of family size units in Alexandria
Limited bedroom plus size units in Alexandria that are affordable.

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the

Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2005 grants)		
a) Public Housing Operating Fund	2,889,000	
b) Public Housing Capital Fund	1,471,619	Public Housing Capital Improvements
c) HOPE VI Revitalization	6,716,250	Public Housing Redevelopment
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	15,600,000	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	Ø	
g) Resident Opportunity and Self-Sufficiency Grants	1,063,200	Public Housing Supportive Services
h) Community Development Block Grant		
i) HOME	Ø	
Other Federal Grants (list below)		
HOPWA	120,000	
Welfare to work	Ø	
Other: Mod. Rehab.	998,747	
Title I	25,000	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
CGP	1,421,775	
3. Public Housing Dwelling Rental Income	4,104,000	
4. Other income (list below)		
Entrepreneurial Activities		Bond program income
Rental		Market rate rental
Interest Income	14,000	Public Housing operations
Other	473,458	Public Housing operations
5. Non-federal sources (list below)		
Tax Credit	8,863,582	
Interest on investments	184,300	Public Housing operations
Total resources	41,126,325	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number) 4
- When families are within a certain time of being offered a unit: (state time) 30 days
- Other: (describe) Citizenship

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other: (describe) Citizenship

c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2) Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists: Chatham Square, Braddock, Whiting, and Reynolds
- Other (describe) Individuals can apply for Elderly/disabled waiting list.

b. Where may interested persons apply for admission to public housing?

- PHA main administrative office
- PHA development site management office
- Other (list below) PHA Housing Operations Office 18 Roth St Alexandria VA 22314

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) Assignment

1. How many site-based waiting lists will the PHA operate in the coming year? 1

2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists? 1

3. Yes No: May families be on more than one list simultaneously?
If yes, how many lists? All

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below):
Housing Operation Office 18 Roth Street Alexandria, VA 22314

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- One
- Two
- Three or More

b. Yes No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA: Disabled applicant may receive more than one offer if they request a reasonable accommodation.

(4) Admissions Preferences

a. Income targeting:

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- Emergencies
- Overhoused
- Underhoused

- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below):
Fire, flood or reasonable accommodation

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below):
Working

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences:

- 2 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 2 Victims of domestic violence
- 2 Substandard housing
- 2 Homelessness
- 2 High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability: 2
- Veterans and veterans' families: 2
- Residents who live and/or work in the jurisdiction: 1
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes): 2
- Households that contribute to meeting income requirements (targeting): 2
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below):
Working: 2

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list):
House Rules that are on an attachment to the Public Housing lease.

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

(6) Deconcentration and Income Mixing

a. Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. Yes No: Did the PHA adopt any changes to its admissions policies based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site-based waiting lists
If selected, list targeted developments below:
Chatham Square

Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:

Employing new admission preferences at targeted developments
If selected, list targeted developments below:

Other (list policies and developments targeted below)

d. Yes No: Did the PHA adopt any changes to other policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below):

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below: VA4-8 Andrew Adkins

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
- Criminal and drug-related activity, more extensively than required by law or regulation
- More general screening than criminal and drug-related activity (list factors below)
- Other (list below): Citizenship

b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

- c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
- Other (describe below):
Two previous landlord's names and addresses.

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting lists merged? (select all that apply)
- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below):
Owners Moderate Rehabilitation list.
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
- Other (list below): 18 Roth Street Alexandria, VA 22314

(3) Search Time

- a. Yes No: Does the PHA give extensions on the standard 60-day period to search for a unit?
- If yes, state circumstances below: Low vacancy rate; limited unit size mix; high rental rates; families needing bilingual assistance; families who cannot pay more than 40% of the total tenant payment for contract rent

(4) Admissions Preferences

a. Income targeting

- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below): Working: 2

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences

- 2 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 2 Victims of domestic violence
- 2 Substandard housing
- 2 Homelessness
- 2 High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability: 2
- Veterans and veterans' families: 2
- Residents who live and/or work in your jurisdiction: 1
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes): 2
- Households that contribute to meeting income requirements (targeting): 2
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below): Working : 2

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- Date and time of application and residency.
 Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- This preference has previously been reviewed and approved by HUD
 The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
 Not applicable: the pool of applicant families ensures that the PHA will meet income-targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- The Section 8 Administrative Plan
 Briefing sessions and written materials
 Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- Through published notices
 Other (list below):
City cable television network. ARHA Board docket published monthly. Libraries.

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

—or—

- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0
 \$1-\$25
 \$26-\$50

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

c. Rents set at less than 30% than adjusted income

1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- For the earned income of a previously unemployed household member
 For increases in earned income
 Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

- For household heads
 For other family members
 For transportation expenses
 For the non-reimbursed medical expenses of non-disabled or non-elderly families
 Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments
 Yes but only for some developments
 No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below):
City of Alexandria VA Tenant Landlord of rent limitations when tenants and owners pay utilities

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) _____
- Other (list below):
Any time there is a change in family income or composition.

g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below):
75% of operating costs rental value of unit; City policy reporting rent increases.

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually
- Other (list below): Twice a year.

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below): Current reduction suggestions in the Section 8 budget for FY 2004

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50

- b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.79 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

An organization chart showing the PHA's management structure and organization is attached.

A brief description of the management structure and organization of the PHA follows:

ARHA's hierarchical structure is built around functional specialization and centralization and centralized authority. This structure makes good strategic and organizational sense because (1) activities can be divided into simple repeatable tasks that can be mastered quickly and then efficiently performed in mass quantity, (2) there are important benefits to deep functional expertise in each managerial discipline and (3) customer needs are sufficiently standardized in a way that is easy to prescribe procedures to satisfy them.

ARHA is governed by a nine-member Board of Commissioners appointed by the Alexandria City Council to staggered, four-year terms. One commissioner serves as the representative of the city's Landlord Tenant Relations Board, and one commissioner serves as the representative of the Alexandria Resident Council, ARHA's public housing resident organization. The Board has one staff position, the Chief Executive Officer (C.E.O.) The C.E.O. has an Executive Secretary and three top level staff persons whom report directly to him.

The agency is divided into three functional areas: Finance, Housing Operations, and Development. All three department heads report directly to the C.E.O.

Finance is responsible for all tasks related to the fiscal, administrative, Management Information Systems and procurement activities of the agency and is staffed by a Director, Section 8/Tenant Account, Accounts Payable Clerk, Purchasing Agent, Grant Accountant, MIS manager, Senior Accountant (2).

Housing Operations oversees the public housing, moderate rehabilitation, project-based voucher and Section 8 housing choice voucher programs of the agency. Staff includes a Director, Housing Program Supervisor, Rent Collection Officer, (2) Housing Inspectors, Waiting List assistant, (3) Administrative Assistants, (11) Section 8 Placement Officers and (5) Public Housing Placement Officers, and (1) Quality Control Placement Officer.

Social Services is under the umbrella of Housing operations and is the provider and clearinghouse for social programs designed to enable those receiving various forms of governmental assistance to become financially self-sufficient. The department also offers a

number of educational opportunities for children and adults in public housing. This department is staffed by a Social Services Coordinator, Senior Services Coordinator, ROSS Coordinator, FRLC Director, Security and Drug Elimination Coordinator. Also, included in Housing Operations is the Charles Houston Senior Center. This group includes a second Senior Services Coordinator, Assistant Coordinator and Nutritionist.

The Director of the Department of Development is responsible for the direct supervision of the Facilities Manager, Modernization Manager, Special Projects Coordinators, Asset Manager and two Administrative Assistants. The Facilities Manager is responsible for the Work Order Coordinator, Work Order Intake/Inventory Clerk, (2) crew leaders, and an HVAC technician. Each of the two-crew leaders supervises 3 to 5 technicians depending on workload. The Special Projects Coordinator who assists the Director in the management of the HOPE VI Program supervises a HOPE VI Community Builder. The Modernization Manager who assists in the management of the Capital Funds Program supervises crew leaders for the vacant unit crew and the force account crew and completes various Capital Funds Projects. There are approximately 20 force account crew positions ranging from skilled labor to laborer/custodian. The Asset Manager supervises a Preventative Maintenance crew of five.

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	734	8%
Section 8 Vouchers	1694	7%
Section 8 Certificates	N/A	N/A
Section 8 Mod Rehab	107	5%
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	N/A
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A
Other Federal Programs(list individually)		
HOPWA	14	2

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

1. Public Housing Maintenance and Management: (list below):

- Admissions and Continued Occupancy Policy (ACOP)
- 2. UPCS for inspections
- 3. Federal regulations and notices.
- 4. Section 8 Management: (list below):
 - Section 8 administrative Plan
 - HQS for inspections
 - All applicable federal regulations and notices.

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6.
Section 8-Only PHAs are exempt from sub-component 6A.

2. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- PHA main administrative office
- PHA development management offices
- Other (list below):
18 Roth Street Alexandria, VA 22314

B. Section 8 Tenant-Based Assistance

1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- PHA main administrative office
- Other (list below): 18 Roth Street Alexandria VA 22314

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template OR, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	\$0.00
2	1406 Operations	\$147,177.00
3	1408 Management Improvements	\$294,400.00
4	1410 Administration	\$147,177.00
5	1411 Audit	\$3,000.00
6	1415 Liquidated Damages	\$0.00
7	1430 Fees and Costs	\$60,021.00
8	1440 Site Acquisition	\$0.00
9	1450 Site Improvement	\$425,000.00
10	1460 Dwelling Structures	\$350,000.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00
12	1470 Nondwelling Structures	\$0.00
13	1475 Nondwelling Equipment	\$0.00
14	1485 Demolition	\$0.00
15	1490 Replacement Reserve	\$0.00
Line No.	Summary by Development Account	Total Estimated Cost
16	1492 Moving to Work Demonstration	\$0.00
17	1495.1 Relocation Costs	\$0.00
18	1498 Mod Used for Development	\$0.00
19	1502 Contingency	\$0.00
20	Amount of Annual Grant (Sum of lines 2-19)	\$1,421,775
21	Amount of line 20 Related to LBP Activities	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00
23	Amount of line 20 Related to Security	\$0.00
24	Amount of line 20 Related to Energy Conservation Measures	\$0.00

**Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
Operations Management Improvements	Agency-Wide	1406	\$142,177
	Preventative Maintenance	1408	\$237,900
	Resident Initiatives	1408	\$25,000
	Staff Training	1408	\$6,454
	Computers	1408	\$25,000
HA-Wide Admin	Technical/Non-technical Support Staff Salary and benefits	1410	147,177
Audit Fees	Audit	1411	\$3,000
HA-Wide Fees & Costs	A/E Support for Mod. Projects	1430	\$60,021
VA4-3 Samuel Madden (Uptown)	Upgrade Underground Sewer Main System	1450.02	\$150,000
VA4-10 Scattered Sites	Roof Replacement/repair	1460.01	\$575,000
VA4-9 Ladrey	Repair Balconies/Handrailing/Drainage	1460.03	\$50,000

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template OR by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund?
(if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name: Samuel Madden Homes (Downtown)
2. Development (project) number: VA4-03
3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

VA4-14, Glebe Park Apartments; VA4-3 Samuel Madden Uptown

Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

Revitalization of Glebe Park Apartment.

Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C.

1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

2. Activity Description

Yes No: Has the PHA provided the activities description information in the optional Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

Demolition/Disposition Activity Description	
1a. Development name:	Glebe Park Apartments
1b. Development (project) number:	VA4-14
2. Activity type:	Demolition <input checked="" type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one)	Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	(12/01/04)
5. Number of units affected:	40
6. Coverage of action (select one)	<input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity:	a. Actual or projected start date of activity: 09/05 b. Projected end date of activity: 12/07

Demolition/Disposition Activity Description	
1a. Development name:	Jefferson Village
1b. Development (project) number:	VA4-15
2. Activity type:	Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one)	Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	(12/01/04)
5. Number of units affected:	50
6. Coverage of action (select one)	<input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity:	a. Actual or projected start date of activity: 10/04 b. Projected end date of activity: 12/05

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description
 Yes No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name:	Ladrey Highrise
1b. Development (project) number:	VA4-9
2. Designation type:	Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one)	Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission:	(01/07/05)
5. If approved, will this designation constitute a (select one)	<input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:	170
7. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.79 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description
 Yes No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.79 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to small PHA or high performing PHA status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

Yes No:

Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	
	<input type="checkbox"/> HOPE I
	<input type="checkbox"/> 5(h)
	<input type="checkbox"/> Turnkey III
	<input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	
	<input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program
	<input type="checkbox"/> Submitted, pending approval
	<input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	
	<input type="checkbox"/> Part of the development
	<input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs may skip to component 12.**)

2. Program Description:

a. Size of Program

- Yes No:

Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
 26 - 50 participants
 51 to 100 participants
 more than 100 participants

b. PHA-established eligibility criteria

- Yes No:

Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below: See Chapter 30 in section 8 Administration Plan.

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.79 (f)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? 10/08/02

1. Other coordination efforts between the PHA and TANF agency (select all that apply)

- Client referrals
 Information sharing regarding mutual clients (for rent determinations and otherwise)

- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
 - Jointly administer programs
 - Partner to administer a HUD Welfare-to-Work voucher program
 - Joint administration of other demonstration program
 - Other (describe)
- B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas?

(select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

1. Economic and Social Self-Sufficiency programs

Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Senior Services Coordination	400	Specific criteria	PHA Office	Both

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: 09/10/04)
Public Housing		3
Section 8	91	83

- b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below): Resident police officers.

3. Which developments are most affected? (list below):
 Samuel Madden Uptown, Jefferson Village, Andrew Adkins, Ramsey House, James Bland Homes, James Bland Addition, Ladrey High-Rise

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

1. Which developments are most affected? (list below):
 Samuel Madden Homes (Uptown), Jefferson Village, Andrew Adkins, James Bland Homes, James Bland Addition, Ladrey High-Rise

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

2. Which developments are most affected? (list below): All Sites.

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2004 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ___)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)] See ACOP for Pet Policy

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

- 1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
- 2. Yes No: Was the most recent fiscal audit submitted to HUD?
- 3. Yes No: Were there any findings as the result of that audit?
- 4. Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
- 5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have not been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
- Not applicable
- Private management
- Development-based accounting
- Comprehensive stock assessment
- Other: (list below)
3. Yes No: Has the PHA included descriptions of asset management activities in the optional Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.79 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA MUST select one)
- Attached at Attachment (File name)
- Provided below:

RAB REPORT FROM LADREY HIGH-RISE REPRESENTATIVES

SEPTEMBER 16, 2004

Ladrey High-Rise
RAB Representatives
300 Wythe Street
Alexandria, Virginia 22314

September 16, 2004

Mr. Robert A. Minatee
Modernization Manager
600 North Fairfax Street
Alexandria, Virginia 22314

Dear Mr. Minatee:

The members of Ladrey high-rise RAB members are pleased with the Regulations which are already in place as regards the ARHA ADMISSIONS AND CONTINUED OCCUPANCY PLAN AS DRAFTED AUGUST 20, 2004.

We felt that the regulations would be more useful and meaningful if they were strictly enforced.

We see a need for stronger enforcement of the following regulations:

CHAPTER 1,
STATEMENT OF POLICIES AND OBJECTIVES
SECTION A
PARAGRAPH 2

Page 1-1

Which speaks of a goal to operate Drug Free, decent, safe and sanitary housing for tenants and their families. The issue here is that we do have drug traffic here in Ladrey, we also have intoxicated people staggering around public areas every day. The Front doesn't always lock at night, other doors are being propped open, and the trash chute is constantly backing up. These things are neither safe, sanitary, or Drug Free. PLEASE ENFORCE THESE RULES.

CHAPTER 2
ELIGIBILITY FOR ADMISSION

SECTION A
PARAGRAPH 1

PAGE 2-1

States: In determining qualifications for tenancy, the ARHA will consider the following items: whether the conduct of the applicant in present or prior housing has been such that admission to the program would adversely affect the health, safety or welfare of other residents, or physical environment, or financial stability of the community. It tells what steps ARHA will take to make sure that the tenant is qualified.

CHAPTER 2
ELIGIBILITY FOR ADMISSION
SECTION A
PARAGRAPH 1
PAGE 2-1

THIS WILL BE DONE IN ORDER TO DETERMINE WHETHER INDIVIDUAL ATTRIBUTES, PRIOR CONDUCT, AND BEHAVIOR OF A PARTICULAR APPLICANT OR TENANT IS LIKELY TO INTERFERE WITH OTHER TENANTS IN SUCH A MANNER AS TO DIMINISH THEIR ENJOYMENT OR THE PREMISES BY ADVERSELY AFFECTING THEIR HEALTH, AND SAFETY OR WELFARE. We would strongly urge that you very strictly enforce THIS regulation, because of some very unfavorable situations which have occurred in the Ladrey Building in the last 2-3 years.

CHAPTER 2
SECTION C
LIVE IN ATTENDANTS
PAGE 2-6

DEFINITIONS OF LIVE IN ATTENDANTS NEED TO BE MORE STRICTLY ENFORCED, WE HAVE PEOPLE WHO HAVE MORE THAN ONE FAMILY MEMBER LIVING WITH THEM. THEY HAVE BEEN THERE FOR QUITE A WHILE.

We would like to suggest that, the fifteen-day written permission be strictly enforced, as stated in our leases. We have noticed a lot of non-residents using keys to get into the building and, they are living with relatives.

CHAPTER 2, SECTION F
Paragraph b.

SCREENING OUT ILLEGAL DRUG USERS and ALCOHOL ABUSERS:
Which is dealing the fact that Drug and Alcohol abuse which interferes with the peaceful enjoyment of the premises by tenants will be looked and proper steps used to eliminate the problem.

We suggest that THIS chapter be, taken very seriously, and followed to the letter of the law. We have people falling down drunk in public areas every day, which is a safety hazard for residents who are on scooters and in wheel chairs.

CHAPTER 10
PET POLICY
SECTION B
PAGE 10-2

4. NO DOG OR CAT SHALL EXCEED 15" IN HEIGHT AT THE SHOULDERS, OR WEIGH MORE THAN 25 POUNDS.
5. ALL DOGS AND CATS MUST BE SPAYED OR NEUTERED.

SECTION C
PAGE 10-3

SUB TOPIC a, d, and g address the issue of a service dog, what a service dog is who may have service dog, and who determines what is and is not a service dog.
We suggest to you that there is a difference between a SERVICE DOG, AND A DOG WHICH HAS GONE THROUGH OBEDIENCE TRAINING.

PET POLICY
SECTION D
PETS TEMPORARILY ON PREMISES
PAGE 10-4

Pets, which are NOT OWNED BY A TENANT, WILL NOT BE ALLOWED.

THIS rule excludes visiting pet programs sponsored by a humane society or other nonprofit organization.

We would suggest to you that, THIS RULE IS BEING VIOLATED BY SOME TENANTS ON A WEEKLY BASIS, THERE IS A TENANT WHO HAS A FEMALE BLACK LAB THAT IS EXPECTING A LITTER OF PUPS THAT, STAYS THE WEEKENDS HERE.

STATE AND LOCAL LAWS GOVERNING PETS TEMPORARILY IN DWELLING ACCOMMODATIONS SHALL PREVAIL.

IS IT POSSIBLE FOR US TO KNOW WHAT THIS LAW IS?

CHAPTER 11
SECTION B
PARAGRAPH C
PAGE 11-4
FAMILY CHOICE OF RENTAL PAYMENT

EXPLAINS THE CHOICES TENANTS ARE SUPPOSED TO HAVE IN THE WAY THEY PAY THEIR RENT, THE DUTIES AND RESPONSIBILITIES OF BOTH ARHA AND THE TENANTS.

WE WOULD SUGGEST TO YOU THAT AT THE MEETING LAST YEAR WE WERE TOLD THAT WE DONOT HAVE THIS CHOICE, AND IT WAS NOT AVAILBABLE TO US WHEN WE WERE RECERTIFIED. WILL IT ACTUALLY BE IN EFFECT THIS YEAR? IF NOT WHY IS IT INCLUDED IN THE REPORT?

CHAPTER 12
LEASE TERMINATIONS
SECTION B
TERMINATION BY ARHA
PAGE 12-1 -12-2

WE SUGGEST THAT THE FOLLOWING SUBTOPICS BE ENFORCED TO THE LETTER OF THE LAW: 3, 4, 5, 11, 14 AND 15.

WE APPRECIATE THE GREAT DETAILS IN THE REGULATIONS FOR ADMISSIONS AND CONTINUED OCCUPANCY DRAFT AS PREPARED ON, AUGUST 20, 2004, HOWEVER IT WAS QUITE REPETITIVE.

IT IS COMFORTING TO KNOW THAT LADREY IS BEING CONSIDERED AS A PLACE FOR AN RPO AS WE DESPERATELY NEED AN RPO HERE, TO CURTAIL SOME OF THE ACTIVITIES THAT GO ON IN AND AROUND THE BUILDING.

THE STATS WERE VERY HELPFUL AND, THE REPORT ON LBP, WAS VERY HELPFUL AND INFORMATIVE.

WE ALSO SUPPORT ARC, IN IT'S EFFORT TO MAKE LIFE MORE ENJOYABLE AND LIVABLE FOR THEIR RESIDENTS.

**RESIDENT ADVISORY BOARD
Alexandria Redevelopment Housing Authority**

**MEETING MINUTES:
AGENCY ANNUAL PLAN - REVIEW AND COMMENTS**

Date/Time: September 14, 2004
Location: 300 Wythe Street

ATTENDEE LIST

Name	Organization	Contact Information
Margo Tolliver	Ladrey RC	703-548-4092
Connie Lennox	ARHA	703-549-7115 Ex 231
Elijah Johnson	ARHA	703-549-7115 Ex 207 or 245
Bennie Burch	ARC	703-299-9197
Anita Payne	ARC	1019 Montgomery St.
Tracey Roberson	ARC	1020 Montgomery St.
Georgia Herrin	ARC	815 N. Alfred St.
Richard Blake	ARC	702-658-0931
Otis Weeks	Ladrey	703-549-1523
Robert Minatee	ARHA	703-549-7115 Ex 256

Ms. Lennox opened the meeting by thanking those in attendance for coming to participate in the process of reviewing and commenting on ARHA's Annual Plan submission for this year. She then introduced Elijah Johnson, Housing Program Supervisor, and Robert Minatee, Modernization Manager. She explained that the purpose of the meeting was to present to the RAB, the changes that have been made in this year's Annual Plan submission compared to last year's plan and to get written feedback from the RAB. Mr. Minatee then distributed copies of the ARHA PHA Plan draft and Mr.

Johnson distributed copies of the ARHA Admissions and Continued Occupancy Plan (ACOP) and Section 8 Admissions Plan. Mr. Johnson explained that the proposed changes in the ACOP and Section 8 Plan were shown either by crossing out the removed words or language or by inserting the new words or language using italicized letters.

Ms. Lennox reported that one change from last year's plan was the development of a Disposition Plan as required by HUD in order for ARHA to implement a conversion from public housing ACC to Section 8 vouchers at Glebe Park and Jefferson Village. She said that HUD did not all allow ARHA to convert from public housing leases to market rate leases last year because the rules were not promulgated for voluntary conversion.

Mr. Minatee then referred the attendees to the portion of the Annual Plan concerning the proposed 2004 Capital Fund Program (CGP) application. Ms. Lennox explained that the HUD program was an annual grant to the Authority of funds to be used for modernizing public housing through capital improvement projects and for improving the management of public housing. She said that funds had to be obligated or committed to projects within two years and fully expended within four years of HUD approval. Mr. Minatee said that the Authority performs a Physical Needs Assessment of all of its development communities to determine the scope of capital improvement work needed to make public housing healthy, safe and comfortable. He said that the capital improvement work was prioritized in such a way that health, safety and fire code compliance items would be addressed first, especially those items that have the potential to cause other damage (i.e., leaking roof could damage the interior of the unit), other building code enforcement items second and then residential unit improvements (i.e., the addition of air conditioning).

Mr. Minatee then reviewed the capital improvement projects proposed by ARHA for the Capital Fund Program's upcoming 2004 grant year. Ms. Roberson said that she felt that air conditioning should be installed in the Samuel Madden Uptown, community. Other members said that Andrew Adkins needed air conditioning as well. Ms. Lennox said that ARHA has used Capital Grant Program funds in the past for a number of renovations in the Madden community. She said that it has only been recently that HUD has permitted the use of Capital Fund (CF) dollars to install air conditioning in public housing. She said that the Authority recently replaced the gas furnaces in James Bland with a unit that was equipped to include air conditioning with the addition of coils and a condenser. If the funds become available, the equipment will be added but at that time the most urgent need was to replace the gas furnaces and bring the electrical service up to code. Several members asked about the policies concerning window air conditioning units, because it did not appear that the Ramsey Homes units were complying. Ms. Lennox and Mr. Johnson explained that fire code prohibits installing window air conditioning units in dwelling spaces that have only one window for emergency egress; HUD also inspects for this condition and the Authority must enforce that requirement. They said that ARHA staff has been instructed to report window air conditioning units in violation of the regulation to the Authority and that residents should do so as well.

Questions were asked about unit inspection procedures. Mr. Johnson explained that inspectors were not looking to "spy" on households, but to evaluate for housekeeping issues and that the lease requirements are being met. If the inspector does notice something in the normal course of the inspection, it is possible that follow-up actions could occur. Some attendees reported severe pest and rodent infestation in Samuel Madden, Uptown. They said that dead rats and burrows were in yard areas and that residents were throwing grease and leftover food out their back doors into the alley areas. They also said that household vegetable gardens contributed to the rodent problem. Ms. Lennox asked for specific addresses where that problem existed so that ARHA's exterminators could treat the problem and management could talk to the offenders.

After commenting on the Ladrey work items in the 2004 CFP proposal, an attendee asked if the hallway handrails at Ladrey could be secured. Ms. Lennox said that the work would be included in the

Preventative Maintenance program work. An attendee asked about making the Ladrey community room handicap accessible. Ms. Lennox said that ARHA had ordered levered door hardware to install for that purpose, but it was not of the institutional quality that was needed. She said that the status would be investigated and followed up.

Attendees then reported that the alley behind the block of 901-905 Montgomery Street was too dark and that gambling and fighting occurred throughout most nights. They said that the police would not investigate when they are called saying that if they do not see money present, the situation is not considered to be gambling. Ms. Lennox said that the Preventative Maintenance electrician would check the existing lighting and ARHA would upgrade in order to increase light levels. A question was asked about visiting dogs. Ms. Tolliver said that a Ladrey resident was dog sitting for a relative almost every weekend. It was a problem because the dog is not familiar with the Ladrey residents or its surroundings, which makes the situation potentially dangerous. Mr. Johnson directed the attendees to the Pet Policy section in the ACOP document. He said that the policy also applies to visiting dogs and applies to all pets.

Ms. Lennox closed the meeting by asking attendees to review the distributed materials and to provide their written comments concerning the documents to Mr. Minatee as soon as possible. She said that the deadline for submitting the written comments was not later than Monday, September 20th the date of the Public Hearing on the Agency Plan.

The Meeting was adjourned at 8:45 p.m.

3. In what manner did the PHA address those comments? (select all that apply)

- Considered comments, but determined that no changes to the PHA Plan were necessary.
 The PHA changed portions of the PHA Plan in response to comments
List changes below:

Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations
 Candidates could be nominated by any adult recipient of PHA assistance
 Self-nomination: Candidates registered with the PHA and requested a place on ballot
 Other: (describe)

b. Eligible candidates: (select one)

- Any recipient of PHA assistance

- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list): All adult recipients of PHA assistance.

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here): City of Alexandria

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plans.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Attachments

Use this section to provide any additional attachments referenced in the Plans.

**PHA Plan
Table Library**

VA004a01 – DECONCENTRATION PLAN

ADMISSIONS POLICY FOR DECONCENTRATION

According to recent information provided by the Washington, D. C. Council of Governments (COG), poverty has been defined in this area as follows:

- Low poverty is a census tract with less than 10% of the households below the poverty level.
- High poverty is a census tract with more than 10% of the households below the poverty level.

Maps and census tracts charts also provided by the Council of Governments indicate that there are eleven high poverty areas within the City of Alexandria. The specific Census Tracts with high poverty are 2001.03 (10.3%), 2001.05 (11.1%), 2003.01 (17.4%), 2003.03 (13.9%), 2005 (13.4%), 2008.02 (11.2%), 2012.03 (18.8%), 2016 (18.8%), 2018.01 (11.1%), and 2018.02 (15.3%).

The overall average income for ARHA's public housing residents has decreased from 14,028.54 to 13,490.57. The highest average income is 21,200.00 as of September 30, 2004. ARHA's scattered sites still have the higher average incomes. These results confirm that families applying for housing are primarily within the very low-income category. ARHA remains committed the reaching out to higher income families to increase their representation in public housing, however it remains difficult since waiting list applicants have incomes that in the extremely low-income category. James Bland Homes (148 units) remains the only public housing develop ARHA manages that is affected by the deconcentration regulation which exempts developments with fewer than 100 units, developments designated of elderly and or disable families, developments which consist of one general occupancy and development s approved for demolition or conversion to tenant based assistance.

For Section 8, ARHA continues to make every effort to reduce the number of Section 8 units in high poverty areas listed above. This has become more difficult as a result of HUD's recent budget cuts in the Housing Choice Voucher program; as well as the reduction in the Applicable Payment Standards for the metropolitan area of Washington, DC that went into effective October 1, 2004. Families will be forced to rent units in high poverty areas where rents are traditionally lower. Also, staff has begun to see a trend of families moving from single-family homes and town homes, to apartments where rents and utility payments are lower. ARHA's goal is to educate the participants in locating housing in other parts of the City of Alexandria and the region.

The Housing Counseling Consortium (HCC) is comprised of the City of Alexandria, Prince George County, Arlington County, Fairfax County, Prince William County, The District of Columbia, the City of Manassas, Montgomery County and the City of Rockville, Maryland. The Metropolitan Washington Council of Governments (COG) is the lead non-profit organization. COG utilizes a number of nonprofits within the region to provide direct housing counseling services to families from each participating jurisdiction. Other activities have included landlord

outreach to develop strategies to better market the Section 8 program in low poverty neighborhoods, developing a database to inventory the metropolitan rental housing stock, examination of housing agencies administrative plans, and addressing existing barriers to mobility.

ARHA works closely with the City of Alexandria's office of Housing to assist families with housing counseling and home ownership counseling. ARHA will also advertise a Request for Proposal (RFP) for housing counseling during the upcoming fiscal year.

DECONCENTRATION OF PUBLIC AND ASSISTED HOUSING

The purpose of the rule to deconcentrate poverty within public housing units and Section 8 voucher recipients is to promote economic integration. Deconcentration is achieved by bringing higher income tenants into lower income developments and lower income tenants into higher income developments. The rule applies to admissions, with both site-based and community-wide waiting lists included in the requirements.

There is a five-step approach to apply in enforcing the deconcentration rule. First, annually, ARHA must determine the average income of all residents in all general occupancy developments. This includes families residing in developments approved for demolition or conversion to tenant based assistance and families residing in public housing units in mixed financed developments.

Next, ARHA must determine the average income of all families residing in each building of each general occupancy development. After this, ARHA must determine which general occupancy development buildings have an average income higher than the ARHA average for general occupancy developments or "higher income buildings" and vice versa for "lower income buildings".

ARHA then will review the waiting lists; determine which families are "higher income families" those with income higher than the ARHA-wide average income and "lower income families" or those with incomes lower than the ARHA-wide average incomes.

After the above analysis is completed, when a unit becomes available for occupancy in a higher income building, ARHA must skip families on the waiting list if it is necessary to reach a lower income family. The opposite result will hold true for lower income buildings.

There will be instances where admissions under the deconcentration rule can be based on other criteria. This would occur when local admission preferences apply. ARHA may use local admissions policies, if doing so does not place a "higher income" family in a higher income building. The same holds true for lower income buildings.

The family has the discretion whether to accept an offer of a unit. ARHA cannot take any adverse action toward any eligible family for choosing not to accept an offer of a unit. However, ARHA can and does limit the number of offers received by applicants.

The rule also applies to scattered sites and small developments. If a development contains no structures that qualify as a building, the deconcentration requirement is applied to the entire development as if it were a building.

For the initial lease up of vacant public housing, the average income for the public housing units in each building must not exceed the ARHA average income for general occupancy public housing developments. After the initial lease up, the units are covered by deconcentration requirements unless the building which, contains these units, is classified as a lower income building.

In the case where ARHA has provided that families that resided in public housing on the site of a mixed finance or other development, the displaced family has a right to admission to a public unit in that development after revitalization, and the deconcentration rule does not apply.

OTHER DECONCENTRATION EFFORTS

The income targeting guidelines will address some of the deconcentration issues. ARHA continues to work with families to increase their job skills. ARHA has operated a Welfare-To-Work (WTW) program, provided GED classes and job placement. ARHA has also partnered with the Shiloh Baptist Church and the City of Alexandria's Housing Office to assist Section 8 and public housing families in purchasing a home. Along with our partners, we are able to provide home ownership counseling and financial assistance for purchasing a home. ARHA also continues to work with our Family Self Sufficiency participants with reaching their goal of impendence. ARHA will also open its public housing waiting list this during the fall of 2004 in an effort to attract high income families into public housing.

ARHA also continues to provide Security Deposit loans to families who wish to lease a unit within Alexandria with funds obtained from the City of Alexandria, Virginia Housing Trust Fund. This is a loan program and the Housing Choice Voucher families is required to repay the loan; it then becomes a revolving fund to loan to other qualified families. These loans will assist families to locate units in low poverty areas.

VA004b01 – CAPITAL FUND 2000, P & E

Annual Statement /Performance and Evaluation Report

OMB Approval No. 2577-0157 (7/98)

U. S. Department of Housing and Urban Development

Capital Funds Program (CF)

Part I: Summary

Office of Public and Indian Housing

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (may not exceed 10% of 19)	\$53,200.00	\$160,339.00	\$160,339.00	\$160,339.00
3	1408 Management Improvements	\$184,766.00	\$122,722.03	\$122,722.03	\$122,722.03
4	1410 Administration	\$115,200.00	\$160,339.00	\$160,339.00	\$160,339.00
5	1411 Audit	\$3,000.00	\$18,112.95	\$18,112.95	\$18,112.95
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$28,016.00	\$104,685.56	\$104,685.56	\$104,685.56
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$202,750.00	\$25,534.16	\$25,534.16	\$25,534.16
10	1460 Dwelling Structures	\$871,574.00	\$971,600.87	\$971,600.87	\$971,600.87
11	1465.1 Dwelling Equipment-Nonexpendable	\$30,000.00	\$9,637.43	\$9,637.43	\$9,637.43
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$50,000.00	\$30,417.80	\$30,417.80	\$30,417.80
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,538,506.00	\$1,603,388.80	\$1,603,388.80	\$1,603,388.80
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number Performance and Evaluation Report for Program Year Ending
 Final Performance and Evaluation Report

HA Name: **ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY**
 Comprehensive Grant Number: **VA39 P004 501**
 FFY of Grant Approval: **2000**

Signature of Executive Director and Date: _____ Signature of Public Housing Director or Office of Native American Programs Administrator & Date: _____

X

X

Part II: Supporting Pages

Development Number/ Name H/A-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
Operations	Operating Subsidy	1406.01	Total 1406	\$53,200.00	\$ 160,339.00	\$ 160,339.00	\$ 160,339.00	
Managem't Improve	Staff Training	1408.01	Total 1408	\$50,000.00	\$ 1,737.31	\$ 1,737.31	\$ 1,737.31	Rockhurst Univ., Recl National Seminars
	Environmental Reviews	1408.02		\$10,000.00	\$0.00	\$0.00	\$0.00	Update existing
	Marketing Plan	1408.03		\$15,000.00	\$0.00	\$0.00	\$0.00	Force account
	Preventative Maintenance	1408.04		\$109,766.00	\$109,990.40	\$109,990.40	\$109,990.40	
	Computer upgrades	1408.05		\$0.00	\$10,994.32	\$10,994.32	\$10,994.32	
HA-Wide Admin	Funding for comp grant staff CEO, Director of Finance, etc. salaries, benefits and sundry	1410.01	Total 1410	\$115,200.00	\$ 160,339.00	\$ 160,339.00	\$ 160,339.00	
Audit Fees	CGP portion of audit fees	1411.01	Total 1411	\$3,000.00	\$18,112.95	\$18,112.95	\$18,112.95	Rector & Moffit, Dooley Vicars
Fees and Costs	Professional Services	1430.01	Total 1430	\$28,016.00	\$104,685.56	\$104,685.56	\$104,685.56	ADG, Tise Diamond
				\$28,016.00	\$104,685.56	\$104,685.56	\$104,685.56	
Site Improve PHA-Wide	Replace landscaping after replacement of underground gas lines	1450.01	Total 1450:	\$202,750.00	\$0.00	\$0.00	\$0.00	Funged forward from CF2002, 1450.01
	Emergency replacement site utilities *	1450.02		\$0.00	\$18,350.00	\$18,350.00	\$18,350.00	
	Site Improvements - Paving*	1450.03		\$0.00	\$7,184.16	\$7,184.16	\$7,184.16	Funged forward from CF2002, 1450.01
				\$202,750.00	\$25,534.16	\$25,534.16	\$25,534.16	Funged forward from CF2002, 1450.01

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

Annual Statement /Performance and Evaluation Report

Part II: Supporting Pages

Comprehensive Grant Program (CGP)

FFY 2000

Development Number/ Name HA-Wide	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost			Status of Proposed Work	
				Original	Revised	Funds Obligated	Funds Expended	
VA4-4	James Bland Homes: 1. Modernize bathrooms 2. Paint Interiors	1460.01	74 units	\$355,200.00	\$0.00	\$0.00	\$0.00	Deleted at the request of HUD Field Office
VA4-7	James Bland Addition: 1. Replace stair treads, railings 2. Paint Interiors	1460.02	46 units	\$92,000.00	\$0.00	\$0.00	\$0.00	Deleted at the request of HUD Field Office
VA4-9	Ladrey Highrise 1. Lobby improvements 2. Upgrades to handicap units 3. Balcony rail repairs 4. Replace flooring in all common areas	1460.03	11 floors 20 units 11 floors 11 floors	\$11,000.00 \$100,000.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	
VA4-10	Scattered Sites I: 1. Replace broken windows 2. Repair window sills 3. Replace damaged fascia & soffit	1460.04	50 units 50 units 9 bldgs	\$93,500.00	\$0.00	\$0.00	\$0.00	
VA4-11	Scattered Sites II: 1. Roof repairs / replacement	1460.05		\$0.00	\$0.00	\$0.00	\$0.00	
VA4-15	Jefferson Village 1. Repairs to courtyard area 2. Brick repairs 3. Substantial Rehabilitation of Interiors	1460.07	50 units	\$0.00	\$971,600.87	\$971,600.87	\$971,600.87	Funged forward from CF2001 and 2002
			Total 1460:	\$296,500.00	\$971,600.87	\$971,600.87	\$971,600.87	
PHA-Wide	Stoves and refrigerators	1465.01		\$30,000.00	\$9,637.43	\$9,637.43	\$9,637.43	
			Total 1465:	\$30,000.00	\$9,637.43	\$9,637.43	\$9,637.43	
PHA-Wide Admin.	Maintenance Replacement Vehicles Renovations to the 3rd Floor of the Administration Building	1475.01		\$50,000.00 \$0.00	\$0.00 \$30,417.80	\$0.00 \$30,417.80	\$0.00 \$30,417.80	Vehicle Purchase charged to CGP 1999, 1475.04 Funged forward from CF2002
			Total 1475:	\$50,000.00	\$30,417.80	\$30,417.80	\$30,417.80	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

Annual Statement / Performance and Evaluation Report

U. S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Comprehensive Grant Program (CGP) Part III: Implementation Schedule

OMB Approval No. 2577-0157 (7/31/98)

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates (2)
	Original	Revised	Original	Revised	
	Actual	Actual	Actual	Actual	
PHA Wide Management Improvement		03/31/02		03/31/02	
VA4-5, Ramsey Homes	December-00	03/31/02	December-01	03/31/02	03/31/02
VA4-4, James Bland	December-00	03/31/02	December-01	09/30/03	09/30/03
VA4-7, James Bland Addition	March-01	03/31/02	March-02	09/30/03	09/30/03
VA4-9, Ladrey Highrise	March-01	03/31/02	March-02	09/30/03	09/30/03
VA4-10, Scattered Sites	March-01	03/31/02	March-02	09/30/03	09/30/03
VA4-11, Scattered Sites	March-01	03/31/02	March-02	09/30/03	09/30/03
VA4-15, Jefferson Village	December-00	03/31/02	December-01	09/30/03	09/30/03

* Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

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VA004c01 -- CAPITAL FUND 2001, P & E

Part I: Summary

Office of Public and Indian Housing

FFY of Grant Approval
2001

Comprehensive Grant Program (CGP)

Comprehensive Grant Number
VA39 P004 501

HA Name

ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY

Performance and Evaluation Report for Program Year Ending

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 3

Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Revised	Obligated	Total Actual Cost	
		Original	Revised			Expended	Expended
1	Total Non-CGP Funds						
2	Operations (may not exceed 10% of 19)	\$160,339.00	\$163,968.30	\$163,968.30	\$163,968.30	\$163,968.30	\$163,968.30
3	Management Improvements	\$116,000.00	\$271,936.60	\$271,936.60	\$271,936.60	\$271,936.60	\$271,936.60
4	Administration	\$160,339.00	\$163,968.30	\$163,968.30	\$163,968.30	\$163,968.30	\$163,968.30
5	Audit	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00
6	Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	Fees and Costs	\$80,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	Site Improvement	\$380,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Dwelling Structures	\$644,461.00	\$1,036,809.80	\$1,036,809.80	\$1,036,809.80	\$1,036,809.80	\$1,036,809.80
11	Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	Demolition	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	Relocation Cost	\$59,250.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Contingency (may not exceed 8% of 19)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,603,389.00	\$1,639,683.00	\$1,639,683.00	\$1,639,683.00	\$1,639,683.00	\$1,639,683.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Public Housing Director or Office of Native American Programs Administrator & Date:

X

Part II: Supporting Pages

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
Operations	Agency Operations	1406.01	Total 1406	\$160,339.00	\$163,968.30	\$163,968.30	\$163,968.30	
Managem't Improve	Resident Initiative Training Environmental, physical needs, updates Preventative Maintenance Resident Initiatives Staff training	1408.01 1408.02 1408.03 1408.04 1408.05		\$20,000.00 \$20,000.00 \$40,000.00 \$36,000.00 \$0.00	\$0.00 \$0.00 \$271,936.60 \$0.00 \$0.00	\$0.00 \$0.00 \$271,936.60 \$0.00 \$0.00	\$0.00 \$0.00 \$271,936.60 \$0.00 \$0.00	Force account
HA-Wide Admin	Technical Support Staff and Non-technical support (e.g. Executive Director, Director of Finance, Executive Assistant, Director of Development, Chief Accountant) Salary and benefits	1410.01	Total 1408	\$116,000.00	\$271,936.60	\$271,936.60	\$271,936.60	
Audit Fees	Audit	1411.01	Total 1410	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00	FY 2000 audit Rector & Moffitt
HA-Wide Fees and Costs	A/E Support for Mod. Projects	1430.01	Total 1411	\$80,000.00	\$0.00	\$0.00	\$0.00	Paid in CF00
Site Improve PHA-Wide	Sidewalk, parking lot repairs, trash cans, benches	1450.01	Total 1430	\$380,000.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director and Date				Signature of Public Housing Director or Office of Native American Programs Administrator and Date				
X				X				

Annual Statement /Performance and Evaluation Report

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Development Number/ Name HA-Wide	General Description of Major Work Categories	Development Account	Quantity	Total Estimated Cost				Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
VA4-5	Replace flooring Repaint interior	1460.01 1460.04	15 units 45-units	\$60,000.00 \$24,000.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	Deleted per Field Office HUD
VA4-8 Andrew Adkins	Repair/Replace Roof Remodel Bathrooms	1460.03 1460.04	10 Buildings 90 Units	\$71,000.00 \$90,000.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	GSA
VA4-10 Scattered Sites	Replace Gas-Fired Furnaces with Central Heating & Air Conditioning Repaint Interior Refinish existing wood flooring Replace Stair Treads	1460.03 1460.04 1460.05 1460.06	52 Units 52 Units 52 Units 52 Units	\$85,000.00 \$77,000.00 \$204,961.00 \$10,000.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	Deleted per Field Office HUD
VA4-15 Jefferson Village	Repair/Replace Exterior Lighting Substantial Rehabilitation	1460.07	1 Site	\$22,500.00	\$1,036,809.80	\$1,036,809.80	\$0.00	Funged from CF2002
			Total 1460	\$644,461.00	\$1,036,809.80	\$1,036,809.80	\$0.00	
	Relocation Costs	1495.01	Total 1495	\$59,250.00	\$0.00	\$0.00	\$0.00	
				\$59,250.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

U. S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Annual Statement /Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part III: Implementation Schedule

NY 2001

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates (2)
	Original	Revised	Original	Revised	
	Actual	Actual	Actual	Actual	
1460 VA4-5 Ramsey Homes	Jun-03		Jun-05		
1460 VA 4-8 Andrew Adkins	Jun-03		Jun-05		
1460 VA 4-10 Scattered Sites	Jun-03	Jul-01	Jun-05		
1460 VA4-15 Jefferson Village	Jun-03	Jul-01	Jun-05		
1450 HA-WIDE Sidewalk Repairs	Jun-03		Jun-05		
Signature of Executive Director and Date					Signature of Public Housing Director or Office of Native American Programs Administrator and Date
X					X

VA004d01 – CAPITAL FUND 2002, P & E

U. S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Comprehensive Grant Number
VA39 P004 501 02

OMB Approval No. 2577-0157 (7198)
 FFY of Grant Approval
2002

HA Name
ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 3 Performance and Evaluation Report for Program Year Ending

Line No.	Summary by Development Account	Total Estimated Cost			Total Actual Cost	
		Original	Revised	Obligated	Expended	
1	Total Non-CGP Funds					
2	1406 Operations (may not exceed 10% of 19)	\$163,968.00	\$156,496.00	\$156,496.00	\$156,496.00	
3	1408 Management Improvements	\$100,000.00	\$0.00	\$0.00	\$0.00	
4	1410 Administration	\$163,968.00	\$156,496.00	\$156,496.00	\$156,496.00	
5	1411 Audit	\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$60,000.00	\$0.00	\$0.00	\$0.00	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$148,936.00	\$0.00	\$0.00	\$0.00	
10	1460 Dwelling Structures	\$999,811.00	\$1,248,970.00	\$1,248,970.00	\$0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00	
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	
15	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00	
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00	
17	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00	
18	1502 Contingency (may not exceed 8% of 19)	\$0.00	\$0.00	\$0.00	\$0.00	
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,639,683.00	\$1,564,962.00	\$1,564,962.00	\$312,992.00	
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00	
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00	
23	Amount of line 19 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date _____ X
 Signature of Public Housing Director or Office of Native American Programs Administrator & Date: _____

Annual Statement /Performance and Evaluation Report
Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
Operations	Agency Operations	1406.01	Total 1406	\$163,968.00	\$156,496.00	\$156,496.00	\$156,496.00	
Management Improve	Staff training Renovations to 3rd floor Admin. Bldg. Mobile Communication Systems for Facilities Employees High Density Files/File Management System Resident Initiative	1408.01		\$15,000.00	\$0.00	\$0.00	\$0.00	Completed in earlier grant Completed in earlier grant Completed in earlier grant No resident interest
		1408.02		\$25,000.00	\$0.00	\$0.00	\$0.00	
		1408.03		\$15,000.00	\$0.00	\$0.00	\$0.00	
		1408.04		\$25,000.00	\$0.00	\$0.00	\$0.00	
		1408.05		\$20,000.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Technical Support Staff and Non-technical support (e.g. Executive Director, Director of Finance, Executive Assistant, Director of Development, Chief Accountant) Salary and benefits	1410.01	Total 1408	\$163,968.00	\$156,496.00	\$156,496.00	\$156,496.00	Revised for actual amount of grant
Audit Fees	Audit	1411.01	Total 1411	\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	
				\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	
HA-Wide Fees and Costs	A/E Support for Mod. Projects	1430.01	Total 1430	\$60,000.00	\$0.00	\$0.00	\$0.00	Paid in CF00
				\$60,000.00	\$0.00	\$0.00	\$0.00	
Site Improve PHA-Wide	Erosion Control, Exterior Lighting and Resurface Downtown Site Alleys	1450.01	Total 1450:	\$148,936.00	\$0.00	\$0.00	\$0.00	
				\$148,936.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

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Signature of Public Housing Director or Office of Native American Programs Administrator and Date

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Annual Statement /Performance and Evaluation Report
 Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Development Number/ Name HA-Wide	General Description of Major Work Categories	Development Account	Quantity	Total Estimated Cost			Status of Proposed Work	
				Original	Revised	Funds Obligated	Funds Expended	
VA4-5	Replace Flooring	1460.01	15 units	\$30,000.00	\$0.00	\$0.00	\$0.00	
VA 4-7	Replace Gas Furnaces and Electrical Code Upgrades	1460.02		\$141,000.00	\$0.00	\$0.00	\$0.00	
VA4-8	Clean and repoint Exterior Brick	1460.03		\$90,000.00	\$0.00	\$0.00	\$0.00	
VA4-10	Replace roofs	1460.04		\$360,000.00	\$0.00	\$0.00	\$0.00	
VA4-15	Replace Gas-Fired Furnaces with Central Heating and A/C, Replace Wood Flooring with VCT Paint Exteriors	1460.05	69 units	\$111,811.00	\$0.00	\$0.00	\$0.00	Funged back to CF2001
VA4-4, 4-7	Roof Repairs Replace Stair Treads Gut Rehabilitation Emergency reroofing	1460.06	194 units	\$0.00	\$1,248,970.00	\$1,248,970.00	\$0.00	NAA, Inc.
Total 1460				\$999,811.00	\$1,248,970.00	\$1,248,970.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

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Annual Statement /Performance and Evaluation Report

Comprehensive Grant Program (CGP) Part III: Implementation Schedule

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates (2)
	Original	Revised	Original	Actual	
VA4-5	May-04		May-06		
VA 4-8	May-04		May-06		
VA 4-10	May-04		May-06		
VA4-15	May-04		May-06		
HA-WIDE Sidewalk Repairs	May-04		May-06		
VA4-4, 4-7				April-04	Funds reprogrammed due to emergency re-roof, code violations
Signature of Executive Director and Date					Signature of Public Housing Director or Office of Native American Programs Administrator and Date
X					X

VA004e01 – CAPITAL FUND 2003, P & E

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (7/98)

Comprehensive Grant Program (CGP)

Part I: Summary

HA Name		Comprehensive Grant Number		FFY of Grant Approval	
ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY		VA39 P004 501 03		2003	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		<input checked="" type="checkbox"/> Revised Annual Statement/Revision Number 1 <input type="checkbox"/> Performance and Evaluation Report for Program Year Ending			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1408 Operations (may not exceed 10% of 19)	\$156,496.00	\$121,500.00	\$121,500.00	\$121,500.00
3	1408 Management Improvements	\$0.00	\$180,510.65	\$180,510.65	\$0.00
4	1410 Administration	\$156,496.00	\$121,500.00	\$121,500.00	\$121,500.00
5	1411 Audit	\$3,000.00	\$3,000.00	\$3,000.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$55,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$1,193,970.00	\$788,490.35	\$788,490.35	\$662,336.92
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,564,962.00	\$1,215,001.00	\$1,215,001.00	\$905,336.92
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

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Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
Operations	Agency Operations	1406.01	Total 1406	\$156,496.00	\$121,500.00	\$121,500.00	\$121,500.00	Force Account on staff
Mngmt Improvements	Preventative Maintenance	1408.01	Total 1408	\$0.00	\$180,510.65	\$180,510.65	\$0.00	
HA-Wide Admin	Technical Support Staff and Non-technical support (e.g. Executive Director, Director of Finance, Executive Assistant, Director of Development, Chief Accountant) Salary and benefits	1410.01	Total 1410	\$156,496.00	\$121,500.00	\$121,500.00	\$121,500.00	Staff on Board
Audit Fees	Audit	1411.01	Total 1411	\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	
HA-Wide Fees and Costs	A/E Support for Mod. Projects	1430.01	Total 1430	\$55,000.00	\$0.00	\$0.00	\$0.00	Completed in CF00

Signature of Executive Director and Date _____ X

Signature of Public Housing Director or Office of Native American Programs Administrator and Date _____ X

Annual Statement / Performance and Evaluation Report

Comprehensive Grant Program (CGP) Part II: Supporting Pages

Development Number/ Name HA-Wide	General Description of Major Work Categories	Development Account	Quantity	Total Estimated Cost			Status of Proposed Work		
				Original	Revised	Funds Obligated	Funds Expended		
VA 4-3	Install new door and window screens	1460.01	148 units	\$125,400.00	\$126,153.43	\$126,153.43	\$0.00		
VA 4-4	Install new screen doors and replace existing entry doors	1460.02	46 units	\$281,200.00	\$0.00	\$0.00	\$0.00		
VA4-7	Install new screen doors and replace existing entry doors	1460.03	66 units	\$87,370.00	\$0.00	\$0.00	\$0.00		
VA4-3	Demolition of 100 town-homes for HOPE redevelopment	1460.04	100 units	\$700,000.00	\$662,336.92	\$662,336.92	\$662,336.92	Wrecking Corporation	
Total 1460				\$1,193,970.00	\$788,490.35	\$788,490.35	\$662,336.92		
Signature of Executive Director and Date				Signature of Public Housing Director or Office of Native American Programs Administrator and Date					
X				X					

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (7/31/98)

Comprehensive Grant Program (CGP) Part III: Implementation Schedule

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates (2)
	Original	Revised	Original	Revised	
1430	September-05		December-07		October-03
1460 VA4-3 Samuel Madden Homes (Uptown)	September-05		December-07		October-03
1460 VA 4-4 James Bland	September-05		December-07		
1460 VA 4-7 James Bland Addition	September-05		December-07		
1460 VA4-3 Samuel Madden Homes (Downtown)	September-05		December-07		
Signature of Executive Director and Date					Signature of Public Housing Director or Office of Native American Programs Administrator and Date
X					X

VA004f01 – CAPITAL FUND 2003, P & E

U. S. Department of Housing and Urban Development

Annual Statement /Performance and Evaluation Report

Office of Public and Indian Housing

Part I: Summary

FFY of Grant Approval

Comprehensive Grant Number

2003

VA39 P004 502 03

HA Name

ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY

Performance and Evaluation Report for Program Year Ending

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 1

Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total Actual Cost
		Original	Revised		
1	Total Non-CGP Funds				
2	1406 Operations (may not exceed 10% of 19)	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$256,618.00	\$256,618.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$0.00	\$256,618.00	\$256,618.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator & Date:

X

X

Annual Statement /Performance and Evaluation Report

OMB Approval No. 2577-0157 (7/31/98)

U. S. Department of Housing
and Urban Development

Office of Public and Indian Housing

Part II: Supporting Pages

Comprehensive Grant Program (CGP)

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
VA4-4, 4-7	Emergency re-roof	1460.04	194 units	\$0.00	\$256,618.00	\$256,618.00	\$0.00	NAA, Inc.
				Signature of Executive Director and Date		Signature of Public Housing Director or Office of Native American Programs Administrator and Date		
				X		X		

X

Annual Statement /Performance and Evaluation Report

OMB Approval No. 2577-0157 (7/31/98)

U. S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Comprehensive Grant Program (CGP) Part III: Implementation Schedule

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates (2)
	Original	Revised	Original	Actual	
1460 VA 4-4 James Bland	September-05		December-07	May-04	
1460 VA 4-7 James Bland Addition	September-05		December-07	May-04	

Signature of Executive Director and Date

X

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

VA004g01 – CAPITAL FUND 2004, P & E

Capital Funds Program (CF)

Part I: Summary

Office of Public and Indian Housing

FFY of Grant Approval
2004

Comprehensive Grant Number
VA39 P004 501 04

HA Name

ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 1 Performance and Evaluation Report for Program Year Ending

Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Revised	Obligated	Total Actual Cost
		Original	Revised			
1	Total Non-CGP Funds					
2	1406 Operations (may not exceed 10% of 19)	\$156,496.00	\$142,178.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$212,992.00	\$212,992.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$156,496.00	\$142,178.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$3,000.00	\$3,000.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$60,000.00	\$60,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$606,478.00	\$606,478.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$191,000.00	\$164,949.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$178,500.00	\$90,000.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,564,962.00	\$1,421,775.00	\$0.00	\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director and Date

X

X

Signature of Public Housing Director or Office of Native American Programs Administrator & Date:

Annual Statement /Performance and Evaluation Report

Part II: Supporting Pages

Comprehensive Grant Program (CGP)

FFY 2000

Status of Proposed Work

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
Operations	Operating Subsidy	1406.01	Total 1406	\$156,496.00	\$142,178.00	\$0.00	\$0.00
Managem't Improve	Preventative Maintenance	1408.01	Total 1408	\$156,496.00	\$142,178.00	\$0.00	\$0.00
HA-Wide Admin	Funding for comp grant staff CEO, Director of Finance, etc. salaries, benefits and sundry	1410.01	Total 1410	\$369,488.00	\$355,170.00	\$0.00	\$0.00
Audit Fees	CGP portion of audit fees	1411.01	Total 1411	\$156,496.00	\$142,178.00	\$0.00	\$0.00
Fees and Costs	Professional Services	1430.01	Total 1430	\$3,000.00	\$3,000.00	\$0.00	\$0.00
Site Improve	Replace underground utilities	1450.01		\$60,000.00	\$60,000.00	\$0.00	\$0.00
VA4-3	Replace retaining wall and correct structural damages	1450.02		\$60,000.00	\$60,000.00	\$0.00	\$0.00
VA4-11			Total 1450:	\$231,000.00	\$231,000.00	\$0.00	\$0.00
				\$375,478.00	\$375,478.00	\$0.00	\$0.00
				\$606,478.00	\$606,478.00	\$0.00	\$0.00

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

Annual Statement / Performance and Evaluation Report

Comprehensive Grant Program (CGP)

FFY 2000

Part II: Supporting Pages

Development Number/ Name HA-Wide	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost			Status of Proposed Work
				Original	Revised	Funds Obligated	
VA4-11	Yale-Ellsworth Upgrade electrical to meet code	1460.01	30 units	\$16,000.00	\$16,000.00	\$0.00	\$0.00
VA4-9	Ladrey Highrise Upgrade fire doors in common areas to meet fire codes	1460.02	170 units	\$175,000.00	\$148,949.00	\$0.00	\$0.00
			Total 1460:	\$191,000.00	\$164,949.00	\$0.00	\$0.00
VA4-11	Yale-Ellsworth Replace water heaters and HVAC systems	1465.01	30 units	\$88,500.00	\$0.00	\$0.00	\$0.00
VA4-9	Ladrey Highrise 1. Replace HVAC domestic water pumps install temperature-mixing valves and repipe 2. Upgrade standpipe system pumps and central panel to meet NFP codes	1465.02 1465.03		\$45,000.00 \$45,000.00	\$45,000.00 \$45,000.00	\$0.00 \$0.00	\$0.00 \$0.00
			Total 1465:	\$178,500.00	\$90,000.00	\$0.00	\$0.00

Signature of Executive Director and Date

X

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Comprehensive Grant Program (CGP)

Part III: Implementation Schedule

OMB Approval No. 2577-0157 (7/31/98)

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates (2)
	Original	Revised	Original	Actual	
PHA-Wide Preventative Maintenance	7-Sep-06		7-Sep-08		
VA4-9, Ladrey Highrise	7-Sep-06		7-Sep-08		
VA4-10, Yale-Elisworth	7-Sep-06		7-Sep-08		
Signature of Executive Director and Date				Signature of Public Housing Director or Office of Native American Programs Administrator and Date	
X				X	

PHA BOARD CERTIFICATION

Standard PHA Plan PHA Certifications of Compliance

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the *Standard Annual, Standard 5-Year/Annual, and Streamlined 5-Year/Annual PHA Plans*

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the standard Annual, X standard 5-Year/Annual or streamlined 5-Year/Annual PHA Plan for the PHA fiscal year beginning 1-1-05 hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
7. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
- The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
- The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.

13. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
14. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
15. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
16. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
17. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
18. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
19. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments.).
20. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
21. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

Alexandria Redevelopment & Housing Authority
PHA Name

VA004
PHA Number/HA Code

- Standard PHA Plan for Fiscal Year: 20__
- Standard Five-Year PHA Plan for Fiscal Years 2005 - 2009, including Annual Plan for FY 2005
- Streamlined Five-Year PHA Plan for Fiscal Years 20__ - 20__, including Annual Plan for FY 20__

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official <u>A. Melvin Miller</u>	Title <u>Chairperson</u>
Signature <u>A. Melvin Miller</u>	Date <u>October 12, 2004</u>

CERTIFICATION BY LOCAL OFFICIAL

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Philip Sunderland the City Manager certify that the Five Year and
Annual Plan of the Alexandria Redevelopment & Housing Authority is consistent with the
Consolidated Plan of the City of Alexandria prepared pursuant to 24 CFR Part 91.

 10/8/04
Signed/Dated by Appropriate State or Local Official

HUD CERTIFICATION OF TRANSMISSION

Public and Indian Housing

- Public Housing
- Public Housing Agency Plans
 - Submit plans
 - Received plans
 - Review plans
 - Approved plans
 - Templates
 - Certifications
 - About PHA Plans
 - Common questions
 - Policy & guidance

HUD news

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- Mailing lists
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- Help

Thank You for using the PHA Plan Submission System

[E-mail this to a friend](#)[Print version](#)

Your PHA Plan files have been successfully submitted to:

Field Office:	District of Columbia
PHA Code & Name:	VA004, Alexandria
Fiscal Year:	2005
Total number of uploaded files:	8 file(s)

Your PHA Plan will be processed and posted for review by the HUD Field within 48 hours of the next business day. Your field office has been noti

The **Received Plans** web page will be updated within 48 hours as well.

If you need to submit another PHA Plan, you may do so at the **Submit** page.

You may return to the **PHA Plans homepage** or go to **HUD's main page**

Last modified: June 4, 2004 11:23



U.S. Department of Housing and Urban Development
451 7th Street S.W., Washington, DC 20410
Telephone: (202) 708-1112 TTY: (202) 708-1455

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APPENDIX IV

CITY OF ALEXANDRIA, VA - CONTINUUM OF CARE

2004 Application Summary

Continuum of Care (COC) Name: City of Alexandria, Virginia Continuum of Care

CoC Contact Person and Organization: L. Michael Gilmore, Ph.D., Alexandria Community Services Board

Address: 720 North Saint Asaph Street, 4th Floor, Alexandria, VA 22314

Phone Number: (703) 838-4455 E-mail: michael.gilmore@alexandriava.gov

Continuum of Care Geography

Using the Geographic Area Guide, list the name and the six-digit geographic code number for *each* city and/or county participating in your Continuum of Care. Because the geography covered by your system will affect your Need score, it is important to be accurate. Enter the name of *every listed* city and/or county that makes up the geography for your Continuum of Care system and its assigned code. Leaving out a jurisdiction could reduce your pro rata need amount. Adding in a jurisdiction that is not really part of your system is likely to significantly reduce your score. Before completing, please read the NOFA guidance and page 2 of this application regarding geographically overlapping Continuum of Care systems.

Geographic Area Name	6-digit Code
example: Syracuse	366376
example: Onondaga County	369067
Alexandria, Virginia	510024

Geographic Area Name	6-digit Code

Reproduce this page to include additional names and codes.

HUD-40076 CoC-A

Exhibit 1: CoC Planning Process Organizations

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulations Represented (SMI, SA, VETS, HIV/AIDS, DV, YU)	Level of Participation (activity and frequency) in Planning Process (H,M,L) 2
Federal agencies:			
Dept. Of Veterans Affairs, Outreach and Assessment Services, Dave Wolpert	Federal Regional Representative	VETS	L: Provides consultation to HSCC on veterans health care issues.
State agencies:			
Virginia Health Department, Melinda Gray, Debbie Bowers	City of Alexandria, Virginia	HIV/AIDS	H: Health Care Task Force representative, attends all meetings; attends all monthly HSCC planning meetings.
Alexandria Probation and Parole, Jane Reedy, Barbara Ward, Christie Melus	"	G	New committee member as of May; has attended both meetings.
Local government agencies:			
City of Alexandria, Department of Human Services- Job Link Program (One Stop Center for Work Force Investment) Lenwood Roberts	"	G	H: Employment Training Sub- committee representative, attends all meetings; attends all monthly HSCC planning meetings.
City of Alexandria Department of Human Services, Office of Community Services, Nelson Smith	"	G	H: Co-chairs and attends all monthly HSCC planning meetings; Chairs and attends all CoC Sub- committee meetings; attends all Strategic Planning Sub- committee meetings.
City of Alexandria Department of Human Services, Family Services, Coordinator Foster Care Mentor Home, Cathy Bartholomew	"	Y	H: Youth transition from foster care representative attends all monthly HSCC planning meetings.
City of Alexandria Department of Human Services, Office of Community Services, Homeless Services Coordinator, Rick Howard	"	G	H: City's Homeless services coordinator attends all monthly HSCC planning meetings; attends all CoC Sub- committee meetings for point-in-time count and all Winter Shelter, HMIS Sub- committee meetings.
City of Alexandria Department of Human Services, Office of Community Services; Office of Aging and Adult Services, Jane Eichenberger	"	G	H: Aging adult services representative attends all monthly HSCC planning meetings.
City of Alexandria Department of Human Services, Office of Community Services, Homeless Services Social Worker, Hope Toye	"	G	H: Attends all monthly HSCC planning meetings; attends all Winter Shelter, HMIS and Transitional Housing Sub-Committee.
City of Alexandria, Department of Mental Health, Mental Retardation and Substance Abuse-Residential Services, Juliette Millushev	"	SMI, SA	H: Member of the CoC Sub- committee. Transitional Housing, Strategic Planning and attends most meetings attends all monthly HSCC planning meetings.

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulations Represented (SMI, SA, VETS, HIV/AIDS, DV, YU)	Level of Participation (activity and frequency) in Planning Process (H,M,L) 2
City of Alexandria, Department of Mental Health, Mental Retardation and Substance Abuse — PATH Mental Health Case Management and Homeless Outreach, Lynn Fritts	"	SMI, SA	H: Member of the CoC, Strategic Planning, Health Care and Winter Shelter Sub- committees and attends all meetings; attends all HSCC monthly planning meetings.
City of Alexandria, Department of Mental Health, Mental Retardation and Substance Abuse — Mental Health Case Management and Homeless Outreach, Dana Woolfolk	"	SMI, SA	H: Member of the Virginia Policy Academy and attends all monthly HSCC planning meetings. Is a also a formerly homeless person representative listed below.
City of Alexandria, Department of Mental Health, Mental Retardation and Substance Abuse — Substance Abuse Case Management and Homeless Outreach , Ron Jackson	"	SA, SMI	H: Member of the Winter Shelter Sub- committee and attends all meetings; attends all monthly HSCC planning meetings.
City of Alexandria Department of Mental Health, Mental Retardation and Substance Abuse- SA/MH Day Support Services, Judy Carter	"	SMI, SA,	H: Member of the CoC Sub- committee, Strategic Planning Sub- committee and attends all meetings; attends all monthly HSCC planning meetings.
City of Alexandria Office of Housing, Marcy Meyers	"	G	H: Member of the Transitional Housing Task Force an Strategic Planning Sub- committees and attends all meetings; attends most monthly HSCC planning meetings.
City of Alexandria Office on Women, Domestic Violence Program, Women's Shelter and Victim's Assistance programs, Claire Dunn, Debbie Evans, Lyn Myers, Kim Whitrap	"	DV	H: Member of HMIS, Employment Training and Transitional Housing Sub- committees and attends all meetings; Attends all monthly HSCC meetings.
City of Alexandria Police Department	"	G	M: Member of the Winter Shelter Sub-Committee and attends most meetings.
County of Arlington, Virginia Homeless Services Representative, Tony Turnage, Diane Downing, Ann Rudd	Arlington	G	M: Health Care Task Force representative attends most task force meetings.
Northern Virginia Regional Commission, Housing Opportunity for Persons with Aids (HOPWA) Housing Coordinator, Todd Huntley	"	HIV/AIDS	L: Member of the Health Care Task Force and attends some meetings; provides consultation on HIV/AIDS issues to HSCC.
Housing Developers:			
Wesley Housing Development Corporation, co-owner transitional housing development with Carpenter's Shelter, Al Smuzynski	"	G	L: Provides consultation to HSCC on housing development issues.
Public Housing Authority (PHA):			
Alexandria Redevelopment and Housing Authority, Marquisha Dean	"	G	M: Public housing authority representative attends monthly HSCC planning meetings; provides consultation to HSCC on section 8 voucher, HOME, and other federal housing programs.

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulations Represented (SMI, SA, VETS, HIV/AIDS, DV, YI)	Level of Participation (activity and frequency) in Planning Process (H,M,L) 2
Businesses:			
Work Force Organization for Regional Collaboration (WORC)- Employment services for low income and the homeless, Summer Spencer	"	G	M: Member of the Employment Training Sub-committee, attends most meetings.
Inova Alexandria Hospital Luann Sines	"	G	L: Member of the Health Care Task Force, attend some meetings.
City of Alexandria, Department of Human Services- Job Link Program (One Stop Center for Work Force Investment) Provides linkage to the business community. Lenwood Roberts	"	G	H: Employment Training Sub- committee representative, attends all meetings; attends all monthly HSCC planning meetings.
Non-profit organizations: (includes Faith Based organizations)			
Northern Virginia Family Service, social service agency; Transitional Housing provider in City of Alexandria funded by City Housing Trust Fund, Gwen Underwood, Zondra Anderson, Rhonda Thissen	Northern Virginia	G	H: Transitional Housing Task Force chair; Health Care Task Force co-chair, Transitional Housing, HMIS and Employment Training Sub- committees, attends all meetings; attends all monthly HSCC planning meetings.
Stop Child Abuse Now (SCAN), Diane Charles	Northern Virginia	Y	H: Youth representative, attends all monthly HSCC planning meetings.
Alexandria Neighborhood Health Services, Inc., Jennell Charles	Alexandria, Arlington	G	H: Member of Health Care Task Force, attends most meetings; attends some HSCC planning meetings.
Arlington-Alexandria Coalition for the Homeless, Ed Rea	"	G	H: Co-chair HSCC, attends all monthly HSCC planning meetings; Chair of HMIS Sub- committee; member of CoC, Strategic Planning, Employment and Training Sub-Committees and attends all meetings.
Arlington-Alexandria Coalition for the Homeless, Lorraine Davis-Dantley, Adopt A Family	"	G	H: Attends all HSCC planning committee meetings. Member of Transitional Housing Task Force attends all meetings.
Arlington-Alexandria Coalition for the Homeless, Gina Fimbel	"	G	H: Attends all HSCC planning committee meetings.
Old Presbyterian Meeting House - Family to Family Ministries, Meade Church, Jeanette Smalling	"	G	H: Member of the Winter Shelter Sub-Committee and Transitional Housing Task Force, attends all meetings. Attends almost all monthly HSCC planning meetings.
Community Lodgings, Inc., Cynthia Pfaff, Gregory Barnes	"	G	H: Member of the CoC and Strategic Planning, HMIS Sub-Committees and Transitional Housing Task Force, attends all meetings; attends all monthly HSCC planning meetings.
Salvation Army- Turning Point Transitional Housing program, Suzanne Barrington, Betty Waites	"	G	M: Member of the Strategic Planning, and Transitional Housing Task Force and attends some meetings; attends almost some monthly HSCC meetings.

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulations Represented (SMI, SA, VETS, HIV/AIDS, DV, YI)	Level of Participation (activity and frequency) in Planning Process (H,M,L) 2
Salvation Army/Alexandria Community Shelter, Howard Roy	"	G	H: Member of the Strategic Planning, HMIS and Transitional Housing Task Force and attends most meetings; attends almost all monthly HSCC meetings.
Carpenter's Shelter, Executive Director, Fran Becker	"	G	H: Member of the Strategic Planning and CoC Sub-committees, and Health Care Task Force and attends all meetings; attends all monthly HSCC planning meetings.
Carpenter's Shelter, Asst. Director, Mary Martin	"	G	H: Attends all monthly HSCC planning meetings. Member of Transitional Housing Sub-committee attends all meetings.
Carpenter's Shelter, Hypothermia Shelter, Larry Roberts	"	G	H: Chair of the Winter Shelter Sub-committee; Attends all monthly planning meetings. Member of Winter Shelter Sub-committee attends all meetings.
Carpenter's Shelter Aftercare Program, Dan Hilton	"	G	H: Attends almost all monthly HSCC planning meetings. Member of the Employment Training Sub-committee attends all meetings.
Carpenter's Shelter; David's Place Day Program, Chris Woodard	"	G	L: Provides consultation to HSCC on as needed basis.
Guest House, Inc. Executive Director, Marie McBride	"	G	New member to the HSCC as of June 2004 representing individuals transitioning from criminal justice system. Member of the Transitional Housing Task Force and HMIS Sub-committee.
Child Family Network Center, Alex Gehring	"	Y	H: Co-chair of the Health Care Task Force and attends all meetings.
ALIVE! Inc., Mary Riley	"	G	H: Chairs Strategic Planning Sub-committee, member of Health Care Task Force, Transitional Housing Task Force, Employment Training and CoC Sub-committees and attends all meetings; attends all monthly HSCC planning meetings.
ALIVE! House Shelter, Suzanne Arnold	"	G	H: Attends all monthly HSCC planning meetings. Member of Transitional Housing Task Force attends all meetings.
ALIVE! House Shelter, LaRue Barnes	"	G	H: Attends all monthly HSCC planning meetings. Member of HMIS Sub-committee and Transitional Housing Task Force attends all meetings.
Church of St. Clement, Chuck Ziegler	"	G	M: Participates on Winter Shelter Sub-Committee
Blessed Sacrament Catholic Community, Greg Vogt	"	G	M: Participates on Winter Shelter Sub-Committee
Alfred Street Baptist Church, Bill Willis	"	G	M: Participates on Winter Shelter Sub-Committee
Fairlington United Methodist Church, Wray Sexson, Mark Elder	"	G	M: Participates on Winter Shelter Sub-Committee
St. Paul's Episcopal, Rev. Dr. Diane Murphy	"	G	M: Participates on Winter Shelter Sub-Committee

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulations Represented (SMI, SA, VETS, HIV/AIDS, DV, Y)	Level of Participation (activity and frequency) in Planning Process (H,M,L) <u>2</u>
Christ Church, Rev. Shirley Smith Graham, Rev. Jenni Ovenstone	"	G	L: Member of the Strategic Planning Sub- committee and attends some meetings; attends a few monthly HSCC planning meetings
Catholic Charities, Ryan Lovett	"	G	H: Member of the Strategic Planning and CoC Sub- committees attends most meetings; attends all monthly HSCC planning meetings.
Refunds for Free Metro DC, Tax Preparation and EITC Assistance for the Homeless, Paul Heimer	"	G	H: Attends all monthly HSCC planning meetings.
Whitman-Walker Clinic - health care for individuals with HIV/AIDS, Sally Michael, Eva Cardenas, Brian Jennings	"	HIV/ AIDS	M: Member of the Health Care Task Force, attends all meetings.
Alexandria Interfaith Coalition for Affordable Housing and Co-Chair of Housing Action (for development of affordable housing), Jim Hoben	"	G	H: Attends all monthly HSCC planning meetings. Member Strategic Planning Sub- committee attends some meetings.
Homeless/formerly homeless persons:			
One representative (also employed by the Department of Mental Health, Mental Retardation and Substance Abuse), Dana Woolfolk	"	Former Resident of Transitional Supportive Housing program (Men's Recovery Home)	H: Member of the Virginia Policy Academy on Homelessness; attends all monthly HSCC planning meetings.
Other:			
Virginia Coalition for the Homeless- Legislative and Policy Planning, Sue Capers	"	G	H: Member of the Steering, Strategic Planning and CoC Sub- committees and attends all meetings; attends all monthly HSCC planning meetings.
Commission on Persons with Disabilities, Barbara Gilley	"	G	L: Provides consultation to the HSCC on legislative and other issues impacting persons with disabilities..

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1 **Subpopulations Key:** General (G), Seriously Mentally Ill (SMI), Substance Abuse (SA), HIV/AIDS, Veterans (VETS), Domestic Violence (DV), and Youth (Y).

2 **Level of Participation Key:** High (H) - HSCC member attends all or most monthly HSCC planning meetings or Sub-Committee member attends all or most Sub- committee meetings; Medium (M) - Attends some monthly meetings and participates on one Sub- committee; Low (L) - Attends a few monthly HSCC meetings annually and/ or provides consultation to HSCC or Sub- committee or task force on specialized subpopulations.

Exhibit 1: Continuum of Care Narrative

1. Continuum of Care Accomplishments

Over the past year, Alexandria's continuum has accomplished the following:

- ▶ Endorsed the paradigm shift from "managing" homelessness to ending it by developing new goals and strategies.
- ▶ Developed and approved a *Ten-Year Plan to End Chronic and Other Forms of Homelessness* based on national "best practice" models and tied into Commonwealth of Virginia's plan.
- ▶ Sought and obtained Alexandria (Va.) City Council support for a Safe Haven for chronic homeless, including provision of a City-owned building, assessed at \$789,200, and \$795,000 in rehabilitation funds for the Safe Haven.
- ▶ Established a Mentoring Home for youth aging out of foster care using a City owned building, state funds and City general funds.
- ▶ Reopened a nine-bed transitional facility for female ex-offenders that had been closed for two years.
- ▶ Added discharge planning services to assist inmates leaving the Alexandria Detention Center link with housing and other resources to prevent homelessness.
- ▶ Added Alexandria Probation and Parole to the membership of the Homeless Services Coordinating Committee.
- ▶ Received an additional 25 Housing Choice vouchers for individuals with a serious mental illness and/or substance abuse disorders.
- ▶ Placed an eligibility worker at the Department of Mental Health, Mental Retardation and Substance Abuse intake site to provide on-site applications for entitlements.
- ▶ Reviewed regulatory barriers with City of Alexandria's Departments of Planning and Zoning and Code Enforcement documenting current use of a comprehensive plan for development, use of national building code, provision of density bonuses to developers to offset cost of below market units, and the use of a single, consolidated permit application process to reduce regulatory barriers to affordable housing.
- ▶ Provided two Alexandria continuum members to the Virginia Policy Council to End Chronic Homelessness, including a former chronically homeless consumer.
- ▶ Expanded the number of community members actively committed to solving the chronic homeless problem.
- ▶ Successfully restored State homeless funding and EITC through advocacy with State legislators.
- ▶ Acquired additional City funds for homeless transitional housing program for underserved.
- ▶ Established a new Housing Development Corporation begun with City funding to preserve and expand affordable housing.
- ▶ Leveraged CDBG funding for HMIS acquisition and set-up and signed contract to implement HMIS.
- ▶ Expanded health care services through HHS-grant funded Community Health Center and began work on Health Care for the Homeless grant process.
- ▶ Conducted and published a survey of employment and job training programs for homeless.
- ▶ Established a task force to develop a breakfast program for chronic, unsheltered homeless.
- ▶ Updated and advertised homeless services website.
- ▶ Provided emergency shelter, transitional housing, permanent supportive housing to more than 1,300 persons.

2. Community Planning Process for Developing a Continuum of Care Strategy

a. Lead Entity for the CoC Planning Process

The Homeless Services Coordinating Committee for the City of Alexandria, Virginia (HSCC), the identified lead entity for the planning process in the City of Alexandria, was created in 1987 as a public and private partnership to conduct a needs assessment when the community faced the loss of its only winter church shelter serving single men. For the past seventeen years the HSCC has met monthly to provide a community forum to identify and address housing and homeless services issues for the City of Alexandria. The HSCC formally adopted By-Laws in November, 1999 and has three primary goals. The first is to provide leadership for the community planning process for development and implementation of the Continuum of Care in the City of Alexandria, Virginia. Secondly, the

HSCC coordinates housing and support services to ensure the needs of homeless individuals and families are met as they move to stable housing and self-sufficiency. Lastly, the HSCC is the lead entity for strategic planning of homeless services for the City of Alexandria, including the development of Alexandria's *Ten Year Plan to End Chronic Homelessness*. The HSCC is a collaborative partnership that includes public and private homeless service delivery agencies, advocates, business interests, former consumers, faith based organizations and individual citizens interested in ending homelessness. The Committee is currently co-chaired and convened by a representative of the City of Alexandria's lead agency for homeless services, the Department of Human Services, Office of Community Services (DHS/OCS) and by the Executive Director of the Arlington-Alexandria Coalition for the Homeless (AACH), a non-profit homeless housing and support service provider.

b. Community's CoC Planning Process

The HSCC meets every month to coordinate the homeless services planning process for the City of Alexandria and assess the progress towards meeting its identified goals. The HSCC has an established sub- committee structure that provides a mechanism to identify needs of the homeless, analyze information and data collected, identify new opportunities to expand HSCC membership to ensure a broad base, generate creative and innovative programs, identify joint funding opportunities, coordinate efforts to access mainstream resources and eliminate barriers to affordable housing. Sub- committees includes: Strategic Planning, Membership and Evaluation, Continuum of Care, Winter Shelter, HMIS and Employment and Training. Two additional ad-hoc committees, that report to the Strategic Planning Sub-Committee, have been established to address specific needs in the community. The Transitional Housing Task Force was formed to specifically address needs within the transitional housing area. A Health Care Task Force was also formed to address two strategic goals related to the expansion of services to homeless requiring medical supervision and support.

Over the past year, the Strategic Planning Sub- committee has developed a draft *Ten Year Plan to End Chronic Homelessness*. This is a significant paradigm shift for the Alexandria community to move from focusing on *managing* homelessness to developing a plan and action steps to end homelessness in the City of Alexandria. The Strategic Planning Sub-Committee conducts an annual needs assessment to identify gaps in housing and services for the homeless in Alexandria. It provides data to the HSCC on the current inventory of homeless services, develops guidelines for priority ranking of gaps and develops the methodology for HSCC's long-range planning. In addition, this Sub-Committee drafts a long-range strategy statement, a one-year plan of action and develops procedures for obtaining feedback for all projects on an on-going basis. The Sub- committee develops the agendas for the HSCC planning meetings. Documents for City Council are prepared as well as testimony for public hearings. Input into the City's Consolidated Plan is also developed. The Sub- committee reviews the by-laws annually. Over the past year, this Sub-Committee took the lead in drafting Alexandria's *Ten Year Plan to End Chronic Homelessness* and coordinated goals and objectives with the City of Alexandria's Strategic Plan currently under development.

The Continuum of Care Sub-Committee is responsible for conducting a point-in-time survey, establishing procedures for proposal presentations, submissions of applications and public notice of the community planning process. Moreover, this Sub-Committee is accountable for developing proposal evaluation, ranking criteria, and revising and editing the Continuum of Care Plan. On January 21, 2004, volunteers and service providers in the City took part in a regional point-in-time count organized under the auspices of the Metropolitan Washington Council of Governments (COG). The point-in-time count establishes a base line for homelessness in the region and serves as a cooperative model in the regional effort to alleviate homelessness and provide affordable housing.

The Homeless Management Information System (HMIS) Sub- committee has coordinated efforts to secure funding for the HMIS software as well as select a software vendor. The goal of the Sub- committee is for all providers to use an integrated data tool to record and report uniform system-wide information on client needs and services.

The Employment and Training Sub- committee's efforts were focused this year on completing an Employment and Training Survey, developing the Workforce Investment Network and other vocational resources for the homeless. The Winter Shelter Sub- committee annually assesses winter shelter needs, ensures that adequate facilities exist to house homeless persons during the winter months, identifies alternate sites, if needed, and develops policies related

to winter shelter operations for review by the HSCC. The Membership Sub- committee ensures that the membership of the HSCC is broad-based and inclusive of all agencies, groups, business and individuals impacting the homeless in Alexandria. Recruitment of new members is an on-going process to ensure that vacancies are filled and all groups are adequately represented.

The HSCC continues to reach out in the effort to expand membership of the HSCC and broaden participation in the Continuum of Care planning process. The Membership Sub-Committee has recruited additional faith-based organizations involved in hypothermia services and developed a working relationship with Housing Action, a broad based coalition determined to expand permanent affordable housing opportunities in the community.

This year, the Directors of the Departments of Human Services and Mental Health, Mental Retardation and Substance Abuse met to begin discussions on closer collaboration, integration and possible co-location of services in order to better serve shared clients and the citizens of Alexandria. Two members of the HSCC were involved in the discussion. The participants agreed to begin analyzing ways to increase collaboration and integration of services starting with youth, geriatric and the homeless populations. The focus centered on examining the eligibility process for entitlements for shared clients as well as a common intake for shared clients who have substance abuse and /or mental health problems.

c. Dates and Main Topics of CoC Planning Meetings Held Since June 2003

The dates and main topics of the HSCC planning meetings are as follows.

June 17, 2003 HSCC Planning Meeting: Virginia Department of Rehabilitative Services (DRS) overview of services assisting persons with a wide range of disabilities. Presentation by Stop Child Abuse Now (SCAN) on *National Alliance to End Homelessness Audio Conference on Preventing and Ending Youth Homelessness*. Discussion on City of Alexandria's City Council recent approval to use city owned townhouse for a transitional facility for four youth aging out of foster care. HMIS Sub-Committee report.

June 2003 Sub- committee meetings: HMIS Sub- committee meeting with CSB staff to discuss contract with service provider and City purchasing rules. **Continuum of Care Sub- committee** met to write Exhibit 1 for HUD grant. **Health Care Task Force** met to review service delivery models providing health care for the homeless; discussion of respite care services and new "Clinica Hispana."

August 2003 Sub- committee meetings: **Strategic Planning Sub- committee** met with City Manager; discussed updates on City's Ten Year Strategic Plan for Ending Chronic Homelessness and the Mayor's Task Force; closing of Guest House and Christ House; regional approach to health care for the homeless.

September 30, 2003 HSCC Planning Meeting: Non-Profit Legal Support Program overview of free legal services. Fairfax Bar Pro Bono program presented legal services available for homeless individuals. Virginia Coalition for the Homeless (VCH) representative and the Alexandria Mental Health Center staff outreach worker (formerly homeless individual) were appointed by the HSCC to the HUD Policy Academy.

September 2003 Sub- committee meetings: **Strategic Planning Sub- committee** reviewed HSCC committee structure to make recommendations to the full HSCC. Also discussed development of Safe Haven with CSB staff.

Transitional Housing Sub- committee discussed mental health services and Housing Choice vouchers for transitional graduates. **HMIS Sub- committee** discussed contracting with Fairfax software contractor, and funding options. Submitted a funding request as part of the supplemental budget for DMHM RSA and DHS.

October 21, 2003 HSCC Planning Meeting: VCH representative updated HSCC on Virginia General Assembly legislative issues. Winter Shelter Sub- committee reviewed hypothermia program guidelines approved by the HSCC in 2001 and recommended approval as is. AACH presented the referral process to their Adopt a Family program. Strategic Planning Subcommittee Chair reported on letter submitted to Office of Housing commenting on the draft *Consolidated Plan*.

October 2003 Sub- committee meetings: **Strategic Planning Sub- committee** discussed City of Alexandria's Consolidated Plan and drafting comments; Virginia Policy Council's activities on ending chronic homelessness and how they relate to Mayor's Task Force to address chronic homelessness in the City; discussed goals and action steps for the non-chronic homeless population. **Transitional Housing Sub- committee** discussed Section 8 set-asides.

Employment and Training Sub- committee discussed completion of survey of Workforce Investment Network and

other resources. **Health Care Task Force** meeting with Arlington County, Virginia representatives; discussed future coordination between jurisdictions; presentation by ANHSI executive director on new community health center; discussion on Medical Care for Children Program and FAMIS. **HMIS Sub- committee** discussed City Department directors meeting with City Manager regarding the importance of implementing and funding HMIS.

November 18, 2003 HSCC Planning Meeting: Update on the HUD Policy Academy, highlighting difficulty homeless individuals have faced in obtaining identification with the recent change in state laws as a result of 9/11. Presentation on Refunds for Free Metro DC, tax assistance for homeless individuals in operation since 1989. Employment Sub-Committee report on the employment services report to be generated by intern. Point-in-time Sub-Committee met to plan for the count on January 21, 2004. Strategic Planning Sub-Committee Chair shared draft comments to be delivered to City Council by HSCC at Public Hearing on the City budget.

November 2003 Sub- committee meetings: **Strategic Planning Sub-Committee meeting** discussion of Chair's meeting with Mayor on *Ten Year Plan to End Chronic Homelessness*; draft of HSCC public comment at November City Council public hearing; ARHA and HUD notice to PHAs on ending chronic homelessness; lobbying State legislators concerning TANF shortfall; plans for point-in-time count for January 21, 2004. **Employment Sub-Committee** met with clinical psychology intern assigned to work with the Sub-Committee by the Alexandria Mental Health Center to develop inventory of employment services, including training and job placement. **Health Care Task Force** members participated in *Northern Virginia Access to Health Care Consortium* meeting. **HMIS Sub- committee:** new chair approved; CDBG funds were committed by the Office of Housing to help with initial start up.

December 16, 2003 HSCC Planning Meeting: HSCC representatives attended the HUD Policy Academy in Denver. CoC Planning Activities mailed out to the community. Presentation by *Housing Action* on the group's recent activities on creating affordable housing in Alexandria. City Council will appoint the new board and fund the corporation for 2-3 years. Point-in-time Sub-Committee updated group on the count.

December 2003 Sub- committee meetings: **Strategic Planning Sub-Committee** COG training for point-in-time count; Housing Action and new Housing Development Corporation update.

January 20, 2004 HSCC Planning Meeting: Distributed the Continuum of Care-Point-in-time Sub-Committee instructions on the count. Health Care Task Force updated HSCC on ANHCI, the non-profit that will run the new community health center funded by HHS.

January 2004 Sub- committee meetings: **Strategic Planning Sub- committee** discussed data to be collected during the point-in-time survey. **Health Care Task Force meeting** on *Primary Care for the Homeless Action Team* in Arlington, NVFS's Medical Care for Children Program, and regional roundtable addressing access to prescription medications. **Point-in-time Sub- committee** met to complete the individual and family surveys for the count January 21. Members of the Sub- committee attended a training by the Washington Council of Governments.

February 17, 2004 HSCC Planning Meeting: Strategic Planning Sub-Committee plans to meet with HUD representative for debriefing on 2003 CoC. Presentation by SCAN on programs operated by the organization. Strategic Planning Sub-Committee has reviewed Virginia's Ten Year Plan to End Chronic Homelessness.

February 2004 Sub- committee meeting: **Strategic Planning Sub-Committee meeting** on Virginia's Plan to End Chronic Homelessness; point-in-time count update and initial analysis; low-income access to free prescription medications through new program; new survey of Employment and Training Opportunities for Homeless Persons. **Employment & Training Sub-Committee meeting** to discuss final draft of E&T survey. **HMIS Sub- committee** met to view a demonstration of the software by Bowman Systems.

March 16, 2004 HSCC Planning Meeting: Progress reports were provided on all projects funded with HUD Supported Housing Program funds, including AACH Adopt-A-Family and DMHM RSA transitional and permanent supportive housing programs. CoC Point-in-time Sub-Committee completed count. Transitional Housing Sub-Committee met with ARHA to discuss Section 8 set asides for graduating transitional housing households. HMIS Sub-Committee met with Bowman Systems regarding the purchase of their software to be used for the Alexandria HMIS. CDBG monies were approved to fund the purchase.

March 2004 Sub- committee meetings: **Strategic Planning Sub-Committee** review and analysis of point-in-time survey data. **Health Care Task Force meeting** to discuss mission/action steps for coming year, including Health Care for Homeless application and outreach to underserved populations. **Transitional Housing Task Force meeting** with speaker from ARHA on set asides for Section 8 vouchers for graduating transitional housing households. **HMIS Sub- committee** members make a presentation to the City's Information Technology Commission. **Point-in-time Sub- committee** met to continue analyzing data from the count in January.

April 20, 2004 Planning Meeting: Presentation by the Northern Virginia Family Services Transitional Housing

Program. Carpenter's Shelter After Care Program staff explained the services provided to those individuals leaving the shelter to ensure all necessary services are in place prior to leaving the shelter and continue after individuals are placed into their homes. Gap analysis was reviewed and discussed by committee and needs were ranked for families and individuals.

April 2004 Sub- committee meetings: HMIS Sub-Committee meeting to discuss *ServicePoint Readiness* paper; discussion of mission/vision of group, HIPAA, HMIS report generation. **Strategic Planning Sub- committee** met to develop final draft of *Ten Year Plan to End Homelessness*. **Continuum of Care Sub- committee** met to organize agenda for Planning Meeting on need rankings based on gaps analysis.

May 18, 2004 HSCC Planning Meeting: Presentation by ANHSI, formerly known as the Arlandria Health Clinic. ANSHI received a major grant from the federal government in March 2004 as a qualified community health center, the first urban clinic to fund medically underserved. Presentations were made to the full committee on new and renewal projects being submitted to HUD for the latest CoC Supportive Housing grant. ACSB staff presented five renewal projects and AACH presented one. The ACSB presented new project for a 12 bed Safe Haven. The committee voted to have the Safe Haven be the number one priority project. Project ranking and guidelines were distributed by mail with the agenda. All eligible members completed rankings and submitted their ballots to the HSCC Chair to be tallied.

May 2004 Sub- committee meetings: **Strategic Planning Sub- committee** met to incorporate the community input on the *Ten Year Plan to End Chronic and other Forms of Homelessness*; **Continuum of Care Sub- committee** met to coordinate writing and tasks for the Continuum of Care. **Transitional Housing Task Force** met to provide program updates, bed availability and changes in procedures.

June 15, 2004 HSCC Planning Meeting: Chair of Strategic Planning Sub- committee presented to full HSCC on the *Ten Year Plan to End Homelessness and Other Forms of Homelessness*. HSCC approved Plan with two changes. The HSCC approved the Continuum of Care Sub- committee submitting the application to HUD for Supportive Housing. Two members reported on attending a training by Social Security Administration on presumptive disability determination. Alexandria Probation and Parole representative discussed problems they have in placing sex offenders into local homeless shelters. The Executive Director of Guest House brought the committee up to date on the reopening of Guest House on May 31. The HMIS Sub-Committee Chair said the HMIS contract with Bowman Services will be signed within the next week. The funds have been encumbered by the City.

June 2004 Sub- committee meetings: The **Strategic Planning Sub- committee** held a focus group on the draft *Ten Year Plan to End Homelessness and Other Forms of Homelessness* with participants from David's Place, a drop in center for unsheltered homeless individuals. **Strategic Planning Sub- committee** met to finalize *Ten Year Plan* and incorporate feedback from HSCC and focus group. **Continuum of Care Sub- committee** met to write Continuum of Care. **Transitional Housing Task Force** met. **Health Care Task Force** met to discuss applying for HHS/HRSA Health Care for the Homeless grant in 2005. Grant guidelines were reviewed.

3. Continuum of Care Goals and System Under Development

a. Chronic Homelessness Strategy/Goals

Alexandria's HSCC has endorsed the paradigm shift from "managing" chronic homelessness to ending it and focusing on those unaccompanied individuals with disabling conditions who have had four episodes of homelessness within the last three years or have been continuously homeless for a year or more. The HSCC's strategy contains the four key components identified by the *National Alliance to End Homeless* (NAEH) as essential to any successful plan to end chronic homelessness: (1) Plan for Outcomes (involvement of diverse stakeholders, systematic data collection and analysis, defining the problem, research into "best models," and "thinking outside the box"); (2) Close the Front Door (Preventing Homelessness); (3) Open the Back Door (Creating Permanent Housing); and (4) Build the Infrastructure (Maximize Mainstream Resources).

(1) Past Performance

(a) Specific Actions Over the Past Year. In the past year, the Alexandria HSCC focused on the creation of a *Safe Haven* program, a permanent housing facility for hard-to-reach, chronically homeless, unsheltered persons with severe mental illness (SMI) or co-occurring SMI and substance abuse disorders. In August and September of 2003, the Chair of HSCC's Strategic Planning Sub-Committee joined forces with the Chair of the Alexandria Community

Services Board (CSB) to meet with the Alexandria Mayor to discuss the *Ten-Year Plan to End Chronic Homelessness* under development by the HSCC. The two Chairs also met with City Council members to stress the importance of creating a permanent housing solution for Alexandria's street homeless. The City of Alexandria agreed to designate a city building worth \$789,200, provide \$795,000 in rehabilitation funding and \$111,891 for support services for the *Safe Haven*. CSB staff identified a site, completed a feasibility study, met with the City's planning and zoning staff, and commissioned an architect to develop a preliminary building design and associated rehabilitation costs for the *Safe Haven*. A *Safe Haven Design Team*, composed of CSB staff, financial officers, program managers, and outreach counselors has been working for the past several months to work out both building and programmatic design details.

Alexandria's *Ten-Year Plan to End Chronic Homelessness* has been drafted, approved by the full HSCC (including representatives of every agency accountable for the accomplishment of the plan's goals and action steps) and in Summer 2004 will be reviewed and finalized by relevant City Department heads before submittal to City Council in the Fall 2004. Many of the goals and action steps in the *Ten-Year Plan* will also be incorporated into the City's *Five-Year Consolidated Plan for Housing and Community Development*. Two members of Alexandria's HSCC are active participants in *Virginia's Policy Council to End Chronic Homelessness*. One of these individuals is an HSCC consumer representative who has lived on the street and graduated from a City-funded transitional housing program. The goals and action steps of Alexandria's *Ten-Year Plan* are closely tied to the Virginia Plan, "Virginia: Sharing A Common Wealth to End Homelessness" and are addressed in more detail in Section (3), Future Goals to End Chronic Homelessness.

In addition to the *Safe Haven* and the development of Alexandria's *Ten-Year Plan*, the HSCC has expanded the number of community members actively committed to the goal of ending chronic homelessness. In advocating for the *Safe Haven*, the HSCC was able to enlist the support of City Commission members (e.g., Economic Opportunities Commission, Public Health Advisory Commission), community leaders and scores of religious congregations, shelters, non-profit agency representatives and private citizens. These advocates will serve as a base of support to continue to seek solutions for ending chronic homelessness as the goals and action steps of the *Ten-Year Plan* are put into place.

Two formerly chronically homeless individuals with a serious mental illness and substance abuse disorders testified at an Alexandria City Council meeting to provide City Council a first-hand account of life on the streets, addiction, mental illness and how services are effective. In addition, they spoke about needed services, such as the *Safe Haven*. Furthermore, HSCC advocacy efforts were directed toward the State budget situation with great success. Virginia legislators voted to restore core services for homeless, as well as to fund three new PACT (*Program of Assertive Community Treatment*) teams and adopt the Virginia Earned Income Tax Credit (EITC).

(b) Impact of Actions on the Number of Chronic Homeless. The 2003 CoC identified 104 chronically homeless individuals (50 unsheltered, 54 sheltered) and the 2004 CoC identified 93 chronically homeless individuals (53 unsheltered, 40 sheltered). There was a reduction of 11% of chronic homeless individuals from 2003 to 2004. It is anticipated that the new *Safe Haven* facility will directly impact the number of chronic homeless by housing 12 of these individuals by 2006.

(c) Remaining Obstacles to Achieving Goal of Ending Chronic Homelessness. There are several major obstacles to achieving the goal of ending chronic homelessness.

- The development of a system-wide coordinated process for assisting chronically homeless individuals apply for, follow up on, and receive entitlements. This process has already begun with the beginning of joint planning meetings with City Departments of Human Services and Mental Health, Mental Retardation and Substance Abuse.

- Community acceptance of the goal to end chronic homelessness is also a significant challenge to achieving the goal. Recent meetings with neighbors of the proposed Safe Haven have given voice to the lack of understanding and fear of the population to be served. This will require continued efforts by the Alexandria Community Services Board, as well as significant support and political will from the Alexandria City Council and Mayor.
- A major obstacle in creating the Safe Haven was the identification of funding sources for ongoing supportive services. This same obstacle will exist as we move forward to develop any additional permanent supportive housing facilities for the chronic homeless population and provide on-going supportive services, i.e., mental health counseling, case management, employment counseling, and substance abuse education and counseling.
- Another obstacle is the high cost of real estate in Alexandria and the lack of available properties. This adds to the difficulty of identifying adequate funding opportunities to address housing for the chronic population. If a property is identified, neighborhood opposition (*NIMBYism*) for the placement of a property for individuals with the issues faced by the chronically homeless population is anticipated to be strong.
- For those chronically homeless individuals who reside in shelters and transitional housing and have taken the steps necessary to achieve independent living status, permanent affordable housing is virtually non-existent in Alexandria. While there may be some difficulties in engaging the chronically homeless consumer with severe mental illness, we believe that if housing were available, this would not be a serious obstacle to overcome.

(2) Current Chronic Homelessness Strategy

The vision in Alexandria's *Ten-Year Plan* states: "In ten years, all individuals experiencing chronic homelessness and other forms of homelessness in the City of Alexandria, Virginia will have access to safe, decent, affordable housing." As previously noted, Alexandria's strategy for ending chronic homelessness by 2012 is organized around the four key components identified by the *National Alliance to End Homelessness* (NAEH) as being critical to any successful plan to end chronic homelessness: Plan for Outcomes; Close the Front Door; Open the Back Door; and Build the Infrastructure. The goals identified for each of these components are shown below. Detailed action steps, with responsible parties and time lines, are identified for each of the goals in the *Ten-Year Plan*.

PLAN FOR OUTCOMES – DATA COLLECTION AND ANALYSIS

Goal 1: Establish Homeless Management Information System (HMIS)

Goal 2: Analyze Data to Effect Improvements in Programs & Services

CLOSE THE FRONT DOOR – PREVENTING HOMELESSNESS

Goal 3: Utilize Effective Discharge Planning Models

Goal 4: Ensure Veterans Receive Entitlements

Goal 5: Develop Homeless Prevention Plan with Landlords

Goal 6: Prevent Evictions & Enhance Other Prevention Efforts

Goal 7: Enhance Legal Services for the Chronically Homeless

Goal 8: Advocate for Support for Funding & Services

OPEN THE BACK DOOR – CREATING PERMANENT HOUSING

Goal 9: Develop a 12-Bed Permanent Housing Safe Haven Facility

Goal 10: Develop a Permanent Housing SRO Facility

Goal 11: Increase Housing Opportunities Available to Chronic Homeless by Maximizing Use of Existing Funding Streams & Identifying Resources/Community Partners for Planning/Development of Additional Permanent & PSH

BUILD THE INFRASTRUCTURE – MAXIMIZE MAINSTREAM RESOURCES

Goal 12: Reduce Barriers in Delivery of Supportive Services to Chronic Homeless

Goal 13: Provide Comprehensive Health Services to Chronically Homeless

Goal 14: Increase the Availability of Training Opportunities and Jobs for the Chronically Homeless

The number of sheltered and unsheltered chronically homeless persons, as identified on the "Continuum of Care Homeless Population and Sub-populations Chart," is 93 (53 unsheltered and 40 sheltered). The creation of Safe Haven and SRO facilities will have a dramatic impact on housing the chronically homeless population, and the addition of staffing to increase services to chronically homeless consumers (Action Step 4 in Goal 12) will serve to move additional persons off the street and into housing and treatment. The remaining goals (e.g., data analysis, prevention, providing health care, job training, etc.) will provide information and support for the continued movement of chronically homeless persons through the continuum.

(3) Future Goals to End Chronic Homelessness

Specific action steps to be undertaken over the next 18 months in carrying out a strategy to end chronic homelessness in Alexandria are delineated in the following chart.

Chronic Homelessness Strategy/Goals

Goal End Chronic Homelessness	Action Steps	Responsible Person Organization	Target Date (month/year when it will be completed)
Goal 1: Increase permanent supportive housing for chronically homeless individuals with a serious mental illness by 12 beds. <i>(Ten-Year Plan, Goal 9)</i>	1. Communicate with neighbors, engage community support through meetings and discussions.	Community Services Board (CSB)	June 2004
	2. Submit HUD 2004 SHP application for funding 12 bed permanent housing Safe Haven facility for chronically homeless persons with severe mental illness (SMI) or co-occurring SMI & substance abuse disorders.	CSB	July 2004
	3. Obtain HUD notice of funding and ensure other funding streams in place.	CSB	December 2004
	4. Begin renovation process.	City of Alexandria Department of General Services CSB	January 2005
	5. Begin Recruitment, hiring and training of Safe Haven staff.	CSB	March 2006
	6. Complete renovation.	CSB	March 2006
	7. Begin Safe Haven operations	CSB	June 2006
Goal 2: Increase affordable permanent housing by 15 units for chronically homeless individuals by developing a Permanent Housing Single-Room Occupancy (SRO) Facility. <i>(Ten-Year Plan, Goal 10)</i>	1. Identify funding sources, meet with City officials and staff (e.g., Housing, Planning & Zoning) and begin preparation of applications/proposals for funding.	Community Non-Profit	July 2004
	2. Identify site, meet with architect, etc. to determine rehabilitation costs.	Community Non-Profit identified in Step 1.	December 2004
	3. Develop business plan and apply for funding.	Community Non-Profit, HSCC members, homeless providers, congregations	Jan-April 2005
	When funding identified, develop program, communicate with neighbors, engage community support through meetings and discussions.		Jan-March 2006
Goal 3: Identify resources and community partners for the planning and development of additional permanent and permanent supportive housing units, acquisition of additional Section 8 vouchers, and other permanent housing solutions for the homeless population. <i>(Ten-Year Plan, Goal 11, Action Step 6)</i>	1. HSCC hosts meeting to identify type of housing, lead agency, community partners, and possible funding sources.	CSB or non-profit agency, HSCC, <i>Housing Action</i>	February 2005
	(Once funding sources are identified, the Action Steps in Goal 2, above, would apply.)		
Goal 4: Analyze HMIS data to improve programs and services for chronically homeless. <i>(Ten-Year Plan, Goal 2)</i>	Extract reports from HMIS that identify number of chronic homeless persons, housing and service needs, how people are interacting with mainstream systems of care, and the effectiveness of interventions.	DHS, CSB IT staff	Dec. 2005 (Use annual point-in-time count in Jan. 2005) Jan. 2006

Goal: End Chronic Homelessness	Action Steps	Responsible Person/ Organization	Target Dates (mo./yr. will be accomplished)
See "Other Homeless Goals Chart," Goal 1, for detailed information on HMIS.)	2. Review the entire Continuum of Care (i.e., shelter/transitional facilities' bed use, populations served, services provided, barriers, etc.), meet and coordinate with other providers throughout the region, and develop priorities and strategies for improvements throughout the Continuum and the region.	HSCC Strategic Planning/Eval. Sub-Committee and senior representatives of all homeless providers	
Goal 5: Increase services to chronically homeless consumers with mental health and substance abuse issues in shelters and on the street. (Ten-Year Plan, Goal 12, Action Step 4)	1. Identify funding sources to add minimum 1.5 FTE (e.g. for PACT team) to increase services to chronically homeless individuals with mental health and or substance abuse problems living on the streets or in shelters.	Community Services Board (CSB)- primary role - other shelter providers - supportive role.	Jan. 2006
Goal 6: Utilize effective discharge planning models (Ten-Year Plan, Goal 3)	<p>1. Ensure compliance with Statewide discharge policy for all at-risk individuals (Virginia Commonwealth Plan, Priority Three, Strategy 3.1) after implementation.</p> <p>2. Ensure "best practice" strategies to ensure persons being released after incarceration or being discharged from psychiatric hospitals and medical facilities do not become homeless.</p> <p>3. Increase the number of prisoners and mental health consumers who have applications pre-filed for Medicaid and other entitlements (e.g., SSI, SSDI) and expedite processing of benefits before release from institutions (Virginia Commonwealth Plan, Priority Four, Strategy 4.1).</p> <p>4. Collect and analyze data through the HMIS on persons who become homeless after discharge from State and local hospitals, jail, detention center, prisons, and foster care.</p>	<p>CSB, DHS, DOC, Ex-Offender Programs</p> <p>DHS, Va. Cares, Jail/Prison staff, OAR, CSB Pre-Release; homeless providers; Alex. Probation & Parole, Hospital staff.</p> <p>CSB, DHS</p> <p>DHS, Va. Cares, Strategic Plng Sub-Committee, OAR, CSB Pre-Release; Detention Ctr; homeless providers; Alex. Probation & Parole</p>	<p>Nov. 2004</p> <p>Dec. 2004</p> <p>Dec. 2004</p> <p>Dec. 2005</p>
Goal 7: Improve prevention efforts for chronically homeless. (Ten-Year Plan, Goal 4 - Veterans; Goal 5, Step 6 - housing stability; Goal 6 - Steps 1 - 4 (Evictions/Intakes) and Goal 7 (Legal Services) - see "Other Homeless Goals Chart."	<p>1. Ensure that all organizations serving the chronically homeless identify those consumers who are veterans, inform them of available benefits, and have the necessary POA forms to allow veterans services to act on behalf of the veteran (Virginia Commonwealth Plan, Priority Four, Strategy 4.2)</p> <p>2. Review CSB policies & procedures (e.g., program rules/admittance criteria for residential properties) to promote residential housing stability.</p> <p>3. Increase the number of chronically homeless individuals applying for disability benefits.</p> <p>4. Attend State-sponsored workshop on Disability Determination and Presumptive Decision Making to enhance the number of chronically homeless receiving disability benefits. (Virginia Commonwealth Priority 2, Strategy 2.2)</p>	<p>DHS, CSB, VA</p> <p>CSB</p> <p>CSB, DHS, VA, all homeless providers</p> <p>CSB, DHS, other providers</p>	<p>Sept. 2004</p> <p>Oct. 2005</p> <p>10/year each year of the Ten-Year Plan.</p> <p>State-determined workshop dates (2004-05)</p>
Goal 8: Advocate for support for funding and services for chronically homeless and other homeless individuals.	See "Other Homeless Goals Chart" for details.	See "Other Homeless Goals Chart" for details	See "Other Homeless Goals Chart" for details.
Goal 9: Increase housing opportunities available to chronic and other homeless persons by maximizing use of existing funding streams.	See "Other Homeless Goals Chart" for details.	See "Other Homeless Goals Chart" for details.	See "Other Homeless Goals Chart" for details.
Goals 10, 11, 12 - Build the Infrastructure and Maximize Mainstream Resources	See "Other Homeless Goals Chart" for details.	See "Other Homeless Goals Chart" for details.	See "Other Homeless Goals Chart" for details.

Goals/End Chronic Homelessness	Action Steps	Responsible Person/ Organization	Target Dates (mo./y) will be accomplished
			Chart" for details.

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(4) Coordination

The Continuum of Care covers only the City of Alexandria, Virginia and does not cover any other jurisdiction with a separate strategy.

b. Other Homeless Goals Chart

(1) Accomplishments over the past year in addressing other homeless goals

In the past year, Alexandria’s continuum has developed a four-bed *Foster Mentoring Home* for youth aging out of foster care and has reopened a nine-bed transitional facility for female ex-offenders that had been closed for more than a year due to lack of funding. Additional City funds were secured for a transitional housing program for the underserved, and HSCC members leveraged CDBG funding for the HMIS acquisition and set-up. Access to health care for homeless persons expanded with a new federally-funded (Department of Health and Human Services) *Community Health Center*, and HSCC *Health Care Task Force* members are working on obtaining additional grant funding for homeless persons’ health care. A new *Affordable Housing Development Corporation* was begun with City funding to preserve and expand affordable housing, and the City has reviewed and removed several regulatory barriers to affordable housing. HSCC members successfully lobbied with State legislators to restore homeless funding and to adopt the *Virginia Non-Refundable Earned Income Tax Credit (EITC)*. The HSCC also conducted and published a survey of employment and job training programs for the homeless and updated and advertised its homeless services website. In addition, the Department of Mental Health, Mental Retardation and Substance Abuse developed a single eligibility form for mainstream resources, analyzing and pilot testing the use of new software. Based on the answers to questions, the software determines a person’s eligibility for a wide variety of mainstream resources. City of Alexandria Department of Human Services has placed an eligibility worker at the Department of Mental Health, Mental Retardation and Substance Abuse (DMHMRSA) intake site to increase coordination and applications for entitlement programs.

(2) Specific Goals and Action Steps to Address Homelessness

Goal/Other Homelessness	Action Steps	Responsible Person/ Organization	Target Dates
Goal 1: Establish Homeless Management Information System (HMIS) (<i>Ten-Year Plan</i> , Goal 1)	<ol style="list-style-type: none"> 1. Define data elements to be included in HMIS and train providers in the use of HMIS. 2. Implement <i>ServicePoint</i> to standardize assessment of consumer needs, create service plans, coordinate case management, and track housing and services. 3. Analyze data and evaluate HMIS functioning. 4. Recommend HMIS program improvements based on evaluation. 5. Adopt HMIS improvements. 6. Coordinate with Statewide HMIS plan (Virginia Commonwealth Plan, Priority Five, Strategies 5.1, 5.2). 	Bowman Internet Services, CSB & DHS IT staff	July 2004
		Bowman Internet Services, CSB & DHS IT staff	Aug. 2004
		HMIS Sub-Committee	Jan. 2005
		HMIS Sub-Committee	March 2005
		<i>ServicePoint</i> , CSB & DHS IT staff CSB & DHS IT staff	May 2005
			June 2005
Goal 2: Analyze HMIS data to effect improvements in programs and	1. Extract reports from HMIS that identify number of homeless persons, reason for entry	CSB, DHS	Dec. 2005

Goal/Other Homelessness	Action Step	Responsible Person/Organization	Target Dates
(Ten-Year Plan, Goal 7)	<p>formed State-level <i>Indigent Defense Commission</i>, which will establish standards for court-appointment layers and ensure adequate representation for the poor.)</p> <p>2. Through the HMIS and other sources, identify the number of chronically homeless and other homeless persons who could benefit from legal services (e.g., individuals with severe mental illness or women who become chronically homeless as a result of domestic violence).</p> <p>3. Work with police, judges, and landlords to identify those at risk of homelessness.</p>	<p>DHS, CSB, all homeless providers</p> <p>DHS, providers</p>	<p>Dec. 2005</p> <p>June 2005</p>
<p>Goal 7: Advocate for support for funding and services for chronically homeless and other homeless individuals</p> <p>(Ten-Year Plan, Goal 8)</p>	<p>1. Prepare public relations materials documenting the lack of funding for homeless programs, e.g., Homeless Intervention Program (HIP), TANF, FSG/SSG.</p> <p>2. Participate in public hearings concerning homeless issues and in legislative advocacy at the Federal, State, and local levels.</p> <p>3. Support the Virginia Coalition for the Homeless in its efforts to secure a Rental Assistance program for homeless (Virginia Commonwealth Plan, Priority One, Objective 2, Strategy 1.8); to increase funding for affordable housing through a State-level Housing Trust Fund (Objective 2, Strategy 1.10); to increase State funding for support of emergency and transitional housing (Objective 2, Strategy 1.12).</p> <p>4. Develop case history vignettes of chronically homeless and other homeless consumers in Alexandria to increase public awareness and political support (Virginia Commonwealth Plan, Priority Five, Strategy 5.5). Use vignettes in public hearings and materials developed in Action Step 1.</p> <p>5. Expand collaboration with the wider community (public and private) to garner support for addressing the needs of chronically homeless and other homeless individuals. Identify Federal, State, and local funders, neighborhood organizations, private foundations, citizens, local businesses, public officials who may be instrumental in assisting the HSCC in providing goods, services, and advocacy.</p>	<p>Virginia Coalition for the Homeless, DHS, providers, consumers</p> <p>Virginia Coalition for the Homeless, DHS, providers, consumers</p> <p>Providers, consumers</p> <p>CSB/DHS case workers, Shelter/T.H. providers</p> <p>HSCC, Housing Action, Congregations, Housing, DHS, CSB</p>	<p>Oct. 2004</p> <p>As hearings are scheduled</p> <p>As legislation comes forward</p> <p>Oct. 2004</p> <p>Feb. 2005</p>
<p>Goal 8: Develop a permanent housing SRO (single-room occupancy) facility</p>	<p>See "End Chronic Homelessness" Table</p>		
<p>Goal 9: Increase housing opportunities available to chronic homeless and other persons experiencing homelessness by maximizing use of existing funding streams and developing additional permanent and permanent supportive housing</p> <p>(Ten-Year Plan, Goal 11) Note that</p>	<p>1. Access HOME-Tenant Based Rental Assistance being developed at the State level (Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.1)</p> <p>2. Apply for VHDA/DMHMRSAS <i>Mainstream Housing Opportunities for Persons with Disabilities</i> vouchers (Special Project identified in Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.2/1.3)</p>	<p>ARHA, CSB, DHS</p> <p>CSB</p> <p>CSB, DMHMRSAS</p>	<p>FY04-06</p> <p>June 2004</p> <p>March 2005</p>

Goal/Other Homelessness	Action Steps	Responsible Person/ Organization	Target Dates
<p>some of the housing development action steps for this goal take place after Jan. '06 and therefore are not included in this chart.</p>	<p>3. Determine whether any Veterans Affairs, HUD, or USDA foreclosed properties exist in Alexandria; Coordinate with Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.4).</p> <p>4. Coordinate with DHCD/VIACH/VCH to expand use of housing resources available through the Veterans Affairs-Per Diem. (Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.6)</p> <p>5. Coordinate with NOVAM, Whitman-Walker and others to expand use of housing resources available through HOPWA.</p> <p>6. Establish linkages with faith-based non-profits to improve access to federal funding opportunities, as well as to increase the number of volunteers serving the homeless.</p>	<p>DHS, VA, CSB</p> <p>DHS, Health Dept., CSB, Shelter providers</p> <p>HSCC, faith-based entities, Alexandria Interfaith Coalition for Affordable Housing</p>	<p>Mar-Nov 2004</p> <p>Nov 2004</p> <p>Nov. 2005</p>
<p>Goal 10: Reduce barriers in delivery of supportive services to chronic homeless and other individuals experiencing homelessness</p> <p><i>(Ten-Year Plan, Goal 12)</i></p>	<p>1. Identify opportunities for coordination of intake eligibility determinations, assessment and data collection to facilitate access to mainstream services, such as TANF, Medicaid, Primary Health Services, MH and SA Services. (Virginia Commonwealth Plan, Priority 2, Strategy 2.3: "No Wrong Door.")</p> <p>2. Ensure distribution of State-Produced Resource Guide (Strategy 2.4) and communication to all providers of Statewide 211.</p> <p>3. Department of Social Services designates an eligibility worker (and back-up) to expand outreach to David's Place and shelters to take applications from homeless individuals. (Virginia Commonwealth Plan, Priority 2, Strategy 2.5)</p>	<p>CSB, DHS, Health Dept., State Policy Academy</p> <p>HSCC, all providers, DHS, CSB</p> <p>DHS/DSS</p>	<p>July 2005</p> <p>July 2005</p> <p>Oct. 2005</p>
<p>Goal 11: Provide comprehensive health services to the chronically homeless and other persons experiencing homelessness</p> <p><i>(Ten-Year Plan, Goal 13)</i> Note that Action Steps to create a medical respite facility extend beyond Jan. '06 and therefore are not included in this Chart.</p>	<p>1. Identify barriers to health care access for the chronically homeless and other individuals experiencing homelessness.</p> <p>2. Work with health care providers to remove barriers.</p> <p>3. Educate local health care entities and others about successful medical respite facilities for homeless.</p> <p>4. Submit application to HHS/HRSA for <i>Health Care for the Homeless</i> grant.</p>	<p>HSCC, Providers, Faith-based nonprofits</p> <p>Health Dept., HSCC, Community Health Center, Clinica Hispana, Queen Street Clinic, Health Care Task Force, INOVA Alexandria Hospital <i>HSCC, Health Care Task Force Va. Coalition for the Homeless Community Health Center, Health Care Task Force, Health Dept., INOVA Alexandria Hospital</i></p>	<p>Dec. 2005</p> <p>Jan – March 2006</p> <p>Jan. 2006</p> <p>April 2005</p>
<p>Goal 12: Increase the availability of training opportunities and jobs to the chronically homeless and other homeless individuals</p> <p><i>(Ten-Year Plan, Goal 14)</i> Note that Action Steps to add employers and training programs in each year of the</p>	<p>1. Identify employers willing to hire chronic homeless and other homeless individuals who are able to work.</p> <p>2. Identify how chronically homeless who are able to work and other homeless persons can access existing training programs, and identify</p>	<p><i>Task Force On Prisoner Re-Entry</i>, CSB, DRS, WORC Primary: JobLink One-Stop Center for Workforce Investment</p> <p><i>Task Force On Prisoner Re-Entry</i>, CSB, DRS, WORC Primary: JobLink One-Stop Center for Workforce Investment</p>	<p>Dec. 2005 (2 employers)</p> <p>Dec. 2005 (2 programs)</p>

Goal: Other Homelessness	Action Steps	Responsible Person/ Organization	Target Dates
<p>plan extend beyond Jan. '06 and therefore are not included in this Chart.</p>	<p>training programs needed by these populations that are not currently being provided.</p> <p>3. Coordinate with JobLink One-Stop Center to access training/educational opportunities that may be available to chronic and other homeless persons through the Workforce Investment Act (WIA). (Virginia Commonwealth Plan, Priority Four, Strategy 4.3 – 4.5).</p> <p>4. Increase employment opportunities for chronic and other homeless persons who are able to work and prisoner re-entry populations by accessing Work Opportunity Tax Credit (WOTC) employment (Virginia Commonwealth Plan, Priority Four, Strategy 4.6).</p> <p>5. For those chronically homeless and other homeless individuals who are working, increase annual income through the <i>Refundable Earned Income Tax Credit</i> (Virginia Commonwealth Plan, Priority Four, Strategy 4.8).</p> <p>6. Apply for Job Opportunities for Low-Income People (U.S. HHS, U.S. Department of Labor, Employment and Training Administration <i>Workforce Investment Board</i> grants to assist homeless, chronically homeless and ex-offenders.</p>	<p><i>Task Force On Prisoner Re-Entry</i>, CSB, DRS, DHS, WORC Primary: JobLink One-Stop Center for Workforce Investment</p> <p><i>Task Force On Prisoner Re-Entry</i>, DHS, CSB, DRS, WORC Primary: JobLink One-Stop Center for Workforce Investment</p> <p>DSS, <i>Refunds for Free In Metro D.C.</i>, all providers</p> <p>TFOPR, Primary: JobLink One-Stop Center for Workforce Investment</p>	<p>Oct. 2005</p> <p>Nov. 2005</p> <p>Feb.-April 2005 & annually</p> <p>pril-Sept. 2004</p>

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Exhibit 1: Continuum of Care- Discharge Planning Policy

The Alexandria Community Services Board (ACSB), which provides policy direction and fiscal oversight of the City of Alexandria's Department of Mental Health, Mental Retardation and Substance Abuse (DMHRMSA), is the local government agency responsible for the implementation of state policies governing the discharge of individuals from state psychiatric facilities. The ACSB, as mandated by state code, is also the entry point for screening individuals in need of hospitalization at state psychiatric facilities and training centers for individuals with mental retardation. As a result, the Board is a part of the discharge planning process from the moment an individual is determined to be in need of admission to a state facility. The ACSB, the local state psychiatric facility, the Northern Virginia Mental Health Institute (NVMHI) as well as Western State Psychiatric Hospital, and the Northern Virginia Training Center (NVTC) also have a signed cooperative agreement that outlines each facility's roles and responsibilities. The ACSB also has a signed cooperative agreement with Inova Alexandria Hospital that outlines both facilities roles and responsibilities as they pertain to the admission and discharge of individuals from the hospital's psychiatric unit (the only inpatient psychiatric unit in Alexandria, Virginia as of July 2004). Although Inova Alexandria Hospital is closing the inpatient psychiatric unit in August 2004, the ACSB has agreements with Inova Mt. Vernon and Northern Virginia Community Hospital in place for continuing these services.

The City of Alexandria's DMHRMSA, representing the ACSB, has been actively involved with the HSCC, since its inception, in the development and implementation of the Continuum of Care. The HSCC has identified the need to coordinate the discharges from state institutions and systems of care in its *Ten Year Plan to End Chronic Homelessness* and is tied into the Commonwealth of Virginia's Ten Year Plan as well.

For over twenty-five years the Commonwealth of Virginia has had in place a set of guidelines called *Discharge Protocols for Community Services Boards and State Mental Health Facilities*. These protocols are designed to provide consistent direction and coordination of those activities required of state facilities and community services boards in the development and implementation of discharge planning from state psychiatric hospitals. Virginia protocols require state psychiatric facilities to include housing as a part of the discharge plans. The activities delineated in these protocols are based on or referenced in the *Code of Virginia* or the Continuity of Care Procedures in the Community Services Performance Contract. (The Community Services Boards must agree to follow these protocols as part of their annual performance contract with the state.) The ACSB/DMHRMSA has had policies and protocols in place for many years, specifically addressing the roles and responsibilities in providing community support services for individuals who are hospitalized in state psychiatric institutions. The ACSB/DMHRMSA makes every effort to link homeless individuals with appropriate residential services and uses homeless shelters only as a last resort or when an individual refuses residential placements offered to them and chooses a shelter placement. In fact, the Department, using a variety of state and local resources, has significantly expanded its own continuum of supportive residential placements over the past twenty years.

For the past 12 years, the Department has been actively involved in a regional effort with four other northern Virginia Community Services Boards to obtain and provide community resources to support the successful discharge and placement of state hospital patients whose special needs have prevented placement in the community and for whom specialized supports and targeted funding are needed for successful community placement. This regional effort, the Discharge Assistance Programs (DAP), has created highly intensive supportive residential services and innovative treatment programs across northern Virginia, using state and local resources. These intensive community support services help prevent and reduce chronic homelessness of individuals with a serious mental illness who enter state psychiatric facilities by providing the necessary residential and support services necessary to live as independently as possible in the community. As of July 1, 2004, an additional \$900,000 has been allocated by the state of Virginia to the five community services boards for the development of additional regional programs to assist individuals with a serious mental illness who have significant barriers to discharge and prevent homelessness.

As part of the strategic planning process, the HSCC identified two special populations leaving state facilities and systems of care that had not been directly addressed in the previous Continuum of Care: youth aging out of foster care and individuals leaving state and local correctional facilities. The HSCC has worked closely with DHS, DMHRMSA and supported the efforts of a newly re-formed non-profit corporation, Guest House, Inc., to address the

needs of these two special needs populations. Since June 2003, these agencies have made significant accomplishments addressing the needs of youth aging out of foster care, individuals with a serious mental illness and/ or co-occurring substance abuse disorders leaving the Alexandria Detention Center and women ex-offenders leaving the state criminal justice system.

Residential Support Services for Youth Aging out of Foster Care: DHS identified a growing problem of youth leaving the foster care system unequipped with the necessary skills to live independently, which may result in greater risk of homelessness. In June 2003, DHS received approval and funding from the Alexandria City Council to open a residential mentoring program for four youth aging out of the foster care system. This program, opened in April 2004, provides supportive residential services for those youths needing additional support and training to live independently and successfully in the community upon their graduation. By teaching these youths the necessary independent living skills, DHS hopes to prevent the likelihood of future homelessness.

Discharge Assistance for Individuals with a Serious Mental Illness and / or Co-occurring Substance Abuse Disorder leaving Alexandria Detention Center: Although the DMHM RSA has been providing mental health and substance abuse treatment services within the Alexandria Detention Center for almost 20 years, staff have not been able to provide necessary case management and follow along services to inmates being released into the community by the courts. In order to address this need, DMHM RSA added additional discharge planning resources to the mental health and substance abuse treatment program located within the City of Alexandria Detention Center. The addition of community based case management services has assisted DMHM RSA Detention Center staff link those individuals being released by the courts into the community with necessary support and follow along service with the goal of preventing recidivism and homelessness.

Residential Services for Women Ex-Offenders: During 2003, local community activists were able to organize and seek new funding for a program that had provided an important link in preventing homelessness for over twenty-five years. Guest House re-opened its doors in April 2004, serving its first consumers May 31, 2004, after being closed for two years due to lack of funds. This program provides residential and support services to nine women ex-offenders returning to the community after incarceration. By providing counseling, housing and linkage to other necessary support services, Guest House has closed an important gap in preventing homelessness in ex-offenders.

The City of Alexandria has only one local community inpatient medical facility, Inova Alexandria Hospital. Although the numbers are few, the local community hospital continues to discharge homeless individuals with medical conditions into the local emergency shelters because there is no other option available. The HSCC has identified this as a problem and has its resolution as a goal in the City of Alexandria's *Ten-Year Plan to End Chronic Homelessness* (Goal 3, Action Step 3). DHS has two eligibility workers who provide liaison with the Inova Alexandria Hospital and the Alexandria Health Department's Casey Clinic to follow up on and to take applications for Medicaid, TANF and other entitlement programs. DHS also is responsible for interviewing patients and completing Uniform Assessment Instruments on all individuals in need of care in assisted living facilities as well as nursing homes. If approved, DHS provides auxiliary grant subsidies to qualified individuals.

Recognizing the need be actively involved with the planning and implementation of discharge policies of individuals leaving state institutions and other systems of care, the HSCC has identified several goals and action steps addressing these issues in its *Ten Year Plan to End Chronic Homelessness and Other Forms of Homelessness*, approved June 2004. The HSCC has also expanded its membership to include the DHS program coordinator for youth aging out of foster care to ensure the HSCC has representation for this population and its needs. In addition, Alexandria Probation and Parole has also begun serving on the HSCC to provide representation on issues affecting individuals exiting the state prison system.

Exhibit 1: Continuum of Care- Unexecuted Grants Awarded Prior to the 2003 Continuum of Care Competition – Not Applicable

Exhibit 1: Continuum of Care Service Activity Chart

Fundamental Components in CoC System - - Service Activity Chart

Component: Prevention

Services in place: Rental and Mortgage Assistance. The Alexandria Department of Human Services (DHS) Office of Community Services (OCS) operates the State Homeless Housing Assistance Resources Homeless Intervention Program (SHARE-HIP). SHARE-HIP provides a combination of case management, housing counseling, and financial intervention to prevent families and single persons from becoming homeless or to regain permanent housing. Families and individuals facing immediate eviction or foreclosure due to circumstances beyond their control may be eligible for up to nine months of financial assistance with rent or mortgage payments. Funds are used to provide vendor payments for rent, security deposits, and mortgages and to provide case management services and staff support. Although intake was suspended in February 2004 due to funding constraints, from July 2003 through March 2004, 143 households received assistance to prevent immediate eviction or foreclosure. OCS also operates two short-term financial assistance programs to prevent eviction and homelessness. The Emergency General Relief Program and the Emergency Shelter Fund both provide financial assistance for past due rent if the household is unable to pay due to circumstances beyond their control, and demonstrates the ability to maintain future obligations. Collectively, these programs served 374 families from July 2003 through June 2004. The Department of Human Services Office of Aging and Adult Services operates a rent relief program for low-income seniors and disabled adults. The monthly supplements help this vulnerable population avoid financial crisis which puts them at-risk of homelessness. The Arlington-Alexandria Coalition for the Homeless (AACH) operates a homeless prevention and follow-up program for former transitional housing families that provides approximately \$1,100 in rental assistance to help two former clients pay rent to avoid eviction and homelessness.

Eviction Assistance. OCS assisted 78 families from June 2003 through May 2004 under the Eviction Assistance and Furniture Storage Program which provides for transportation and storage of possessions of eligible households that were being evicted and did not have permanent replacement housing. Possessions are stored for up to 60 days, giving households time to find replacement housing.

Aftercare Assistance: AACH Adopt-A-Family transitional housing program provides assistance to families who have graduated from the program to help ensure self-sufficiency and permanent housing. Carpenter's Shelter also provides aftercare services to individuals and families leaving the shelter and moving into transitional or permanent housing. This aftercare support helps these formerly homeless persons achieve stability and permanent housing.

Services planned: Rental and Mortgage Assistance. The DHS/OCS will continue the Homeless Intervention Program (SHARE-HIP) using a combination of state General Fund and Temporary Assistance to Needy Families (TANF) funding administered by the Virginia Department of Housing and Community Development, supplemented by \$100,000 in local General Fund revenue. The City Council approved a supplemental request for an additional \$150,000 for prevention and homeless services bringing total local support to \$250,000. DHS/OCS will continue to administer state and local funds of the General Relief program and the Emergency Shelter Fund which provides short-term rental assistance to relieve an impending housing crisis and prevent homelessness. DHS/OCS also manages donations from local charities providing funds on a case-by-case basis for eviction prevention and other housing needs. The Department of Human Services Office of Aging and Adult Services will continue the Rent Relief program and increase outreach to vulnerable populations to increase program utilization. The AACH Adopt-A-Family Program as well as the Carpenter's Shelter Aftercare Program plan to continue their follow-up prevention efforts with families and individuals who graduate from the transitional programs.

Eviction Assistance. The Eviction Assistance and Furniture Storage Program will continue using Community Development Block Grant (CDBG) monies to assist approximately 100 low-income households.

HIV/AIDS. The Alexandria Health Department provides confidential and anonymous HIV counseling and testing, partner counseling and referral services, and primary HIV medical care services. The Northern Virginia AIDS Services provides transportation, grocery vouchers, child care and other support services as well as outreach and prevention services. Whitman Walker Clinic of Northern Virginia provides medical care, case management, prevention, legal and housing services. The ACSB/DMHMRSAs has one full-time position dedicated to HIV/AIDS pre and post testing. All ACSB consumers are given information on the availability of HIV/AIDS services at intake.

How Persons Access/Receive Assistance. Case managers in every HSCC member agency are actively involved in ensuring that families and individuals in need of prevention programs are put in touch with OCS staff. These programs can also be accessed through OCS staff on a walk-in basis. OCS maintained ongoing communications with homeless service providers, shelter case management personnel, outreach workers, local clergy and landlords to ensure that persons needing assistance receive it. Aging and Adult Services staff conduct outreach and direct mail campaigns to identify potentially eligible vulnerable populations. Families completing Adopt-A-Family are involved in extensive follow-up and are encouraged to contact prevention staff to facilitate their access to these services if needed in the future.

Component: Outreach

Outreach in Place:

(1) Homeless Individuals Living on the Streets. The Alexandria Community Services Board through the staff of the Department of Mental Health, Mental Retardation and Substance Abuse (ACSB/DMHMRSAs) provides outreach and assessment services to individuals with serious mental illnesses and/or substance abuse disorders. Outreach services target homeless persons with serious mental illnesses by canvassing the streets, hypothermia shelters in the winter, visiting places homeless individuals are known to be and establishing relationships with the homeless consumers who live on the streets. Consumers are helped to access the following: emergency shelter services, transitional and permanent housing, alcohol and drug treatment, entitlements assistance including SSI, SSDI, Veteran's benefits, medicaid, food stamps, TANF, "soup kitchens," legal assistance and medical and dental care. Outreach to the chronic street homeless also occurs at *David's Place*, a drop-in day shelter, offering a safe environment off of the streets, where the unsheltered homeless can attend to their basic needs such as laundry, showers, storage, receive mail and use a telephone. This program offers passive outreach and clients can participate in programs such as job mentoring, substance abuse focus groups, HIV/AIDS awareness and life-skills workshops, as well as receive assistance in accessing mainstream benefit programs. *David's Place* provides outreach to almost 400 women and men annually. The Alexandria Police Department (APD) identify and assist individuals living in the streets and places not meant for human habitation. The APD work closely with ACSB/DMHMRSAs staff to provide emergency clinical assessments and referrals for services. In addition, the APD identifies homeless individuals who are drunk in public and offers them a choice of going to jail or receiving services at the ACSB/DMHMRSAs social detoxification center. This provides yet another point of contact to assist individuals accessing services. The detox center is co-located with the Alexandria Community Shelter. ACSB/DMHMRSAs homeless outreach staff are also co-located in the detox center and can provide immediate assistance to homeless individuals brought in to detox.

(2) Outreach Activities for other Homeless. Once a homeless individual accepts emergency shelter, ACSB/DMHMRSAs outreach staff meet in weekly case management meetings held at the Alexandria Community Shelter and the Carpenter's Shelter. Each member serves as a liaison and advocate for services offered by their respective agency. Shelter staff, outreach workers and case managers act as advocates to assist clients to access mainstream resources, including SSI, SSDI, TANF, Medicaid, Veteran's benefits and housing assistance and supportive services. Services are also available to homeless persons on a walk-in basis at DHS. Case managers at emergency shelters and DMHMRSAs outreach workers coordinate movement from emergency shelters to transitional housing programs and permanent supportive housing program operated by ACSB/DMHMRSAs.

A major barrier to services and treatment has been the homeless individual's unwillingness to be identified as needing mental health or substance abuse services. Identification and engagement of these individuals can only be achieved through assertive outreach to persons in shelter settings, food distribution centers and the streets, and passive outreach that allows homeless persons to engage services on their own terms. ACSB/DMHMRSAs provides

staff and facilities that are equipped to accomplish both goals including three full-time outreach workers/case managers assigned to serve homeless persons residing in local shelters and/or on the streets. These staff begin the engagement process by locating people living on the streets who are highly resistant to accepting services. Through a process of engagement, these persons can begin to trust the service provider and develop a relationship leading to services, shelter placement and treatment.

Veterans. Outreach to veterans is accomplished through coordination between the two largest emergency shelters (Carpenter's Shelter and the Alexandria Community Shelter) in the City, David's Place (a drop-in day shelter operated by Carpenter's shelter), and the Department of Veterans Affairs (DVA). A representative from the DVA visits Carpenter's Shelter and the Alexandria Community Shelter at least weekly to provide information and referral for veteran residents and David's Place members. Those in need of outreach services can access them through contact with PATH Outreach workers, through referrals from another service provider, or on a walk-in basis.

Domestic Violence. The Domestic Violence Program (DVP) is a component of the City of Alexandria's Office on Women. The DVP provides direct crisis services 24 hours a day to women in domestic violence situations. DVP coordinates with City agencies and community organizations to provide outreach services. An interagency committee meets monthly to monitor enforcement, treatment and court actions. Community education programs provided by outreach staff target potentially homeless victims or those at-risk of becoming homeless. The Office on Women receives grant funding to provide targeted outreach to the Hispanic community. A satellite office was opened this year at the Essex House Apartments in Alexandria's West End to focus services on the City's growing and diverse immigrant population. The complex is also home to four transitional housing families in the Adopt-A-Family SHP Project who have ready access to available services.

Outreach Planned:

(1) Outreach Planned for Persons Living on the Street It is anticipated that the current ACSB/DMHM RSA outreach workers will continue to provide outreach to persons living on the street at the same funding levels as last year. In addition, *David's Place* will continue to operate on a daily basis to provide outreach to the chronic street homeless population. The management of Carpenter's Shelter, which operates *David's Place*, is currently exploring the possibility of creating a new model program providing intensive case management to expedite housing placement for a small number of persons living on the street and extending the hours of operation to more fully respond to the needs of those persons living on the street who have day labor jobs.

(2) Outreach to Other Homeless Persons It is anticipated that the current ACSB/DMHM RSA outreach workers will continue to provide outreach to other homeless persons at the same funding levels as last year. The ACSB has included in their strategic plan to increase case management services to this population.

Component: Supportive Services

Services in place: Case Management. Families and single individuals participating in each stage of Alexandria's homeless service continuum access comprehensive case management services designed to overcome the crisis that precipitated their homelessness. Each family and single adult residing in emergency shelter is assigned to a case manager employed by the shelter. Carpenter's Shelter, Alexandria Community Shelter, Arlington-Alexandria Coalition for the Homeless (AACH), CLI, Inc., ALIVE!, Northern Virginia Family Services Transitional Housing, DHS Mentor Foster Home, as well as DMHM RSA and DHS all have dedicated full time staff providing case management services to individuals who are homeless. The case manager is charged with orchestrating a range of services to accomplish individual goals. To facilitate planning and service delivery, social work, clinical and job development staff from the Department of Human Services and the Alexandria Community Services Board through the staff of the Department of Mental Health, Mental Retardation and Substance Abuse provide input on plans, linkage to services and counseling when indicated.

A wide variety of support services are in place and available directly from the homeless service programs. Literacy programs, life skills, parenting, self-directed computer tutorials and GED preparation are offered by Carpenter's

Shelter or Alexandria Community Shelter staff or volunteers recruited to work with residents. Arlington-Alexandria Coalition for the Homeless (AACH) provides targeted in-house employment assistance to clients through its LifeWorks program. Carpenter's Shelter employs a Children's Coordinator, hired with state grant funds, to address the education and developmental needs of youth coming into the shelter programs. AACH dedicates a children's services coordinator to meet the needs of its clients in transitional housing through its Support for Kids in Transition (SKIT) program as well as provides child care assistance. The Alexandria City Public Schools maintain children coming into the shelter at their home school and continue to provide transportation. Case managers at emergency shelters and DMHM RSA outreach workers coordinate movement from emergency shelters with transitional housing programs and permanent supportive housing program operated by ACSB/DMHM RSA.

In emergency shelter settings, services are planned and delivered by HSCC's case management teams that include a Social Worker from DHS/OCS, an Employment Assistance and Training Specialist from Job Link, the City's One Stop Employment Center, ACSB/DMHM RSA staff including a Substance Abuse Counselor, a Mental Health Counselor, Outreach Worker, and the Shelter Case Manager. Appropriate staff assigned to the team provide crisis child care for job and housing search, skills assessment, job development and job placement. Transportation assistance is offered in the form of bus tokens, passes and Metro Fare Cards. The goal is to return homeless individuals to stable, permanent housing in the community. Shelter residents work on developing resources to become self-supporting and are assisted in accessing support services by their assigned Shelter Case Manager. Each resident of the shelter meets with the case management staff to discuss the underlying reasons for the shelter placement, prior incidents of homelessness, educational background, work history, mental health and substance abuse history, as well as individual and family strengths, needs, and general level of functioning. The team assesses and arranges and/or provides appropriate and necessary services on behalf of the resident. In subsequent meetings, discussions focus on the resident's progress in meeting goals established to move toward self-sufficiency, if the services are appropriate, and whether the resident is ready to move into permanent housing or another level of the continuum of care. Shelter operators have taken the additional step of instituting aftercare programs that focus on ensuring stability of former residents having moved on to permanent housing. David's Place has expanded services on-site to include life skills training, job mentoring, computer training, GED and ESL training, SA counseling, art therapy as well as other programs designed to meet the growing needs of the homeless population integrating back into society.

Mainstream services and income maintenance programs are available through offices of the Alexandria Department of Human Services, the Social Security Administration, Department of Veterans Affairs, and the Virginia Employment Commission (VEC). The Department of Human Services administers the Temporary Assistance to Needy Families (TANFF) program, the Food Stamp program, Virginia's Medicaid and Children's Medical Insurance Program known as FAMIS. Attached to DHS, the WIA One-Stop Center, JobLink provides core services, including skills assessment, employment training, job development and job placement, to all job seekers. The Social Security Administration administers the Supplemental Security Income program and Social Security retirement, disability and survivors programs. The Virginia Employment Commission, VEC, supports workforce development efforts of the One-Stop Center and administers Unemployment Compensation. Shelter case manager and team members assigned refer and advocate with the provider agencies to ensure appropriate services and benefits are delivered.

SMI and Substance Abuse: ACSB/DMHM RSA outreach team members provide substance abuse case management and counseling services to homeless persons residing in shelters. They coordinate linkages to all Department treatment services, including drug and alcohol treatment residential programs, and assist shelter residents in maintaining sobriety by providing counseling, drug and alcohol education, relapse prevention and other supportive services designed to help them through the first stage of recovery. ACSB/DMHM RSA provides a full range of diagnostic assessment, psychiatric evaluations, outpatient treatment, medication management, supportive counseling for substance abuse as well as mental health problems, crisis intervention, psycho-social rehabilitation, supportive employment, residential treatment services, case management, social detoxification, discharge planning, and psychological evaluation. In order to ensure easy access for homeless individuals to behavioral health services, ACSB/DMHM RSA mental health professionals are scheduled twice a week and available as needed at all of the shelters for consultation.

HIV/AIDS Specific Services: The Alexandria Health Department provides a wide array of services. These include confidential and anonymous HIV counseling and testing; partner counseling and referral services; primary HIV medical care; nutrition counseling and nutrition supplements; dental care; public health nurse case management providing health and psychosocial assessment to identify other health, mental health, substance abuse and social support referrals and assistance with Medicaid applications; AIDS drugs assistance program. The Northern Virginia AIDS Services provides transportation, grocery store vouchers, child care, adolescent support services and outreach in addition to prevention services. Whitman Walker Clinic of Northern Virginia provides medical care, case management, dental care, social case management, prevention services, legal services, and housing services. Inova Juniper Program provides medical care case management and dental care. The Alexandria Community Services Board through the staff of the Department of Mental Health, Mental Retardation and Substance Abuse provides HIV/AIDS testing and pre and post test counseling and behavior change counseling. The Alexandria Redevelopment and Housing Authority manages 14 HOPWA vouchers.

Services Planned: All case management and supportive services delivered to special populations are expected to continue at their existing level. The Departments of Human Services and Mental Health, Mental Retardation and Substance Abuse are discussing creating a coordinated system of care for shared clients of both departments. Senior management staff met in June 2004 to discuss ways to develop a system wide approach to intake, eligibility and service coordination. Staff are examining ways to increase collaboration, integration and possibly co-location of services when leases for both departments expire in five years. An agreement was made to begin reviewing specific programs serving the same clients to analyze methods to collaborate and integrate services. The three areas agreed upon were youth, geriatric and homeless services.

How homeless persons access/receive assistance: DHS has assigned a social worker twenty hours a week who is responsible for screening and preliminary clinical assessments for any homeless individual or family presenting at DHS. The social worker ensures referrals are made to the appropriate resources, including mental health and substance abuse services. Weekly case management meetings are held at the Alexandria Community Shelter and The Carpenter's Shelter. Team membership is as described above. Each team member serves as liaison and advocates for services offered by their respective agency. Team members and shelter case managers act as advocates to assist clients to access mainstream financial and housing assistance and supportive services by accompanying the individual to apply for services and by following up on the application process. Services are also available to homeless persons on a walk-in basis at DHS. In January 2004, the Department of Human Services began sending monthly an eligibility worker to the Department of Mental Health, Mental Retardation and Substance Abuse to improve access to mainstream resources for clients of the Department. The ACSB/DMHM RSA also has a clinical social worker at DHS weekly to accept referrals and complete intakes on individuals identified by DHS workers as in need of substance abuse treatment services. Homeless individuals can also walk-in and request services at the ACSB/DMHRMSA main intake site and be seen by the emergency services team. The system changes described demonstrate improving integration and coordination of services, where multiple needs can be addressed at the same time.

Form HUD 40076 CoC-F

Exhibit 1: Continuum of Care Housing Activity Chart

Provider Name	Facility Name	HMIS	Geo Code <input checked="" type="checkbox"/>	Target Population 2004 Year-Round Units/Beds					2004 All Beds		
				A	B	Family Units	Family Beds	Individual Beds	Year-Round	Seasonal	Overflow Voucher
Current Inventory											
City of Alexandria / Salvation Army	Alex. City Shelter	P-8/04	5E+05	M				32	33	65	6
A LIVE!	A LIVE! House	P-8/04		FC				14	0	14	0
Carpenter's Shelter	Carpenter's Shelter	P-8/04		M				40	40	80	61
City of Alexandria	Domestic Violence Shelter	P-8/04		FC DV				14	0	14	0
SUBTOTAL								100	73	173	67
Under Development											
Not Applicable											
SUBTOTAL											
TRANSITIONAL HOUSING											
Provider Name	Facility Name	HMIS	Geo Code <input checked="" type="checkbox"/>	Target Population 2004 Year-Round Units/Beds					2004 All Beds		
				A	B	Family Units	Family Beds	Individual Beds	Total Beds	Seasonal	Overflow Voucher
Current Inventory											
Arlington-Alexandria Coalition for the Homeless	Adopt-A-Family Program	P-8/04	510-024	FC				18	65	0	65
ACSB	Women's Recovery Home	P-8/04		SF				0	0	6	6
ACSB	Men's Recovery Home	P-8/04		SM				0	0	7	7
ACSB	Aspen	P-8/04		SMF				0	0	4	4
ACSB	Independent Living Program	P-8/04		SMF				0	0	21	21
CLI, Inc.	Door To Independence	P-8/04		FC				10	45	0	45
NO.VA. FAMILY SERVICES	Alexandria Transitional Housing Program	P-8/04		M				10	58	1	59
Salvation Army	Turning Point	P-8/04		FC				7	14	0	14
ACSB	North Howard	P-8/04		SMF				0	0	7	7
Carpenter's Shelter	Carpenter's Transitional Housing Program	P-8/04		M				1	3	1	4
SUBTOTAL								46	185	47	232
Under Development											
Not Applicable											
SUBTOTAL											
PERMANENT SUPPORTIVE HOUSING											
Provider Name	Facility Name	HMIS	Geo Code <input checked="" type="checkbox"/>	Target Population 2004 Year-Round Units/Beds					2004 All Beds		
				A	B	Family Units	Family Beds	Individual Beds	Total Beds	Seasonal	Overflow Voucher
Current Inventory											
ACSB	Mayflower/ Canterbury	P-8/04		SMF					8	8	
ACSB	Columbus & Wythe	P-8/04		SMF					7	7	
ACSB	Notabene	P-8/04		SMF					10	10	
ACSB	Family Condos	P-8/04		FC				3	10	0	10
SUBTOTAL								3	10	25	35

Exhibit 1: Continuum of Care: Housing Gaps Analysis Chart

		Current Inventory in 2004	Under Development in 2004	Unmet Need/ Gap
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Individuals

Beds	Emergency Shelter	140*	0	0
	Transitional Housing	47	0	4
	Permanent Supportive Housing	25	0	34
	Total	212	0	38

Persons in Families With Children

Beds	Emergency Shelter	100	0	0
	Transitional Housing	46	0	5
	Permanent Supportive Housing	10	0	0
	Total	156	0	5

* Includes 67 seasonal and 73 individual beds available on the night of the point-in-time count.

Form HUD 40076 CoC-H

Exhibit 1: Continuum of Care: Homeless Population and Sub-Populations Chart

Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
1. Homeless Individuals	104 (N)	36 (N)	73 (N)	213 (N)
2. Homeless Families with Children	16 (N)	33 (N)	0	49 (N)
2a. Persons in Homeless Families with Children	53 (N)	148 (N)	0	201 (N)
Total (lines 1 + 2a)	157 (N)	184 (N)	73 (N)	414 (N)
Part 2: Homeless Subpopulations	Sheltered		Unsheltered	Total
1. Chronically Homeless	40 (N)			
2. Seriously Mentally Ill	14 (N)		17 (N)	31
3. Chronic Substance Abuse	55 (N)		24 (N)	79
4. Veterans	19 (N)		8 (N)	27
5. Persons with HIV/AIDS**	2 (N)		4 (N)	6
6. Victims of Domestic Violence	13 (N)		0 (N)	13
7. Youth	0 (N)		0 (N)	0

Form HUD 40076 CoC-I

Exhibit 1: Continuum of Care Information Collection Methods

1. Housing Activity Chart

(a.) The HSCC, through the Strategic Planning Sub-Committee, is responsible for coordinating annual efforts updating the housing inventory in place and under development within the City of Alexandria. This year, the HSCC completed the point-in-time count in coordination with the Washington Metropolitan Council of Governments (COG) regional enumeration on January 21, 2004. The three emergency shelters, three family transitional housing providers as well as the residential services programs operated by the ACSB's Department of Mental Health, Mental Retardation and Substance Abuse completed surveys on individuals in residence, program capacity and programs under development on January 21. The Point-in-Time Sub-Committee contacted each provider to verify data collected on the surveys hand delivered to the contact person.

Emergency Shelter — Emergency housing in conjunction with food and support services that may include substance abuse education, transportation, crisis stabilization services, supportive counseling, medication management, case management, training in activities of daily living, vocational skills training and emergency financial assistance, the purpose of which is to enable individuals and families to gain self-sufficiency and independence. Emergency shelters may provide a place for families to be during the day while conducting job searches, working or attending training.

Transitional Housing — Transitional Housing facilitates the movement of homeless individuals and families to permanent housing within twenty-four months. This temporary housing is combined with support services, such as substance abuse education, crisis stabilization services, transportation, supportive counseling, medication management, case management, training in activities of daily living, vocational skills training and emergency financial assistance, to enable homeless individuals and families to live as independently as possible.

(b.) **2005 Point-In-Time Survey:** The HSCC has coordinated its annual one night point-in-time survey with the Metropolitan Washington Council of Governments (COG) since 2001. This coordination has successfully reduced interjurisdictional duplication of homeless individuals. Historically, the count has occurred the last week of January and will continue at this time per HUD instructions. It is anticipated that the COG Homeless Task Force will call local CoC representatives together in the fall of 2004 to make any adjustments to the survey instruments used in the count based on feedback from this year. Each facility will complete the survey on residents present on the designated date of the count and return them to the contact person appointed. The HSCC plans to continue the same successful methodology for conducting the point-in-time study and inventory of housing and homeless individuals. However, the implementation of HMIS in the fall 2004 may provide additional information that may influence the point-in-time process.

2. Housing Gaps Analysis Chart

The data for the housing gaps analysis was gathered through a collaborative effort of HSCC members in preparation for the annual point-in-time count. A one night point-in-time count was utilized to survey all shelter, transitional and permanent housing providers. On January 21, 2004 a point-in-time survey was completed on site by service providers and produced data to complete the Housing Activity Chart. As Alexandria's membership chart demonstrates, all emergency shelter, transitional housing and supportive housing providers are active in the planning and development of the community service continuum. These members also are represented on the Point-in-Time Sub-Committee. Prior to the agreed upon enumeration day, representatives met for training on the survey instrument in use and to document their current inventory. **The unmet need/ gap is the difference between the inventory and the need identified by the point-in-time survey.**

3. Methods for Completing Part 1 and 2 Homeless Population and Subpopulations Chart.

(a) **Point-in-Time Count.** This year's point-in-time (for sheltered and unsheltered) count was conducted on January 21, 2004 in conjunction with the regional homeless enumeration sponsored by The Washington Metropolitan Council of Governments (COG) Homeless Task Force. In August of 2000, the chief administrative officials in the 17 jurisdictions comprising COG agreed to participate in an ongoing regional effort to establish an unduplicated count of homeless families and individuals. Each local jurisdiction conducts an individual count using a survey instrument developed by the COG Homeless Task Force and submits its results on common data elements to produce an unduplicated regional point-in-time count and demographic profile of homeless sub-populations in the Washington Metropolitan area. Each emergency shelter provider, transitional housing provider and supportive housing program completes a comprehensive survey on sheltered and unsheltered residents based on their

administrative records. Provider records and knowledge of the residents afford excellent information on demographics, disabilities and other service needs. In order to determine the number of non-sheltered and chronic homeless persons, the ACSB/DMHM RSA Homeless Outreach Coordinator, is the lead agency and contact. The ACSB, through the staff of the DMHM RSA, administers mental health, mental retardation and substance abuse programs in the City. ACSB/DMHM RSA outreach team and other volunteers combed the City on January 21, 2004 in an effort to identify and extract as much information as possible from homeless persons on the street. The outreach teams visited various program sites homeless people frequent to complete individual surveys. Sites included the day shelter (David's Place) and two meal program sites (Meade Episcopal Church, Christ House). The outreach workers and volunteers canvassed the City of Alexandria to locate and identify the unsheltered homeless population. Homeless persons were interviewed in such diverse places as the libraries, shopping centers, fast food restaurants, underneath bridges and overpasses and other locations not normally used for shelter. Each surveyor received training in the administration of the "point-in-time" survey and the definitions of unsheltered and chronic homeless. Many of the chronic homeless with serious mental illnesses and chemical dependency are known to ACSB/DMHM RSA staff. Surveyors convened after the point-in-time count to ensure that individuals were properly counted, classified correctly and to ensure that there was no duplication.

(b.) Future "Sheltered" Data Collection. Alexandria participates with the COG Homeless Committee and plans to continue to take part in the *annual* regional point-in-time enumeration. The HSCC will conduct the survey in the last week of January 2005 as it has in the past. The HSCC will use the comprehensive provider survey developed in conjunction with COG to update the Housing Activity Chart. As part of the January 2005 point-in-time count, every provider in the Continuum will be asked to update their inventory numbers for inclusion in the Housing Activity Chart.

(c.) Future "Unsheltered" Data Collection. The same frequency, survey and outreach methodology will be employed as described in section (a) point-in-time count above, with interviews performed by outreach staff.

(d.) Changes from 2003 to 2004. As documented in the point-in-time counts January 2003 and 2004, the number of unsheltered individuals has dropped from 113 in 2003 to 73 in 2004. The total number of persons in emergency shelter has also dropped from 218 in 2003 to 157 in 2004. Both single individuals and family members using emergency shelters are lower this year. However, the number of persons in transitional housing has increased from 151 in 2003 to 184 in 2004. The population determined chronic in 2004 was 93 individuals after residents of permanent housing were factored out. In 2003, the chronic population was 104.

Continuum of Care: Exhibit 1 Homeless Management Information System (HMIS)

a. CoC Strategy to Implement an HMIS and Progress Made

The HMIS Sub-Committee of the HSCC was established two years ago to plan and implement HMIS. The Sub-Committee comprised the entire Alexandria network of homeless and social service providers. These providers (including emergency shelters, transitional housing, and McKinney-Vento permanent supportive housing) will use the HMIS integrated data tool to record and report uniform system-wide information on client needs and services. A contract was signed in June 2004 with Bowman Systems to use their Service Point HMIS system. The schedule for the coming year is: July 2004: Set up data structure and operating protocols and train providers. August 2004: Begin provider data entry. January 2005: Analyze data and evaluate HMIS functioning. March 2005: Recommend HMIS program improvements based on evaluation. May 2005: Implement HMIS program improvements. June 2005: Coordinate and integrate, as appropriate, with Statewide HMIS plan.

b. Check one of the following which best reflects the status of your CoC in having a Continuum-wide HMIS

- The CoC has not yet considered implementing an HMIS.
- The CoC has been meeting and is considering implementing an HMIS.
- The CoC has decided to implement an HMIS and is selecting needed software and hardware.
- The CoC has implemented a continuum-wide HMIS.
- The CoC is seeking to update or change its current HMIS.
- The CoC is seeking to expand the coverage of the current system.

c. If your CoC has already implemented or is seeking to update or expand its HMIS system, identify the in the table below how many of the Current Inventory in 2004 beds listed on your Housing Gaps Analysis chart are included in the CoC's HMIS and are currently providing data on clients into the system.

	Current Inventory in 2004	
	Beds/Percentage Providing Client Data into HMIS	
	Individuals	Families
Emergency Shelter	<u>140/100%</u>	<u>100/100%</u>
Transitional Housing	<u>47/100%</u>	<u>185/100%</u>
Permanent Supportive Housing	<u>25/100%</u>	<u>10/100%</u>

Form HUD 40076 CoC-J

Exhibit 1: Continuum of Care Priorities

a. Methods to Assess Performance. At least annually, each project up for renewal provides a written report to the HSCC members modeled after the HUD required annual performance reports (APR). Each project describes established outcome measures for participants. In addition, each project sponsor makes an oral presentation to the HSCC describing their goals and progress made toward meeting them. During the presentation, HSCC members are offered the opportunity to ask questions and make suggestions and/or comments. Only projects that have successfully met their goals and objectives, or have developed strategies to correct deficiencies, and continue to meet a need in the CoC are included in Alexandria's application to HUD. Because the number of City Alexandria's CoC system service providers receiving HUD funds are limited, the presentations are completed in one meeting.

b. Filling a Gap. The Alexandria CoC has identified the need for a Safe Haven as its number one priority need. The City identified the establishment of a Safe Haven as a top priority in its *FY 2001-2005 Consolidated Plan for Housing and Community Development*, as well as in its *2004-2015 Draft Strategic Plan*. The Alexandria Community Services Board (ACSB) also identified the development of a Safe Haven as a top Board priority. A recent survey found 73 unsheltered homeless persons in the City of Alexandria, and another 49 staying in winter shelter and therefore unhoused the remainder of the year. Currently, there is no place in the City for the 100+ people living on our streets to be housed. Many of these individuals, because of their symptomology, are not able to utilize the current emergency shelter system. They live under bridges, urban encampments, in cars, and in doorways. Although many attempt to utilize the shelter system or supportive residential treatment settings, they fail because of the demands and expectations of the facilities. Although the annual operating budget for this program is high; the cost of NOT providing housing for this population is also tremendously costly. Research has shown that homeless people placed in supportive housing experience significant reductions in hospitalizations (regardless of type-medical or psychiatric), length of stay per hospitalization and time incarcerated. By providing a safe, low demand environment, research has shown that residents eventually accept treatment services. The ACSB has proposed to meet this need by developing a Safe Haven for 12 chronically homeless individuals with a serious mental illness and/or co-occurring substance use disorder. The City of Alexandria has a unique opportunity, at this moment, to meet this need. The City has agreed to provide the ACSB the use of a 10,000 square foot building, with an open market office space rent of \$126,900 annually, \$795,000 in rehabilitation funds as well as \$111,891 annually towards the cost of mental health and substance abuse services for residents of the Safe Haven. The ACSB has already begun notification of the neighbors of the site as well as conducted community meetings about the proposed project. The proposed site is in a commercial downtown area of Old Town Alexandria familiar to many of the potential Safe Haven residents. It is well-located because of its accessibility to public transportation and its proximity to other community resources, such as employment, social services and ACSB services. City zoning ordinances do not require a special use permit for the development of multi-family apartment units.

c. Project Selection and Priority Placement Process

(1) The HSCC initiated the community planning process for 2004 Supportive Housing Program proposals and the response to the Super NOFA in December 2003. Notice of SHP planning activity was mailed to all members of the HSCC and the mailing list for community participation in Community Development Block Grant planning. All known homeless service providers in the geographic area and surrounding jurisdictions also received notice of CoC planning. All HSCC members are asked to identify any omissions to the list to ensure its comprehensiveness. Non-profit and faith based organization are well represented in these lists. The notice explained the role of HSCC, projected a time line for key steps, (including the point -in-time count, gaps analysis and prioritization, progress reports, presentation of proposals, voting and ranking). The notice provided the date, time and location of upcoming HSCC meetings used for planning. The HSCC planning process and priorities are also published in the City's Comprehensive Annual Performance Report (CAPER) and annual Action Plan updates prepared for HUD. One renewal project was proposed by Arlington-Alexandria Coalition for the Homeless for transitional housing for families in the community. Two renewal projects were proposed by Sheltered Homes of Alexandria to operate permanent supportive housing programs. Three renewal projects were proposed by the Alexandria Community Services Board to operate one permanent supportive housing project and two transitional supportive housing projects. The Board also proposed one new Safe Haven project.

(2) Project proposals are evaluated using a five step criteria. Renewals are considered with the additional test of whether project objectives are met. The selection and ranking criteria is as follows: the project meets identified gaps

and priorities established by the point-in-time count (transitional and permanent supportive housing); the expected outcomes are clear and attainable; the description of the project and services offered is clear; the budget is reasonable and clear; and the project sponsor has demonstrated the administrative capacity to implement the proposal.

(3) The HSCC adopted by-laws in 1999 that established criteria for participation in voting and project ranking. Any member organization that meets the criteria is eligible to vote in that year. Voting members must demonstrate an ongoing commitment to the planning process through consistent attendance at full committee meetings and active work on Sub-Committees that provide the core work for annual CoC updates and homeless enumerations. Voting criteria is based on maximum participation in the work of the HSCC. Member organizations must have attended two thirds of the meetings during the year in addition to Sub-Committee work. One vote is allowed per qualifying organization no matter how many representatives attend the meetings. Project applicants and sponsors are included. In creating the by-laws, the HSCC's goal was inclusiveness. The committee continues to strongly promote participation of all agencies and has yet to identify bias in the voting records of potential project applicants or sponsors. Twelve organizations were eligible to vote and rank projects for the 2004 SHP application. Eight non-profit and faith-based organizations, three public agencies and one formerly homeless individual comprised the selection pool. Voting is done with confidential ballots reviewed and tabulated by the HSCC Co-chair from DHS.

(4) The Committee has not received any complaints in the preceding 12 months regarding selection or voting.

Continuum of Care: Project Priorities Chart

(1) Applicant	(2) Project Sponsor and Project Name	(3) Numeric Priority	(4) Requested Project Amount	(5) Term of Project	Program and Component/Type (Check only one)				
					SHP new	SHP renew	S+C new	S+C renew	SRO new
Alexandria Community Services Board (ACSB)	ACSB, Safe Haven Permanent Housing Project	1	\$163,824	3	SH-ph				
ACSB	ACSB, Notabene and Family Permanent Housing	2	\$131,643	1		PH			
Sheltered Homes of Alexandria	Sheltered Homes of Alexandria, Canterbury and Mayflower	3	\$77,749	1		PH			
ACSB	ACSB, Men's Recovery Home	4	\$98,150	1		TH			
Sheltered Homes of Alexandria	Sheltered Homes of Alexandria, Columbus Street Permanent Housing Project	5	\$89,288	1		PH			
Arlington-Alexandria Coalition for the Homeless (AACH)	AACH, Adopt-A-Family	6	\$139,440	1		TH			
ACSB	ACSB, Aspen Street	7	\$29,814	1		TH			
Total Requested Amount			\$729,908						

Form HUD 40076 CoC-K

**Exhibit 1: Continuum of Care Supplemental Resources
Enrollment and Participation in Mainstream Programs**

(1) Check those mainstream programs for which your COC systematically helps homeless persons identify, apply for and follow-up to receive benefit under:

- SSI SSDI TANF Medicaid Food Stamps
 SCHIP WIA Veterans Health Care

(2) Which policies are currently in place in your CoC to help clients secure these mainstream benefits for which they are eligible? Check those policies implemented by a majority of your CoC's homeless assistance providers:

A majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream benefit programs.

The CoC systematically analyzes its projects' APRs to assess and improve access to mainstream programs.

CoC contains a specific planning committee to improve CoC-wide participation in mainstream programs.

A majority of homeless assistance providers use a single application form for four or more of the above mainstream programs.

The COC systematically provides outreach and intake staff specific, ongoing training on how to identify eligibility and program changes for mainstream programs.

CoC has specialized staff whose only responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs.

A majority of homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments.

A majority of homeless assistance providers have staff systematically follow-up to ensure that mainstream benefits are received.

Other (Please describe in 1-2 sentences.) Form HUD 40076 CoC-L

Exhibit 1. Continuum of Care Project Performance- Housing and Services

A. Housing

1. Permanent Housing.

- a. What is the number of participants who exited the permanent the permanent housing project (s) during the operating year (from APR Question 12(a))? 7
- b. What is the number of participants who did not leave the project(s) during the operating year ? 28
- c. Of those who exited, how many stayed longer than 6 months in the permanent housing program (APR Question 12(a))? 7
- d. Of those who did not leave, how many stayed longer than 6 months in the permanent housing program? 23
- e. Of the total number of participants in the permanent housing project(s) (both those who left and those who stayed), what percentage stayed longer than 6 months (both those who left and those who stayed)? 86%

2. Transitional Housing.

- a. What is the total number of participants who left transitional housing projects during the operating year? 18
- b. What is the number of participants who left transitional housing projects and moved to permanent housing? 13
- c. Of the number of participants who left transitional housing, what percentage move to permanent housing? 72%

Form HUD 40076 CoC-M

B. Supportive Services

Continuum of Care Participation in Mainstream Programs and Employment Chart

1 Number of Adults Who Left (Use the same number in each cell)	2 Income Source	3 Number of Exiting Adults with Each Source of Income	4 % with Income at Exit (Col 3 ÷ Col 1 x 100)
25	a. SSI	6	24%
25	b. SSDI	1	4%
25	c. Social Security	0	0%
25	d. General Public Assistance	1	4%
25	e. TANF	1	4%
25	f. SCHIP	0	0%
25	g. Veterans Benefits	0	0%
25	h. Employment Income	14	56% *
25	i. Unemployment Benefits	0	0%
25	j. Veterans Health Care	0	0%
25	k. Medicaid	6	24%
25	l. Food Stamps	4	16%
25	m. Other (please specify)	0	0%
25	n. No Financial Resources	3	12%

* Employed residents earned income above eligibility cut off limits for many mainstream resources including food stamps, Medicaid, TANF, or social security disability benefits.

Form HUD 40076 CoC-M

Exhibit 1: Continuum of Care Use of Other Resources Chart

1 Other Resources	2 Use of Resource in CoC System for <u>Homeless</u> Persons (e.g., rehab of rental units, job training, etc.)	3 Specific Project Name	4 \$ Amount or number of units/beds provided within last 2 years specifically for the homeless
CDBG	Eviction Storage providing emergency assistance to renters at immediate risk of eviction and homelessness, including moving and storage of household belongings for up to 60 days; Homeless Transitional Assistance Program (TAP) provides financial assistance to homeless individuals and families leasing new housing, funding half security deposit and first three months rent. Winter Shelter Program providing hypothermia beds during winter months. Purchase of HMIS software from Bowman Systems.	Department Human Services/Office of Community Services Eviction Storage; Homeless Transitional Assistance and Winter Shelter Program <i>ServicePoint</i>	\$394,000 \$50,000
HOME			
Housing Choice Vouchers (only if "priority" is given to homeless)	Section 8 vouchers are issued by the Alexandria Redevelopment and Housing Authority. Preference point is given to individuals who are homeless.	ARHA Section 8 Program	Total Vouchers issued for homeless individuals served by HSCC continuum service providers are 28. An additional 25 vouchers were assigned to the ACSB and priority was given to homeless individuals with a serious mental illness and/or substance abuse disorder.
Public Housing (only if units are dedicated to homeless)			
Mental Health Block Grant	Youth and Adult mental health outpatient services, case management for homeless individuals and families.	ACSB	\$50,816
Substance Abuse Block Grant	Substance abuse outpatient services, case management, day treatment, detoxification services for homeless individuals.	ACSB	\$122,448
Social Services Block Grant			
Welfare-to-Work	TANF portions of State Shelter Grant and Children's Services Coordinators Grant. These fund case management, supportive services, rental assistance, and operations.	AACH Adopt-A-Family Program Salvation Army Carpenter's Shelter Alive! CLI, Inc. Alexandria Community Shelter	\$115,224 \$6,400 \$146,353 \$15,867 \$62,455 \$62,666
State-Funded Programs	Emergency shelter operations funded with SHARE program funds. Virginia State grants (non-TANF): State Shelter Grant, Federal Shelter Grant, Children's Services Coordinators Grant, and Child Care for Homeless Children Program. These fund case management, supportive services, rental assistance, and operations.	Alexandria Community Shelter AACH Adopt-A-Family Program Carpenter's Shelter CLI, Inc. ACS Alive! Salvation Army	\$164,000 \$103,853 \$221,662 \$71,441 \$103,496 \$23,754 \$8,846

1 Other Resources	2 Use of Resource in CoC System for Homeless Persons (e.g., rehab of rental units, job training, etc.)	3 Specific Project Name	4 \$ Amount or number of units/beds provided within last 2 years specifically for the homeless
	Homeless outreach, mental health youth and adult outpatient services and case management; Substance abuse outpatient services, case management, day treatment and detoxification services for homeless individuals, families. Domestic Violence Shelter operations funded by State Shelter Grant and Virginia Department of Social Services Grant, Federal Shelter Grant for Domestic Violence Shelter PATH (Project for Assistance in Transition from Homelessness) for homeless outreach for individuals with a serious mental illness. PATH funds for David's Place drop in center operations USDA/ FEMA food for shelter kitchen	ACSB Office of Women, Domestic Violence Shelter ACSB David's Place operated by Carpenter's Shelter Carpenter's Shelter	\$294,742 \$22,400 (SSG) \$328,164 (VA DSS) \$13,500 \$32,429 \$61,657 \$23,000
City/County Funded Programs	Emergency shelter operations Crisis Child Care for residents of homeless shelters while they seek work, housing, training, etc. Winter Shelter Program providing hypothermia beds during winter months. City of Alexandria local funds for transitional housing. Homeless outreach, mental health youth and adult outpatient services and case management; substance abuse outpatient services, case management, day treatment, and detoxification services for homeless individuals and families. Domestic violence shelter operations for battered, homeless women.	Alexandria Community Shelter DHS/ OCS Crisis Child Care Program Coordinated by Carpenter's Shelter AACH Adopt-A-Family Program Carpenter's Shelter Alive! Northern Va. Family Services ACSB City of Alexandria Office on Women Domestic Violence Shelter	\$1,070,000 \$60,000 \$50,000 \$64,000 \$133,000 \$75,924 \$500,000 \$1,014,290 \$522,000
Private	Private fund-raising from individuals (including United Way & CFC), churches, and activities which fund case management, supportive services, rental assistance, and operations. Domestic Violence Shelter operations.	AACH Adopt-A-Family Carpenter's Shelter CLI, Inc. Alive! City of Alexandria Office on Women Domestic Violence Shelter	\$123,000 \$1,116,490 \$115,308 \$23,379 \$19,000
Foundations (Identify by name)	Fannie Mac Community Foundation (Walkathon) Boeing Employees Community Fund Gannett Foundation Junior League of Washington Marpat Foundation Mars Foundation Ronald McDonald House The Brodsky Family Foundation The Kiplinger Foundation Washington Forrest Foundation	AACH Carpenter's Shelter Alive! CLI, Inc.	\$86,480 \$435,599 \$27,778 \$74,250

1 Other Resources	2 Use of Resource in CoC System for <u>Homeless</u> Persons (e.g., rehab of rental units, job training, etc.)	3 Specific Project Name	4 \$ Amount or number of units/beds provided within last <u>2 years</u> specifically for the <u>homeless</u>
	Virginia Commerce Bank United Way CSF Phillip Graham Foundation Forrest Foundation Freddie Mac Foundation Freddie Mac Hoops for the Homeless International Monetary Fund		

Form HUD 40076 CoC-N

Exhibit 1: Continuum of Care - Response to HUD Policy Priority For Removal of Regulatory Barriers to Affordable Housing
 See Attached completed for HUD-27300, "Questionnaire for HUD's Initiative on Removal of Regulatory Barriers."

Continuum of Care: Project Leveraging

Project Priority Number	Name of Project	Type of Contribution	Source or Provider	*Value of Written Commitment
1	ACSB Safe Haven Permanent Housing	Office Space Rent	City of Alexandria	\$126,900
1	ACSB Safe Haven Permanent Housing	Rehabilitation Funds	City of Alexandria	\$795,000
1	ACSB Safe Haven Permanent Housing	Mental health and substance abuse support services, including drug screening and treatment, and mental health services.	City of Alexandria, ACSB	\$111,891
1	ACSB Safe Haven Permanent Housing	Operating expenses including facility staffing, utilities, food and facility maintenance and repair.	City of Alexandria, ACSB	\$54,608
1	ACSB Safe Haven Permanent Housing	Life skills, other mental health support services and case management	City of Alexandria, ACSB	\$1,027,465
2	ACSB Notabene and Family Permanent Housing	Mental health and substance abuse support services, including life skills, drug screening and treatment, and mental health services.	City of Alexandria, ACSB	\$22,630
2	ACSB Notabene and Family Permanent Housing	Operating expenses including utilities and facility maintenance and repairs	City of Alexandria, ACSB	\$12,041
2	ACSB Notabene and Family Permanent Housing	Supportive services and additional project expenses related to allocated administrative, supervisory and operating costs.	City of Alexandria, ACSB	\$41,671
3	SHA Canterbury and Mayflower Condominiums Permanent Housing	Mental health and substance abuse supportive services, specifically drug screening and treatment and mental health services.	Sheltered Homes of Alexandria	\$14,458
3	SHA Canterbury and Mayflower Condominiums Permanent Housing	Operating expenses including utilities and facility maintenance and repair.	Sheltered Homes of Alexandria	\$6,145
3	SHA Canterbury and Mayflower Condominiums Permanent Housing	Supportive services, specifically life skills training, and additional project expenses related to allocated administrative, supervisory and operating costs.	City of Alexandria, ACSB	\$8,102
4	ACSB Men's Recovery Home Transitional Housing	Mental health and substance abuse support services, including life skills, drug screening and treatment,	City of Alexandria, ACSB	\$18,700

		and mental health services.		
4	ACSB Men's Recovery Home Transitional Housing	Operating expenses including utilities and facility maintenance and repairs	City of Alexandria, ACSB	\$6,250
4	ACSB Men's Recovery Home Transitional Housing	Supportive services and additional project expenses related to allocated administrative, supervisory and operating costs.	City of Alexandria, ACSB	\$35,819
5	SHA Columbus and Wythe Permanent Housing	Supportive services, specifically life skills training, and additional project expenses related to allocated administrative, supervisory and operating costs.	City of Alexandria, ACSB	\$30,529
5	SHA Columbus and Wythe Permanent Housing	Supportive services, specifically drug screening and treatment, and other mental health services.	Sheltered Homes of Alexandria	\$17,795
5	SHA Columbus and Wythe Permanent Housing	Operating expenses including utilities and facility maintenance and repair.	Sheltered Homes of Alexandria	\$4,637
6	AACH Adopt-A-Family Transitional Housing Program	Child care, employment services, relocation assistance	City of Alexandria Dept of Human Services	\$94,000
6	AACH Adopt-A-Family Transitional Housing Program	Mental Health and Substance Abuse Family Therapy	Alexandria Community Services Board (CSB)	\$26,000
6	AACH Adopt-A-Family Transitional Housing Program	Medication Management	Alexandria Community Services Board (CSB)	\$2,700
6	AACH Adopt-A-Family Transitional Housing Program	Psychiatric Evaluation	Alexandria Community Services Board (CSB)	\$750
6	AACH Adopt-A-Family Transitional Housing Program	Drug Testing	Alexandria Community Services Board (CSB)	\$1,080
6	AACH Adopt-A-Family Transitional Housing Program	Substance Abuse Group Therapy	Alexandria Community Services Board (CSB)	\$2,160
6	AACH Adopt-A-Family Transitional Housing Program	Furniture Donations	ALIVE!	\$4,500
6	AACH Adopt-A-Family Transitional Housing Program	Legal Services	Legal Services of Northern Virginia	\$2,000
6	AACH Adopt-A-Family Transitional Housing Program	Volunteer Support	Arlington-Alexandria Coalition for the Homeless (AACH)	\$11,450
6	AACH Adopt-A-Family Transitional Housing Program	In-kind donations	Arlington-Alexandria Coalition for the Homeless (AACH)	\$5,000
7	ACSB Aspen Street Transitional Housing	Mental health and substance abuse support services, including drug screening and treatment, and mental health services.	City of Alexandria, ACSB	\$34,036
7	ACSB Aspen Street Transitional Housing	Operating expenses including utilities and facility maintenance and repairs	City of Alexandria, ACSB	\$1,424
7	ACSB Aspen Street Transitional Housing	Supportive services and additional project expenses related to allocated administrative, supervisory and operating costs.	City of Alexandria, ACSB	\$69,455
			TOTAL	\$2,589,196

**Please enter the value of the contribution for which you have a written commitment*

Form HUD 40076 CoC-P

APPENDIX V

**CITY OF ALEXANDRIA, VA - TEN-YEAR PLAN TO END
CHRONIC HOMELESSNESS**

CITY OF ALEXANDRIA, VIRGINIA

**TEN-YEAR PLAN TO
END CHRONIC
HOMELESSNESS
AND OTHER
FORMS OF
HOMELESSNESS**

OCTOBER 2004

Prepared by the
*Alexandria Homeless Services
Coordinating Committee*

**ALEXANDRIA HOMELESS SERVICES
COORDINATING COMMITTEE (HSCC)**

CONTINUUM OF CARE MEMBERS

ALEXANDRIA HEALTH DEPARTMENT
ALEXANDRIA NEIGHBORHOOD HEALTH SERVICES, INC. (ANHSI)
ALEXANDRIANS INVOLVED ECUMENICALLY (ALIVE!)
ALEXANDRIA PROBATION AND PAROLE
ALEXANDRIA REDEVELOPMENT & HOUSING AUTHORITY – PUBLIC HOUSING AUTHORITY
ALFRED STREET BAPTIST CHURCH
ARLINGTON-ALEXANDRIA COALITION FOR THE HOMELESS (AACH)
ARLINGTON COUNTY – HOMELESS & HEALTH CARE REPRESENTATIVES
BLESSED SACRAMENT CATHOLIC COMMUNITY
CARPENTER’S SHELTER
DAVID’S PLACE
TRANSITIONAL HOUSING PROGRAM
CATHOLIC CHARITIES
CHILD & FAMILY NETWORK CENTER
CHRIST CHURCH
CHURCH OF ST. CLEMENT
COMMISSION ON PERSONS WITH DISABILITIES
COMMUNITY LODGINGS, INC. (CLI)
COMMUNITY SERVICES BOARD (CSB) – DEPARTMENT OF MENTAL HEALTH,
MENTAL RETARDATION AND SUBSTANCE ABUSE
SUBSTANCE ABUSE CASE MANAGEMENT SERVICES & HOMELESS OUTREACH
MENTAL HEALTH SERVICES – OUTREACH
MENTAL HEALTH/SUBSTANCE ABUSE RESIDENTIAL SERVICES
CLUBHOUSE & SUBSTANCE ABUSE DAY SUPPORT

DEPARTMENT OF HUMAN SERVICES (DHS)
JOB LINK ONE-STOP CENTER FOR WORKFORCE INVESTMENT
OFFICE OF AGING & ADULT SERVICES
OFFICE OF COMMUNITY SERVICES
FAMILY SERVICES - FOSTER CARE - INDEPENDENT LIVING

FAIRLINGTON UNITED METHODIST CHURCH
GUEST HOUSE
HOMELESS CONSUMER REPRESENTATIVES
HOUSING ACTION
INTERFAITH COALITION FOR AFFORDABLE HOUSING
MEADE CHURCH
NORTHERN VIRGINIA FAMILY SERVICE (NVFS)
OFFICE OF HOUSING
OFFICE ON WOMEN-DOMESTIC VIOLENCE SHELTER (OOW)
OLD PRESBYTERIAN MEETING HOUSE – FAMILY TO FAMILY MINISTRIES
SALVATION ARMY - ALEXANDRIA COMMUNITY SHELTER &
TURNING POINT TRANSITIONAL HOUSING
STOP CHILD ABUSE NOW (SCAN) OF NORTHERN VIRGINIA
ST. CLEMENT'S
ST. PAUL'S EPISCOPAL
VIRGINIA COALITION FOR THE HOMELESS
VETERANS ADMINISTRATION-NORTHERN VIRGINIA (VA)
WESLEY HOUSING DEVELOPMENT CORPORATION
WESTMINSTER PRESBYTERIAN CHURCH
WHITMAN-WALKER CLINIC OF NORTHERN VIRGINIA
WORKFORCE ORG. FOR REGIONAL COLLABORATION (WORC)

**TEN-YEAR PLAN TO END CHRONIC HOMELESSNESS
AND OTHER FORMS OF HOMELESSNESS
IN ALEXANDRIA, VIRGINIA**

VISION

**IN TEN YEARS, ALL INDIVIDUALS EXPERIENCING
CHRONIC AND OTHER FORMS OF HOMELESSNESS IN THE
CITY OF ALEXANDRIA, VIRGINIA WILL HAVE
ACCESS TO SAFE, DECENT, AFFORDABLE HOUSING.**

BACKGROUND

The goal of ending chronic¹ homelessness was described in 2000 by the *National Alliance to End Homelessness (NAEH)* as part of its ten-year plan. U.S. Department of Housing and Urban Development (HUD) Secretary Mel Martinez announced HUD's acceptance of this goal in 2001. In 2002, the *NAEH* published, "A Plan: Not a Dream – How to End Homelessness in Ten Years." By 2003, the *United States Interagency Council on Homelessness* had been resurrected to pursue this goal, and the Council published "The 10-Year Planning Process to End Chronic Homelessness in Your Community: A Step-by-Step Guide." In June 2003, the U.S. Conference of Mayors unanimously endorsed the 10-year planning process and urged cities across the nation to create and implement strategic plans to end chronic homelessness in 10 years. Since 2002, HUD has required jurisdictions receiving HUD Supportive Housing Program (SHP) and other HUD funding to develop a concrete plan to end chronic homelessness.

ALEXANDRIA'S PLAN²

Prior to this nationwide effort, in 1999, Alexandria's *Homeless Services Coordinating Committee (HSCC)*³ developed a strategic plan to address the pressing needs of the chronically homeless population, as well as other homeless persons (family members and individuals not experiencing chronic homelessness). Five objectives (the creation of a Safe Haven for unsheltered, chronic homeless individuals; the addition of mental health/substance abuse

¹ HUD defines chronic homelessness as "an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more OR has had at least four episodes of homelessness in the past three years." A "disabling condition" is defined as "a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability including the co-occurrence of two or more of these conditions. A disabling condition limits an individual's ability to work or perform one or more activities of daily living."

² For a comprehensive description of housing and supportive services available to the homeless in the City of Alexandria (i.e., its Continuum of Care) and the history and role of the *Homeless Services Coordinating Committee*, see Appendix 1. Appendix 2 provides a summary of the HSCC's accomplishments over the past year.

³ The members of Alexandria's HSCC are shown on the previous two pages.

staffing to provide additional outreach and follow-up to the homeless population; the creation of medical respite beds; the expansion of affordable health care services, and the addition of transitional housing units for singles and youth aging out of foster care) were incorporated into the City's *Five Year Consolidated Plan for Housing and Community Development*. While significant progress has been made on three of the objectives (the creation of a Safe Haven, the expansion of health services, and the creation of transitional housing units), much remains to be done to house and provide services for the chronically homeless population and those needing medical respite beds. In addition, affordable housing opportunities for the non-chronic population must be created if the homeless problem is to be resolved.

Over the past several months, the Commonwealth of Virginia, through its *Policy Academy on Chronic Homelessness*, has developed an action plan entitled, "Virginia: A Common Wealth to End Homelessness." This plan has been approved by Virginia's Governor Warner and can be found at www.dhcd.virginia.gov. Representatives of Alexandria's HSCC, including an individual who was chronically homeless and had lived on the streets, serve on the *Policy Academy*. Alexandria's plan, delineated on the following pages, is tied into Virginia's plan, and also utilizes the research and guidance provided by the *National Alliance to End Homelessness*, as well as models of "best practices" from throughout the country. In developing the plan, the HSCC held several meetings, including a focus group with consumers of *David's Place*, a day program for unsheltered homeless adults, to obtain input on the plan. Representatives of all of the agencies identified as "Responsible Parties" throughout the plan also provided input.

The key components of any successful plan to end chronic homelessness, according to the NAEH are: Plan for Outcomes; Close the Front Door; Open the Back Door; and Build the Infrastructure. Alexandria's plan addresses these key components.

PLAN FOR OUTCOMES: INVOLVEMENT OF DIVERSE STAKEHOLDERS, DATA ANALYSIS, RESEARCH, DEFINING THE PROBLEM, AND "THINKING OUTSIDE THE BOX"

The NAEH report notes that "Today most American communities plan how to manage homelessness – not how to end it." A first step in planning for outcomes is to collect data at the local level on the nature and extent of homelessness. Alexandria has collected point-in-time data since 1996, and since 2000, has participated in an ongoing Council of Governments (COG) regional effort to establish an unduplicated count of homeless families and individuals in the region. The fourth regional enumeration took place on January 21, 2004. In the Fall of 2004, Alexandria's Homeless Continuum of Care will have its *Homeless Management Information System (HMIS)* in place. The HMIS will use an integrated data tool to record and report uniform system-wide information on client needs and services. (A description of the steps taken to date by HSCC's *HMIS Task Force* is provided at Appendix 2.)

According to longitudinal research, people who experience chronic homelessness are more likely to have a serious mental illness, sometimes with co-occurring substance abuse, unstable employment histories, and histories of hospitalization and/or incarceration. Nationally, it is estimated that 10% of the single adult homeless population experiences this persistent homelessness. Because many of these individuals use the shelter system for extended periods of time, they have been found to consume 50% of the resources.

The chart below shows the breakout of the chronic homeless population in Alexandria identified by surveyors in the 2004 point-in-time count.

January 2004 Point-in-Time Count: Alexandria, Virginia

<u>Survey Location</u>	<u>Total</u>	<u>Chronic</u>
Outreach	73 ¹	41
Winter Shelter	49 ²	33
Emerg. Shelter Individuals ³	55	12
Emergency Shelter Family Members ⁴ (16 families)	53	-
Trans. Housing	<u>184⁵</u>	<u>7</u>
Total:	414	93

As is evident in the above chart, 93, or 22% (93 of 414) of the Alexandria homeless population identified above, were determined to be chronically homeless. (Another 35 individuals, all with either a disability of severe mental illness or a dual diagnosis, are housed in permanent supportive housing units.)

According to the NAEH report, because they have no regular place to stay, people who are homeless use a variety of public systems in an inefficient and costly way. People who are homeless:

- **Are more likely to access costly health care services** (spending an average of four days longer per hospital visit than comparable non-homeless individuals). Homelessness both causes and results from serious health care issues, including addictive disorders. Substance abuse increases the risk of incarceration and HIV exposure, and it is itself a substantial cost to our medical system.
- **Spend more time in jail or prison** – sometimes for crimes such as loitering – which is an extremely costly and inefficient use of scarce resources.

¹Unsheltered – 53; awaiting discharge – 20; Male-56; Female-17.

²Male-46; Female-3.

³Male-32; Female-23.

⁴20 Adults (Female-16; Male-4); 33 children.

⁵Of the 184 persons in Transitional Housing, 36 were individuals (7 of whom were chronic); 148 were persons in 39 families.

- **Use emergency shelters, a costly alternative to permanent housing.** (According to one study, the cost of an emergency shelter bed was approximately \$8,067 more than the average annual cost of a federal housing subsidy.)
- **Lose future productivity.** Decreased health and more time spent in jails or prisons, means that homeless people have more obstacles to contributing to society through their work and creativity.

Once adequate data are available, the second step is to create a planning process that focuses on the outcome of ending homelessness, and then brings to the table not just the homeless assistance providers, but the mainstream State and local agencies and organizations whose clients are homeless. As is evident from the HSCC membership list on the previous pages, Alexandria has broad representation on its committee.

CLOSE THE FRONT DOOR: PREVENTING HOMELESSNESS

Our current approach has proven inadequate to the challenge of eliminating homelessness. The most effective solution, a core tenet of the new approach recommended by NAEH, is to prevent homelessness whenever possible (“close the front door”), and to rapidly re-house people when homelessness cannot be prevented. The NAEH report notes that:

“People who become homeless are almost always clients of public systems of care and assistance (the mental health system, the public health system, the welfare system, veterans system, criminal justice system). . . . to end homelessness, these mainstream programs must prevent people from becoming homeless.”

Alexandria’s plan addresses goals and action steps aimed at improving its emergency homelessness prevention programs.

OPEN THE BACK DOOR: CREATING PERMANENT HOUSING

The national effort focuses on helping people to exit homelessness as quickly as possible through a “housing first approach.” For the chronically homeless, this means permanent housing, with services available as the consumers establish trust with treatment workers. For families and non-disabled single adults, it means getting people very quickly into permanent housing and linking them with services, if needed. The development of permanent supportive housing for the chronically homeless and affordable permanent housing for other homeless individuals is one of the biggest challenges facing Alexandria’s homeless continuum of care. In addition to limited financial resources, lack of land and property for project development are also constraints facing Alexandria’s continuum; however, the plan does address the development of new housing units for the homeless population, as well as other methods for “opening the back door.”

BUILD THE INFRASTRUCTURE: MAXIMIZE MAINSTREAM RESOURCES

The NAEH report notes that remedies to homelessness must take place within the context of “re-building the infrastructure”: housing, income, and services. Those individuals living in poverty who are working are paying more than half of their income for rent. There is an ever-growing shortage of affordable housing units throughout the country; this problem is particularly severe in Alexandria. To rent an efficiency apartment in Alexandria, an income of about \$36,500⁴ is required, or about 70% more than a person working two full-time jobs at minimum wage. For the chronically homeless, with severe mental disabilities, permanent supportive housing is the only solution. The NAEH report states, “A great deal of current chronic homelessness can be traced to the lack of a system of community treatment, linked with housing, to replace the system of state hospitals that have been closed in large numbers in recent decades.”

The goals and action steps for each of the foregoing areas are addressed below.

PLAN FOR OUTCOMES – DATA COLLECTION & ANALYSIS

GOAL 1: ESTABLISH HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

Action Steps

1. Define data elements to be included in the HMIS and train providers in the use of HMIS.

Responsible Parties: *Bowman Internet Services,* Target Date: July 2004
CSB & DHS IT staff

2. Implement *ServicePoint*⁵ to standardize assessment of consumer needs, create service plans, coordinate case management, and track housing and services.

Responsible Parties: *Bowman Internet Services* Target Date: Aug. 2004
CSB & DHS IT staff

3. Analyze data and evaluate HMIS functioning.

Responsible Parties: HMIS Sub-Committee Target Date: Jan. 2005

4. Recommend HMIS program improvements based on evaluation.

Responsible Parties: HMIS Sub-Committee Target Date: March 2005

⁴ Household income needed by a new buyer if payment is 30% of gross income. *National Low Income Housing Coalition, “Out of Reach, 2002 – Alexandria, VA.”*

⁵ See Appendix 2 for a description of HSCC’s activities over the past year, including steps taken by the HMIS Sub-Committee to identify *ServicePoint*.

5. Adopt HMIS improvements.

Responsible Parties: ServicePoint, CSB & DHS IT staff Target Date: May 2005

6. Coordinate with Statewide HMIS plan (Virginia Commonwealth Plan, Priority Five, Strategies 5.1, 5.2).

Responsible Parties: CSB & DHS IT staff Target Date: June, 2005

GOAL 2: ANALYZE HMIS DATA TO EFFECT IMPROVEMENTS IN PROGRAMS AND SERVICES

Action Steps

1. Extract reports from HMIS that identify number of homeless persons, reason for entry into the continuum of care, housing and service needs by sub-population, how people are interacting with mainstream systems of care, and the effectiveness of interventions.

Responsible Parties: CSB, DHS Target Date: Dec. 2005

2. Review the entire Continuum of Care (i.e., shelter/transitional facilities' bed use, populations served, services provided, barriers, etc.), meet and coordinate with other providers throughout the region, and develop priorities and strategies for improvements throughout the Continuum and the region so that the maximum number of persons are served in the most efficient and effective manner. Review and provide input to other annual needs assessments (e.g., United Way, CSB).

Responsible Parties: HSCC Strategic Planning/
Evaluation Sub-Committee
and senior representatives of all homeless providers Target Date: Jan. 2006

3. Implement recommended strategies. Ensure that linkages are made with entities identified in Step 2 for carrying out the strategies.

Responsible Parties: Homeless Svcs. providers and other parties identified in Step 2,
HSCC Strategic Planning/
Evaluation Sub-Committee Target Date: April, 2006

4. Evaluate effectiveness of program changes.

Responsible Parties: HSCC Strategic Planning/
Evaluation Sub-Committee
and senior representatives of all homeless providers Target Date: Oct. 2006

5. Recommend program improvements based on evaluation.

Responsible Parties: HSCC Strategic Planning/
Evaluation Sub-Committee Target Date: Nov. 2006

6. Adopt improvements.

Responsible Parties: Homeless Svcs. providers Target Date: Jan. 2007

NOTE: The Action Steps in Goal 2 will continue throughout the ten-year plan.

CLOSE THE FRONT DOOR – PREVENTING HOMELESSNESS

GOAL 3: UTILIZE EFFECTIVE DISCHARGE PLANNING MODELS

Action Steps

1. Collect and analyze data through the HMIS on persons who become homeless after discharge from State and local hospitals, jail, detention center, prisons, and foster care.

Responsible Parties: DHS, Va. Cares, Strategic Png/Eval Sub-Comm. Target Date: Dec. 2005
OAR, CSB Pre-Release: Detention Ctr,
Homeless providers, Alex. Probation & Parole

2. Develop and adopt “best practice” strategy to ensure persons being released after incarceration do not become homeless.

Responsible Parties: DHS, Va. Cares, Jail/Prison Staff, OAR, CSB Pre-Release: Detention Ctr,
Homeless providers, Alex. Probation & Parole Target Date: Dec. 2004

3. Develop and adopt “best practice” strategy to ensure persons being discharged from psychiatric hospitals and medical facilities do not become homeless, including linkage with CSB’s discharge planning process.

Responsible Parties: CSB, DHS, Hospital staff Target Date: Dec. 2004

4. Ensure compliance with Statewide discharge policy for all at-risk individuals (Virginia Commonwealth Plan, Priority Three, Strategy 3.1) after implementation.

Responsible Parties: CSB, DHS, DOC, Ex-Offender Programs Target Date: Nov. 2004

5. Increase the number of prisoners and mental health consumers who have applications pre-filed for Medicaid and other entitlements (e.g., SSI, SSDI) and expedite processing of benefits before release from institutions (Virginia Commonwealth Plan, Priority Four, Strategy 4.1).

Responsible Parties: CSB, DHS

Target Date: Dec. 2004

6. Refer juvenile offenders and juveniles aging out of foster care to *Job Corps* (Virginia Commonwealth Plan, Priority Three, Strategy 3.2), Independent Living Program (ILP), and scholarships for higher education.

Responsible Parties: DSS/DJJ, JobLink,
Youth Employment Svcs.

Target Date: Nov. 2004

7. Attend State DSS training on placing more emphasis on preparing young adults leaving foster care to become self-sufficient (Virginia Commonwealth Plan, Priority Three, Strategy 3.3) and ensure resources available through HB1109 (passed by the Virginia State legislature in 2004 to provide transitional assistance for young people ages 18 – 21 who are moving from foster care to self-sufficiency) are utilized.

Responsible Parties: DSS foster care staff

Target Date: Oct 2004

8. Identify funding to support and strengthen family members who deal with individuals who are at risk of becoming homeless. (Virginia Commonwealth Plan, Priority Three, Strategy 3.4).

Responsible Parties: TBD

Target Date: TBD

GOAL 4: ENSURE VETERANS RECEIVE ENTITLEMENTS

Action Steps

1. Ensure that all organizations serving the chronically homeless identify those consumers who are veterans, inform them of available benefits, and have the necessary POA forms to allow veterans services to act on behalf of the veteran (Virginia Commonwealth Plan, Priority Four, Strategy 4.2)

Responsible Parties: DHS, VA

Target Date: Sept. 2004

GOAL 5: DEVELOP HOMELESS PREVENTION PLAN WITH LANDLORDS

Action Steps

1. Identify landlords willing to participate in "housing first" approach.

Responsible Parties: Office of Housing; Land-
lord Tenant Relations Board (LTBC),
ARHA, DHS, CSB, non-profit providers

Target Date: Sept. 2007

2. Meet with landlords to develop homeless prevention plan.

Responsible Parties: Office of Housing; Landlord Tenant Relations Board (LTBC), ARHA, DHS, CSB, non-profit providers. Jail/Prison staff
Target Date: Jan. 2006

3. Identify funding to hire a housing specialist to act as a broker between homeless persons and those being released/discharged from institutions and private landlords. The housing specialist, a "one-stop shop housing counselor," would also develop and maintain a centralized housing network.

Responsible Parties: Non-Profits & Homeless Services Providers
Target Date: March 2007

4. Implement plan with 1 – 2 landlords

Responsible Parties: Identified in Step 3
Target Date: 2008

5. Expand plan to additional landlords.

Responsible Parties: TBD
Target Date: 2009 – 2012

6. Review CSB policies/procedures (e.g., program rules/admittance criteria for residential properties, residential fee setting, etc.) to promote residential housing stability.

Responsible Parties: CSB
Target Date: Oct. 2005

GOAL 6: PREVENT EVICTIONS & ENHANCE OTHER PREVENTION EFFORTS

Action Steps

1. Develop a marketing plan to expand the number of persons informed of Alexandria's eviction prevention program. Ensure that information about the prevention program is widely disseminated so that tenants are informed long before receiving an eviction notice.

Responsible Parties: Office of Housing; Landlord Tenant Relations Board (LTRB), DHS, Legal Svcs.
Target Date: Sept. 2005

2. Conduct workshops (e.g., in shelters, day support programs) and/or provide individual counseling for consumers to increase understanding of tenant responsibilities, and distribute materials.

Responsible Parties: Housing, Shelters/TH
Target Date: Oct. 2005

Providers, Landlords, ARHA

3. Form a task force to review/assess current policies and procedures for preventing evictions, study "best practices," and recommend improvements in current system.

Responsible Parties: DHS, Courts, Landlords Target Date: Nov. 2005

GOAL 7: IMPROVE LEGAL SERVICES FOR THE CHRONICALLY HOMELESS AND OTHER HOMELESS INDIVIDUALS

Action Steps

1. Through the HMIS and other sources, identify the number of chronically homeless and other homeless persons who could benefit from legal services (e.g., individuals with severe mental illness or women who become chronically homeless as a result of domestic violence).

Responsible Parties: All homeless providers, DHS, CSB Target Date: Dec. 2005

2. Develop a plan to provide pro bono legal services to those needing assistance. (As part of this plan, review the work of the newly-formed State-level *Indigent Defense Commission*, which will establish standards for court-appointment layers and ensure adequate representation for the poor.)

Responsible Parties: Legal Svcs staff, DVS, Jail/Prison staff, DHS, CSB Target Date: Nov. 2004

3. Work with police, judges, and landlords to identify those at risk of homelessness.

Responsible Parties: DHS, providers Target Date: June 2005

GOAL 8: ADVOCATE FOR SUPPORT FOR FUNDING AND SERVICES FOR CHRONICALLY HOMELESS AND OTHER HOMELESS INDIVIDUALS

Action Steps

1. Prepare public relations materials documenting the lack of funding for homeless programs, e.g., Homeless Intervention Program (HIP), TANF, FSG/SSG, etc.

Responsible Parties: Virginia Coalition for the Homeless, DHS, providers, consumers Target Date: Oct. 2004

2. Participate in public hearings concerning homeless issues and in legislative advocacy at the Federal, State, and local levels.

Responsible Parties: Virginia Coalition for the Homeless, providers, consumers Target Date: As hearings are scheduled

3. Support the Virginia Coalition for the Homeless in its efforts to secure a Rental Assistance program for homeless (Virginia Commonwealth Plan, Priority One, Objective 2, Strategy 1.8); to increase funding for affordable housing through a State-level Housing Trust Fund (Objective 2, Strategy 1.10); to increase State funding for support of emergency and transitional housing (Objective 2, Strategy 1.12).

Responsible Parties: Providers, consumers Target Date: As legislation comes forward

4. Develop case history vignettes of chronically homeless and other homeless consumers in Alexandria to increase public awareness and political support (Virginia Commonwealth Plan, Priority Five, Strategy 5.5). Use vignettes in public hearings and materials developed in Action Step 1.

Responsible Parties: CSB/DHS case workers, Shelter/T.H. providers Target Date: Oct. 2004

5. Expand collaboration with the wider community (public and private) to garner support for addressing the needs of chronically homeless and other homeless individuals. Identify Federal, State, and local funders, neighborhood organizations, private foundations, citizens, local businesses, public officials who may be instrumental in assisting the HSCC in providing goods, services, and advocacy.

Responsible Parties: HSCC, Housing Action, Congregations, Housing, DHS, CSB Target Date: Feb. 2005

OPEN THE BACK DOOR – CREATING PERMANENT HOUSING

GOAL 9: DEVELOP A 12-BED PERMANENT HOUSING SAFE HAVEN FACILITY FOR CHRONICALLY HOMELESS PERSONS

Action Steps

1. Submit HUD 2004 application for funding.

Responsible Parties: CSB Target Date: July 2004

2. Communicate with neighbors, engage community support through meetings and discussions and initiate recruitment/hiring of Project Director.

Responsible Parties: CSB Target Date: June-July 2004

3. Obtain HUD notice of funding.

Responsible Parties: CSB

Target Date: Dec. 2004

4. Begin building renovation.

Responsible Parties: Gen. Svcs., CSB

Target Date: Jan. 2005

3. Complete renovation.

Responsible Parties: Gen. Svcs, CSB

Target Date: March 2006

4. Develop program, including steps for managing crises and non-intrusive, non-punitive, "low-demand" rules which promote safety, cleanliness, privacy. Hire Safe Haven staff.

Responsible Parties: CSB

Target Date: Nov. 2005-Apr 2006

5. Begin Safe Haven operations.

Responsible Parties: CSB

Target Date: June 2006

GOAL 10: DEVELOP A PERMANENT HOUSING SRO⁶ (SINGLE-ROOM OCCUPANCY) FACILITY

Action Steps

1. Identify funding sources, meet with City officials and staff (e.g., Housing, Planning & Zoning) and begin preparation of applications/proposals for funding.

Responsible Parties: Community Non-Profit

Target Date: July 2004

2. Identify site, meet with Architect to determine project design & costs.

Responsible Parties: Community Non-Profit

Target Date: December 2004

3. Develop business plan and apply for funding.

Responsible Parties: Community Non-Profit

Target Date: Jan-Apr 2005

⁶ SRO housing is defined as a residential property that includes multiple single room dwelling units. First priority for occupancy of SRO units is given to homeless individuals.

4. When funding secured, develop program, communicate with neighbors, engage community support through meetings and discussions.

Responsible Parties: Community Non-Profit, Congregations, homeless providers Target Date: Jan-Mar 2006

5. Complete renovation.

Responsible Parties: Community Non-Profit Target Date: Sept 2006

6. Open SRO

Responsible Parties: Community Non-Profit Target Date: Oct 2006

GOAL 11: INCREASE HOUSING OPPORTUNITIES AVAILABLE TO CHRONIC HOMELESS AND OTHER PERSONS EXPERIENCING HOMELESSNESS BY MAXIMIZING USE OF EXISTING FUNDING STREAMS AND DEVELOPING ADDITIONAL PERMANENT AND PERMANENT SUPPORTIVE HOUSING

Action Steps

1. Apply for VHDA/DMHMRSAS *Mainstream Housing Opportunities for Persons with Disabilities* vouchers (Special Project identified in Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.2/1.3)

Responsible Parties: CSB Target Date: June 2004

2. Determine whether any Veterans Administration, HUD, or USDA foreclosed properties exist in Alexandria; Coordinate with Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.4).

Responsible Parties: CSB, DMHMRSAS Target Date: March 2005

2. Coordinate with DHCD/VIACH/VCH to expand use of housing resources available through the Veterans Administration-Per Diem. (Virginia Commonwealth Plan, Priority One, Objective 1, Strategy 1.6)

Responsible Parties: DHS, VA, CSB Target Date: Mar-Nov 2004

3. Coordinate with NOVAM, Whitman-Walker and others to expand use of housing resources available through HOPWA.

Responsible Parties: DHS, Health Dept., CSB Target Date: Mar-Nov 2004
Shelter providers

4. Target two of the group homes, 10 apartment/condos, and 10 Section 8 Certificates in the CSB's *Five-Year Housing Plan* to homeless individuals.

Responsible Parties: CSB, ARHA

Target Date: 2008

5. Identify resources (e.g., VA, HHS, HUD, State, private) and community partners for the planning and development of additional permanent and permanent supportive housing units, acquisition of additional Section 8 vouchers, and other permanent housing solutions for the homeless population.

Responsible Parties: Housing, ARHA, CSB,
Housing Action, DHS, HSCC,
Faith-based non-profits

Target Date: 2008

6. Establish linkages with faith-based non-profits to improve access to federal funding opportunities, as well as to increase the number of volunteers serving the homeless.

Responsible Parties: HSCC, faith-based entities
Alexandria Interfaith Coalition for Affordable Housing

Target Date: Nov. 2005

BUILD THE INFRASTRUCTURE – MAXIMIZE MAINSTREAM RESOURCES

GOAL 12: REDUCE BARRIERS IN DELIVERY OF SUPPORTIVE SERVICES TO CHRONIC HOMELESS AND OTHER INDIVIDUALS EXPERIENCING HOMELESSNESS

Action Steps

1. Identify opportunities for coordination of intake eligibility determinations, assessment and data collection to facilitate access to mainstream services, such as TANF, Medicaid, Primary Health Services, MH and SA Services. (Virginia Commonwealth Plan, Priority 2, Strategy 2.3: “No Wrong Door.”)

Responsible Parties: CSB, DHS, Health Dept.
State Policy Academy

Target Date: July 2005

2. Department of Social Services designates an eligibility worker (and back-up) to expand outreach to David’s Place and shelters to take applications from homeless individuals. (Virginia Commonwealth Plan, Priority 2, Strategy 2.5)

Responsible Parties: DHS/DSS

Target Date: Oct 2005

3. Ensure distribution of State-Produced Resource Guide (Strategy 2.4) and communication to all providers of Statewide 211.

Responsible Parties: HSCC, all providers
DHS, CSB

Target Date: July 2005

4. Identify funding to add a minimum of 1.5 FTE (e.g., through PACT team) to increase services to chronically homeless consumers with mental health and substance abuse issues in shelters and on the street (e.g., CSB application to SAMHSA, State funding for PACT).

Responsible Parties: CSB, Carpenter's Shelter Target Date: Jan. 2006

5. Each year of the plan, increase the number of chronically homeless and other homeless individuals applying for disability benefits.

Responsible Parties: CSB, DHS, all homeless Providers, VA Target Date: 10/yr throughout duration of plan

6. Attend State-sponsored workshop on Disability Determination and Presumptive Decision Making to increase the number of chronically homeless receiving disability benefits. (Virginia Commonwealth Priority 2, Strategy 2.2)

Responsible Parties: CSB, DHS, other providers Target Date: TBD when State announces workshop dates

GOAL 13: PROVIDE COMPREHENSIVE HEALTH SERVICES TO THE CHRONICALLY HOMELESS AND OTHER PERSONS EXPERIENCING HOMELESSNESS

Action Steps

1. Identify barriers to health care access for the chronically homeless and other individuals experiencing homelessness.

Responsible Parties: *HSCC, Providers,* Target Date: Dec. 2005
Faith-based non-profits

2. Work with health care providers to remove barriers.

Responsible Parties: *Health Dept., HSCC,* Target Date: Jan – March 2006
*Community Health Center, Clinica Hispana,
Queen Street Clinic, Health Care Task Force,
INOVA Alexandria Hospital*

3. Identify entities that could provide long-term shelter and health services for persons requiring on-going medical supervision. (Virginia Commonwealth Plan, Strategy 1.9)

Responsible Parties: *Health Dept., HSCC,* Target Date: 2007
*Community Health Center,
Health Care Task Force,
INOVA Alexandria Hospital*

- Educate local health care entities and others about successful medical respite facilities for homeless.

Responsible Parties: *HSCC, Health Care Task Force, Va. Coalition for the Homeless* Target Date: Jan. 2006

- Create a medical respite facility.

Responsible Parties: TBD Target Date: January 2008

- Submit application to HHS/HRSA for *Health Care for the Homeless* grant.

Responsible Parties: *Community Health Center, Health Care Task Force, Health Dept., INOVA Alexandria Hospital* Target Date: April 2005

GOAL 14: INCREASE THE AVAILABILITY OF TRAINING OPPORTUNITIES AND JOBS TO THE CHRONICALLY HOMELESS AND OTHER HOMELESS INDIVIDUALS

Action Steps

- Identify employers willing to hire chronic homeless and other homeless individuals who are able to work.

Responsible Parties: *Task Force On Prisoner Re-Entry, CSB, DRS, WORC* Target Date: 2005 (2 employers)
2006 – 2010 (2 new employers per year)
Primary: JobLink One-Stop Center for Workforce Investment

- Identify how chronically homeless who are able to work and other homeless persons can access existing training programs, and identify training programs needed by these populations that are not currently being provided.

Responsible Parties: *Task Force On Prisoner Re-Entry, CSB, DRS, WORC* Target Date: 2005 (2 programs)
2006 – 2010 (2 new programs per year)
Primary: JobLink One-Stop Center for Workforce Investment

- Coordinate with JobLink One-Stop Center to access training/educational opportunities that may be available to chronic and other homeless persons through the Workforce Investment Act (Virginia Commonwealth Plan, Priority Four, Strategy 4.3 – 4.5) and to improve access to, and accelerated completion of, GED training by homeless persons.

Responsible Parties: *Task Force On Prisoner Re-Entry, CSB, DRS, DHS, WORC* Target Date: Oct. 2005
Primary: JobLink One-Stop Center for Workforce Investment

4. Increase employment opportunities for chronic and other homeless persons who are able to work and prisoner re-entry populations by accessing Work Opportunity Tax Credit (WOTC) employment (Virginia Commonwealth Plan, Priority Four, Strategy 4.6).

Responsible Parties: *Task Force On Prisoner Re-Entry, DHS, CSB, DRS, WORC* Target Date: Nov. 2005
Primary: JobLink One-Stop Center for Workforce Investment

5. For those chronically homeless and other homeless individuals who are working, increase annual income through the Federal *Refundable* and *Virginia Non-Refundable Earned Income Tax Credit* (Virginia Commonwealth Plan, Priority Four, Strategy 4.8).

Responsible Parties: *DSS, Refunds for Free In Metro D.C., all providers* Target Date: Feb-Apr 2005 & Annually

6. Apply for Job Opportunites for Low-Income People (U.S. HHS, U.S. Department of Labor, Employment and Training Administration *Workforce Investment Board* grants to assist homeless, chronically homeless and ex-offenders.

Responsible Parties: *TFOPR* Target Date: April – Sept 2004
Primary: JobLink One-Stop Center for Workforce Investment

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APPENDIX 1

HOMELESS FACILITIES IN ALEXANDRIA, VIRGINIA⁷

Day Shelter

David's Place (Carpenter's)

Emergency Shelters

Alexandria Community Shelter (ACS)
(ACS is City-funded and operated under contract by The Salvation Army)

ALIVE! House

Carpenter's Shelter

Domestic Violence Shelter (Office on Women)

Transitional Housing Programs

Adopt-A-Family (Arlington-Alexandria Coalition for the Homeless)

Carpenter's Shelter

Door to Independence (Community Lodgings, Inc.)

Guest House

Alexandria Transitional Housing Program (Northern Virginia Family Service)
(Funded through Alexandria's Housing Trust Fund)

Turning Point (Salvation Army)

Men's Recovery Home (ACSB)⁸

Aspen House (ACSB)

Permanent Supportive Housing

Mayflower/Canterbury (ACSB)

Columbus and Wythe (ACSB)

Notabene (ACSB)

⁷ Visit our website at www.alexandriahscc.org for a complete listing of facility addresses and contacts. Definitions for the various types of facilities are provided on the following page.

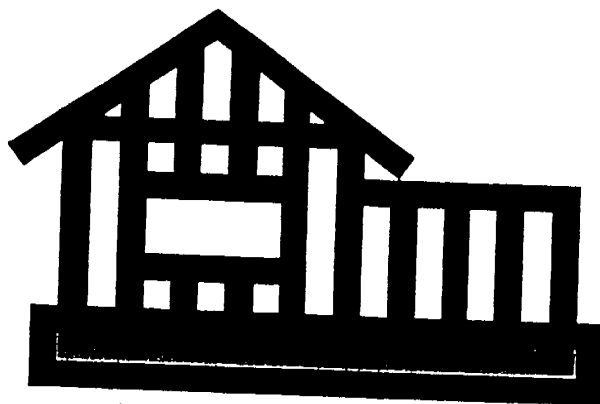
⁸ ACSB: Alexandria Community Services Board HUD-funded properties are shown above. Other group homes and supervised apartments operated by the ACSB throughout the City are also available to homeless individuals.

DEFINITIONS

DAY SHELTER: Provides unsheltered homeless adults a safe environment during daytime hours, along with services such as laundry and locker facilities, showers, phone, mailing address and service referrals, but does not provide overnight accommodations.

EMERGENCY SHELTER: Emergency housing in conjunction with food and supportive services to enable individuals and families to stabilize their lives, obtain jobs, and move on to transitional, permanent, or permanent supportive housing. Emergency shelters may provide a place for homeless persons to be during the day while conducting job searches, working or attending training.

TRANSITIONAL HOUSING: Transitional Housing facilitates the movement of homeless individuals and families to permanent housing, usually within 24 months. This temporary housing is combined with support services, such as substance abuse education, crisis stabilization services, transportation, supportive counseling, medication management, case management, training in activities of daily living, vocational skills training and emergency financial assistance, to enable homeless individuals and families to live as independently as possible.



PERMANENT SUPPORTIVE HOUSING: Permanent Supportive Housing is long-term housing. Permanent housing is combined with support services, such as those noted above for Transitional Housing, to enable homeless individuals and families to live as independently as possible in a permanent setting.

SECTION 8 CERTIFICATE: Housing assistance, in the form of direct payments to a private landlord, secured from a local housing authority, that low-income people can use to rent apartments and homes on the private market.

**MISSION AND ORGANIZATION
OF THE
HOMELESS SERVICES COORDINATING COMMITTEE
Alexandria, Virginia**

MISSION

The *Homeless Services Coordinating Committee (HSCC)*, established in 1989, is committed to creating and implementing an effective continuum of care⁹ for the homeless in Alexandria, Virginia, with particular attention to homeless prevention and self-sufficiency. In addition to emergency shelter, the HSCC ensures the provision of support services including, but not limited to, substance abuse and mental health services, child care, job training/placement and financial counseling, transitional housing with supportive services, and case management to assist in the transition to permanent housing and self-sufficiency.

MEMBERSHIP and MEETINGS

The HSCC is a collaborative partnership that includes public and private homeless service delivery agencies, advocates, business interests, former consumers, faith-based organizations and individual citizens interested in alleviating homelessness in Alexandria, Virginia. (A listing of current Committee members is provided on pages 3 and 4 of this report.) The Director of the Office of Community Services and a member representative of a non-profit agency, rotated on an annual basis, serve as the Co-Chairpersons of the HSCC. The non-profit Co-Chair is elected by a majority of voting members present at the May meeting each year. The primary function of the Co-Chairs is to preside over all regular meetings of the HSCC and to ensure that Sub-Committee seats are filled. Appointments to Sub-Committees are made at the May meeting.

The HSCC meets monthly at a time and location agreed upon by the membership. A meeting agenda prepared by the Strategic Planning Sub-Committee and minutes of each meeting prepared by the City's Office of Community Services are distributed to all members in advance of each monthly meeting.

⁹ The Continuum of Care is a community-based, long-range plan that addresses the needs of homeless persons in order to help them reach maximum self-sufficiency. The Continuum of Care is developed through collaboration with a broad cross section of the community and based on a thorough assessment of homeless needs and resources. The Continuum of Care is recommended by the U.S. Department of Housing and Urban Development (HUD) as a comprehensive and strategic approach to addressing homelessness. HUD Definition of the Continuum of Care: "A community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness." (Every year, the HSCC prepares the Continuum of Care document for submittal to HUD.)

ORGANIZATION

In order to carry out its mission in the most efficient manner, the HSCC has established the following sub-committees that meet outside of regular meetings to accomplish studies/tasks, and then make recommendations for review and approval by the full committee. Each sub-committee designates a member to serve as its chairperson for a term of one year.

Membership Sub-Committee

The Membership Sub-Committee ensures that the membership of the HSCC is broad-based and inclusive of all agencies, groups, businesses and individuals impacting the homeless in Alexandria. Recruitment of new members is an on-going process to ensure that vacancies are filled and all groups are adequately represented.

Winter Shelter Sub-Committee

The Winter Shelter Sub-Committee annually assesses winter shelter needs, ensures that adequate facilities exist to house homeless persons during the winter months, identifies alternate sites, if needed, and develops policies related to winter shelter operations for review by the HSCC.

Strategic Planning & Evaluation Sub-Committee

The Strategic Planning & Evaluation Sub-Committee has the following major functions:

- (1) Conducts an annual *Needs Assessment* to identify gaps in housing and services for the homeless population.
- (2) Provides data to the HSCC on existing resources/current inventory and identifies major needs by homeless sub-groups.
- (3) Develops guidelines for the HSCC to use in determining priority ranking of the gaps in housing resources and existing services.
- (4) Provides a method for the HSCC to use in developing long-range plan strategies to address the high-priority gaps identified.
- (5) Drafts a *Long-Range Strategy Statement* to address the gaps identified.
- (6) Develops a *One-Year Plan* identifying actions which can be undertaken in the next 12 - 18 months.
- (7) Establishes procedures for obtaining evaluation feedback for all projects on an on-going basis.

(8) Develops agenda and calendar for the HSCC.

(9) Prepares documents for City Council and/or others advocating for policies/programs to support homeless individuals in Alexandria. (Members may also testify at hearings, meet with Council members, and so forth, to present HSCC plans and recommendations for addressing homeless issues in Alexandria.) A major responsibility is to draft HSCC input for the City's Consolidated Plan.

(10) Reviews HSCC By-Laws annually and presents revisions, if needed, to the HSCC.

(11) Coordinate the work of the Transitional Housing and Health Care Task Forces, providing input for the Task Forces' strategic goals and action steps.

Homeless Management Information System (HMIS) Sub-Committee

The HMIS Sub-Committee is comprised of the entire Alexandria network of homeless and social service providers. The goal of the HMIS is for all providers to use an integrated data tool to record and report uniform system-wide information on client needs and services. This system will meet mandated reporting requirements and improve planning and service delivery. The HMIS Sub-Committee will ensure that the HMIS meets the following goals:

1. Identify gaps in the service delivery system.
2. Improve availability of data to aid Alexandria in making planning and funding decisions about services provided to homeless people.
3. Improve the quality of client services by providing faster linkage to housing, benefits and services.
4. Meet Federal mandates
5. Ensure that data are secure and privacy is protected.
6. Centralized intake (possible for the future)
7. Unduplicated intakes
8. FSG/SSG and other required State and Federal reports will be generated by the system.

Continuum of Care Sub-Committee

The Continuum of Care Sub-Committee has the following major functions:

(1) Conducts a "Point in Time" shelter and street survey.

(2) Establishes procedures for submittal of applications (deadlines, etc.) and ensures that procedures are in place to notify all potential applicants.

(3) Develops procedures for project presentations to the HSCC (e.g., criteria to be presented by

applicant, time limits, etc.).

(4) Recommends proposal evaluation and ranking criteria for use by the HSCC. Determines which HSCC members will vote on the final list of proposals to be sent to HUD or other funding sources and ensures that the HSCC adheres to the established Attendance and Voting rules.

(5) Drafts the Continuum of Care document for review and approval by the HSCC.

APPENDIX 2

HSCC ACTIVITIES & ACCOMPLISHMENTS OF THE PAST YEAR

The activities and accomplishments of the various Sub-Committees and Task Forces of the *Homeless Services Coordinating Committee* (HSCC) during Calendar Year 2003 and the first quarter of CY2004 are described below.

The *Strategic Planning Sub-Committee* met with the City Manager and provided an update on the ten-year strategic plan process for ending chronic homelessness and HSCC's participation in a regional approach to health care for the homeless. Strategic Planning members and CSB staff also met with HUD representatives to discuss the development of a Safe Haven for persons experiencing chronic homelessness. Liaison with *Virginia's Policy Academy on Chronic Homelessness* took place throughout the year with two HSCC members assigned to the Academy and several Sub-Committee members attended a *Virginia Coalition for the Homeless* meeting to provide feedback on Virginia's plan. Strategic Planning members also analyzed data trends for chronic homeless and provided public comment on the City's One-Year Update of the Consolidated Plan. The Strategic Planning Chair met with the Mayor concerning the ten-year plan. The Chair also met with several members of City Council concerning the plan for the Safe Haven. Two Strategic Planning members are also members of the Steering Committee for *Housing Action*, an advocacy group for affordable housing, and participated in recruiting members for a new *Housing Development Corporation*. Sub-Committee members identified the need for Representative Payees for consumers and initiated a recruitment strategy to obtain volunteers through local congregations. Members also identified the need for a breakfast program for chronic homeless and made contacts with several local churches to respond to this need. Members viewed HUD webcasts throughout the year concerning chronic homelessness and discussed implications for Alexandria. The HSCC web site was updated and advertised within the community. Strategic Planning members also reviewed the point-in-time data and participated with the *Continuum of Care Sub-Committee* in making recommendations for priority rankings of needs. Members also met with the Executive Director and staff of a local non-profit human services agency concerning the high-priority need for an SRO.

The *Homeless Management Information System (HMIS) Sub-Committee* reviewed HUD's "Data & Technical Standards Notice" in detail and discussed funding options for initiating the HMIS. HMIS members developed a mission and vision statement and goals for the HMIS implementation (see Appendix 1 of this report). The HMIS Chair attended several meetings and HMIS training sessions conducted by HUD/DC Field Office staff, as well as by State Department of Housing Community Development (DHCD) representatives who were exploring the possibility of developing a Statewide system. The Task Force met monthly to review the HMIS requirements, the technical design decisions needed, and policy and procedure considerations necessary for successful implementation. Through the Statewide DHCD meetings, four different software options were studied, with Committee members deciding that Bowman System's *ServicePoint* would meet the needs of most providers and Continuum of Care groups. (*ServicePoint* is currently used in 48 States.) Task Force members met and spoke with representatives of surrounding jurisdictions to discuss mutual HMIS needs. Two near-by jurisdictions selected *ServicePoint*. Alexandria Task Force members and HSCC representatives attended two presentations of *ServicePoint* by a Bowman Systems representative, and

recommended that Bowman Systems' *Service Point* be the system utilized by Alexandria's homeless services providers. Funding for the start-up costs in implementing HMIS were secured through the City's Office of Housing and it is anticipated that HMIS training for homeless providers will begin in Summer 2004.

The *Continuum of Care Sub-Committee* conducted its annual Point-in-Time Survey of homeless persons in cooperation with the Washington regional Council of Governments (COG) survey. This Sub-Committee also established procedures for submittal of applications for HUD funding and ensured that procedures were in place to notify applicants of timelines and voting criteria, reviewed attendance records, and ensured that the HSCC was in compliance with the established Attendance and Voting rules as specified in the HSCC By-Laws. Members of this Sub-Committee also have primary accountability for the drafting of the Continuum of Care document, ensuring that goals and action steps are addressed throughout the year through the full participation of HSCC members in the process.

The HSCC's *Employment and Training Sub-Committee* held meetings to discuss the need for an Employment and Training Survey, the Workforce Investment Network, and other resources for the homeless. A CSB intern was assigned in the Fall to conduct the Employment and Training Survey. She conducted interviews with employers, trainers, and providers and met with Sub-Committee members to discuss results. The final survey was completed in February 2004 and distributed to all HSCC members and other interested community members.

The HSCC's *Winter Shelter Sub-Committee* met regularly throughout the winter months to ensure that hypothermia shelter was provided to the unsheltered homeless population.

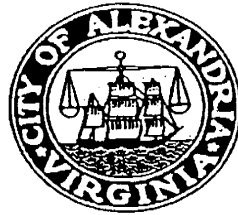
The HSCC's *Health Care Task Force* reviewed service delivery models providing health care for the homeless and discussed respite care needs for Alexandria's homeless population. Task Force members recruited Arlington County representatives to sit on the Task Force to address health care needs for the homeless in both jurisdictions and the *Health Care Task Force* Chair attending a meeting of Arlington's *Primary Care for the Homeless Action Team*. The Executive Director of the Arlandria Neighborhood Health Services, Inc. (ANHSI), a member of the Task Force, has kept the group apprised of the new HHS-funded Community Health Center operated by ANHSI. Task Force members are working with ANHSI to address homeless health care needs by applying for additional grant funding to serve this population, and one member of the Task Force is a member of a regional roundtable addressing access to prescription medications for the low-income population. Task Force members also participate throughout the year in Northern Virginia's *Access to Health Care Consortium* meetings.

HSCC's *Transitional Housing Task Force* addressed access to mental health services for consumers in transitional housing. Speakers attended Task Force meetings to discuss services for disabled persons and elderly. Throughout the year, the Task Force discussed the need for Housing Choice Vouchers for transitional graduates, and met with ARHA representatives concerning Section 8 set-asides for this population.

APPENDIX VI

**CITY OF ALEXANDRIA, VA - ALEXANDRIA COMMUNITY
SERVICE BOARD FIVE YEAR PLAN**

Alexandria Community Services Board



**Approved Five Year Housing Plan
July 1, 2003 through June 30, 2008**

March, 2003

Prepared by: Karen R. Kaiser, Ph.D., Director of Residential Services
Revised June 17, 2003

Purpose of the Alexandria Community Services Board Five Year Housing Plan

The Alexandria Community Services Board (ACSB) is a group of 16 volunteers appointed by the Alexandria City Council. The ACSB provides community-integrated mental health, mental retardation and substance abuse services to the citizens of Alexandria City.

In March of 2003, the ACSB reviewed housing needs for persons with mental illnesses, intellectual disabilities and chemical dependency. The 2003 housing needs assessment was based on the following:

- The 2003 Council of Governments Regional Point-In-Time Survey;
- Census Data from Commonwealth of Virginia facilities (Training Centers and Psychiatric Hospitals); and
- ACSB Residential Services waiting list data.

The ACSB FY 2004-2008 Housing Plan is based on the 2003 housing needs assessment. The ACSB Housing Plan is a guide for residential program development and grant seeking efforts for the next five years. The plan helps the Board operate effectively and efficiently in the development of housing resources for people with severe mental disabilities and/or chemical dependency.

This report is divided into four sections:

- Status of Current Housing Plan for FY 1999-2003;
- Housing Needs Assessment;
- Proposed Housing Plan for FY2004-2008; and
- Location of New Board Housing.

Status of Current Housing Plan for FY 1999-2003

City Council approved the ACSB FY 1999-2003 Housing Plan on June 23, 1998. A total of fifty-eight beds which included five group homes, seven supervised apartments and thirty Section 8 Certificates were identified for the FY 1999-2003 Plan. See Table 1 for the number of housing units and beds approved by City Council and the number of housing units and beds implemented as of June 30, 2003.

	City Council Approved Plan		Implemented as of June 30, 2003 ¹	
	# of Housing Units	# of Beds	# of Housing Units	# of Beds
Group Homes (includes Safe Haven)	5	30	0	0
Condos	7	28	7	28
Section 8 Certificates	30	N/A ²	20	N/A
Total	42	58	27	28

It is projected that twenty-eight of the fifty-eight beds approved by City Council for the FY 1999-2003 Housing Plan will be implemented by June 30, 2003. Twenty³ of the thirty Section 8 Certificates approved by City Council were committed by the Alexandria Redevelopment and Housing Authority (ARHA) September, 2002.

Twelve condos were purchased during the fiscal years 1999 through 2003. Five of the twelve condos purchased replaced existing rental units, for a balance of seven new condos. The ACSB met its goal of purchasing seven additional condos. The ACSB did not implement any new group homes from July, 1999 through June, 2003 due to funding constraints. Twenty eight of the fifty-eight beds approved by City Council on June 23, 1998 have been implemented, with a balance of thirty beds and ten Section 8 certificates yet to be implemented.

Housing Needs Assessment

In March of 2003, the housing needs of individuals with serious mental illnesses, intellectual disabilities and chemical dependency were assessed by the ACSB. The needs assessment was based on information collected from the Washington Metropolitan Council of Governments (COG) point-in-time count and Commonwealth of Virginia facility census data.

The COG Point-In-Time Count

The COG point-in-time count was conducted January 22, 2003. On January 22, volunteers, outreach workers, service providers and Homeless Services Coordinating Committee (HSCC)

members participated in the homeless enumeration and resources inventory. After the count, the Strategic Planning Sub-committee met to identify gaps and develop priority rankings for presentation to the HSCC. The estimated need for each housing component and supportive service slot was established based on the existing circumstance of the family or individual on the night of the enumeration.

The 2003 COG point-in-time count revealed the following: On the night of the enumeration, there were sixty-four individuals in need of supportive housing. Twenty-five of the sixty-four individuals were receiving housing services. This resulted in a gap of thirty-nine individuals who did not receive the service due to a lack of appropriate beds. Nineteen individuals were identified as needing housing with unlimited stay and an environment in which few demands are placed on the consumer. A safe haven model meets these criteria and provides services to hard-to-serve consumers (those who are chronically homeless with serious mental illnesses).

Twenty individuals were identified as needing housing with a limited stay and supportive services to help them reach independent living. Supportive services may include job training and placement, substance abuse treatment, short-term mental health services, and independent living skills training.

State Facility Census

At the time of the needs assessment, there was a total of forty-four Alexandria residents residing in Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services' facilities. Twenty-three individuals diagnosed with serious mental illnesses from Alexandria City were patients in State Psychiatric Hospitals (Central State, Western State, Eastern State and Northern Virginia Mental Health Institute). In addition, there were twenty-one individuals from the City of Alexandria with intellectual disabilities in State-run Training Centers. All of these individuals could potentially return to Alexandria City if appropriate supportive housing was available.

Proposed Housing Plan for July 1, 2003 through June 30, 2008

The Board review of housing needs for Alexandrians with mental illnesses, intellectual disabilities and chemical dependency identified a need for one hundred fifteen beds based on the following:

- The 2003 COG point-in-time count identified thirty-nine beds needed to serve the chronically homeless in Alexandria City with serious mental illnesses and/or chemical dependency; and
- Review of the State facility census revealed forty-four consumers who were living in State run facilities who could return to Alexandria City if beds were available with appropriate support services.
- An average of thirty-two individuals per month are on the Residential Services waiting list for some form of ACSB housing (e.g., group homes or apartments for individuals with serious mental illnesses, group homes or apartments for individuals with intellectual

disabilities and group homes or apartments for individuals with chemical dependency).

Although one hundred fifteen beds were identified, only seventy-seven additional beds and ten additional Section Eight vouchers are being proposed for the FY 2004 - 2008 Housing Plan. This proposal recognizes the limited capacity and resources available to implement and manage new facilities.

Four group homes with six beds each, one safe haven with eight beds, fifteen condos with forty-five beds and ten Section 8 vouchers are proposed for the Plan. Table 2 presents the proposed five year housing plan which would be implemented as funding becomes available.

Table 2: The Number of Housing Units and Beds Proposed for the Board's Five Year Housing Plan FY 2004 - 2008

Residential Configuration	# of Beds ⁴	# of Housing Units	
Safe Haven		1	8
Group Homes		4	24
Apts/Condos		15	45
Section 8 Certificates (Adults with Mental Disabilities and Chemical Dependency Accompanied by Children)		10	N/A
Total		30	77

Location of New Board Housing

The Board's siting policy includes two aspects of the siting process: (a) financial and physical criteria that must be met by the intended housing, (b) the location within the City.

(a) Financial and physical criteria for Board Housing (from Board Policy #13)

- Affordability
- Reasonably convenient to transportation, employment, food, pharmacy, shopping and recreation
- Suitable size for intended use
- Adequate ceiling heights, windows, room sizes to meet regulatory requirements and normal standards of comfort
- Reasonably modified for handicapped accessibility where required
- Permits practical installation for sprinklers (for group homes only)
- Purchase price confirmed by independent appraisal
- Readily conforms to applicable building codes
- Resultant building changes improve or do not distract from community appearance
- Location reasonably safe or does not present exceptional risk
- Best "fit" of properties currently available.

(b) Basis for locating Board housing

- The Board uses eight Board Housing Planning Areas ⁵ (Areas) which are based on a combination of the Small Area Plans used by the City's Department of Planning and Zoning.
- Board policy requires that Board owned and operated special needs housing be located throughout the City. Every attempt is made to place new Board owned and operated housing in Areas with the lowest proportion of existing special needs

housing. Section Eight housing that is not owned or operated by ACSB or Sheltered Homes of Alexandria is not included in this plan as this information is highly variable (constantly changing) due to the nature of the Section Eight Program. In addition, individuals designated to receive Section Eight vouchers may use the vouchers within and outside of Alexandria City limits.

- If appropriate housing is not available in an Area that is designated as having the lowest proportion of special needs housing, the Board may search other Areas, beginning with the Area having the next lowest proportion of special needs housing and so on. For example, as shown in table three, the Board plans to begin its search for the first new group home in Board Housing Planning Area I. If appropriate housing is not available in Area I, the Board will move its search to Area III.
- If affordable housing is not available in an Area with the lowest proportion of special needs housing, the Board may either: (i) request additional funds from City Council to purchase or lease appropriate housing in that Area, or (ii) seek housing in the Area with the next lowest proportion of special needs housing.

Table 3 presents for each Board Planning Housing Area: The number of group homes for persons with mental illnesses, intellectual disabilities and/or chemical dependency and housing for special needs populations without mental disabilities (Special Needs Other); the City stock of single family units, apartments and condos; the number of apartments and condos for persons with mental illnesses, intellectual disabilities and/or chemical dependency and special needs other per 1,000 City stock of single family units, apartments and condos.

Table 3: Board Housing Plan Area						
	Number of Group Homes	City Stock	Proportion	Number of Apartments and Condos	City Stock	Proportion
Board Housing Planning Area	Group Homes for Persons with Mental Illnesses, Intellectual Disabilities and/or Chemical Dependency and Special Needs Other Housing	Number of Single Family Units	Group Homes for Persons with Mental Illnesses, Intellectual Disabilities and/or Chemical Dependency and Special Needs Other Housing per 1,000 City Stock of Single Family Units	Apartments and Condos for Persons with Mental Illnesses, Intellectual Disabilities and/or Chemical Dependency and Special Needs Other Housing	Number of Apartments and Condos	Apartments and Condos for Persons with Mental Illnesses, Intellectual Disabilities and/or Chemical Dependency and Special Needs Other Housing per 1,000 City Stock of Apartments and Condos
I Alexandria West	0	1,845	0	7	11,451	.61
II Landmark/Van Dorn; King Street and Eisenhower Ave.	1	2,795	.36	8	13,275	.60
III Northridge, Rosemont, Fairlington and Bradlee	1	3,581	.28	2	1,745	1.15
IV Old Town and the Southwest Quadrant	2	3,770	.53	1	2,906	0.34
V Braddock/Metro; North East; Old Town North; Potomac Yard and Potomac Green	2	2,677	.75	1	2,744	.36
VI Potomac West	8	5,623	1.42	17	4,514	3.77
VII Seminary Hill and Strawberry Hill	8	2,837	2.82	4	5,383	.74

VIII Taylor Run and Duke Street	1	1,479	0.68	2	921	2.17
Total Units ⁶	23	24,607	N/A	42	42,939	N/A

Table 4 shows for each Board Housing Planning Area, the number of existing and proposed group homes and apartments/condos and the proposed rank order⁷ for siting new group homes.

Table 4 Number and Location of Existing Special Needs Residences Number and Location of Proposed New Board Group Homes and Condos/Apartments Proposed Rank Order for Siting New Group Homes and Condos/Apartments for Board Planning Housing Area				
Board Housing Planning Areas	Group Homes		Condos/Apartments	
	Existing Special Needs Group Homes	Proposed New Group Homes	Existing Special Needs Apartments/Condos	Proposed New Apartments/Condos
I Alexandria West	0	1,5	7	4, 7, 11, 13
II Landmark/Van Dorn; King Street and Eisenhower Ave.	1	3	8	3,5, 10, 12, 14
III Northridge, Rosemont, Fairlington and Bradlee	1	2	2	
IV Old Town and the Southwest Quadrant	2	4	1	1, 6
V Braddock/Metro, North East, Old Town North, Potomac Yard and Potomac Green	2		1	2, 8
VI Potomac West	8		17	
VII Seminary Hill and Strawberry Hill	8		4	9, 15
VIII Taylor Run and Duke Street	1		2	
Total Units	23	5	42	15

¹ The FY 2004 - 2008 Housing Plan was written March, 2003. Therefore, the number of housing units to be implemented by June 30, 2003 were projected.

² Section 8 Certificates are used to obtain rental units with varying numbers of beds.

³ Twenty-five Section Eight Vouchers were committed by the Alexandria Redevelopment and Housing Authority in FY 2002. Five of the twenty-five vouchers were replacement vouchers from those issued in 1989. Five vouchers issued in 1989 were lost when consumers moved out of Alexandria City.

⁴ Number of beds may vary depending on facility availability.

⁵ The City has 14 Small Planning Areas. Several of these were combined to produce eight Board Housing Planning Areas. For example, City Areas 2, 6, 9 and 11 comprise Board Housing Planning Area V. The Board Housing Planning Area II covers the City's Small Planning Areas 4 and 5. Board Housing Planning Area III includes the City's Small Planning Areas 3 and 7 and Board Housing Planning Area IV covers the City's Small Planning Areas 8 and 13. See Appendix I for a map of the City of Alexandria special needs residences.

⁶ A unit includes group homes, shelters, privately owned residences, apartments or condos.

⁷ Rank order was determined by first identifying the Area with the lowest proportion of existing special needs group homes to all single-family dwellings and the Area with the lowest proportion of existing special needs apartments/condos to all apartments/condos. Assuming that each type of housing (group homes or apartments/condos) was located in the Area selected for that type of housing, the proportions of existing special needs housing to all housing for each type of housing were re-calculated for each Area to determine the Areas that had the next lowest proportion for each type of special needs housing. This process continued until all new housing was placed.

APPENDIX VII

GLOSSARY

CONSOLIDATED PLAN GLOSSARY

Affordable Housing: Affordable housing is generally defined as housing where the occupant is paying no more than 30 percent of gross income for gross housing costs, including utility costs.

AIDS and Related Diseases: The disease of acquired immunodeficiency syndrome or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome.

Alcohol/Other Drug Addiction: A serious and persistent alcohol or other drug addiction that significantly limits a person's ability to live independently.

Assisted Household or Person: An assisted household or person is one which during the period covered by the annual or five year plan will receive benefits through the Federal funds, either alone or in conjunction with the investment of other public or private funds. The program funds providing the benefit(s) may be from any funding year or combined funding years. A renter is benefitted if the person takes occupancy of affordable housing that is newly acquired, newly rehabilitated, or newly constructed, and/or receives rental assistance through new budget authority. An existing homeowner is benefitted during the year if the home's rehabilitation is completed. A first-time homebuyer is benefitted if a home is purchased during the year. A homeless person is benefitted during the year if the person becomes an occupant of transitional or permanent housing. A non-homeless person with special needs is considered as being benefitted, however, only if the provision of supportive services is linked to the acquisition, rehabilitation, or new construction of a housing unit and/or the provision of rental assistance during the year.

Committed: Generally means there has been a legally binding commitment of funds to a specific project to undertake specific activities.

Community Development Block Grants (CDBG): Under Title I of the Housing and Community Development Act of 1974, CDBG funds are to be used to develop viable urban communities, by providing more housing opportunities, a suitable living environment and expanding economic opportunities, principally for persons of low- and moderate-income.

Consistent with the Consolidated Plan: A determination made by the jurisdiction that a program application meets the following criterion: The Annual Plan for that fiscal year's funding indicates the jurisdiction planned to apply for the program or was willing to support an application by another entity for the program; the location of activities is consistent with the geographic areas as specified in the plan; and the activities benefit a category of residents for which the jurisdiction's five-year strategy shows a priority.

Cost Burden > 30%: The extent to which gross housing costs, including utility costs, exceed 30 percent of gross income, based on data published by the U.S. Census Bureau.

Cost Burden > 50% (Severe Cost Burden): The extent to which gross housing costs, including utility costs, exceed 50 percent of gross income, based on data published by the U.S. Census Bureau.

Disabled Household: A household composed of one or more persons at least one of whom is an adult (a person of at least 18 years of age) who has a disability. A person shall be considered to have a disability if the person is determined to have a physical, mental or emotional impairment that: (1) is expected to be of long-continued and indefinite duration, (2) substantially impeded his or her ability to live independently, and (3) is of such a nature that the ability could be improved by more suitable housing conditions. A person shall also be considered to have a disability if he or she has a developmental disability as defined in the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001-6006). The term also includes the surviving member or members of any household described in the first sentence of this paragraph who were living in an assisted unit with the deceased member of the household at the time of his or her death.

Economic Independence and Self-Sufficiency Programs: Programs undertaken by Public Housing Agencies (PHAs) to promote economic independence and self-sufficiency for participating families. Such programs may include Project Self-Sufficiency and Operation Bootstrap programs that originated under earlier Section 8 rental certificate and rental voucher initiatives, as well as the Family Self-Sufficiency program. In addition, PHAs may operate locally-developed programs or conduct a variety of special projects designed to promote economic independence and self sufficiency.

Elderly Household: For HUD rental programs, a one or two person household in which the head of the household or spouse is at least 62 years of age.

Elderly Person: A person who is at least 62 years of age.

Emergency Shelter: Any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for the homeless in general or for specific populations of the homeless.

Existing Homeowner: An owner-occupant of residential property who holds legal title to the property and who uses the property as his/her principal residence.

Extremely Low-income Family: Household whose income is between 0 and 30 percent of the median income for the area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower than 30 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes.

Family: HUD's definition of family includes but is not limited to an Elderly Household, a person living alone, the remaining member of a tenant family and a displaced person. (This definition, which is required to be used in the CHAS rule, differs from the Census definition.) The Bureau of Census defines a family as a householder (head of household) and one or more other persons living in the same household who are related by birth, marriage or adoption. The term "household" is used in combination with the term "related" when compatibility with the Census definition of

family (for reports and data available from the Census based upon that definition) is dictated. (See also "Homeless Family.")

Family Self-Sufficiency (FSS) Program: A program enacted by Section 554 of the National Affordable Housing Act which directs Public Housing Agencies (PHAs) and Indian Housing Authorities (IHAs) to use Section 8 assistance under the rental certificate and rental voucher programs, together with public and private resources to provide supportive services, to enable participating families to achieve economic independence and self-sufficiency.

First-Time Homebuyer: An individual or family who has not owned a home during the three-year period preceding the HUD-assisted purchase of a home that must be used as the principal residence of the homebuyer, except that any individual who is a displaced homemaker (as defined in 24 CFR 92) or a single parent (as defined in 24 CFR 92) may not be excluded from consideration as a first-time buyer on the basis that the individual, while a homemaker or married, owned a home with his or her spouse or resided in a home owned by the spouse.

For Rent: Year round housing units which are vacant and offered/available for rent. (U.S. Census definition.)

For Sale: Year round housing units which are vacant and offered/available for sale only. (U.S. Census definition.)

Frail Elderly: An elderly person who is unable to perform at least 3 activities of daily living (i.e. eating, dressing, bathing, grooming, and household management activities). (See 24 CFR 889.105.)

HOME: The HOME Investment Partnerships Program, which is authorized by Title II of the National Affordable Housing Act.

Homeless Family with Children: Family that includes at least one parent or guardian and one child under the age of 18, a homeless pregnant woman, or a homeless person in the process of securing legal custody of a person under the age of 18.

Homeless Person: A youth (17 years or younger) not accompanied by an adult (18 years or older) or an adult without children, who is homeless (not imprisoned or otherwise detained pursuant to an Act of Congress or a State law), including the following: 1) an individual who lacks a fixed regular, and adequate nighttime residence; and 2) an individual who has a primary nighttime residence that is: a) A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); b) an institution that provides a temporary residence for individuals intended to be institutionalized; or c) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

Homeless Subpopulations: Include but are not limited to the following categories of homeless persons: severely mentally ill only; alcohol/drug addicted only; severely mentally ill and alcohol/drug addicted; fleeing domestic violence; youth; and persons with HIV/AIDS.

HOPE 1: The HOPE for Public and Indian Housing Homeownership Program, which is authorized by Title IV, Subtitle A of the National Affordable Housing Act.

HOPE 2: The HOPE for Homeownership of Multifamily Units Program, which is authorized by Title IV, Subtitle B of the National Affordable Housing Act.

HOPE 3: The HOPE for Homeownership of Single Family Homes Program, which is authorized by Title IV, Subtitle C of the National Affordable Housing Act.

Household: One or more persons occupying a housing unit (U.S. Census definition.) See also "Family".

Housing Problems: Households with housing problems include those that: (1) occupy units meeting the definition of Physical Defects; (2) meet the definition of overcrowded; and (3) meet the definition of cost burden greater than 30%.

Housing Unit: An occupied or vacant house, apartment, or a single room (SRO housing) that is intended as separate living quarters. (U.S. Census definition.)

Institutions/Institutional: Group quarters for persons under care or custody. (U.S. Census definition.)

Large Family: A family of 5 or more persons.

Lead-Based Paint Hazard: Any condition that causes exposure to lead from lead-contaminated dust, lead-contaminated soil, lead-contaminated paint that is deteriorated or present in accessible surfaces, friction surfaces, or impact surfaces that would result in adverse human health effects as established by the appropriate Federal agency. (Residential Lead-Based Paint Hazard Reduction Act of 1992 definition.)

LIHTC: (Federal) Low Income Housing Tax Credit.

Low-Income Families: Low-income households whose incomes do not exceed 50 percent of the median family income for the area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower than 50 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes.

Low Income Housing Preservation Resident Homeownership Act (LIHPRHA): An Act adopted by Congress in 1992 to govern the sale of privately owned subsidized rental property. It creates a permanent and comprehensive program which preserves privately owned, low-income housing projects while not restricting the owners' mortgage prepayment rights. The program allows opportunities for resident ownership and/or non-profit, state or local government ownership of privately owned subsidized buildings.

Middle-Income Family: Household whose income is between 80 percent and 95 percent of the median income for the area, as determined by HUD, with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower than 95 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes. (This corresponds to the term "moderate income family" under the CHAS statute, 42 U.S.C. 12705).

Moderate-Income Family: Household whose incomes do not exceed 80 percent of the median income for the area, as determined by HUD, with adjustments for smaller or larger families, except that HUD may establish income ceilings higher or lower than 80 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes.

Non-Elderly Household: A household which does not meet the definition of "Elderly Household," as defined above.

Non-Homeless Persons with Special Needs: Includes frail elderly persons, persons with AIDS, disabled families, and families participating in organized programs to achieve economic self-sufficiency.

Occupied Housing Unit: A housing unit that is the usual place of residence of the occupant(s).

Other Household: A household of one or more persons that does not meet the definition of a Small Related household, Large Related household or Elderly Household.

Other Vacant: Vacant year round housing units that are not For Rent or For Sale. This category would include Awaiting Occupancy or Held.

Overcrowding: A housing unit containing more than one person per room. (U.S. Census definition.)

Owner: A household that owns the housing unit it occupies (U.S. Census definition.)

Person with a Disability: A person who is determined to: 1) Have a physical, mental or emotional impairment that: a) is expected to be of long-continued and indefinite duration; b) substantially impedes his or her ability to live independently; and c) is of such a nature that the ability could be improved by more suitable housing conditions; or 2) Have a developmental disability, as defined in section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001-6007); or 3) be the surviving member or members of any family that had been living in an assisted unit with the deceased member of the family who had a disability at the time of his or her death.

Physical Defects: A housing unit lacking complete kitchen or bathroom (U.S. Census definition.) Jurisdictions may expand upon the Census definition.

Poverty Level Family: Household with an income below the poverty line, as defined by the U.S. Office of Management and Budget and revised annually.

Prepayment of Federally Assisted Mortgages (Section 236.30) - Partial or full payment of a loan, which was provided by the Department of Housing and Urban Development, for the development and/or construction of a rental project for low- and -moderate income families, prior to the end of the loan term. Once the loan is paid off, the owner of the rental project is no longer obligated to keep set-aside units for lower income households. However, prepayment is subject to the requirements of the Low Income Housing Preservation Resident Homeownership Act.

Primary Housing Activity: A means of providing or producing affordable housing - such as rental assistance, production, rehabilitation or acquisition -- that will be allocated significant resources and/or pursued intensively for addressing a particular housing need. (See also, "Secondary Housing Activity".)

Project-Based (Rental) Assistance: Rental Assistance provided for a project, not for a specific tenant. Tenants receiving project-based rental assistance give up the right to that assistance upon moving from the project.

Public Housing CIAP: Public Housing Comprehensive Improvement Assistance Program.

Rent Burden > 30% (Cost Burden): The extent to which gross rents, including utility costs, exceed 30 percent of gross income, based on data published by the U.S. Census Bureau.

Rent Burden > 50% (Severe Cost Burden): The extent to which gross rents, including utility costs, exceed 50 percent of gross income, based on data published by the U.S. Census Bureau.

Rental Assistance: Rental assistance payments provided as either project-based rental assistance or tenant-based rental assistance.

Renter: A household that rents the housing unit it occupies, including both units rented for cash and units occupied without cash payment of rent. (U.S. Census definition.)

Renter Occupied Unit: Any occupied housing unit that is not owner occupied, including units rented for cash and those occupied without payment of cash rent.

Secondary Housing Activity: A means of providing or producing affordable housing - such as rental assistance, production, rehabilitation or acquisition -- that will receive fewer resources and less emphasis than primary housing activities for addressing a particular housing need. (See also, "Primary Housing Activity".)

Section 8 Rental Vouchers: A Federal subsidy offering very low-income households assistance in renting affordable units in the private market. The subsidy has a maximum cap and what the tenant pays varies with the actual gross rent. The voucher is portable i.e. it may be used outside of the jurisdiction.

Section 215: Section 215 of Title II of the National Affordable Housing Act. Section 215 defines "affordable" housing projects under the HOME program.

Section 236 (Section 221 (d)(3) was replaced by Section 236 -- A loan program which provided a mortgage interest subsidy for the construction and/or rehabilitation of privately owned rental projects for low- and -moderate income households.

Service Needs: The particular services identified for special needs populations, which typically may include transportation, personal care, housekeeping, counseling, meals, case management, personal emergency response, and other services to prevent premature institutionalization and assist individuals to continue living independently.

Severe Cost Burden: See Cost Burden > 50%.

Severe Mental Illness: A serious and persistent mental or emotional impairment that significantly limits a person's ability to live independently.

Sheltered: Families and persons whose primary nighttime residence is a supervised publicly or privately operated shelter, including emergency shelters, transitional housing for the homeless, domestic violence shelters, residential shelters for runaway and homeless youth, and any hotel/motel/apartment voucher arrangement paid because the person is homeless. This term does not include persons living doubled up or in overcrowded or substandard conventional housing. Any facility offering permanent housing is not a shelter, nor are its residents homeless.

Small Related: A household of 2 to 4 persons which includes at least one person related to the householder by birth, marriage, or adoption.

Substantial Amendment: A major change in an approved housing strategy. It involves a change to the five-year strategy, which may be occasioned by a decision to undertake activities or programs inconsistent with that strategy.

Substantial Rehabilitation: Rehabilitation of residential property at an average cost for the project in excess of \$25,000 per dwelling unit.

Supportive Housing: Housing that has a supportive environment and includes a planned service component.

Supportive Service Need in FSS Plan: The plan that PHAs administering a Family Self-Sufficiency program are required to develop to identify the services they will provide to participating families and the source of funding for those services. The supportive services may include child care; transportation; remedial education; education for completion of secondary or post secondary schooling; job training, preparation and counseling; substance abuse treatment and counseling; training in homemaking and parenting skills; money management, and household management; counseling in homeownership; job development and placement; follow-up assistance after job placement; and other appropriate services.

Supportive Services: Services provided to residents of supportive housing for the purpose of facilitating the independence of residents. Some examples are case management, medical or psychological counseling and supervision, child care, transportation, and job training.

Tenant-Based (Rental) Assistance: A form of rental assistance in which the assisted tenant may move from a dwelling unit with a right to continued assistance. The assistance is provided for the tenant, not for the project.

Total Vacant Housing Units: Unoccupied year round housing units. (U.S. Census definition.)

Transitional Housing: A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living within 24 months, or longer period approved by HUD. For purposes of the HOME program, there is no HUD-approved time period for moving to independent living.

Unsheltered: Families and individuals whose primary nighttime residence is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings (e.g., streets, parks, alleys).

Vacant Awaiting Occupancy or Held: Vacant year round housing units that have been rented or sold and are currently awaiting occupancy, and vacant year round housing units that are held by owners or renters for occasional use. (U.S. Census definition.)

Vacant Housing Unit: Unoccupied year-round housing units that are available or intended for occupancy at any time during the year.

