

Consolidated Plan

2012 Volume 2

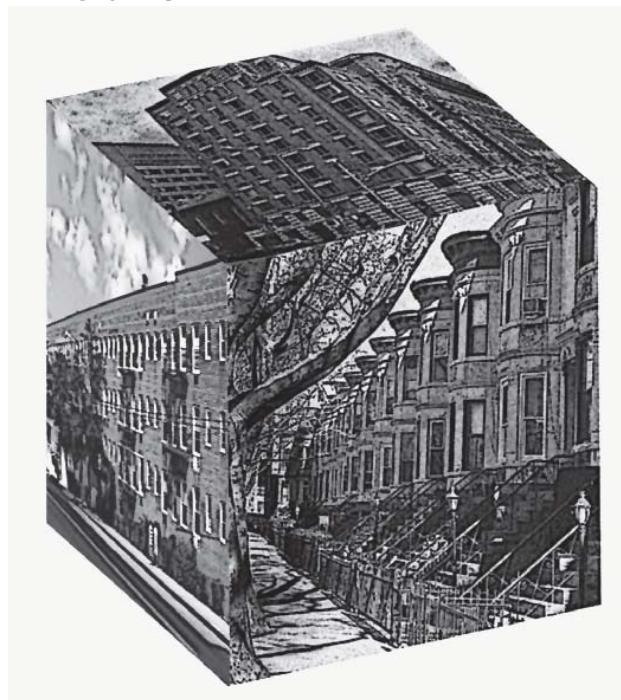


NYCTM PLANNING
DEPARTMENT OF CITY PLANNING CITY OF NEW YORK

Effective as of September 10, 2012

Consolidated Plan

2012
Volume 2



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2012 CONSOLIDATED PLAN

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D. Supportive Housing Continuum of Care for the Homeless and Other Special Needs Populations

This Supportive Housing continuum of care section will address the supportive housing services the City of New York currently undertakes and will continue to undertake during the next year for homeless families and individuals, and non-homeless special needs populations including the elderly, persons with a disability (mental, physical, and/or developmental), persons with a chemical addiction, and persons and families which include persons with HIV/AIDS and victims of domestic violence. This continuum of care also addresses homeless prevention/diversion programs for populations at risk of becoming homeless, including the precariously housed, such as those facing eviction, and very low-income households experiencing rent burden, individuals facing de-institutionalization and relocated families.

Programs for NYCHA residents with special needs are discussed in detail in the NYCHA Resident Initiatives subsection. In addition to the details provided in the Resident Initiatives section, NYCHA contributes to the City's Supportive Housing continuum of care in many ways, throughout this chapter NYCHA programs are referenced, as can be seen in the Homeless and the Domestic Violence subsections below. In addition, Part II., Section C., describes NYCHA programs for special needs groups such as the homeless, the elderly, the disabled, those persons who are chemically dependent, and others.

The continuum of care for the homeless works to prevent low-income individuals and families with and without children from becoming homeless, addresses the multiple needs of homeless individuals and families, and helps homeless persons rapidly make the transition to housing and independent living. This continuum of care aims to end homelessness, with an emphasis on chronic homelessness, among families and individuals. The homeless continuum of care components include: outreach, prevention and diversion services; assessment programs; transitional housing programs which include educational services, vocational training and job placement; health, mental health and substance abuse components, with an emphasis on access to mainstream resources; housing placement assistance that rapidly re-house families and individuals and targets supported housing to those most in need; and aftercare services to ensure that families and individuals remain stably housed. To ensure that people can move successfully through this continuum of care, services are flexible and client-based and clients are expected to be full participants in programs to help them become independent.

This continuum of care recognizes that homelessness is not an isolated problem and that housing is not always the single solution. Homeless families with children face different challenges than homeless single adults. A majority of emergency shelter and transitional housing facilities for homeless single adults offer the following services: employment training, educational counseling and services, mental health rehabilitation, specialized services for veterans, substance abuse treatment, intensive counseling and case management and other transitional services aimed at assisting residents to return to independent living in the community. Facilities housing homeless families provide access to services such as mainstream employment training and job placement, education programs, substance abuse prevention, and referrals and intensive counseling and case management.

1. Supportive Housing Continuum of Care for the Homeless

History of the Supportive Housing Continuum of Care for the Homeless

In the late 1970's and the 1980's, the shelter system provided few services to assist homeless families and single adults attain independence and move on to a permanent living situation. It was designed for emergency purposes and did not provide housing, but offered mainly hotels and congregate arrangements. In short, the system attempted to impose only emergency and temporary solutions, no matter how lasting the problems. This system tended to promote dependency, and made it incredibly difficult for individuals and families to regain independence. In response to this growing problem, the New York City Commission on Homelessness was formed and, in 1992, it published the results of its findings in "The Way Home Report."

The report indicated that the existing approach to homelessness was flawed because it failed to adequately consider other conditions like substance abuse and mental illness, that evidence indicated were often co-morbid characteristics accompanying homelessness. The evidence included in the report indicated that 42% of women and 18% of men reported that they had received treatment for mental or emotional problems, 51% of those surveyed had been in jail or prison at some time, 31% of the women had been physically or sexually abused as a child, 45% by a partner, and 6% tested positive for illegal substances. This data strongly indicated that many homeless people were in need of assistance beyond temporary housing to attain and/or maintain independence; as a result, the Commission recommended a more comprehensive approach to combating homelessness.

As a result of the Commission's recommendations, the responsibility for overseeing the provision of homeless services was transferred from the City's Social Services agency, the Human Resources Administration (HRA), to the newly established Department of Homeless Services (DHS), in the summer of 1993. In May 1994, DHS presented a plan for the delivery of services to homeless people, and the further development of the continuum of care, in a report entitled "Reforming New York City's System of Homeless Services". The report contained a plan to transform New York City's shelter system into the comprehensive system of services that had been recommended by the aforementioned New York City Commission on the Homeless, and supported by the New York City Council's Legislative Commission on the Homeless.

But as vast resources and energy had been focused on creating and maintaining this extensive shelter network, the discussion around how best to address homelessness was primarily a discussion about the provision of shelter, rather than long-term solutions.

As a result of these factors and a persistent and significant affordable housing crisis, the number of people in shelter continued to exist at high levels. During this time, the City's primary approach to the varying types of housing instability – i.e., rent arrears, potential eviction, household discord, medical emergency– was shelter. Despite the fact that the shelter system was designed specifically to protect people from the streets, shelter had become the de facto institutionalized response to wide-ranging needs – many of which could be better addressed with nuanced and more flexible interventions that help people stabilize housing, retain community ties, or transition successfully from institutional or custodial settings to community housing.

On January 17, 2003, under the leadership of Mayor Michael Bloomberg, an historic agreement was reached among The Legal Aid Society, the City of New York and the New York City Department of Homeless Services. The Agreement established the Family Homelessness Special Master Panel and charged it with a mandate to evaluate the functioning of various aspects of the shelter system for homeless families with children. In November 2003, the Special Master Panel issued its Family Homelessness Prevention Report and in February 2004, the Panel also completed a Review of the Legal Framework of the Homeless Shelter System.

In November 2003, Mayor Bloomberg has convened with a group of public, private, and nonprofit leaders to develop a then 10-year, multi-sector strategy to address these concerns and strengthen the City's response to New Yorkers who are most in need. A 41-member coordinating committee, as well as hundreds of task force participants and experts convened to develop the following nine-point strategy. As Mayor Bloomberg introduced this City strategic plan, he then charged his administration to achieve these innovative plans in five years as opposed to the original ten-year goal. This strategic plan aims to:

1. Overcome street homelessness
2. Prevent homelessness
3. Coordinate discharge planning
4. Coordinate city services and benefits
5. Minimize disruptions to families whose homelessness cannot be prevented
6. Minimize duration of homelessness
7. Shift resources into preferred solutions
8. Provide resources for vulnerable populations to access and afford housing

9. Measure progress, evaluate success, and invest in continuous improvement

Also, on June 23, 2004, the Special Masters Panel issued its report on The Emergency Assistance Unit and Shelter Eligibility Determination. The Panel recommended a complete restructuring of and significant improvements in application, eligibility determination, and support functions for shelter services. The Report sets out recommendations that tie together in an integrated, systematic, and flexible way, an approach to: preventing family homelessness; revamping the shelter application process; improving the eligibility determination practice; a more timely placement into shelter; the development of family safeguards; the expansion in the range, availability, and commitment of housing-related resources and supports to families; all in a physical setting designed to facilitate the core EAU functions.

On September 17, 2008, Mayor Michael R. Bloomberg and The Legal Aid Society announced an agreement dismissing the McCain, Lamboy, Slade, and Cosentino collection of lawsuits, which together have governed the homeless services system for families with children in New York City for 25 years. The agreement, signed by the parties, ends litigation and court oversight of the City's family shelter services system. A unanimous recommendation to end this litigation was put forward by the court-appointed Special Master Panel after their detailed evaluation of the homeless services system in 2004. This historic agreement now enables the City to regain full control and oversight of its family services system, no longer having to enforce over 40 highly-detailed court orders or spend precious staff time and agency resources complying with or litigating these cases.

On September 23, 2008, DHS released a report detailing significant progress in reducing street homelessness and homelessness among single adults and major transformations to the homeless system through the City's five-year action plan, *Uniting For Solutions Beyond Shelter*. Record numbers of individuals—including men, women, and children—have moved to work and permanent housing under the Bloomberg administration. The five-year plan outlined major changes needed to improve the adult and families systems, including the addition of prevention services, which prior to the Bloomberg administration was not part of DHS' work. DHS' efforts have led to progress in reducing homelessness among single adults, particularly in outreach to the chronically homeless. Outreach services are tailored in order to be most accepted by those chronically street homeless individuals who are resistant to the traditional shelter system by offering lower threshold housing such as Safe Haven beds.

In 2010, the United States Interagency Council on Homelessness released its federal strategic plan to prevent end homelessness, *Opening Doors*. The plans overarching goals are to:

- Finish the job of ending chronic homelessness in 5 years
- Prevent and end homelessness among Veterans in 5 years
- Prevent and end homelessness for families, youth, and children in 10 years
- Set a path to ending all types of homelessness

DHS embraces the goals established in the federal plan and already has key initiatives in place to support their realization. In alignment with the plan, DHS will continue to utilize its award winning prevention strategies. To assist families and individuals at risk of homelessness and to rapidly re-house individuals who have entered shelter. DHS will also continue its efforts around Veterans homelessness that began in 2007 and continues with a strong collaboration with the Veterans Administration and targeted short-term housing residences for Veterans. Also in concert with the plan, DHS believes that employment is the best way to ensure that homeless families and individuals move towards independence and self-sufficiency, and maintain in the community in homes of their own. DHS is enhancing its already strong focus on employment through greater collaboration with the Human Resources Administration.

a. Homeless Prevention for Populations at Risk of Becoming Homeless

Populations at Risk – The Precariously Housed

It is difficult to estimate the numbers of individuals and families at imminent risk of becoming homeless, however, there are a number of situations where a family or an individual can be considered precariously housed and at imminent risk of homelessness. These situations include imminent eviction, very low income and very high rent burdens, substandard housing, overcrowded conditions, and recent homelessness. Each situation is described in greater detail below.

Imminent Eviction

Studies have shown that a majority of people who appear in Housing Court for eviction proceedings do so without legal representation and that a substantial number of these people receive public assistance. Those lacking legal resources will most likely be at risk of legal threat or eviction.

Very low incomes (at or below 50 percent MFI) and high rent burdens and/or in substandard dwelling units

Households with very low incomes and very high rent burdens may be at risk of becoming homeless. Altogether, 503,000 very low income renter households in New York City in 2008 have a severe cost burden and may be at risk of becoming homeless. Among renter households with extremely low income (30 percent or less of area MFI), 75.1% or about 374,000 households, have a severe rent burden - greater than 50 percent of income, according to the 2008 NYC Housing and Vacancy Survey (HVS). In fact, their median gross rent/income ratio was a crushing 83.8 percent. Another 129,000 very low income renter households with incomes at 31 – 50% of Area Median Income for the household size also suffered this severe rent burden. That is a total of 503,000 very low income renter households with severe cost burden who may be at risk of becoming homeless.

Of the HUD household types, crowding is by far a problem of large related renter households: 101,000 or 65.3 percent of large related renter households are crowded. Among large related renter households with incomes less than 30% AMI, 68.6 percent are crowded. These large crowded households with low incomes experience multiple pressures that could lead some members to leave the household and become homeless. If overcrowding is considered to compound the hazard of low income to increase the risk of homelessness, approximately 53,000 very low income renter households (50 percent or less of MFI) are overcrowded and paying more than 50 percent of household income for rent. These renter households must be considered to be under severe pressure and possibly at risk of some members becoming homeless.

Another 38,000 renter households with incomes between 51 and 80 percent of area MFI also have a severe rent burden (over 50% of income) and may be at risk of homelessness. These numbers do not include households with zero or negative income, whose rent burden situation could not be calculated, but who may also have severe rent burden problems, or those reporting no cash rent.

According to the 2008 HVS, about 127,000 low income renter households (income at or below 80 percent of the area median family income) live in physically poor housing. Physically poor housing is defined as being either dilapidated, having three or more building defects, 4 or more maintenance deficiencies, or an incomplete kitchen or bath. Of these, 94,000 households are very low income renters (at or below 50 percent of MFI) living in physically poor housing. When physical conditions become dangerous and landlords fail to make repairs, these families and individuals may leave their homes and enter the shelter system. Most at risk must be the 19,000 low income (80% or less of AMI) renter households who are crowded and living in physically poor housing. Of these high risk households, more than 7,000 also pay a severe rent burden of 50% or more of income for rent.

Overcrowded Renter Households

Overcrowded families represent a pool of precariously housed people who could potentially seek shelter at any time. According to the 2008 HVS the rate of crowding was particularly high among large related low income renter households (at or below 80 percent of AMI), at 66.5 percent crowded.

Institutional Discharges

Another population at risk of homelessness are those people who have been living in institutions and are discharged from these institutions. Correctional, psychiatric and medical institutions often discharge individuals from their systems who are at risk of homelessness. Hospitals and correctional facilities do not always have the time or resources to engage in significant discharge planning for people who are poor, or who have lost touch with friends and family due to a long institutionalization.

Without adequate discharge planning, these people are referred directly into the shelter system, or are expected to find their way into the shelter system. These individuals, usually due to the length of time in an institution, may be isolated and unable to cope with the stresses of daily life. For those released from psychiatric and medical hospitalizations, a congregate shelter setting may be inappropriate, where it may be difficult to monitor medication regimens, or where they are at risk of infection.

Relocated Families

A significant percentage of families in the shelter system have either never had their own home or have not maintained their own household for a long period of time before entering the shelter system. When these families move into permanent housing, they often move into a new and unfamiliar neighborhood without any service or familial linkages. Without the necessary independent living skills households may revert tendencies/practices which result in the families being unable to maintain proper housing.

Employment and Education

One of the causes of homelessness is the lack of affordable housing. The City does, however, recognize the need to ensure that formerly homeless families obtain independent living skills so that they may successfully maintain themselves in permanent housing when they move out of the shelter system into permanent housing. The provision of educational services is integral to the creation of employment opportunities for the heads of homeless families. Social workers, case managers, employment specialists, and vocational counselors work closely with clients to help them improve independent living skills, by providing individualized services meeting their needs in the areas of employment and educational planning.

Homelessness Prevention Programs

The Continuum of Care begins with the provision of preventive services to divert families from the shelter system whenever possible. The City's Human Resources Administration (HRA) Diversion Program provides diversion services to individuals/families in crisis, including assistance in obtaining entitlements or special needs allowances to pay "back rent" or other costs, referral to legal or apartment locating services, and mediation with families and friends who could provide accommodations. Homelessness prevention also entails working to stabilize neighborhoods by improving housing conditions and providing support services to tenants, including tenants of City-owned buildings.

The Family Eviction Prevention Supplement (FEPS) program is a shelter supplement designed to assist Cash Assistance (CA) eligible families with children in maintaining permanent housing by issuing them a shelter supplement in addition to the CA shelter amount. FEPS can last for up to five years (with an extension for good cause), as long as the household maintains CA and FEPS eligibility. Applicants/participants with a court proceeding concerning the nonpayment of rent can apply for FEPS through a New York State Office of Temporary and Disability Assistance (OTDA) authorized community-based organization (CBO), the Legal Aid Society or a Legal Services preparer, thereby avoiding homelessness.

HRA's Office of Housing & Homeless Services/Initiatives (OHHSI) manages several programs that assist HRA's CA applicants and recipients in maintaining affordable housing. OHHSI has established extensive linkages with other City housing agencies, including the New York City Housing Authority (NYCHA), the Department of Housing Preservation and Development (HPD) and the Department of Homeless Services (DHS).

Key OHHSI programs include the Homelessness Diversion Units (HDUs) including the HRA Diversion Annex at the DHS Preventive Assistance Temporary Housing (PATH) facility and the HRA Diversion Unit at the DHS shelter intake center for single male adults and adult families (East 30th Street), the centralized Rental Assistance Unit (RAU), and the Housing Court Units throughout the City. These homelessness prevention programs enable HRA to achieve one of its goals: assisting families and individuals at risk of homelessness by helping them maintain permanent housing, thereby (1) providing a stable housing environment that will support the family's efforts to achieve maximum self-sufficiency and (2) averting the family's entry into the City's homeless shelter system. In addition, these programs provide early and aggressive negotiations with landlords to reduce rent arrears expenditures for New York City and New York State.

Homelessness Diversion Units - are located at all Job Centers and at the Department of Homeless Services' (DHS) Preventive Assistance Temporary Housing (PATH) and the DHS East 30th Street intake center. The mission of these teams is to maintain families/individuals in permanent housing and avoid placement in the City's emergency shelter system. The Diversion Teams negotiate, intervene and advocate on behalf of families/individuals that are homeless or at imminent risk of homelessness. HDU staff evaluate and verify existing situations, discuss possible solutions and develop a "Diversion Plan," which includes possible long-term alternatives such as payment of rent arrears, apartment search services, grants for relocation costs, FEPS intervention, Section 8 reinstatement and other alternatives that maintain or secure permanent housing.

HDU staff interview all individuals/families identified as at risk of homelessness. Of the 69,307 cases through 6/30/11 referred to HDUs during CFY 2011, approximately 49,865 cases had their housing problems resolved. Of these, HDUs maintained permanent housing or found alternate living arrangements for 24,892 (49.9%). This compares with 24,892 of 42,865 (49.9%) families/individuals whose cases were resolved in CFY 2010.

Of those interviewed by HDUs at the Job Centers, 18,692 cases of families/individuals were found to be at imminent risk of homelessness during CFY 2011. HDUs maintained permanent housing or found alternate living arrangements for 16,844 (90.1%) of these families/individuals through the end of CFY 2011. For CFY 2010, comparable statistics were 18,877 of 19,998 (94.4%).

The HRA homelessness diversion team at PATH works to help applicant individuals/families find alternatives to the shelter system. In CFY 2011, the HDU at PATH diverted over 5,563 individuals/families from the DHS shelter system, compared to 5,338 in CFY 2010. In CFY 2011, the HRA Diversion Unit at the DHS East 30th Street intake center diverted 450 single male adults/adult families from the DHS shelter system.

HDU staff works closely with NYCHA to avert evictions for PA recipients with rent arrears. During CFY 2011, HDU averted 417 Housing Authority evictions for "at risk" cases referred by the Housing Authority. During CFY 2010, HDU averted 79.

Rent Arrears Alert (RAA) - In CFY 2001 HRA initiated the Rent Arrears Alert (RAA) Program. HDU staff coordinates this program, which is active at all Job Centers. The RAA Program is primarily focused on early intervention and works with tenants who receive CA and have rent arrears. RAA staff also enter into negotiations with landlords to help tenants remain housed. HRA considers the program to have been very successful in its negotiations with landlords. In CFY 2011, HDU and Rental Assistance Unit (RAU) staff negotiated on behalf of applicants for ongoing CA, recipients of CA, and applicants for "one-shot" assistance, a total of \$33,188,302 thru June 30, 2011 in reductions of past due rent arrears. During CFY 2010, staff negotiated reductions of \$28,779,325.

Rental Assistance Unit (RAU) - The Rental Assistance Unit (RAU) is a "safety net" to prevent families and individuals from becoming homeless. RAU staff prevents evictions caused by non-payment of rent by gathering and reviewing information on the extenuating circumstances that cause a particular CA applicant or recipient to be at risk of homelessness. RAU staff then makes a case-by-case determination whether to issue a grant to resolve the housing emergency. RAU staff works closely with the Housing Court and HDU staff. As part of RAU, Housing Court Liaison Unit (HCLU) staff are out-stationed at the City Housing Courts located in

all five boroughs. In addition, HCLU staff are stationed at the Harlem Community Justice Center and the Red Hook Court Justice Center. HCLU staff serve as liaisons between Cash Assistance recipients, landlords and Housing Court judges to forestall and prevent eviction. Staff interview families and individuals and make assessments of their housing problems to determine if evictions can be prevented. Based on the Housing Court liaison's assessment of a housing situation, recommendations for payment or referrals are made to the appropriate Job Center HDU.

During CFY 2011, RAU issued rental assistance grants for 30,802 cases totaling \$90,529,745. This compares to rental assistance grants for 30,288 cases totaling \$87,794,966 for CFY 2010.

Homebase Prevention Program (DHS) - Launched in October 2004, Homebase is a neighborhood-based homeless prevention program. This innovative model serves as a pro-active approach to decreasing the number of individuals and families entering the shelter system. Through Homebase, DHS is now providing services to households at risk of becoming homeless to all communities in New York City. These prevention programs provide an array of services including case management, mediation, independent living skills training, and offer flexible financial assistance to help stabilize families permanently or temporarily while more suitable living arrangements can be found. These services are available to both individuals and families.

With the expansion of Homebase to a citywide model, the program offers community-based prevention services, rapid rehousing from shelter, as well as aftercare services to those households return to the community from shelter through the Advantage New York Housing subsidies. There are now 11 Homebase prevention contracts charged with assisting those at-risk, particularly non-lease holding individuals and families in "doubled up" living situations, through targeted services and financial assistance.

The Homebase providers are Ridgewood Bushwick Senior Citizen's Council serving Brooklyn Community Districts 1, 4, 16; Church Avenue Merchants Block Association serving Brooklyn Community Districts 2, 3, 6-15, 17 and all of Staten Island; Bronxworks serving Bronx Community District 4, HELP USA serving Bronx Community Districts 1, 3, 5-8; Catholic Charities Neighborhood Services serving all of Queens and East New York, Brooklyn; Palladia serving all of Manhattan, and Catholic Charities Community Services serving Bronx Community Districts 2, 9-12. As of July 2012, Homebase has served over 36,000 community clients and over 90% served to date have not entered the shelter system. This initiative is part of DHS' commitment to strengthen neighborhood based services and foster community based solutions to homelessness. Federal funding from HUD through the Homeless Prevention and Rapid Rehousing Program (HPRP) has provided a significant portion of funding to support these initiatives in CFY10, CYF11, and CFY12.

Populations eligible for homeless prevention include individuals and families who are currently in housing but are at risk of becoming homeless; they may need temporary rent or utility assistance to prevent them from becoming homeless or assistance to move to another unit.

Family Anti-Eviction Legal Services - DHS has 10 anti-eviction legal service contracts funded at 6 million dollars. The program is called the the Homelessness Prevention Law Project (HPLP). Services include appearances at judicial and administrative hearings, trials, appeals, and other such forums as required to settle or try eviction cases, factual investigations; inquires into whether a tenant's rent level is correct, whether there are conditions which require repair, and whether these constitute defenses to a proceeding; legal research; preparation and filing of required agency and court papers; drafting briefs; ongoing client contact, including follow-up interviews, when appropriate; and institution of appropriate remedial actions; assistance with pro se documents; drafting letters; and negotiations with landlords and/or other advocacy assistance.

In 2009, New York City commissioned the first rigorous evaluation of homelessness prevention in the country that includes a random control trial, a quasi-experimental design study, hazard modeling and ecological regression analyses. The research team from Columbia University, Abt Associates, Vanderbilt University, University of Pennsylvania and the City University of New York found:

- There are five critical characteristics of families who enter shelter and by screening people for these characteristics; NYC can improve its ability to predict who will enter shelter by 30 percent.
- Researchers have confirmed that there are no barriers too high to serve with prevention services. HomeBase is at its most effective serving the most at-risk families.

DHS has used these findings to develop a screening tool in order to assess an individual’s risk of entering shelter. Prevention services will only be provided to those found to be most at risk of entering shelter.

Prevention Risk Factors While HUD's definition of homelessness is well-understood, it can be more challenging to identify persons who are housed but who have a very high risk of becoming homeless. Through the research described above, DHS’s risk assessment tool screens clients for the following human capital, demographic, and housing variables. These risk factors are grouped by how they are weighted on the screening tool:

- Low-weight risk factors: Pregnancy, having a child under age 2, no high school diploma/GED, no current employment, not a lease holder, reintegrating into the community, aged 23-28, 1-3 moves in the last year, 1-2 disruptive childhood experiences, moderate discord with landlord/leaseholder/household.
- Medium-weight risk factors: Receiving PA, involved with protective services, evicted/asked to leave, applied to shelter in the last 3 months, 22 years old or younger, 4 or more moves within the last year, moderate to severe discord with landlord/leaseholder/household
- Highest-weight risk factor: Previous shelter history as an adult.

Using the tool to assess risk and then future shelter entry, the study did show that “even at the highest level of measured risk, a majority of families managed to avoid shelter.” (Shinn, M. & Greer, A.L, 2011) Thus, those determined to be at the highest risk of entering shelter are provided with the most services.

Family Eligibility

Families who have been exclusively assessed using DHS’s risk assessment and who:

- a. Are at imminent risk of homelessness and
- b. currently reside or are taking up residence; or are returning to a residence after a period of less than 90 days during which they have resided in an institution (e.g., correctional, substance abuse treatment, mental health, etc.) or have been living on the street or living in shelter;
- c. are experiencing a significant threat to their housing stability and is at risk of entering or re-entering shelter due to such factors as:
 - i. a shared living arrangement where there is significant overcrowding or discord; or
 - ii. the commencement of legal action that threatens to terminate the client’s residency; or
 - iii. a need to stabilize housing where the client has reintegrated into the community after moving out of a shelter or other institution;
 - iv. or the end of an existing housing subsidy or is at risk of losing the subsidy.
- e. Household income must not exceed 30% of Area Median Income.

Individual Eligibility

Households without children who have been exclusively assessed using an evidenced-based risk assessment instrument provided by DHS and who:

- a. Are at imminent risk of homelessness and
- b. currently reside or are taking up residence; or
- c. are returning to a residence after a period of less than 90 days during which they have resided in an institution (e.g., correctional, substance abuse treatment, mental health, etc.) or have been living on the street or living in shelter;
- d. are experiencing a significant threat to their housing stability and is at risk of entering or re-entering shelter due to such factors as:
 - i. a shared living arrangement where there is significant overcrowding or discord; or
 - ii. the commencement of legal action that threatens to terminate the client's residency; or
 - iii. a need to stabilize housing where the client has reintegrated into the community after moving out of a shelter or other institution;
 - iv. or the end of an existing housing subsidy or is at risk of losing the subsidy.
- e. Household income must not exceed 30% of Area Median Income.

Rapid Re-housing

Rapid re-housing assistance is available for persons who are homeless according to HUD's definition and ***for whom*** the ESG assistance can be used within the first 10 days of a shelter stay to re-house the family. Households that meet one of the following criteria in addition to the minimum requirements specified in the following section (Eligibility Determination) are eligible for ESG rapid re-housing assistance:

- o Sleeping in an emergency shelter;
- o Sleeping in a place not meant for human habitation, such as cars, parks, abandoned buildings, streets/sidewalks;
- o Staying in a hospital or other institution for up to 90 days but was sleeping in an emergency shelter or other place not meant for human habitation (cars, parks, streets, etc.) immediately prior to entry into the hospital or institution;
- o Graduating from, or timing out of a transitional housing program; and
- o Victims of domestic violence.

b. Homeless Families with Children and Homeless Adult Families without Minor Children

The Division of Family Services oversees the emergency family shelter system for families with children or pregnant women in New York City. The Division of Adult Services provides services to adult families without children who are a legal family through marriage or verifiable co-dependence.

In City Fiscal Year (CFY) 2011, families with children constituted 86% of the total number of families in the DHS shelter system, adult families (without children) constituted 14%. A total of 27,156 families were provided shelter with 78,193 individuals making up those families. Approximately 55% of these family heads of household were African-American, 38% were Hispanic, 2% were White, .7% were Asian and Pacific Islander, Native American, or Alaskan and 4% were of unknown race or ethnicity.

In CFY 2011, a total of 3,820 adult families were provided shelter. Approximately 55% of these family heads of household were African-American, 34% were Hispanic, 6% were White, .7% were Asian and Pacific Islander, Native American, or Alaskan and 3% were of unknown race or ethnicity.

Emergency Services: DHS Intake Centers

DHS operates two separate family shelter intake locations. The first is the Prevention Assistance and Temporary Housing (PATH) Intake Center for families with children and pregnant women and the second location is the Adult Family Intake Center (AFIC) for adult families without minor children. PATH is located in the Bronx and AFIC is located in Manhattan.

PATH Intake Center. In CFY 2011, 22,726 unique families applied for shelter at PATH. After requesting shelter, a family may be given a ten-day conditional stay, while their application is reviewed in order to determine the family's eligibility for temporary housing. Families re-applying for shelter within 90 days of a determination that they have other housing available will not receive shelter during the review of their application for temporary housing assistance unless they demonstrate an immediate need for shelter. All eligibility determinations are evaluated by PATH Eligibility staff.

In May 2011, PATH opened in a new state of the art facility. With more than 75,000 square feet, the new Prevention Assistance and Temporary Housing (PATH) facility has 213 percent more space than the original intake site, and houses more than 200 specialists from the Department of Homeless Services, Administration for Children's Services and Human Resources Administration.

PATH is open 24 hours per day, including weekends and holidays. PATH processes applications during business hours (9 a.m. to 5 p.m.). Families who apply after 5 p.m. may be assigned a temporary shelter placement for the night and transported back to PATH the next morning to complete their application.

In addition, PATH offers the following social services on-site:

- Diversion services – HRA's Homelessness Diversion Unit meet with all families to assist them in avoiding shelter altogether, including exploring services such as anti-eviction legal services, one-shot deals, FEPS, and out-of-City relocations services.
- Medical assistance – Contracted staff screen clients for pregnancy, contagious illness, or other current and significant medical conditions to guide staff in determining medical priorities for intake and placement purposes.
- Domestic violence - HRA's No Violence Again (NoVA) office provides DV crisis counseling and placement into DV shelters for families who are eligible for those services.
- School-related supports through the Department of Education (DOE).
- Family support services through the Administration for Children's Services (ACS); services include family counseling, substance misuse counseling, child welfare housing subsidy information, as well as childcare and parent training services.
- Resource Room - DHS social workers transition applicants found ineligible for shelter services to return to available housing option(s) and/or access community-based organization services.

Adult Family Intake Center (AFIC). AFIC processes all emergency housing applications for adult families without minor children. In CFY 2011, 2,115 unique adult families applied for shelter at AFIC. The goal of AFIC is to expedite the intake process and improve the delivery of services for the adult family population applying for temporary housing. After a restructuring in early 2009, the Division of Adult Services began overseeing the operations at AFIC.

Transitional Services: Families with Children

Homeless families (adults with minor children or pregnant women) receive services in transitional family residences that come in a variety of models, most of which offer apartment style units and a wide array of support services including employment training, educational services, intensive case management, substance abuse prevention, independent living skills training, and child care. All families are expected to work cooperatively with shelter staff to develop a mutually agreed upon independent living plan.

As of August 16, 2011, the Division of Family Services provided temporary shelter in 79 Tier II shelters, 53 hotels, and 11 cluster sites. Of these facilities, 5 are being operated directly by DHS.

The average number of families with children in shelter per day in CFY11 was 8,165, a decrease of 5% from CFY10.

Tier II residences are operated by the varying non-profit members of the service provider community in NYC. The vast majority of these providers are also represented as members of the NYC Coalition on the Continuum of Care. A comprehensive list of our non-profit provider partners is located on the DHS website <http://www.nyc.gov/html/dhs/html/providers/providers.shtml>.

Transitional Services: Adults Families (Families without Minor Children)

Transitional housing assistance and services for the majority of adult families are provided in adult family residences. Beginning in 2009, operations for adult families moved to the Division of Adult Services. This division oversees 14 adult family residences.

The average number of adult families in shelter per day in CFY11 was 1,315.

Supportive Services

Employment Services - The ability of a homeless family to find and maintain a job is key component to independent living and securing permanent housing. To ensure families receive the services they need to seek, secure, and maintain employment, shelter providers offer a variety of employment related services: resume writing, job readiness training, mock interviews, budgeting and parenting workshops, etc. Some facilities are able to offer on-site programming, while others refer out to community agencies, or City-sponsored programs.

HRA plays a major role in the addressing the employment needs of our families. Through the Back To Work and WEP programs, adults are given work experience that may lead to employment. HRA also offers links to employment vendors at their 109 East 16th Street offices. Families can walk in and interview with vendors, complete employment assessments, get resume assistance and complete on-line job searches. HRA and DHS have collaborated and maximized resources on two Job Fairs provided solely for homeless families. DHS continues to work with HRA to ensure adults are given various opportunities for employment so they can ultimately move back into the community.

HRA also provides detailed information to DHS on families' case status and benefits, so that both agencies can work together to make sure our families are in receipt of all the benefits and public assistance they are entitled to and are made aware of any pending actions on their public assistance case, such as closure or sanction.

Education Services - DHS transitional family residences provide assistance in the area of educational planning, primarily through individual counseling. Education services at the shelters help adults to access GED programs, fill out enrollment forms, set educational goals, and utilize community educational and vocational training resources for themselves and their children. DHS works closely with on-site liaisons from the Department of Education to ensure all school-aged children are enrolled and attending school. In 2010, the City launched an Interagency Task Force to improve school attendance with an emphasis on students in shelter. The initiative incorporates increased data sharing between the Department of Education and the Department of Homeless Services to monitor and address students with poor attendance, designated education and shelter liaisons, and special initiatives to assist students in shelter with homework.

Mental Health Services - DHS is initially informed of families with mental illness through self-report – at PATH or once intake is completed at a shelter - which may or may not include information on those family members who have been treated at clinics, or those who have never sought treatment. While some DHS shelter system programs offer mental health services on-site, all of the facilities have the ability to refer clients to mental health services in the community as needed, through medical linkage agreements with community-based health care providers. Through the NY/NY III Supportive Housing program, families with mental health issues may qualify for permanent, supportive housing.

Substance Abuse Services – Transitional facilities in the family system make referrals to Substance Abuse programs in the community for any family that demonstrates a need for substance abuse treatment. Through the NY/NY III Supportive Housing program, families with substance abuse issues may qualify for permanent, supportive housing.

Extra Support Services - DHS' Next Step Program provides a very intensive level of social services to families in need. DHS operates 2 Next Step shelters and oversees 3 contracted Next Step Shelters, brought on in June 2010. Case workers in these 5 sites have a small case load that enables them to provide more attention and time to these families. Next Step families are escorted to all appointments, meet with case workers more frequently than in other shelters, and have limited recreation offerings so that they maintain focus on moving to permanent housing. Through May 31, 2011, 364 families with children participating in Next Step moved out of shelter into the community, on average, in 4.8 months after having been in the system 12.6 months before coming to Next Step.

Permanent Housing

The transition to permanent housing completes the continuum of care for families. Homeless families are assisted in accessing services to return to the community. Beginning in 2007, DHS collaborated with NYS Office of Temporary and Disability Assistance (OTDA) and HRA to implement a rental subsidy, Advantage New York. Advantage, administered in conjunction with HRA, was a portfolio of rental assistance with a strong work emphasis. More than 20,000 families exited shelter with the Advantage program. As a result of the 2011-12 New York State budget which withdrew funding for the Advantage program, the program was discontinued in March of 2011. The status of families currently in receipt of the Advantage supplement is in litigation.

Currently, families are supported in accessing temporary cash assistance, employment and work supports in order to exit shelter and live in the community. Employment is a cornerstone of DHS's efforts to help homeless New Yorkers move back to independence. DHS has a strong collaboration with the Human Resources Administration to connect families to its training and job placement services to help families gain sustainable employment and self-sufficiency.

The ESG funds that are used under the services to homeless families and supportive housing are deployed to address the priorities set by the New York City Coalition on the Continuum of Care. Through ESG, DHS continues to address homelessness issues in the city.

Between CY 2010 and CY2011, the number of families entering shelter declined by 15%. Based on the success of homelessness prevention funded by HPRP, DHS has prioritized this activity. DHS believes that successful targeting of high-risk clients for homelessness prevention, combined with effective diversion early in the shelter stay, will result in an overall reduction in the number of shelter entrants. Similarly, DHS believes effective aftercare services for clients who have exited shelter is critical for keeping clients housed. By allocating funding through our award-winning HomeBase programs, eligible participants will have access to short- and medium-term financial assistance, housing relocation and stabilization services, benefits advocacy, and case management services and will ensure more families and individuals stay stably housed in their communities and avoid the need for emergency shelter. DHS and its partners strongly believe that shelter should be used on an emergency, short-term basis. Therefore, strategies that either prevent homelessness in the first place or reduce the length of time that individuals reside in shelter are key priorities.

c. Homeless Individuals

The Division of Adult Services oversees the Agency's shelter system of emergency and transitional housing facilities for single adult men and single adult women. As of the end CFY 2011, there are 58 facilities with 8,818 beds in use. There are 28 facilities for women (2,630 beds) and 38 for men (6,188 beds), seven of which are co-ed facilities. Six of these facilities are operated directly by the Department of Homeless Services and the rest are operated by non-profit organizations under contract with DHS. In CFY 2011, an average of 8,387 single adults (5,883 men and 2,503 women) resided in the shelter system each night and a total of 31,982 unique individuals were provided temporary housing during the year. 51% of these individuals are African American, 26% Hispanic, 9% White, 1% Asian or Pacific Islander, Native American or Alaskan, and 13% were identified as other or unknown.

Adult Services is organized into five main functional areas: *street homelessness solutions; shelter operations; adult families and veteran services; housing and program planning; and planning and administration.*

Outreach Services

Street Homelessness Solutions. In September of 2007, the NYC Department of Homeless Services (DHS) and the Department of Health and Mental Hygiene (DOHMH), reconfigured the provision of services to street homeless individuals. DHS and DOHMH terminated their former contracts and issued a joint RFP representing a new vision for Outreach and Housing Placement Services. Both agencies combined their outreach funding (approximately \$11 million), which previously was contracted to over a dozen different providers, and has now redistributed this funding to four new providers – each accountable for achieving a reduction in the street census in their respective borough-based areas. The providers have performance based contracts with the City through which milestone payments are earned through the placement of chronically street homeless clients into housing.

The outreach providers, embracing a Housing First and client choice philosophy, work with individuals on the street to help them obtain housing that is not necessarily conditioned on commitment to sobriety or program participation. DHS has been working to increase the housing placement options for the street homeless population. To this end, DHS has created over 449 Safe Haven units across the city since 2008. These facilities, much like the HUD-funded Safe Havens, are low threshold models. Clients must be chronically street homeless to be eligible and are solely referred in by outreach teams. DHS has also been identifying and developing other new resources including stabilization beds. These facilities, similar to Safe Havens are low threshold, smaller and more private but are for clients who are more stable than those entering a Safe Haven. In many cases, clients in stabilization beds are in the final stages of obtaining permanent housing.

Many outreach programs coordinate their services with the four DHS funded and one HUD funded drop-in centers throughout New York City. These drop-in centers have the capacity to serve 550 individuals per day. Drop-in centers primary mission is to provide interim housing to street homeless individuals. In CFY 2011, drop-in centers housed 598 clients. Drop- in centers also provide homeless individuals with meals, counseling, medical/psychiatric services, showers, laundry facilities, some clothing, recreational activities, referrals for employment, assistance in applying for benefits, and other social services for adults in New York City. Two Drop in Centers operate 24 hours a day seven days per week, the remaining three Drop in Centers adhere to a new model in which operation begin at 7:30 AM and ends at 8:30 PM. The new model is intended to reduce and eventually eliminate the incidence of clients sleeping in chairs. As such, DHS has entered into contract with community based organizations that coordinate a network of overnight accommodations in churches and synagogues around the city. This Faith Based Network includes over 100 churches and synagogues and provides on average 340 beds each night during peak cold -weather season (November through March). Services at these respite beds include overnight sleeping areas, dinner or snacks and continental breakfast. The respite sites serve on average between 6 to 15 individuals and are staffed primarily by volunteers. Clients are transported to and from these respite beds every night before the drop in centers are closed for the day.

Since 2005 the Department of Homeless Services has conducted an annual city-wide estimate of the street homeless population, the Homeless Outreach Population Estimate, or HOPE. The point-in-time count, conducted every January, requires DHS volunteers to methodically survey the City's streets, parks, and subway stations and trains. The results provide a consistent measure of the agency's progress toward reducing the number of people sleeping on the streets, and are used to evaluate and strengthen outreach strategies.

In HOPE 2011, DHS estimated 2,648 unsheltered individuals. This is a 40% decrease from the 2005 baseline estimate of 4,395 individuals, and a 15% reduction from the 3,111 estimated in 2010.

Intake & Assessment Services

At Intake new admits into the shelter system and clients who have been out of the system for longer than one year are processed and assigned an identifying HA number. All adult clients are enrolled in our AFIS finger-imaging database system that attaches a 5-point finger image to each client's picture in the database. *Intake* is also comprised of a basic information-gathering process and placement into an assessment bed. Beginning in

May 2009, DHS implemented a strong diversion component at intake, where clients' resources are assessed with the goal of returning them to their families or other appropriate settings. If a diversion is not possible, the client is assigned to an assessment bed. DHS operates one intake facility for men and two intake facilities for women. The three goals of Assessment include the completion of the Applicant Intake Document (AID), a physical exam, and a brief psycho-social assessment. These completed deliverables are tools utilized to best determine the most appropriate shelter placement for each individual based on their service needs. The Assessment process can be completed as soon as the three deliverables are achieved. In 2009 DHS transformed one assessment site for men into an employment program that includes short-term housing beds and criminal justice beds for men. There are three assessment sites for men remaining.

Discharge Planning Policies

DHS also coordinates local discharge planning policies that ensure persons are not routinely discharged into homelessness, including the streets, emergency homeless shelters, or other homeless assistance housing programs.

Foster Care (Youth Aging Out): The NYC Administration for Children Services has a policy in place that prohibits youth from being discharged to homelessness. ACS caseworkers and contracted non-profit foster care providers are required to develop an individualized discharge plan that prevents homelessness. Youth are discharged to Independent Living and Transitional Housing programs that support youth in making the transition to independence. Youth aging out of care are prioritized for permanent supportive housing through NY/NY III; 200 units have been designated for this population and ACS serves on the NY/NY III Oversight Committee. Youth aging out of care are also prioritized for NYCHA public housing and NYCHA Section 8 vouchers, when available. For youth with SMI coming from OMH institutions that are in the care of the State, staff at nonprofits use OMH's Children's Single Point of Access (SPOA) to secure housing.

Health Care: DHS has a policy in place which requires that all possible placement avenues are explored prior to hospital discharge, and that a shelter placement or referral to outreach teams is seen as the last resort. DHS Office of Health Care Policy and Administration (OHCPA), in collaboration with representative hospital staff from the Greater New York Hospital Association, implemented a process for discharges from all hospitals in the greater New York area and other medical and psychiatric facilities to the DHS shelter system. Under this process, hospitals communicate directly with DHS shelter staff via DHS discharge forms regarding appropriate discharges of their shared patients/clients. This allows for a quicker review and placement process for clients and serves to identify those who are medically inappropriate for shelter placement so that alternative living arrangements can be made. These can include prior living arrangements, return to family, nursing home, or other facility that is suited to meet the individual's medical needs.

Mental Health: There are several policies in place to ensure that the mental health system is not discharging persons to homelessness. DHS has a policy in place which requires that all possible placement avenues are explored prior to hospital discharge, and that a shelter placement or referral to outreach teams is seen as the last resort. The NYC Health and Hospital Corporation (HHC) Hospitals are prohibited from discharging mentally ill patients to shelter by the Koskinas lawsuit and must develop a housing plan for discharge. NYS OMH has mandated a non-discharge to homelessness policy and must document that all efforts were made to place the client outside the shelter system and that they have followed-up with and residences for which the patient was on a waiting list. OMH also has a SPOA for all patients leaving hospitals to ensure that mental health housing is secured upon discharge. Clients are discharged to community residences, non-homeless supported housing (not for the homeless) and OMH housing for people with mental illness. The acute care hospital is expected to apply for Assisted Outpatient Treatment (AOT) for all eligible homeless inpatients. DHS coordinates with DOHMH and HHC-specific AOT teams to work towards discharge to supportive housing, instead of shelter. CoC providers will be monitored through the Evaluation Tool to ensure that they are only serving eligible clients. OMH and DOHMH are active, voting members of the CoC Steering Committee.

Corrections: NYS DOC has a policy in place that prevents discharge to homelessness. DHS works with DOHMH's Forensic Behavioral Health Services to accommodate Brad H Class members released from Riker's

Island into DHS shelter system, assisting DOHMH in implementing their discharge plan from Riker's and connecting these clients to mental health services within the community. Inmates with mental illness use the OMH Single Point of Access (SPOA) to access mental health housing including Community Residences, Single Room/Community Residences, Apartment Treatment and Supported Housing. Discharge Planning protocols continue to be improved through New York City's discharge planning collaboration initiated seven years ago which includes DHS, DOP, DOC, and DOHMH. As part of this collaboration a program targeting frequent users of shelter and jail for services and supportive housing and an effort to expedite connection to benefits for clients upon release from jail was created and has been successful at ending the jail/homelessness cycle for many individuals. DHS's HPRP-funded community-based prevention program, Homebase, is onsite at Riker's Island to assist inmates to reconnect to housing and community resources. CoC providers will be monitored through the Evaluation Tool to ensure that they are only serving eligible clients.

Correctional Review Unit - In response to the Brad H., et al. v. the City of New York, et al. litigation, the NYC Department of Homeless Services (DHS) Correctional Review Unit (CRU) of the Office of Health Care Policy and Administration, together with the New York City Department of Health and Mental Hygiene (DOHMH), through the Division of Health Care Access and Improvement's Correctional Health Services Program (CHS), work collaboratively to place sentenced, Brad H Class Members from jail, directly, into a DHS program shelter, immediately upon their release, provided that a bed is available in a designated mental health shelter, the Class Member arrives, before curfew, on the day of release, and DHS has received clinical information, prior to the individual's release, detailing the person's need for a program shelter. Seriously and persistently mentally ill individuals are placed in mental health shelters, as capacity exists, and as DHS learns of their arrival in the shelter system. The CRU has access to the DOHMH-Division of Mental Hygiene's Brad H database, "Citrix", and obtains daily reports, which identify those homeless class members, who are due to be released within the next week, as well as those who have been released within the past 30 days. DHS tracks these individuals, on a daily basis, to see whether they've arrived at DHS, as well as alerting all intake sites to their possible arrival. Additionally, when homeless, sentenced, Brad H. Class Members, who are severely and persistently mentally ill (SPMI), have consented to release medical documents to DHS, and have orally agreed to be transported to a DHS shelter, upon release from jail, a "Transportation List" is sent to DHS, and the receiving shelter or Intake is notified of the Class Member's impending arrival; if the Class Member was projected to come to DHS and DHS received clinical information about the Member, if capacity exists, a mental health bed would be assigned to that individual, prior to his arrival. The CHS unit routinely provides CRU with document packets for Brad H. Class Members, who appear on the DHS transportation list, within 3 days before discharge. The documents may include information from Riker's Island Intake System, such as a history and physical, problem list, medication list, discharge plan, aftercare letter, psychiatric assessment, psycho-social summary, and HRA 2010e housing application and approval, if available. CHS provides the documents to CRU, which, in turn, forwards them to a designated mental health program shelter staff, in their efforts to develop an independent living plan for that client, with the immediate goals of obtaining income, identifying available permanent housing options, and providing medical and mental health aftercare linkages in the community, so, that the client may move to his own permanent residence, independent of the shelter system. DHS generates monthly reports on the activity of the CRU, including numbers of sentenced Brad H. clients, who have come into the shelter system, and where they were placed.

Transitional Services

From Assessment Centers, homeless single adults are referred to one of the 58 transitional shelter residences and two short-term housing residences (both of these are specifically for veterans). All beds in the single adult shelter system are associated with program services, including assessment, employment training, "rapid-rehousing," mental health rehabilitation, and substance abuse treatment. Many shelters offer case management and other services aimed at assisting residents to return to independent living in the community. Social workers, case managers, employment specialists, housing benefits counselors, on-site medical staff and vocational counselors work closely with clients to help them become independent. An individualized approach is implemented to provide clients with the services needed to achieve their highest level of self-sufficiency. Federal ESG funds are used to support social service programs at sixteen of these transitional shelters. Three of these transitional shelters are Next Step shelters.

The Next Step Program offers a more structured and service-intensive environment for clients who have been unsuccessful at completing the goals of their independent living plans. It is a highly structured environment incorporating intensive case management and additional program components where clients will receive specialized assistance to achieve the goals of their independent living plans. Services are delivered in a consistent, intensive, and respectful manner with the objective of returning the client to independent living as quickly as possible.

Supportive Services

Employment Services: DHS coordinates employment training for shelter residents, including providing innovative employment programs, some of which are specifically designed for substance abusers. DHS contracts with non-profit providers to assist residents with employment readiness, including career counseling, job search assistance, and placement services. The Doe Fund operates two substance free shelters, and stresses the importance of saving money and returning to living independently. The Bowery Mission accepts clients who are either employed or employable and works with the individuals to maintain their employment status.

DHS contracts with non-profit providers to assist residents with employment readiness including career counseling, job search assistance, and placement services. These programs are highly structured and aim to give individuals in the shelter system, the skills they need to take advantage of employment program shelters. Another employment program overseen by DHS is an employment support program. This is a program designed for men who have been employed for at least a month and who are committed to the goal of independent living. The program provides support in the areas of maintaining employment, housing assistance, and budgeting and saving. Several employment programs are designed for substance abusers, and integrate working into the recovery process. DHS also has a contract under the U.S. Department of Labor Job Corps program to provide educational and vocational training for homeless young adults between the ages of 18 and 24. Most of these contracted employment programs are also eligible to receive incentive payments for placements above their contractual targets.

Educational Services: Job training programs require a strong basic skills component. DHS operated or contracted facilities provide GED classes either on or off site as well as refer clients to other educational services in the community to prepare clients for employment responsibilities.

Mental Health Rehabilitation: There are a number of existing programs for shelter residents who are identified as being mentally ill. Most of these programs are operated by non-profit organizations and are funded with City, State, and Federal dollars. ESG funds are used by DHS to help support mental health programs at adult transitional residences in the DHS system. In CFY 2011, these facilities served a total bed capacity of 2,130 for individuals with mental illness. All mental health programs are funded to include psychiatric clinicians working on-site, including psychiatrists, psychiatric nurse practitioners, psychiatric social worker and other appropriately licensed mental health professionals. In some facilities, the New York State Office of Mental Health (OMH) provides evaluation, referral, and mental health services in the single adult shelter system, while at other sites providers contract with licensed mental health providers to bring such services on site. The DOHMH Mobile Crisis Teams also assist in evaluation and emergency transport of clients and the provision of emergency care as necessary. Some of the mental health programs provided include Community Support Services (CSS), Mental Health Rehabilitation Programs, Transitional Living Communities (TLCs), and Services for Mentally Ill Chemical Abusers (MICAs).

CSS programs are clinical case management programs that identify residents with serious and persistent mental illness and try to engage them in treatment. They provide a comprehensive array of services in a flexible, low-demand environment. The primary goal of CSS programs is to help clients develop the skills necessary to move into permanent housing or into a transitional program that will lead to permanent housing. TLCs also provide mental health rehabilitation services to seriously mentally ill homeless persons. The TLC program model is administered via contract by non-profit agencies with oversight from DHS and the DOHMH's Division of Mental Hygiene. The goal of the TLC model is to place individuals into permanent housing by providing a

structured transitional rehabilitative environment within the shelter system. These programs are funded through State Community Support services dollars and City expense funds.

The mentally-ill chemical abuser (MICA) programs provide case management, mental health, and substance abuse counseling to clients who are dually diagnosed with mental illness and substance abuse problems. The ten MICA programs in the adult system also provide on-site medical and psychiatric assessment and/or treatment, assistance in obtaining benefits and appropriate housing placements. The goal of the program model is to stabilize clients, to provide the support services and structure necessary for them to maintain a drug free lifestyle, and to make the transition from shelter to appropriate housing.

DHS oversees one reception center that is operated by a non-profit provider that serve the medically frail and mentally ill. This center provides low-demand mental health programs, similar to the federal "Safe Havens" model for seriously mentally ill clients. This center has enhanced staffing, with physicians and nurses on-site, and offer beds and a wide variety of services. In order to draw in more service-resistant street homeless individuals who could benefit from the center, the center coordinates with outreach teams to identify suitable clients.

Specialized Services for Veterans: In 2007, DHS remodeled the Borden Avenue Veterans Residence into a short term housing facility for homeless male and female veterans. Clients have their own private spaces at the newly designed facility, and residential "neighborhoods" create a community-like feeling. Beginning in July 2008, the non-profit provider the Institute for Community Living (ICL) took over the contract for the facility and the new short term housing program began. The Borden Avenue residence located in Long Island City provides an array of social services for this population. In May 2008, DHS, in partnership with the Veterans Administration, opened Project TORCH as a single point of intake into shelter for homeless veterans in the City. DHS staff work at Project TORCH alongside VA staff to provide an array of social services and permanent housing placement services to homeless veterans. In April 2009, The Doe Fund transformed over 100 beds in its Porter Avenue Residence into short term housing beds for homeless veterans, making over 350 short-term housing beds for homeless veterans available through DHS.

Substance Abuse Treatment: It is difficult to provide an accurate count of the number of adult residents who are in need of drug rehabilitation and treatment. In order to provide residents with the opportunity to live in a drug-free environment with supportive services, DHS oversees the operation of a number of residential substance abuse treatment programs within its contracted and directly run sites, and transitional housing programs. As of the end of FY2011, 13% of shelter beds were designated for clients in need of substance abuse programming.

A number of different program models are available in the shelter system for clients who are chemically dependent. These programs are designed to address substance abuse issues through intensive on-site services, as well as referrals to community-based day programs. On-site programs include Clean and Sober programs, modified Therapeutic Communities (TC's), Supported Work Programs (SWP's), Re-Entry programs, and Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings.

Clean and Sober programs complement community-based day treatment program attendance, by providing shelter-based support services in the evening. ESG funds are used by DHS to fund substance abuse counselors at two adult transitional facilities. These counselors assess clients, refer them to appropriate outpatient services, and support them on-site with relapse prevention programs and group counseling.

A therapeutic community (TC) is a highly structured program model. TC's offer various ancillary services, including vocational training, educational services, life skills training, HIV education, group and individual counseling, and legal assistance.

SWPs (Supported Work Programs) are site-based programs based on the Alcoholic Anonymous 12-Step philosophy, which integrate a progressive work component providing a graduated salary-stipend into the recovery model. Intensive individual and group counseling are used to enhance the substance abusers

commitment to recovery, and assist them in attaining financial independence, and making the transition into the community.

Specialized Case Management - The demand for specialized case management is apparent given the high rates of mental illness and substance abuse, as well as other social and medical problems among shelter residents. Strong counseling and case management services enable programs to promote independent living by providing clients with on-site support with linkages to appropriate community-based follow up services. Specialized case management is available to varying degrees in the mental health, substance abuse, and employment program shelters.

Health Services

Family shelters are required to have medical linkages with community-based health providers where families can go for medical and mental health care. There are several on-site medical clinics, funded through federal Health Care for the Homeless grants, in family shelters. In some contracted and directly-run Adult Services shelters, DHS facilitates clients' access to health care by funding directly, or via sub-contract, on-site medical services. Additionally, on-site psychiatric services are available at all single adult assessment sites, mental health/MICA shelters, and some shelters caring for older clients or those suffering from substance abuse disorders.

The Office of Health Care Policy & Administration works collaboratively with various Bureaus of DOHMH, to ensure that public health in the family and single adult shelter systems is properly addressed and optimized. The DOHMH Bureaus include Communicable Diseases; HIV/AIDS Prevention and Control; Immunization; Environmental Disease Prevention, including Lead Poisoning Prevention Program; Epidemiology Services; Bureau of Vital Statistics; Bureau of Mental Retardation and Development Disability Services; Bureau of Alcohol and Drug Prevention, Care and Treatment; School Health; Tuberculosis Control; Chronic Disease Prevention; Tobacco Control; Maternal Infant and Reproductive Health; Office of Emergency Preparedness and Response,; and the Division of Health Care Access and Improvement.

DHS works, especially, closely, with the DOHMH's Bureaus of Communicable Diseases and Immunization to address individual client's health concerns, to promote immunization as the best preventive measure, or, at times, to contain outbreaks of infectious illnesses and to prevent their spread.

DHS also works with the DOHMH's Bureau of Tuberculosis (TB) Control. Monthly, DHS and Bureau of TB Control perform a data match to identify shelter clients, who might have been lost to follow-up care for TB. Efforts are made to bring these clients back in treatment. If ever there is a reported case of TB, among the homeless population, DOHMH BTBC and DHS coordinate care for that individual, contact investigations, as necessary, and follow-up testing and treatment.

DHS works with Division of Mental Health (DMH). DHS matches, monthly, with DMH's database of clients enrolled into the Court-mandated Assisted Outpatient Treatment (AOT) program, to monitor AOT clients entering the shelter.

Also, within the same Division, DHS works with the Bureau of Alcohol and Drug Prevention, Care and Treatment to train shelter and street outreach staff about ways to reverse an opioid overdose, by using intranasal naloxone, in an attempt to prevent death related to opioid use. Individuals who successfully complete the training are certified as Trained Overdose Responders.

DHS works with DOHMH's Forensic Behavioral Health Services to accommodate Brad H Class members released from Riker's Island into DHS shelter system, assisting DOHMH in implementing their discharge plan, from Riker's, and connecting these clients to mental health services within the community.

DHS works with DOHMH's Division of Health Care Access to ensure the latest changes to Medicaid regulations are quickly disseminated to individual shelters, thus, preventing lapses in coverage of shelter residents, who are on Medicaid.

Effective July 1, 2010, DHS Office of Health Care Policy and Administration (OHCPA), in collaboration with representative hospital staff from the Greater New York Hospital Association, implemented a process for discharges from all hospitals in the greater New York area and other medical and psychiatric facilities to the DHS shelter system. Under this process, hospitals communicate, directly, with DHS shelter staff, via faxed, DHS discharge forms, regarding appropriate discharges of their shared patients/clients. This allows for a quicker review and placement process for clients and serves to identify those who are medically inappropriate for shelter placement, so that alternative living arrangements can be made, and also enable clients to return to their shelters to continue working toward independent living.

OHCPA staff continue to triage and troubleshoot for community and hospital providers, regarding families' applications through PATH, advocating for PATH exemptions of medically fragile children, who may be currently hospitalized, or who may be unable, medically, to be in an area with other children. Similarly, OHCPA consults, regarding appropriate placement of families with fragile children, and, formally, consults regarding authorization of air conditioners and other reasonable accommodations of health concerns, including, when necessary, transfers between shelters. Lastly, OHCPA receives direct communication from the Office of the Chief Medical Examiner (OCME), regarding the death of any homeless person, sheltered or unsheltered, in NYC.

Housing and Program Development

The Housing and Program Development Division of Adult Services is responsible for the referral of residents to appropriate permanent housing. The Division works closely with supportive housing providers and shelter staff to identify, engage, and place as many shelter and street homeless residents as possible into housing. This includes homeless veterans and persons recently released from correctional facilities who are currently in the shelter system.

Housing and Program Development is also responsible for developing and helping to fund supportive SROs by providing social service funding to non-profit SRO operators that house homeless and low income individuals. These funded services enable tenants to live independently in a safe and secure environment and provide needed support in their transition from the shelter to permanent housing. VASH provide other housing options for Veteran clients exiting the transitional system.

Permanent Housing

Social service programs throughout the continuum of care serve to assist homeless single adults in their return to permanent housing in the community be it an independent living arrangement or a supportive housing environment. Towards this end, the City of New York provides a variety of housing alternatives for single adults including emergency placement in commercial Single Room Occupancy (SRO) buildings, permanent placement into supportive SROs with on-site social services operated by not-for-profit organizations; transitional congregate housing with supportive services; permanent congregate housing with supportive services, (these housing alternatives are overseen by the DOHMH, please refer to the non-special needs section for more information) and independent housing.

A critical component of DHS' permanency strategy is to create supportive housing targeted to long term shelter stayers and difficult to place single adults and to place those individuals into existing and new housing. Several programs, including VASH, have been developed in coordination with a taskforce of government and nonprofit agencies as part of this strategy.

DHS has deployed ESG funded staff to implement many housing initiatives. These programs represent a combination of evidence-based practices (e.g. supportive housing and assertive community treatment) and innovative approaches to promoting permanency and utilizing housing options more effectively. DHS' ESG

funded staff have been essential in developing and implementing these programs. These staff members ensure that housing and related services are targeted to the street and sheltered homeless clients who are at the greatest need, as measured by length of homelessness and clinical acuity.

A recent addition to the supportive services repertoire available to the chronically homeless is the Single Point Of Access (SPOA) service. The SPOA Housing Project is a joint demonstration project between OMH and DOHMH which focuses on housing services for eligible adults with severe and persistent mental illness in NYC. The main goals of the SPOA initiative are to identify scope and characteristics of chronic shelter users; establish new case management approaches to reduce the number of long-term shelter stayers; and target

In November 2005, the City and State of New York signed the New York/New York III agreement, a \$1 billion pact to finance and develop 9,000 new units of supportive housing (6,250 Congregate and 2,750 Scatter Site) in New York City over the next 10 years for 9 specific populations. Of these units, 5,550 will be for single adults who meet the criteria for 3 of these populations, Populations A, E and F. The DHS Adult Services Division, in its role as one of the four placement entities, is charged with referring clients to all 5,550 of these units, of which 3,700 are congregate and 1,750 are scatter sites. Oversight and funding for these units fall under the auspices of either The City (DOHMH and/or DHS) or the State (OMH or OASAS). (It should be noted that the number of units reflected above are a cumulative total of all funding sources (City and State). Also, please keep in mind that these self same agencies also provide oversight and funding for programs which service other populations for which DHS is not the referral entity.)

The clients for these units must meet one of the three following criteria: NY/NY III Population A - Chronically homeless (those homeless for one out of the past two years or two out of the past four years) single adults who suffer from serious and persistent mental illness or who are diagnosed as mentally ill and chemically addicted (MICA); NY/NY III Population E - Chronically homeless (those homeless for one out of the past two years or two out of the past four years) single adults, as well as single adults who have been homeless for at least 6 months of the last year who have a substance abuse disorder that is a primary barrier to independent living. The application must contain documentation from a qualified health professional that the client has an active substance abuse disorder; NY/NY III Population F - Homeless single adults who have completed a course of treatment for a substance abuse disorder and are at risk of street homelessness or sheltered homelessness and who need transitional supportive housing (that may include half-way houses) to sustain sobriety and achieve independent living.

As described in the Agreement, DHS has functioned as the placement agent for these units as described above. Kickoff meetings were held with housing providers to orient them to the role of DHS, eligible clients were identified through coordination with HRA, and the housing interviews were coordinated between DHS' Placement Facilitation, the shelter provider, and housing provider. These contract awards are managed by the Department of Health and Mental Hygiene.

In CFY 2011, homeless single adults also received housing assistance from a variety of publicly supported permanent housing programs, including: supportive SROs; licensed residential facilities; Section 8 rental assistance; NYCHA units; HUD's Shelter Plus Care Program; units from HPD's non-SRO programs; and assistance through HRA's HASA Services. The supportive SROs into which DHS places homeless single adults are developed primarily through HPD's SRO Loan Program. HPD also receives Section 8 Moderate Rehabilitation funding from HUD that helps to pay for the operating costs of these units. DHS, through Support Service contracts, provides the funding for the SRO supportive services. As the demand for supportive and service-enriched housing for the chronically homeless, as well as rental assistance for at-risk populations, is exceeding our supply, DHS is working to end chronic homelessness by increasing the supply of supportive housing/service-enriched housing as well as improving coordination of rental assistance policy across city agencies.

DHS relocated 8,801 single adults into permanent housing during CFY 2011, including 125 in Supportive housing, 698 in subsidized housing, 937 in residential rehabilitation, and 5,704 returned to family or independent living.

d. Runaway and Homeless Youth (RHY)

Nature and Extent of Homeless Problem

According to the Runaway and Homeless Youth Act, "runaway youth" shall mean a person under the age of eighteen years who is absent from his legal residence without the consent of his parent, legal guardian, or custodian; and "homeless youth" shall mean a person under the age of twenty-one who is in need of services and is without a place of shelter where supervision and care are available. Youth become homeless for a variety of reasons. Many young people run away from home because of conflict with parents or others in the household. Some are rejected by their families because of sexual orientation, an unplanned pregnancy, problems at school, or use of drugs and alcohol. Others have been exposed to sexual exploitation, domestic violence, or parental neglect. Some find themselves without suitable housing arrangements after exiting juvenile detention or foster care, despite the best efforts of those systems to establish effective discharge plans. Whatever the cause of their homelessness, runaway and homeless youth tend to have multiple needs, all of which must be addressed if they are to get on track for success. In addition to a safe place to live, they typically require health, mental health, education, and employment services.

Runaway and Homeless Youth Services

In keeping with the federal Runaway and Homeless Youth Act (RHYA) of 1978 and current New York State RHYA regulations, the City's Department of Youth and Community Development (DYCD) funds programs that are designed to protect runaway and homeless youth and, whenever possible, reunite them with their families. In cases where reunification is not possible, these programs are designed to help youth progress from crisis and transitional care to independent living. Program activities and experiences are designed to assist youth in becoming healthy, caring, and responsible adults. Funding to operate these programs is provided in partnership with the New York State Office of Children and Family Services (OCFS) and the New York City Department of Homeless Services (DHS).

In 2006, DYCD strengthened its RHY services by establishing a "continuum of care" system that included drop-in centers for each borough, revised street outreach services, specialized residential services, and expanded shelter options. Overall, the new system was designed to make it easier for youth to access needed services, strengthen family connections, and create the foundation for more effective responses to RHY, including the best use of residential services.

In November 2008, DYCD issued a new RFP for contracts from July 1, 2009 to June 30, 2012 to refine certain aspects of its RHY continuum of care system based on lessons learned during the previous two years, while retaining the basic components of the continuum of care system put in place in 2006. Total funding for this solicitation was \$5.8 million, divided among four service options: Borough-based Drop-In Centers, Crisis Shelters, Transitional Independent Living Programs, and Street Outreach Services. In particular, the RFP made the following changes: (a) brought the operating hours of drop-in centers and street outreach services into line with actual usage patterns; (b) required drop-in centers, residential programs, and street outreach services each to take responsibility for transporting youth in need to safe destinations, as necessary; and (c) established a range of allowable costs per bed for RHY residential programs.

DYCD's residential programs continue to meet the needs of all vulnerable young people, including the specialized needs of lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth; pregnant and parenting youth; and sexually exploited youth.

In CFY11, 116 Crisis beds and 137 TIL beds were funded for a total of 252 beds.

Street Outreach & Referral Services

DYCD's citywide, vehicle-based, street outreach services focus primarily on those areas where youth are known to congregate at night, on weekends, and on weekdays. The purpose of the program is to distribute information about RHY services; provide resources, materials, and referrals; and transport youth to their homes, crisis shelters, or other safe environments. Contractors target public spaces, subway stations, and transportation hubs such as those in Jamaica, Queens; Atlantic Avenue, Brooklyn; and the Port Authority bus terminal in Manhattan.

By developing rapport with youth in the streets and elsewhere, outreach workers directly inform RHY and youth at risk for homelessness about available services and refer youth and their families to drop-in centers and other RHY programs, thereby serving as a point of entry into the wider DYCD RHY system.

Hours of Operation

Street Outreach services operate six days a week from Wednesday through Monday or Tuesday through Sunday. Required hours of operation will vary by season, as follows:

- Fall/Winter: 7:00 pm to 3:00 am
- Spring/Summer: 9:00 pm to 5:00 am

Safe Horizon will operate Street Outreach Services for the 5 boroughs of New York City with 2 contracts for \$200,000 each.

Borough-based Drop-In Centers

Drop-in centers are resource centers for RHY and their families. Each drop-in center is staffed by a full-time program director and at least one community connections coordinator. Their role is to provide a range of services and information and facilitate access to other local resources so that families are better able to help youth develop into healthy, well-functioning adults, allowing crisis shelter and TIL programs to focus on youth with no other options.

The drop-in center services include: crisis intervention, assessment, counseling, and mediation; transportation to RHY residential programs or other safe locations; life skills and work readiness assistance; educational counseling; and referrals to other services, including, in particular, education and career development, health and mental health and substance abuse treatment programs.

The contractor is responsible for setting up direct linkages with health and mental health services, schools, and other RHY programs, including street outreach services, to create an interlocking network of services for youth. The contractor will establish working relationships with City agencies including ACS, DOE, DOHMH, DHS, DJJ, DOP, OCFS, and NYPD. In addition, drop-in centers provide informational literature and raise public awareness about homelessness through workshop presentations in schools and other appropriate venues.

Role of the Community Connections Coordinator

The community connections coordinator, working under the supervision of the program director, will help youth and families to access appropriate services and resources in their neighborhoods. A key role of the coordinator is to provide intensive case management, counseling, and assistance designed to prevent homelessness among at-risk youth and encourage precariously housed and homeless young people, to the greatest extent possible, to return to their homes. The coordinator establishes vital linkages with local resources, particularly those relating to education and career development such as schools, other RHY service providers, and City agencies, including the Borough Service Cabinet in that borough.

Hours of Operation

The drop-in centers are easily accessible by public transportation and operate at least six days a week from 12:00 noon to 9:00 pm on four weekdays and 12:00 pm to 6:00 pm on Saturdays and Sundays. Unless

otherwise approved by DYCD, each drop-in center offers services on Saturdays and Sundays but is allowed to close one other day during the week.

The following organizations are currently contracted to provide drop-in services to runaway and homeless youth: The Door in Manhattan (\$300,000), Cardinal McCloskey Services in the Bronx (\$300,000), Safe Space (Queens, \$300,000), Project Hospitality (Staten Island, \$200,000), and SCO Family of Services (Brooklyn, \$300,000). With assistance from City Council, 3 additional drop-in center hubs have been funded in high-need areas and are operated by Safe Horizon, Bronx Community Pride Center, and the Ali Forney Center.

Crisis Shelters

Emergency shelter is a critical component within the continuum of care for runaway and homeless youth and is the entry point for residential services in our system. These voluntary, short-term residential programs provide emergency shelter and crisis intervention services with the goal of reuniting youth with their families or, if family reunification is not possible, finding other appropriate transitional and long-term placements for them. Youth will be housed on a short-term basis for up to 30 days.

Crisis shelters provide comprehensive, on-site, short-term care and services that include but are not limited to the following: emergency services, including food, shelter, and clothing; entitlement services; intensive counseling for families, individuals and groups; medical and mental health care; dental care; HIV testing; educational services, including basic skills testing and proficiency exams; housing assistance; legal assistance; recreational activities; substance abuse education and prevention; transportation services; violence intervention and prevention counseling; ACS referrals, where required, and family mediation.

Beginning in CFY10, the following organizations were funded under the RFP: Covenant House (35 beds for \$1,217,720), Safe Horizon (6 beds for \$210,000), and Ali Forney (6 beds for \$206,262). With City Council funding included, the total allocations were as follows: Covenant House (58 beds for \$2,017,963), Ali Forney (12 beds for \$206,262), Safe Horizon (6 beds for \$210,000), and The Turning Point (22 beds for \$682,682). In 2011, 67 additional crisis shelter beds were funded with City Council discretionary monies.

Transitional Independent Living (TIL) Programs

The goal of these programs is to provide older homeless youth (16-20 years of age) with the training and skills necessary to establish a self-supporting, independent life. Youth may stay in the Transitional Independent Living Program for up to 18 months, during which time they receive educational services, vocational training, job placement assistance, counseling, and training in basic life skills such as cooking, home maintenance, and money management.

Residents live in a cooperative situation, where they have maximum responsibility for their daily lives but also have on-site access to counseling and support services. All Transitional Independent Living Programs are open 24 hours per day, 365 days per year. A young person in need of these residential services must first enter a Crisis Shelter.

Beginning in CFY10, the following organizations were contracted: SCO Family of Services (2 sites, 33 beds for \$1,342,000), GEMS (6 beds for \$243,972), Rachel's Place (6 beds for \$249,000) and Safe Space (8 beds for \$336,000). With City Council funding, total allocations were as follows: SCO Family of Services (70 beds, 4 sites for \$2,871,425), GEMS (9 beds for \$365,958), Green Chimneys (12 beds for \$504,000), Rachel's Place (8 beds for \$332,000), Good Shepherd Services (8 beds for \$336,000), Inwood House (12 beds for \$501,084), Safe Space, (12 beds for \$504,000), and Project Hospitality (6 beds for \$252,000). In 2011, 79 additional TIL beds were funded with City Council discretionary monies.

NYC Commission for Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Runaway and Homeless Youth (RHY).

In October of 2009, Mayor Bloomberg established a New York City Commission for LGBTQ RHY. Commissioner Mullgrav was the Director of the Commission. After seven months of research, Commission

members delivered a report to the Mayor in June 2010 which outlined a comprehensive set of recommendations for improving the lives of LGBTQ RHY. The report listed 10 key recommendations with 37 corresponding strategies which fell broadly into three main categories – prevention, improving services, and building support. DYCD has taken the lead in implementation of the report recommendations.

Program Highlights

- DYCD crisis shelters utilized \$333,750 in ARRA Homelessness Prevention and Rapid Re-housing Program (HPRP) funding from DHS to provide case management services to 534 young adults from December 1, 2009 to November 30, 2010.
- DYCD has helped develop additional residential capacity for RHY through its partnership with OCFS, including ten newly NYS-certified facilities since 2006.
- On November 4, 2010, DYCD together with artist and advocate Cyndi Lauper took part in a lighting ceremony at the Empire State Building. That evening the Empire State Building was lit green, the color designated by the National Runaway Switchboard as the national symbol for runaway awareness and prevention.
- Cyndi Lauper’s True Colors Fund partnered with DYCD and released a new youth homelessness public service announcement (PSA) through its “We Give a Damn” campaign. With support from NYC & Company, roughly 11,700 taxicabs in New York City aired the PSA, which features actress Susan Sarandon, throughout the months of November and December 2010.
- On July 1, 2011, based on the LGBTQ RHY Commission’s recommendation to “test innovative approaches to develop family support for LGBTQ homeless youth to prevent homelessness or shorten its duration” and with financial support from the MAC AIDS Fund, DYCD launched the one-year Family Therapy Intervention Pilot. This pilot will involve 30 New York City homeless or at-risk LGBTQ youth, ages 16-20, and their families. Through the pilot, participants will receive counseling based on Cognitive Behavior Therapy approaches over a three to four month period. Two DYCD contractors, Green Chimneys and SCO Family of Services, have been selected to implement the Pilot, which will run from July 1, 2011 to June 30, 2012. Funding for an evaluation is also being sought.

Placement of Children into Foster Care and Children Aging Out of Foster Care

The Administration for Children’s Services (ACS or Children’s Services) provides a range of supports and services to families and young people who are aging out of foster care. Statistics indicate that children who age out of the foster care system are at an elevated risk for homelessness. The City of New York is working to assist such youth in obtaining suitable and permanent housing. The ACS Division of Family Permanency, which encompasses Housing, and the ACS Division of the Budget. ACS is also collaborating on the development of a number of innovative supportive housing programs for youth aging out of foster care. The following is a description of the housing supports and resources offered by ACS:

1. Resources for Families with Children

Family Unification Program (FUP)

In August 2002, Children’s Services, in cooperation with the New York City Housing Authority (NYCHA), developed the Family Unification Priority (FUP) Code Program. Through the Family Unification Priority Code Program, ACS was able to obtain a Public Housing apartment for any qualified family served by Children’s Services, which would help keep families together when appropriate and safe, and reduce the amount of time some children may have spent in foster care.

Public Housing for Families

Children’s Services, in cooperation with the New York City Housing Authority, has established priority access to Public Housing units for our families who will be reunified with their children who are returning home from foster care. This program offers our families a reliable option to obtain stable and affordable housing within the five boroughs of New York City.

To qualify for this priority access, families must meet the following criteria:

- The family has at least one child currently in foster care.
- Lack of adequate housing is the sole barrier to family reunification, i.e., “but for the lack of adequate housing, the family could be reunified with the child(ren) in foster care”.
- The family has a stable source of income and the total household income is within the NYCHA Admission Income Limits (Based on Gross Income).
- All household members over the age of 16 are able to pass the NYCHA Criminal Background Check.

2. Resources for Youth Aging out of Foster Care

NYCHA Public Housing

Children’s Services, in cooperation with the New York City Housing Authority, has established priority access to Public Housing units for young adults (ages 18 – 25) leaving foster care who have a goal of APPLA, (formerly known as Independent Living) have special priority access to NYCHA public housing apartments. To qualify for this program, youths must meet the following criteria:

- Must be actively in foster care, under the legal authority of the Commissioner of the Administration for Children’s Services
- At least 18 years of age and in care with an anticipated discharge date within the next 6 months; and, with income that is within the NYCHA Admission Income Limits (\$43,000/yr for one person; \$49,150/year for 2 persons).
- Has no discharge resource.
- Either employed, in school, or in a training program.
- If not employed, has another stable source of income.
- Able to pass the NYCHA Criminal Background Check; not all crimes are disqualifiers.
- No drug use in the past 3 years unless able to submit proof of satisfactory completion of drug treatment.

ACS certifies families and young adults that meet these requirements. In 2010, 154 young adults who transitioned from foster care to live independently, moved into Public Housing apartments, as did 49 families who reunified with children who were returning home from a foster care placement. The total amount of APPLA referrals made from ACS for 2010 was 583 for Public Housing while 231 family referrals were made. Since the NYCHA freeze on Section 8 occurred at the close of 2009, no ACS APPLA youth or FUP Family were afforded the opportunity to apply for, or acquire, a Section 8 voucher through ACS.

Development of Supportive Housing for Youth Aging Out of Foster Care and Families with Foster Care and Preventive Histories

ACS strives to ensure that youth leaving the foster care system have a stable place to live and a meaningful connection to an adult in the community. Youth are also actively involved in education and/or employment plans at the time of their discharge. To better serve our youth, Children’s Services collaborated with the NYC Department of Housing Preservation and Development, Common Ground Community, and Good Shepherd Services to develop the country’s first Foyer Program – a residential career development program for young people aging out of the foster care system, who are homeless or at risk of being homeless.

The Foyer Program is designed to prevent homelessness by offering a comprehensive transitional experience to independent adulthood. Participants work over an 18-month period towards goals of permanent housing and stable employment with career skills by the time of graduation. Residents participate in employment, educational mentoring and life-skills training programs. The 40-unit program is based on a European model and is the first of its type in the United States. With this innovative program, Children’s Services is helping young people develop the tools and skills necessary to avoid homelessness as adults.

In addition, Children's Services, in cooperation with a variety of private not-for-profit housing developers, continues to support the development of supportive housing for the children and families in our care.

- Operated by the Lantern Group, Schaefer Hall has 25 studio apartments for IL youth aged 18-23 in a facility with a total of 91 units. Supportive services include case management, employment and educational resources, entitlements assistance/advocacy, social and recreational activities, medical and mental health referrals, substance abuse counseling, independent living skills training, support and informational groups, health and nutritional counseling, and consistent emotional support.
- Community League of the Heights (CLOTH) is a community-based housing provider that has program components designed specifically for alumni of foster care. Community Access Network (CAN) provides the services component for the youth residing in these building through this program. Services provided include assisting tenants with entitlements and budgeting, counseling, referrals to schooling and job training, crisis intervention, referrals to medical, substance abuse, and psychiatric care, and household and wellness self-management.
- INDEPENDENCE STARTS AT HOME (ISAH) is a Local Initiative Support Corporation (LISC) Pilot Program. ISAH is a collaboration among LISC, selected Community Development Corporations (CDCs), and Children's Services that placed youth transitioning from foster care into quality, permanent housing with on-site supports for the youth. The apartments are largely studio and one bedroom apartments located in West Harlem neighborhoods in Manhattan and Bedford-Stuyvesant in Brooklyn.
- On February 16th 2007 New York City and New York State entered into the New York/New York III Supportive Housing Agreement. This landmark agreement calls for the development of 3,850 units of supportive housing, including 300 units for youth of which 200 are specifically for young people aging out of foster care.

3. Resources Targeted for Families and Youth

Housing Subsidy Program for Youth and Families

ACS also operates a Housing Subsidy Program that targets certain families, as well as youth ages 18-21 who are being discharged from foster care to the permanency goal of APPLA (who intend to live in nonsubsidized, market-rate apartments until age 21). Families are eligible when a primary barrier to reunification is lack of adequate housing or when they are receiving Children's Services preventive services and the lack of adequate housing is a primary factor putting their children at risk of placement into care. Once deemed eligible, up to \$300 is available per month per client for up to three years to assist with paying rent or mortgage. The subsidy is subject to a lifetime cap of \$10,800 for each youth or family that participates in the program. The subsidy payments are made directly to the landlord to prevent any interference with public assistance grants.

There are two other components of the program that provide extra support to our clients. One-time grants of up to \$1,800 are available to assist with expenses associated with obtaining a new apartment, such as a security deposit, broker's fees, furniture (for foster care cases only), mover's fee, extermination, and essential repairs. Separate one-time grants can also cover up to \$1,800 in rental arrears. However, these one-time grants are counted against the lifetime cap of \$10,800.

Preparing Youth for Adulthood, ACS Strategy to Support Youth in and transitioning from Foster Care

Preparing Youth for Adulthood or PYA is Children's Services' comprehensive strategy to support youth in foster care and as they transition to adulthood promotes the following principles:

- Youth will have permanent connection with caring adults
- Youth will reside in stable living situations
- Youth will have opportunities to advance their education and personal development
- Youth will be encouraged to take increasing responsibility for their work and life decisions, and their positive decisions are reinforced

- Young people's individual needs will be met
- Youth will have ongoing support after they age out of foster care.

Preparing Youth for Adulthood emanates from a strength-based, youth development philosophy that encourages youth participation in decision-making and planning for their own future and goals. In support of this philosophy, Children's Services has established the Office of Youth Development, which works with provider agencies and other stakeholders to uphold PYA principles through cultivating high practice standards, identifying resources to assist in the implementation of this practice and to help support the execution and monitoring of this work. To facilitate this, OYD offers technical assistance, training, supportive programming and a host of other services to ensure positive outcomes for youth in foster care.

2. Housing Continuum of Care for Non-Homeless Special Needs Populations

a. Mentally Ill, Mentally and Developmentally Disabled and Chemically Dependent Populations

1. Housing Needs

People with disabilities face barriers beyond the expected problems of cost and location in their search for housing. Meeting the dual challenges of locating housing that is both accessible and affordable can be exceedingly difficult, particularly when accessibility relates not only to the dwelling place itself, but also to location on an accessible route to employment, services and other features of daily living which most people take for granted.

By most standard measures, the disability community in New York City is poorer and has a higher rate of unemployment and under-employment than other segments of the adult population. This makes it difficult for most people with disabilities to enter the city's high-priced housing market without the use of heavy rent subsidies, which are in short supply.

Hospitals and community-based service programs seek to coordinate their efforts with transitional and permanent supportive housing facilities. Hospital discharge planning policies and practices call for arranging aftercare and housing, if necessary, prior to the conclusion of an inpatient stay. If the client will be homeless upon discharge, discharge planners contact supportive residences providing various levels of care regarding available vacancies and application procedures.

Housing facility administrators reach out to both hospitals and community-based service programs to inform them about the types of supportive residential settings in which persons may live and continue their rehabilitation.

2. Inventory of Housing

Supportive housing programs for this population are predominately funded on the State level by New York State's Office of Mental Health (OMH), the Office for People With Developmental Disabilities (OPWDD) (formerly the Office of Mental Retardation and Developmental Disabilities (OMRDD)), and Office of Alcoholism and Substance Abuse Services (OASAS). Many of the supportive housing and related housing service programs described in this section are operated by not-for-profit agencies. Mental Health services for homeless persons are discussed in the Supportive Housing Continuum of Care for the Homeless section.

The following housing services for homeless persons with a diagnosed mental illness are funded by the New York City Department of Health and Mental Hygiene (DOHMH) and the New York State Office of Mental Health:

1. Housing for Seriously and Persistently Mentally Ill (SPMI) Populations

Housing specifically targeted for individuals with mental illness is funded and developed by both OMH and DOHMH.

The State of New York continues to reduce the number of beds in State psychiatric institutions in order to convert to a network of community-based programs to support seriously mentally ill adults and seriously emotionally disturbed children. This transition was initially facilitated by the passage of the Community Mental Health Reinvestment Act in 1993. That act tied funding and development of community-based mental health services to the reduction of beds in State Psychiatric Hospitals by using a formula based on local prevalence rates of mental illness. Reinvestment Act monies were targeted to services that include crisis and emergency

services; outpatient services; vocational, educational and recreational programs; and supported housing. While the programs funded under the original Reinvestment Act continue, that source of funding has ended. However, in 2003, the State of New York passed the Community Mental Health Support & Workforce Reinvestment Program, which will provide OMH with monies to distribute at its discretion from savings due to the continuing closure of State psychiatric center beds. In Fiscal 2005, OMH received \$9.6 million from the closing of 100 adult beds and 21 children's beds. Although these funds were not distributed to localities pursuant to the formula used under the original Reinvestment Act, about \$7 million was used to fund 318 beds of scattered site supported housing for adults with mental illness in New York City. As of June 2010, 318 beds have been allocated and the beds have been developed.

The DOHMH capital development of congregate supported housing is accomplished with the assistance of the New York City Department of Housing Preservation and Development (HPD). Most of the subsidies for the operation and social service costs of the units developed by the City are funded by OMH. However, DOHMH has funded some scattered site housing with Reinvestment money, has supplemented OMH subsidies congregate housing with city tax levy dollars, and is planning to fund several new congregate housing programs for populations with mental illness using DOHMH funding.

There are four principal categories of housing: Congregate Treatment Residences; Apartment Treatment Programs; Congregate Support Residences; and Supported Housing.

Congregate Treatment Residences

Congregate Treatment Residences are licensed transitional (less than two years) residences for people with mental illness that are developed and funded by OMH. In addition to 24-hour supervised living, these residences provide a high level of support to assist the residents to progress to a more independent living situation. Services include counseling, self-care and community skills development, socialization, case management, crisis intervention, and medication management. Participation in services and structured day programs is strongly encouraged. Residents are eligible for Level II SSI benefits and receive a pre-determined personal needs allowance. As of March 31, 2011 there are 2,461 Congregate Treatment Residence units in operation in New York City.

Apartment Treatment Programs

Apartment Treatment Programs are transitional programs that provide shared apartments for up to four individuals and are developed, funded and licensed by OMH. Services include counseling, self-care and community living skills development, case management, crisis intervention, and medication management. Counselors visit residents one to seven times weekly depending on the individual's need for support. Participation in services is encouraged and residents are required to participate in structured day programs. Residents are eligible for Level II SSI benefits and receive a personal needs allowance which is adjusted according to the level of responsibility for meal preparation and other personal expenses. As of March 31, 2011 there are 1,882 Apartment Treatment units in New York City.

Congregate Support Residences

Congregate Support Residences are extended stay residences that are developed, funded and licensed by OMH. They are also known as *Community Residences/ Single Room Occupancy Residences (CR/SRO)*. This type of housing is designed as studio apartments, or as suites containing single bedrooms combined with a shared living space. The CR/SRO provides on site supportive services. Residents have Residency Agreements and are eligible for Level II SSI benefits. Residents pay service fees and retain the equivalent of 70% of the Level II SSI benefit for their personal needs. As of March 31, 2011 there are 1,456 congregate support units in operation in New York City.

Supported Housing

Supported housing provides permanent housing to individuals and families. It is developed by both OMH and DOHMH. Supported housing is not licensed, however it does operate based on an established set of guidelines and standards that have been developed by the funding agencies. Housing choices can include scattered site

apartments or single site apartment buildings and Single Room Occupancy units. Tenants retain a lease for their apartment and are responsible for contributing 30% of their income toward rent and utilities. Case management services are available to assist tenants in accessing all necessary community services and to otherwise assist successful integration into community living. As of June 30, 2011 there are 15,618 units of supported housing in New York City.

Several important initiatives are creating new housing opportunities for this population.

New York/New York II

The 1999 New York/New York II Agreement provided for a joint City/State five-year effort to develop approximately 1,500 additional housing units for homeless adults with mental illness. The capital portion of the Agreement provided for 1,000 new units, with the State and City each committed to developing 500. By securing various other sources of funding, the City was able to increase its share of development to 707, the majority of which are being developed by HPD. Most of the New York/New York II capital housing projects are either already operational or in the later stages of development: the State has 458 units open with the remaining 42 units to be completed by the summer of 2011. Of the City's units, all units (707) are operational as of June 2010. The remaining 500 units not included in the capital development plan which are scattered site have already been completed, 190 by the State and 310 by the City. The State provides \$11,735 per unit annually to subsidize the social service and building operation costs and the City provides an additional \$1,000 annual subsidy per unit, for a total of \$12,735 per NY/NY II unit.

High Service Needs Housing I

A \$50 million City/State match for a congregate housing development program was initiated in Fiscal 2001 to provide approximately 800 new congregate housing units in NYC over five years for mentally ill persons with high service needs. The State made awards for the development of 320 service-enriched SRO units for single adults and 80 community residence units for children and youth. Nine of the adult programs comprised of 225 beds and eight of the children's programs (totaling 64 units) opened as of June 2011, and the others are all in various stages of development. A 50 bed CR-SRO is scheduled to open January, 2012 and two children's community residences will open in the summer and fall of 2011 respectively. The City's match of 400 units are all for single adults. The State provides \$11,732 per unit annually to subsidize the service and building operation costs, and the City provides an additional \$1,000 annual subsidy per unit. Also, the City is able to use savings from Shelter Plus Care, the federal rental subsidy, and add an additional \$768 per unit, for a total of \$13,500 per unit. Ten programs totaling 373 units were open as of June 30, 2011. An additional 19 units are expected to be developed by July 2012.

High Service Needs Housing II

A \$65 million and \$75 million City/State match for congregate housing development was initiated in Fiscal 2003 to provide another 1600 units of supported housing for single adults with mental illness in New York City over the next five years. The State has awarded 800 beds to providers who responded to an RFP issued in the fall of 2003. Eight projects, with 240 units, are open. Three projects will open during the fall of 2011 and two others in January, 2012 with a total of 86 units and two other projects are scheduled to open in January, 2012. Others are in development. The City issued an RFP for its matching 800 units in February 2005. The State is providing \$13,233 annually per unit to subsidize the social service and building operation costs. Using funds including savings from Shelter Plus Care, the federal rental subsidy, the City will contribute an additional \$1,655 so that the total annual funding per unit will be \$14,888. As of June 2011, 17 programs totaling 565 units were in operation, and another 143 units are in development through July 2012.

New York/New York III

In November 2005, the City and State entered into the New York/New York III Agreement, a major initiative to provide 9,000 new units of housing over the next eleven years to a broad range of special needs populations, including persons leaving State psychiatric centers, homeless persons with mental illness, substance abuse disorders or HIV/AIDS, homeless families in which the head of the household has a mental illness, substance abuse disorder, HIV/AIDS or a medical disability, and young adults leaving foster care. The State is responsible

for 5,125 units (3,125 capital and 2,000 scattered sites) and the City is responsible for 4,850 units (3,600 capital and 1,250 scattered sites) which include 1,000 units to be procured by the New York City HIV/AIDS Services Administration (HASA) later this year. The annual per unit rates for the NY/NY III housing units vary by target population type and range from \$14,888 to \$25,000. Pursuant to RFPs issued in 2006 and 2007, the SOMH has awarded contracts for 1000 scattered site units, all of which are operational. SOMH issued set-aside awards for 1055 capital beds. To date two congregate sites have opened for a total of 90 beds and three additional sites will open in the summer of 2011 for a total of 132 beds. The remaining beds will open over the next five years. The State issued an RFP in the spring of 2011 to fund the services and supports in 1,025 units that are being developed using capital funding from the New York State Homes and Community Renewal (HCR) and/or the Office of Temporary Disability Assistance (OTDA). Set aside awards were made for these beds. The City issued two RFPs in early 2007, and has awarded contracts for 4,547 units (2,377 congregate units and 970 scattered-site units). All of the scattered-site units are currently operational. Twenty three of the capital projects are open, while the remainder of the capital units will open gradually over the several years. New proposals may be submitted to DOHMH on a rolling basis until all capital units have been permanently assigned.

2. Housing for Developmentally Disabled Individuals

The New York State Office for People with Developmental Disabilities (OPWDD) funds all residential services for this population. It plans for services, makes policy, and contracts for supplemental services such as employment and recreational services. The OPWDD Certified Housing Program provides a 3-tier system:

Semi-Independent Living Programs

Semi-Independent Living Programs are available to individuals who do not require 24-hour assistance and supervision. *Supportive Community Residences* provide home environments where individuals can acquire the skills necessary to live as independently as possible. *Family Care Homes* combine private homes with families, or unrelated parties, certified by OPWDD to provide care to the residents.

As of December 31st 2010 there were 944 Supportive beds, funded with \$61.2 million. In 2010 there were 425 Family Care beds 3 units being added, funded with \$9.4 million, available in the City. Currently there are 1,295 independent supportive beds. 25 ISS bed were added in 2010 costing \$375,000. Total ISS beds are 1,295 costing \$19.4 million.

24-Hour On-Site Assistance and Training Programs

24-Hour On-Site Assistance and Training Programs provide daily living skills development. *Supervised Community Residences* provide on-site housing staff, supplies and services for persons who require 24-hour assistance and supervision. The home environment permits individuals to learn skills necessary to live as independently as possible. *Individualized Residential Alternatives (IRAs)* are certified homes which may house one to fourteen individuals. They provide room, board, support services and individualized protective oversight.

As of December 31st 2010, there were 124 supervised beds added, funded with \$16.1 million, and presently there are 5827 individuals living in IRAs, funded with \$689.3 million, available in the City. 94 IRA beds were added in 2010 at a cost \$11.3 million. There are a total of 3204 ICF beds in New York City, 30 beds were added in 2010 at a cost of \$4.9 million. The current number of ICF beds is 3204.

3. Housing for Chemically Dependent Individuals

The State Office of Alcohol and Substance Abuse (OASAS) funds a variety of residential services to assist chemically dependent individuals in New York City who are not in need of acute hospital or psychiatric care or chemical dependence inpatient services but are unable to maintain abstinence or participate in treatment without the structure of a 24-hour/day, 7 day/week residential setting. All of these residential programs are intended to serve persons in the non-acute disease stage who have been detoxified and are now intent on remaining sober and rebuilding their lives and improving social and coping skills without relying on chemical substances.

Three levels of residential services are offered: community residential services; supportive living services; and intensive residential services. Lengths of stay range from an average of four months in a community residential service to up to two years in the other residential categories. In 2011 in New York City, there are 693 community residence beds, 14 supportive living beds, and 4,475 intensive residential beds (4,447 intensive residential and 28 Residential Rehabilitation Services for Youth [RRSY]).

(Note: In addition, there are 1,436 intensive residential beds (1,272 intensive residential and 164 RRSY) that are located outside of the City but primarily serve New York City residents. Clients admitted to intensive residential intake programs located in NYC and transferred to the non-NYC programs for a significant part of their treatment episode. These clients are then transferred back to a NYC based re-entry program prior to completion of the treatment episode.

All service levels provide individual and peer group counseling, supportive services, educational services, structured activities and recreation as well as orientation to community-based services. Rehabilitative procedures can be provided directly or through referral and are based on individualized assessments and treatment plans designed to develop coping skills and self-sufficiency necessary to maintain abstinent lifestyles.

At least nine City agencies provide or fund prevention and treatment services to New Yorkers suffering from the effects of chemical dependency: DOHMH; HHC; HRA; DHS; NYCHA; DOC; DJJ; Probation; and the Department of Youth and Community Development.

In 2011, 9.6 % of New York City residents over 12 years of age were estimated to have a chemical dependence problem. It is estimated that one third (33.3%) of those who have a problem would seek treatment from the OASAS chemical dependency treatment system if services were available.

In 2010, there were 11,037 admissions to OASAS-certified Residential Treatment programs by New York City residents. Of those admitted to residential treatment in 2010, 9.6% were under the age of 18, 20.3% were between the ages of 18 and 25, 67% were between the ages of 26 and 55, and 3.2% were over 55 years of age.

Intensive Residential Services (includes Residential Rehabilitation Services for Youth)

Intensive Residential Services assist clients who are in recovery but unable to comply with treatment outside a 24-hour setting as evidenced by recent unsuccessful attempts at abstinence, unsuccessful outpatient treatment or clients who need ongoing management of medical and/or psychiatric problems. A minimum of 40 hours per week of services is provided within a therapeutic milieu. Services may include vocational assessments and training or parenting and social skills development.

Community Residential Services

Community Residential Services provide structured therapeutic environments for residents who are concurrently enrolled in outpatient chemical dependency programs which provide addiction counseling. Services may be provided directly or by referral and include vocational assessment, job readiness training, parenting, social and community living skills. Individuals appropriate for this level of care include individuals who are homeless or who otherwise would have living environments not conducive to recovery and abstinence.

Supportive Living Services

Supportive Living Services provide a minimum level of professional support to individuals who do not require 24- hour on-site supervision by clinical staff but require an alcohol and drug free environment with peer support of fellow residents to maintain abstinence. A weekly clinical staff member contact is provided as residents readapt to independent living.

OASAS also funds Crisis Services that include Inpatient/Residential *Medically Supervised Withdrawal Services* to manage the treatment of clients who are intoxicated by alcohol and/or substances, suffering from mild withdrawal complications, or who are in danger of relapse. These services are often provided early in a person's course of recovery and are relatively short in duration, typically in the three to five day range. They do not

require physician direction but should provide a safe environment for complete withdrawal and then referral to the next level of care. Services include assessment, monitoring of symptoms and vital signs, individual and group counseling, level of care determination and referral to other appropriate services.

b. Needs of Persons with AIDS and HIV Related Diseases

The New York City Eligible Metropolitan Statistical Area (NYC EMSA) has a population of approximately 9.54 million residents, of which 86% reside in the five boroughs of New York City (Bronx, Brooklyn, Manhattan, Queens, and Staten Island) and 14% in the Lower Hudson Valley region (Putnam, Rockland, and Westchester Counties).¹ The New York City portion of the EMSA is densely populated, whereas the Lower Hudson Valley has a combination of both urban and suburban areas. In addition to having one of the nation's highest costs of living, New York City experiences notably high rates of poverty. Specifically, 18.5% of the City's population was living below the national poverty level from 2007-2009, with the Bronx (27.7%) and Brooklyn (21.5%) reporting the highest poverty rates.²

New York City remains the HIV epicenter of the United States (US). In 2009, New York City comprised 2.6% of the US population, but accounted for 11% of new AIDS diagnoses and 10.2% of new HIV diagnoses (among 40 states with confidential name-based HIV infection reporting).^{3,4} According to the latest available CDC surveillance data, in 2008, New York City comprised 12.9% of AIDS deaths in the nation and 14.9% of people living with HIV/AIDS (PLWHA) (among 40 states with confidential name-based HIV infection reporting).^{5,6} The New York State Department of Health reported that, as of December 2008, there were almost 126,000 New Yorkers living with HIV/AIDS, the vast majority of whom were living in the NYC EMSA.⁷ More recently, as of June 30, 2010 the New York City Department of Health and Mental Hygiene (DOHMH) reported that there 109,446 people living with HIV/AIDS in New York City.⁸ In 2009, 2,810 people were newly diagnosed with HIV (non-AIDS) and an additional 2,965 were newly diagnosed with AIDS in New York City.³ Furthermore, in 2009, New York ranked fourth in the nation among major metropolitan areas for newly diagnosed AIDS case rates – nearly 2.5 times the national average.⁹ The NYC EMSA has more newly diagnosed AIDS cases than the cities of Washington DC, Los Angeles and Atlanta (the cities with the next three highest number of diagnosed) combined.

Similar to many large urban areas, the NYC EMSA struggles with complexities common to the HIV/AIDS epidemic. Some of the highest death rates among persons with HIV/AIDS are in the lowest-income communities in NYC: South Bronx, Central Brooklyn, and Harlem.³ In addition to HIV/AIDS, which is the third leading cause of premature death in NYC among those 35-54 years old,¹⁰ substantial disparities in a broad variety of health measures continue to exist among NYC neighborhoods and racial/ethnic groups. Historically marginalized populations have high percentages of co-morbidities, such as tuberculosis, Hepatitis B, and

¹ U.S. Census Bureau. 2010 Census, 2010.

² U.S. Census Bureau. 2007-2009 American Community Survey, 2009

³ HIV Epidemiology and Field Services Program. New York City Department of Health and Mental Hygiene. HIV Epidemiology and Field Services Semiannual Report. October 2010.

⁴ U.S. Centers for Disease Control and Prevention. Diagnoses of HIV Infection and AIDS in the United States and Dependent Areas, 2009, HIV Surveillance Report, Volume 21. 2011, Tables 1a and 2a.

⁵ U.S. Centers for Disease Control and Prevention. Diagnoses of HIV Infection and AIDS in the United States and Dependent Areas, 2009, HIV Surveillance Report, Volume 21. 2011, Tables 11a and 12a.

⁶ HIV Epidemiology and Field Services Program, New York City Department of Health and Mental Hygiene. HIV Epidemiology and Field Services Semiannual Report. October 2009.

⁷ Bureau of HIV/AIDS Epidemiology, New York State Department of Health. New York State HIV/AIDS Surveillance Annual Report For Cases Diagnosed Through December 2008. June 2010.

⁸ HIV Epidemiology and Field Services Program. New York City Department of Health and Mental Hygiene. HIV Epidemiology and Field Services Semiannual Report. April 2011.

⁹ CDC HIV/AIDS Surveillance Report, 2011, Table 23 and Table 24

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/index.htm>

Hepatitis C. In areas where HIV prevalence is high, epidemics of substance abuse and mental illness overlap, contributing to an increase in risk behaviors associated with HIV transmission. The magnitude and complexity of the EMSA's epidemic result in significant challenges in providing essential medical, housing, and supportive services to PLWHA.

As the number of PLWHA increases, the populations most affected by the disease continue to change. When the epidemic first started in 1981, White men who have sex with men (MSM) accounted for the largest group of AIDS diagnoses. By 1988, injection drug use (IDU) became the primary transmission category associated with AIDS diagnoses. At that time, Black and Hispanics accounted for 83% and females 30% of persons newly diagnosed with AIDS in the IDU transmission category. AIDS diagnoses began to decrease among IDUs in the mid-1990s, and in 2002 MSM again became the primary transmission category for new AIDS diagnoses. In the first half of 2010, 3.9% (n=55) of HIV (non-AIDS) diagnoses were associated with IDU transmission, 50.1% (n=705) with MSM transmission, and 22% (n=310) with heterosexual transmission.⁸ Transmission mode was unknown for 23.5% (n=330) of HIV (non-AIDS) diagnoses.

In addition to being the primary transmission category, the NYC MSM population has begun to display alarming trends in incidence by age and race/ethnicity. Young MSM (<30 years of age), particularly among those of color, have seen an increase in the number and proportion of new diagnoses of HIV. In 2001, 32% of new HIV (non-AIDS) diagnoses in MSM were among those younger than 30 years old. By 2008, the proportion rose to 47.4%.¹¹ White, Hispanic, and Black MSM under 30 years old all experienced growing numbers and proportions of newly diagnosed cases of HIV (non-AIDS), but young Black MSM, who represent 23.8% of all newly diagnosed cases of HIV (non-AIDS) in NYC in 2008, have been particularly affected. In 2008, over half of the 458 newly diagnosed Black MSM were younger than 30 years old, while proportions for Hispanics and Whites were 47% and 29%, respectively.¹²

Subgroups become more susceptible to acquiring HIV infection as the HIV prevalence among those subgroups increases. However, it is important to note that HIV prevalence in NYC is neither evenly distributed throughout the 5 boroughs, nor among sub-populations. Unfortunately, the lowest-income communities of NYC also have the highest proportion of minority racial/ethnic groups, and the most concentrated HIV/AIDS prevalence areas. Through the first half of 2010, Blacks and Hispanics together represented 77.3% of all persons living with HIV/AIDS in NYC. Meanwhile, the proportion of newly diagnosed AIDS cases in NYC among Whites decreased from 48.8% in 1981 to 15.6% in the first half of 2010. Blacks comprised more than half of persons newly diagnosed with HIV (48.7%) or AIDS (52%) in the first half of 2010.⁸ Viable prevention, treatment, and care approaches that intervene at multiple levels for these populations should continue to be a priority.

The high prevalence of HIV/AIDS in the NYC EMSA among people who are homeless or unstably housed significantly increases the cost and complexity of NYC's HIV/AIDS care system. Without safe, appropriate shelter, persons with AIDS are unable to adhere to complex antiretroviral drug regimens and also are exposed to conditions that threaten their health and well-being.

Findings from the New York City Department of Housing Preservation and Development's *2011 New York City Housing and Vacancy Survey (HVS)* showed that the citywide rental vacancy rate was only 3.12%. Vacant units available for low rents continue to be extremely scarce. The rental vacancy rate in 2011 for units with asking rents under \$799 was just 1.10%; for units with asking rents of \$800 - \$999 it was 2.58%. The vacancy rate for rent-stabilized units was 2.63% in 2011. . The availability of so few affordable apartments makes it extremely difficult for low-income persons living with HIV/AIDS to find appropriate, affordable housing, and poses

¹⁰ Bureau of Vital Statistics, New York City Department of Health and Mental Hygiene. Summary of Vital Statistics 2008: The City of New York. December 2008.

¹¹ HIV Epidemiology and Field Services Program, New York City Department of Health and Mental Hygiene. New York City HIV/AIDS Annual Surveillance Statistics. Updated December 31, 2010.

¹² HIV Epidemiology and Field Services Program. New York City Department of Health and Mental Hygiene. HIV Epidemiology and Field Services Semiannual Report. April 2009.

challenges for organizations that may wish to employ a scattered site housing model to provide housing for PLWH.

In City Fiscal Year 2009, the Department of Homeless Services (DHS) served 10,807 single adults, 7,712 families with children and 867 adult families accessing DHS shelter services for the first time. DHS refers individuals who self-identify as HIV-positive or living with AIDS to the HIV/AIDS Services Administration for medically appropriate emergency housing placement. However, due to confidentiality concerns and laws, DHS cannot track HIV/AIDS within the shelter system.

In December 2005, DOHMH and DHS published a report on the health of sheltered homeless persons in New York City during the time period 2001–2003. The report found that of the 88,014 New Yorkers who were known to be living with HIV/AIDS from 2001 through 2003, 3,108 of those persons used the homeless shelter system for at least one night during the study period. In addition, the report found that the prevalence of HIV/AIDS among users of the single adult shelter system was more than twice as high as the prevalence in the NYC adult population.

The City's population density, its aging housing and transportation infrastructures, its attraction for new immigrants and its diverse low-income communities have combined to make the HIV/AIDS epidemic here especially entrenched and complex. As the demographics of people with AIDS have changed, low income communities of color have experienced both increasing numbers of AIDS cases and a growing need for extensive social services and housing.

The Mayor of the City of New York, the official grantee of the NYC EMSA HOPWA grant, has designated the NYC Department of Health and Mental Hygiene (DOHMH) as grantee of the HOPWA Program. The Bureau of HIV/AIDS Prevention & Control (BHAPC) within DOHMH serves as the grantee, giving them responsibility for the planning and coordination of the HOPWA grant. HOPWA-funded programs are implemented by the New York City Human Resources Administration - HIV/AIDS Services Administration (HASA) and the New York City Department of Health and Mental Hygiene.

As the designated grantee for the HOPWA formula grant, BHAPC serves as the coordinator and administrator for the HOPWA program for the entire New York City Eligible Metropolitan Statistical Area (EMSA). The EMSA is comprised of the five boroughs of the City of New York together with Westchester, Putnam, and Rockland Counties in the Lower Hudson Valley. BHAPC works with these three counties and the eligible localities therein to plan and evaluate their use of HOPWA funds and to ensure the consistency of their efforts with those of the rest of the EMSA. In turn, Westchester County acts as the administrator for HOPWA funds received by the cities of Mount Vernon and Yonkers.

BHAPC convenes regular meetings with HOPWA-funded City agencies to ensure effective collaborative planning and execution of the HOPWA grant. BHAPC also receives detailed reports from City agencies utilizing HOPWA funds on their use of these funds during the previous year and their plans for proposed HOPWA programming in the upcoming year. These meetings focus on setting specific priorities and recommended spending levels based upon anticipated HOPWA and City Tax Levy revenues. The role of BHAPC as the designated grantee includes negotiation and oversight of the planning, implementation, and monitoring of the use of HOPWA funds for (1) capital development of HIV/AIDS housing projects through HPD, (2) delivery of housing and related supportive services through HASA, (3) delivery of housing and related supportive services within DOHMH.

Overview of the Current HIV/AIDS Housing Portfolio

Enhanced rental assistance, the expansion of existing programs, and the addition of new permanent and transitional units for adults and families are the foundation of the City's continuum of housing and supportive services for persons living with HIV/AIDS. The numerous supportive services that the City provides help to maintain individuals and families in housing and enhance their quality of life in both new and existing settings. The City seeks to relocate persons with AIDS who are inappropriately housed, such as doubled-up families and

individuals, those with inadequate bath or kitchen facilities, or those in situations of inaccessibility. Whenever possible, the City places individuals and families in appropriate-sized apartments or efficiencies with private baths. Several facilities with multiple units have congregate meals prepared, or have specialized staff to provide nutritional counseling for residents who prepare their meals individually.

Given the current state of knowledge about HIV/AIDS, the linkage to primary health care for each individual throughout his or her life is the organizing principle for the housing continuum of care. This includes access to antiretroviral medications and other related HIV/AIDS medications, substance abuse treatment services, mental health services, case management, and home care. Funding for the City's program is provided primarily by City Tax Levy and matching State and Federal Medicaid funds. Additional Federal dollars accessed through HOPWA, the Centers for Disease Control and Prevention, and Part A of the Ryan White HIV/AIDS Treatment Modernization Act (HATMA) expand the considerable efforts the City has committed to meet the needs of this population. Access to a continuum of services is facilitated, in cooperation with HASA, by a network of community-based organizations.

The New York City government agencies that receive HOPWA funding provide or subsidize units under the following housing models:

- Rental subsidies (cash subsidies through Public Assistance for independent, private sector, non-supportive housing);
- Emergency commercial single room occupancy hotels (SROs) and family apartments;
- Permanent scattered site housing with supportive services;
- Transitional congregate housing with supportive services;
- Permanent congregate housing with supportive services;
- Public housing (NYCHA project apartments).

HASA provides a substantial portfolio of independent and supportive housing for its clients. As of June 2012, HASA's total caseload was 31,878, of which three-quarters were in receipt of some type of housing service.

As of June 2012, HASA provides Rental Assistance to 26,600 individuals and families living in independent housing in apartments; 909 individuals and families in transitional supportive housing; 1,957 individuals and families in permanent supportive congregate housing; and 2,527 individuals and families in scattered-site supportive housing operated.

Housing Preservation and Development's (HPD) mission is to preserve, maintain and improve the City's existing supply of affordable housing, as well as to produce new housing units for low-income persons, including PLWH. HPD is responsible for developing and arranging capital funding—through its Supportive Housing Loan Program—for the acquisition and renovation of buildings that will be owned and operated by nonprofit, community-based organizations that specialize in providing housing and supportive services to persons living with HIV/AIDS and other special needs populations. Development funds for these units are provided with a combination of HOPWA, Federal HOME funding, and City capital investment. In this manner, HPD has developed 1,827 units for individuals and families with HIV/AIDS through July 2009.

Community-based organizations also provide supportive housing, rental assistance, and support services through programs that directly contract with DOHMH. The services funded by DOHMH supplement and enhance the programs funded by other City agencies, as well as stand-alone programs.

The City utilizes several service models, strategies, and options to address the housing needs of people with AIDS and HIV-related illnesses.

Human Resources Administration – HIV/AIDS Services Administration (HASA)

Case Management and Support Services

HASA case management and support units provide the foundation for the City's network of services for persons with HIV/AIDS. Due to the increased need for HIV/AIDS housing in New York City, HASA continues to shift HOPWA funding committed to case management services to subsidize supportive housing units. HASA is chartered to offer a full range of social services to individuals and families with HIV/AIDS, as well as to other family members who are not infected. Case management teams respond to the complex support needs of HIV/AIDS clients and their families. The HASA case manager facilitates client access to -- and maintenance of -- emergency, transitional, and permanent supportive housing, as well as rental assistance and enhanced rental assistance. HASA case management units ensure that clients are placed in appropriate housing and that they receive the supports necessary to maintain their housing. In addition to housing issues, HASA clients and their families often present a multiplicity of needs that the case management unit works to address. After completing comprehensive assessments, case management and eligibility staff develop service plans for all clients to determine the benefits and services needs of the clients, which might include cash assistance; nutrition and transportation grants; and housing related benefits such as rental assistance, rent arrears payments, establish of home grants, moving costs, or security deposits. Case managers facilitate client access to Medicaid, home care, homemaker services, Food Stamps, federal disability benefits and community based mental health and substance abuse programs. In Grant Year 2011, HASA anticipates serving a caseload of over 30,000 cases including nearly 5,000 family cases.

Rental Assistance

HASA clients who are capable of maintaining an independent apartment may be eligible for rental assistance. Individuals and families may be eligible to receive enhanced rent supplementation based on family size – above the standard cash assistance amount for rent subsidy for Safety Net/TANF cases – provided through Public Assistance. Costs are funded primarily by the City and State, with a federal contribution for TANF-eligible cases. Upon submission of documentation of a landlord's intent to lease, individuals may obtain an advance for payment of a first month's rent, security deposit and broker's fee. As of June 2012, HASA provides long-term rental assistance to 26,600 individuals and families living in independent housing in apartments. In addition to ongoing rent, HASA also provides for rent increases, home furnishings and sundries, client rent arrears, and moving and storage fee expenses.

Emergency Placement in Commercial SRO Hotels

Newly admitted HASA clients who are homeless require direct emergency housing placement services. Such a demand, when matched with housing development time frames and availability of transitional and permanent supportive housing and independent housing within the private sector, can necessitate the utilization of single room occupancy hotels on an emergency basis. To accelerate placement out of commercial SROs, the City has developed a Housing Placement Unit within HASA to provide intensive housing assistance and case management services to individuals residing in commercial SRO hotels and transitional housing facilities in order to assist them with finding permanent housing.

Transitional Supportive Housing

Transitional supported residences provide on-site case management, group work, assistance with Activities for Daily Living, mental health and substance abuse counseling, and assistance with securing financial benefits and services, all with a focus on preparing the client to maintain successfully a permanent household. Staffing includes a Housing Specialist who assists the resident in obtaining permanent housing. Placements in transitional housing facilities typically last between 30 and 180 days.

Permanent Public Housing

The City also provides apartments through the New York City Housing Authority (NYCHA) and the Department of Housing Preservation and Development. The adults and families living in these apartments continue to receive case management services, rental assistance, transportation and nutrition allowances, and linkages to appropriate care. Public Assistance provides rent supplements to clients for this housing.

Scattered-Site Supportive Housing

Community-based organizations (CBOs) are contracted to locate, lease, and maintain apartments in the private sector and to provide supportive services. Both single adults and families are referred to the CBOs by the HASA Housing Unit and the CBOs work to place them in contracted scattered site apartments. The CBOs provide a continuum of services to enable clients to move to greater levels of self-sufficiency, including intensive case management, mental health and substance abuse services, advocacy and referral linkages to medical and other services. Scattered Site housing is supported with a combination of Federal, City, and State funding.

Permanent Supportive Congregate Care Facilities

HASA contracts out to community-based organizations to provide supportive housing in renovated or newly constructed supportive facilities which contain efficiency apartments or multiple bedroom apartments. Case management and on site supportive services are also provided primarily through facility operating contracts with community-based organizations. The facilities may either be exclusively for a population living with HIV/AIDS or may be “mixed” facilities that also provide housing to other populations, specifically the elderly, the mentally ill, and/or low income individuals. Operating costs are supported with a combination of City and State funds through the above-noted operating contracts, rental assistance, and, in a few cases, with other grants leveraged by providers.

Department of Health and Mental Hygiene (DOHMH)

Targeted Housing Programs

BHAPC contracts with community-based organizations to provide targeted housing services that serve a number of special need populations living with HIV/AIDS. These targeted programs include: women with mental illness, women with children, seniors age 55 and over, difficult to serve individuals; dually diagnosed individuals and families in need of harm reduction services; LGBT street-youth who are HIV-positive or at risk for HIV infection due to prior histories of prostitution or substance abuse; and parolees/releases living with HIV/AIDS.

Housing Placement Assistance

Funding is available to community-based organizations, through HOPWA and Part A of the Ryan White HIV/AIDS Treatment Modernization Act, to provide assistance to persons living with HIV infection. Services include locating and securing apartments and obtaining rental assistance entitlements.

Rental Assistance

DOHMH utilizes a combination of Ryan White Part A and HOPWA funds to provide short-term and long-term rental assistance to individuals and families living with HIV/AIDS who have difficulties in accessing and maintaining permanent housing. A limited amount of HOPWA funding is also used to provide rental-start up to a number of qualifying individuals and families, and assists such clients in securing and maintaining housing.

c. Victims of Domestic Violence

1. Housing Needs

Victims of domestic violence represent a group of individuals and families who, in order to escape the violence, could potentially access the City’s shelter system at any time. While it is difficult to determine the exact number of domestic violence victims, New York City has collected data through various sources regarding reported instances of domestic violence. Information collection is an important tool for both designing preventive efforts and providing immediate preventive services.

A major source of data is the City’s Domestic Violence Hotline, established in 1994. In FY2011, the Hotline received 117,269 calls, including 10,895 unduplicated requests for shelter. The daily average of unduplicated shelter requests was 30. Income data collected indicated that 89.5% of victims requesting shelter reported their

income as low, while 10.2% reported moderate income. Less than 0.2% of those in need of shelter reported an income greater than moderate.

Additional indicators of the prevalence of domestic violence are the number of domestic violence cases responded to by the police, the number of arrests made and the number of domestic violence cases in the courts. The New York City Police Department (NYPD) mandates the filing of a Domestic Incident Report (DIR) in every instance in which an officer responds to a potential domestic violence situation. DIRs are required for every radio run involving a family-related problem, even when no crime has occurred. DIRs are also generated through telephone and walk-in complaints to the local precincts. During FY2011, the NYPD completed 243,644 DIRs. During FY2011, there were 71,379 family-related crimes in New York City, of which 8,260 were violations of Orders of Protection. During the last fiscal year, the NYPD made 44,083 family-related arrests.

The health care system is another critical point of entry for victims of abuse and thus also an additional source of information about the prevalence of domestic violence. The New York City Department of Health and Mental Hygiene (DOHMH) issued a report in 2008, *Intimate Partner Violence Against Women in New York City*, which found that: (1) from 2003 to 2005, nearly half of fatal violence against women (44%) was confirmed to be the result of intimate partner violence; (2) Black and Hispanic women were more than twice as likely as women of other racial/ethnic groups to be killed or injured by an intimate partner; and (3) women living in neighborhoods with very low median household income had at least twice the intimate partner violence related death, hospitalization and emergency department visit rates as women living in higher income neighborhoods. Further, an additional finding of the report, based on anonymous surveys conducted in 2004 and 2005, was that an estimated 69,000 New York City women ages 18 years and older (2.2% of all adult women) reported fearing an intimate partner. Based a recommendation in the report that all health care providers routinely screen for intimate partner violence, in February 2009, the Department of Health and Mental Hygiene launched an 11-week program on intimate partner violence that targeted primary medical providers. During this campaign, staff conducted over 2,000 one-on-one interactions with health care providers and their staff in nearly 200 practices. Through these interactions, health care providers and staff enhanced their understanding of their position as a trusted resource. An Intimate Partner Violence Action Tool Kit provided strategies to facilitate communicating with patients around intimate partner violence, including ways of applying clinical tools, provider resources and patient educational materials into the medical provider's practice. Kit materials are available at: <http://www.nyc.gov/html/doh/html/csi/csi-ipv.shtml>.

Domestic Violence victims often need to leave their homes to escape from the violence. Despite the availability of transitional shelters for domestic violence victims, insufficient financial resources make it difficult for victims and their families to secure affordable housing.

2. Inventory of Housing for Victims of Domestic Violence

Office to Combat Domestic Violence

1. Citywide Coordination of Services

In November 2001, New York City residents voted to amend the City Charter to establish a permanent office that would comprehensively address issues of domestic violence. Mayor Michael R. Bloomberg appointed Yolanda B. Jimenez as the first commissioner to head the new office, which is one of only a few municipal government offices in the United States focused solely on the issue of domestic violence.

The Mayor's Office to Combat Domestic Violence ("OCDV") formulates policies and programs, monitors the citywide delivery of domestic violence services and works with diverse communities to increase awareness of domestic violence. OCDV works closely with community leaders, healthcare providers, City agencies and representatives from the criminal justice system to hold batterers accountable and to create solutions that are critical to preventing domestic violence in New York City.

Domestic Violence Fatality Review Committee

The Domestic Violence Fatality Review Committee (“FRC”) examines information related to domestic violence fatalities in the City and develops recommendations regarding services for the victims. Based on findings from its third annual report, the FRC developed a plan for a community needs assessment in Districts 4, 5, 6, 7 and 9 of the Bronx. The assessment was completed in the fall of 2010. The community assessment found that: (1) community members, including victims, are unclear about which behaviors constitute domestic violence; (2) victims first turn to friends and family members for assistance and they have limited awareness of specific domestic violence services other than police services; and (3) challenges exist in linking victims to services and keeping them engaged in services. Primary actions have been taken to increase knowledge of services through: (1) strategically placed messaging in local business locations and supermarket circulars; (2) training of City employees at the Department of Homeless Services and the New York City Housing Authority; and (3) outreach to medical service providers. The FRC has launched a new community assessment, in Community Districts 3, 8 and 16 in Brooklyn.

New York City Family Justice Center Initiative

The New York City Family Justice Center Initiative is a public-private initiative of OCDV in partnership with the District Attorney’s Offices. The Centers are located in the Bronx, Brooklyn, and Queens. With public and private funding, these innovative Centers help domestic violence victims break the cycle of violence by streamlining the process of receiving supportive services. Clients receive their choice of services that are made available in their language, while their children play in the next room. Since opening in July 2005 through June 2011, the New York City Family Justice Center in Brooklyn has served 42,544 new clients seeking domestic violence services and 7,471 children made use of the Center’s Children’s Room, Margaret’s Place. There have been 88,664 adult client visits to the Brooklyn Center since it opened. Since opening in July 2008 through June 2011, the New York City Family Justice Center in Queens has served 11,400 new clients seeking domestic violence services and 2,255 children were supervised in the Center’s Children’s Room. There have been 29,403 client visits to the Queens Center since it opened. Since opening in April 2010 through June 2011, the New York City Family Justice Center in the Bronx has served 6,435 new clients seeking domestic violence services and 1,172 children were supervised in the Center’s Children’s Room. There have been 14,651 client visits to the Bronx Center since it opened.

New York City Family Justice Center, Brooklyn, Early Victim Engagement (BKFJC EVE) Project

In April 2008, the New York City Family Justice Center in Brooklyn launched the Early Victim Engagement Project in collaboration with the Kings County District Attorney’s Office as well as two nonprofit organizations and three other government agencies. The BKFJC EVE Project is funded by the U.S. Department of Justice, Office on Violence Against Women. The goal of the BKFJC EVE Project is to have effective, early engagement with domestic violence victims whose abusive partners have interacted with the criminal legal system. The purpose of this contact is to provide them with timely, reliable information about the criminal justice system in their language and allow them to make informed decisions about their safety. From January 2010 to June 2011, over 9,187 domestic violence victims were assisted.

Domestic Violence Prevention: New York City Healthy Relationship Academy

In 2005, OCDV established the NYC Healthy Relationship Training Academy in partnership with the Department of Youth and Community Development and the Avon Foundation through the Mayor’s Fund to Advance New York City. The Academy offers educational workshops and training sessions on topics concerning domestic violence prevention (?) for young people ages 11 to 24 of especially vulnerable populations, their parents and organizational staff. Since its inception in 2005 through June 2011, the Academy reached 22,084 young people through 1,104 peer education workshops. These have proven to be highly successful based on data from pre- and post-workshop questionnaires.

2. Homelessness Prevention

Fleeing violence in the home can lead to homelessness for victims and their children. The City provides a wide range of programs and initiatives that aim to prevent domestic violence and provide safety and services to victims.

Public Education

Public education is a critical component of the City's strategy to reduce domestic violence and prevent homelessness in New York City. Effective public education helps to reduce the number of people who become victims and refers those who are victims to appropriate services.

Public Awareness

The OCDV website, www.nyc.gov/domesticviolence, serves as a citywide clearinghouse for comprehensive domestic violence information. In July 2008, Mayor Bloomberg signed Executive Order (EO) 120, creating a centralized language access policy for New York City. In 2009, as part of OCDV's Language Access Plan, content on OCDV's website was reviewed and translated into Arabic, Bengali, Chinese, Haitian-Creole, Korean, Russian and Spanish. OCDV continues to monitor language services and the language needs of our clients through semi-annual bilingual focus groups and language service questions incorporated into the customer satisfaction surveys collected at the Family Justice Centers.

OCDV and the Verizon Wireless HopeLine® Program

OCDV continues to collaborate with Verizon Wireless' HopeLine in urging all New York City residents to help survivors of domestic violence by donating their no-longer-used wireless devices to benefit domestic violence victims.

Raising Awareness of the Right to a Healthy Relationship

In the spring of 2010, OCDV launched a poster, palm card and radio public service announcements raising awareness of the right to a healthy relationship. The campaign materials encourage people to call 311 for the New York City Domestic Violence Hotline or 911 in an emergency. The bilingual campaign in English and Spanish was launched in April 2010 with a Spanish-language public service announcement radio campaign with the support of two New York City Spanish language radio stations and featured musicians Gilberto Santa Rosa and Juan Luis Guerra. This campaign will be re-launched in the summer of 2011. Since June 2010, the posters and palm cards have been displayed in over 1,200 pharmacies, banks, financial services locations, fast food restaurants and other retail locations. The campaign materials were also placed at several City agencies including the Administration for Children's Services, Department of Consumer Affairs, Department of Homeless Services, Human Resources Administration, Department of Parks and Recreation and New York City Housing Authority in addition to medical providers' offices.

"We Are New York" Adult Education Program

OCDV partnered with the Mayor's Office of Adult Education and the City University of New York to create an episode that addresses domestic violence for the "We Are New York" series. The "We Are New York" show is designed to help immigrants learn to speak English and simultaneously learn about vital city services that they can access. The program focuses on some of the barriers and challenges immigrants may face in reaching out for help and highlights that domestic violence services are available to everyone regardless of immigration status. This program continues to be aired on New York City television.

October Domestic Violence Month

Since the fall of 2002, OCDV has collated information regarding domestic violence-related activities being hosted in the City each October in honor of Domestic Violence Awareness Month. These

activities are organized into a useful resource calendar which is widely distributed and posted on the OCDV website.

During Domestic Violence Awareness Month in October 2010, and in May 2011, OCDV partnered with Alpha1 Marketing, the parent company of C-Town, Bravo and AIM Supermarkets, to place a public education message - "If you or someone you know is being abused, please call 311 or 1-800-621-HOPE (4673)" - on the back page of a weekly circular . Last October and May, the circular message was displayed for two consecutive weeks. This circular was then distributed in 123 C-Town, Bravo and AIM Supermarkets.

New York City Housing Authority (NYCHA)

NYCHA holds conferences on domestic violence annual, primarily for NYCHA residents to increase sensitivity on the issues surrounding domestic violence and to provide information on the issue. Last year's conference was held at Pace University on October 14, 2010 and the theme was "We Stand for Healthy Family and Safe Neighborhood". In total, 700 persons attended. Community-Based Resources Representatives, Kiosk Facilitators, and Workshop Presenters gave much needed information on the impact of domestic violence through workshops, and a presentation was done by a Domestic Violence survivor. This year's conference is scheduled for October 29, 2011 at York College, Jamaica, NY. The theme is the same as last year, and the target population is NYCHA youth between the ages 13 and 24.

Human Resources Administration's Teen Relationship Abuse Prevention Program (RAPP)

This school-based program is one of the most comprehensive domestic violence prevention programs in New York City, and is critical to ending relationship abuse among young people. Through a comprehensive curriculum, students learn to recognize and change destructive patterns of behavior before they are transferred to adult relationships. The program is now serving 65 schools citywide.

Peer education is an important component of the RAPP program. One of the goals of the RAPP program is to promote active student involvement as peer partners, peer educators and mentors. During the 2010-2011 school year 2011, 6,489 students received counseling services and over 4,274 students completed the workshop series. Outreach was conducted to over 50,000 students citywide.

Training

Agency personnel and other service providers must be well-trained in order to effectively deliver programs and initiatives that have an impact on reducing domestic violence. This is especially true of frontline workers who directly assist victims and are regularly called upon to provide clear, accurate and culturally appropriate information and assistance.

The Administration for Children's Services Domestic Violence Screening and Assessment Tools and Training

Universal domestic violence screening for all CPS investigations, regardless of allegations together with on-going domestic violence trainings on assessment and intervention, continue to improve the ability of child protective staff to assess and respond to child safety issues while providing survivors of domestic violence with: necessary safety planning assistance, intervention and referrals to community resources, as well as, providing accountability and appropriate service planning for abusive partners. ACS' Satterwhite Training Academy together with the Domestic Violence Policy and Planning unit and the Division of Child Protection have updated the three-day domestic violence training curriculum that is provided to all child protective specialists. Domestic violence trainings now include the Domestic Violence ToolKit, a compilation of Children's Services policies and procedures that specifically apply to cases involving domestic violence. A corresponding Domestic Violence ToolKit training was created and is provided to supervisors and managers. These updates ensure that domestic violence trainings reflect the agency's current domestic violence-related policies and practices and provides staff with

guidance on how to address domestic violence in the context of new child welfare initiatives such as child safety conferences and new city, state and federal laws regarding domestic violence.

In new contracts with foster care and preventive agencies, ACS has required the agencies to enhance their capacity to address domestic violence in the families they work with. ACS currently oversees the Domestic Violence and Child Welfare Initiative currently administered through Children's Aid Society's Family Wellness Program. The Domestic Violence and Child Welfare Initiative provides ongoing training and education, case consultation and technical assistance and the initiative's goal is to increase foster care and preventive agencies' capacity for working effectively with families struggling with domestic violence. These efforts are crucial because a substantial overlap exists between domestic violence and child abuse and neglect, and many victims of domestic violence come into contact with child welfare service providers before they are ready to seek assistance from domestic violence service providers or from the criminal justice system.

New York City Elder Abuse Network

The New York City Department for the Aging (DFTA) established the New York City Elder Abuse Network in 2006. The Network was formed by a nucleus of agencies who indicated a strong desire to expand and strengthen their activities in the area of elder abuse. The Network has a broad membership of over 50 agencies, including law enforcement personnel, district attorneys, city agencies, academic institutions, nonprofit providers of victim services as well as support services to the elderly, financial service providers, and other interested community professionals. The Network developed a web page: www.nycean.net. DFTA provides ongoing administrative support to the Network.

Intimate Partner Violence Report and Annual Data Updates

In 2008, the Department of Health and Mental Hygiene ("DOHMH") released a comprehensive report chronicling the tragic and persistent problem of intimate partner violence. The report is available at <http://nyc.gov/html/doh/downloads/pdf/public/ipv-08.pdf>. Data from city hospitals, medical examiner records and surveys featured in this report are analyzed and updated annually. A presentation summarizing the most recent health department data on female homicides is available at <http://www.nyc.gov/html/doh/downloads/ppt/ip/ip-femicide-stats-1995-2008.ppt>.

Medical Provider Training

In 2009, the DOHMH launched a campaign on intimate partner violence prevention, reaching out to primary care providers in its District Public Health Office neighborhoods. The campaign used strategies to facilitate provider communication around intimate partner violence, including ways to screen and make referrals. Provider resources and patient educational materials from the campaign's kit are still available online at: <http://www.nyc.gov/html/doh/html/csi/csi-ipv.shtml>. In addition, the Health Department still offers technical assistance to health care providers wanting to use these resources.

During October 2010, OCDV and the DOHMH provided training entitled "Domestic Violence Screening and Referral: Training for Medical Providers" to Bronx medical providers and their staff. The training provided medical providers with skill-building tools for responding to domestic violence issues during health care encounters. Additional outreach and training is planned for communities in the Bronx and Brooklyn that have been identified as experiencing a high concentration of family-related homicides.

New York City Housing Authority

In the spring of 2010, OCDV partnered with the New York City Housing Authority (NYCHA) to train agency employees in the Bronx on domestic violence awareness and service referrals. To date, more than 400 NYCHA employees participated in the training program. This program will be expanded to other locations in the City during the fall of 2010. No additional workshops were held during 2010, or planned for 2011.

Department of Homeless Services

From 2008 through 2010, the OCDV partnered with the Department of Homeless Services (DHS) to train homeless population shelter staff on domestic violence awareness and service referrals. In the winter of 2011, this training was expanded to DHS Police supervisors. To date, more than 700 shelter staff members and 60 police supervisors have participated in the training program.

Intervention and Outreach

A number of domestic violence programs and initiatives operated by City agencies are designed to intervene in the lives of victims before they become homeless and involve outreach to victims and their families. Outreach and services are provided to victims through the City's Domestic Violence Hotline; criminal justice services; social services, including health and human services; and alternatives to shelter.

New York City Domestic Violence Hotline

Domestic violence services offered in the City can be accessed through the City's toll-free Domestic Violence Hotline which operates 24 hours a day, seven days a week, and provides interpretation services in more than 150 languages and dialects. During the 2011 fiscal year, the Hotline answered 117,269 calls, averaging 320 calls per day.

Criminal Justice Services

To ensure the safety of domestic violence victims and their families, the New York City Police Department (NYPD) has a proactive and effective response to the crimes of domestic violence. The NYPD responds to calls for help, makes arrests, provides referrals, and conducts follow-up visits to victims.

New York City Police Department (NYPD) Domestic Violence Unit

The NYPD Domestic Violence Unit coordinates the department's overall domestic violence strategy, including the training of officers. There are over 380 Domestic Violence Prevention Officers, Domestic Violence Investigators and Domestic Violence Sergeants in the City's seventy-six (76) police precincts and nine (9) Housing Police Service Areas. In Fiscal Year 2011, the Domestic Violence Unit conducted sixty-eight (68) domestic violence training sessions involving 2,840 uniformed and civilian members from recruits in the Police Academy to Executives.

New York City Police Department Intervention Programs

The Department has many initiatives aimed at prevention, intervention and outreach including a Domestic Violence High Propensity List, which targets households that have a demonstrated tendency toward domestic violence, and the Home Visit Program, where Domestic Violence Prevention Officers visit residences that have had domestic violence incidents in the past in an effort to prevent future incidents.

New York City Police Department Domestic Violence Police Program (DVPP)

The Domestic Violence Police Program (DVPP) combines experienced Safe Horizon counselors with uniformed police officers who jointly contact and counsel NYCHA families where there has been a police report of domestic violence. In January of 2009, Safe Horizon's contract with NYCHA was transitioned to HRA and is now funded by the New York City Council and they continue to provide services to NYCHA residents. Currently, the DVPP is operational in nine Police Service Areas (PSA 1, 2 and 3 in Brooklyn; PSA 4, 5 and 6 in Manhattan; PSA 7 and 8 in the Bronx; and PSA 9 in Queens).

During Fiscal Year 2011, police officers prepared 243,644 Domestic Incident Reports (DIRs) and made 44,083 domestic violence arrests.

Domestic Violence Intervention and Education Program (DVIEP)

DVIEP combines non-profit Safe Horizon counselors with police officers who jointly contact and counsel NYCHA families where there has been a report of domestic violence. During 2010, 12,008 cases were received, 3,610 domestic violence arrests were made, there were 192 police sensitivity training sessions, and 95 community education seminars were conducted. (This program was transitioned to HRA as of January 2009.)

New York City Housing Authority's Witness Relocation Program

Through the Witness Relocation Program, District Attorneys, US Attorneys, or other appropriate law enforcement agencies refer intimidated witnesses who are applying for public housing or Section 8 assistance. During 2010, 236 cases were received and reviewed by the unit, of which 210 were deemed to have met the Intimidated Witness criteria and were forwarded to NYCHA's Department of Housing Applications for processing.

Social Services

The City provides a number of health and human services to meet the immediate needs of victims and help them avoid homelessness. OCDV is committed to having these services delivered in a coordinated manner.

The Administration for Children's Services Domestic Violence Policy and Planning Unit

The Domestic Violence Policy and Planning (DVPP) Unit in the Office of Child and Family Health works to inform Administration for Children's Services (ACS) delivery of services and practice so that families and children who are involved in the child welfare system and are affected by domestic violence are identified and receive the services they need. DVPP supports capacity building and adherence to best practice, and achieves its goals through consultation, training, interagency collaboration and community outreach. The unit conducts strategic planning related to domestic violence and the child welfare system; directs policy development; formulates practice guidelines and protocols; and collaborates internally and externally on developing domestic violence policies, practices and recommendations. The unit is also responsible for the development and implementation of the agency's domestic violence training strategy, the delivery of these trainings, and supporting 15 domestic violence clinical consultation specialists, and their adequate support in the field on certain high-risk cases. In 2009 the James Satterwhite Academy in collaboration with DVPP revised and updated the three day, DV Core Phase II training curriculum for Child Protective Specialists and created the DV ToolKit. The DV ToolKit contains all of Children's Services' domestic violence policies and procedures for best practices when assessing and intervening with families experiencing domestic violence. DVPP developed and began delivering the DV ToolKit training for supervisors and managers in the Division of Child Protection to update on the changes in the revised curriculum.

Domestic Violence Policy and Planning (DVPP) also oversees two initiatives, the Domestic Violence and Child Welfare Initiative (DVCWI) administered through the Children's Aid Society's Family Wellness Program and the Community Empowerment Program (CEP) administered through CONNECT. The Domestic Violence and Child Welfare Initiative (DVCWI) provides ongoing training and education, case consultation, technical assistance and capacity building to all preventive and foster care agencies in New York City with the goal of developing the agencies' capacity to work effectively with families struggling with current or past domestic violence. The Community Empowerment (CEP) through CONNECT is funded by the City Council and is focused on domestic violence prevention and early intervention through work with community based agencies in New York City. CEP is a multi-faceted program that incorporates: transformative education, strengthening of existing infrastructure, network building and technical assistance with resource development.

All of these efforts are crucial because a substantial overlap exists between domestic violence and child abuse and neglect, and many survivors of domestic violence come into contact with child welfare service providers before they are ready to seek assistance from domestic violence service providers or

the criminal justice system. The implementation of domestic violence screening and assessment tools and related on-going training has improved the ability of child protective specialists and preventive program staff to assess and respond to child safety issues, while providing survivors of domestic violence with necessary safety planning assistance and referrals to appropriate community resources.

The Administration for Children's Services Clinical Consultation Program

In 2002, ACS launched the Clinical Consultation Program, which placed 12 domestic violence consultants in the Children's Services child protective field offices throughout the city. The program has since grown to include 15 domestic violence consultants. These consultants work as part of a multidisciplinary team that also includes mental health and substance abuse specialists and a team coordinator and a Medical Services Consultant. The domestic violence consultants, with other team members when needed, provide case specific consultation, office based training, and assistance with referrals for community based resources. Consultations are available to caseworkers, supervisors, and managers to help assess the client for the presence of domestic violence and plan appropriately. In addition, consultants may attend case conferences or have direct contact with clients to provide a more informed consultation and model intervention strategies. Specific office based trainings related to domestic violence and informed by best practices are developed depending on the training needs of a location. Lastly, the domestic violence consultants identify and develop connections to domestic violence related neighborhood based resources to facilitate referrals. A significant change that occurred during this review period was the elimination of the substance abuse consultant line resulting from budget cuts that took effect in June 2010. The impact was seen in a reduction in the number of cross consultants involving domestic violence and substance abuse. Overall during calendar year 2010, domestic violence experts conducted 5,241 consults (domestic violence only); 579 (domestic violence and substance abuse); 805 (domestic violence and mental health); 343 (domestic violence/mental health/substance abuse); 13 (domestic violence/mental health/medical services/substance abuse); 19 (domestic violence and medical services); 27 (domestic violence/medical services/mental health) consultations on domestic violence cases and conducted over 304 office based training sessions (domestic violence only), as well as 12 (domestic violence and mental health); 11 (domestic violence, mental health and substance abuse); 6 (domestic violence, mental health substance abuse and medical services); 6 (domestic violence, medical services) and 5 (domestic violence and substance abuse). These figures represent the fact that the total number of consults exceeds the documented number of formal consults. There are many more instances when the Domestic Violence Consultants are approached with questions that are characterized as informal consults. The consultations included instances when domestic violence was the single issue; and cross consults when there were overlapping issues of substance abuse, mental health or medical services. Similarly, the office-based training activities included the singular topic of domestic violence, and other instances of cross-cutting topics that focused on domestic violence in combination with substance abuse and mental health. This is an aspect of how domestic violence consultation has evolved to increase awareness of the interconnection with other issues that impact children and family functioning. A further enhancement of efforts to address domestic violence has been the collaboration of the Domestic Violence Consultants with the agency's Investigative Consultants and Family Court Legal Services. A continuing aspect of the Clinical Consultation Program's development has been its close relationship with the Domestic Violence Policy and Planning Unit within the Office of Child and Family Health under Family Support Services. These partnerships and linkages have resulted in even more capacity building that helps to strengthen the agency's response. Borough Commissioners have expressed the need for more domestic violence consultants to handle an increasing demand based on evidence of escalating rates of domestic violence and related abuse. Another area of concern is the heightened risk to safety and well-being of children who are witnesses of domestic violence. Additional resources are indicated to address the needs of children and families impacted by domestic violence. The Clinical Consultants have been actively involved in numerous conferences related to family safety, in addition to performing training and case specific consultation. The need to address other issues related to such things as family violence has emerged as

a gap in our current service structure. Despite a myriad of challenges and budgetary constraints, we continue to work collaboratively using existing resources as efficiently and effectively as possible.

Health and Hospitals Corporation (HHC): Domestic Violence (DV) Program

The HHC 11 acute care hospitals provide a range of domestic violence services that includes in-service training of all staff on domestic violence during orientation; mandatory annual training thereafter; ongoing education/training for clinical staff and prevention activities for patients as well as employees. Other services include creation of linkages between patient support groups and domestic violence services; provision of information and assistance to victims with housing; provision of an easy referral system with the New York City Family Justice Centers in the boroughs of Bronx, Brooklyn and Queens for clients in need of both social services and medical attention; continuing education domestic violence training sessions for health care providers; peer advocacy program and grant application (when available) to enhance domestic violence services, e.g. group counseling, therapy, advocacy and community outreach activities focused on prevention and reporting.

Project H.E.A.L. (Health Emergency Assistance Link)

Project H.E.A.L. is a comprehensive plan to improve services provided to DV victims at the 11 City Public Hospitals and a partnership of OCDV and the NYC Health and Hospitals Corporation. This project enhances the ability of City Hospital staff to identify victims, document injuries and connect them with social and legal services. In CY 2010 over 2,166 patients utilized the services provided by this program.

HHC Domestic Violence Coordinators

Domestic violence coordinators provide violence prevention services twenty-four hours a day, seven days a week that include primary, intermediate and follow-up care in a holistic approach inclusive of the victim's psychosocial and cultural needs. Such services may also require collaboration and coordination with external agencies such as NYPD Domestic Violence Prevention Officers and the District Attorneys' Offices at their local police precincts to ensure continuum of care for the safety of the victims. A total of 51 HHC community outreach with 889 community participants were completed in CY 2010. The facilities also participated in the NY Cares Health Fair and Domestic Violence Awareness Month (October 2010). In addition, the Domestic Violence Program continues in partnership with Verizon Wireless to provide high risk patients with pre-paid cell phones.

HHC Domestic Violence Data Base System

The Domestic Violence Database is an electronic system available on HHC's intranet. The database replaced the Domestic Violence Tracking form developed in 2000 with collaboration of the DOHMH to track domestic violence cases seen at HHC hospitals. In CY 2010, 1,829 domestic/intimate partner violence cases were entered in the Domestic Violence Database System.

HHC Training & Screening for Domestic Violence

All newly hired staff are given an in-service on domestic violence on orientation and annually thereafter. In addition, newly hired nurses have an ongoing continuing education on the identification, treatment and referral of domestic violence patients. In CY 2010, 7,683 staff participated in domestic violence training and retraining sessions. HHC's protocol requires the Emergency Department, OB-GYN, Ambulatory Care and WIC Clinic staff to screen all females ages 16 and above (and individuals who meet high risk criteria) for domestic and/or intimate partner violence. In the Bronx, domestic violence coordinators created a DV-ID card worn with their hospital issued identification to raise awareness of physicians, nurses, and social workers in screening for domestic violence. Each patient (actual victim or victims at moderate to high risk) receives a comprehensive domestic violence packet outlining domestic violence services each borough offers.

HHC continues to utilize the best practice "*Clinician Guide for Identifying, Treating and Preventing Family Violence*" Manual as a practical reference to clinical staff in the prevention, identification, treatment and management of family violence in all settings.

Human Resources Administration (HRA) Domestic Violence Liaison Unit

HRA created a Domestic Violence Liaison (DVL) Unit in 1998 as a result of the Federal Family Violence Option, part of welfare reform legislation. During Fiscal 2011, a total of 7,653 families affected by domestic violence received employment and child support enforcement waivers in order to maintain their safety.

Human Resources Administration Project NOVA (No Violence Again)

HRA addresses the needs of domestic violence victims seeking emergency housing from the Department of Homeless Services. During Fiscal 2011, 9,361 families were assessed by NOVA to determine eligibility for domestic violence services. Of these referrals, approximately 1,819 were determined to be eligible for services based on an assessment of the client's safety.

Human Resources Administration Non-residential Domestic Violence Programs

HRA contracts with community based organizations to provide non-residential domestic violence programs. These programs maintain hotlines, provide crisis intervention, counseling, referrals for supportive services, advocacy and community outreach in all five boroughs. During Fiscal 2011, a monthly average of 2,849 clients were served through non-residential programs and a monthly average of 1,037 clients received legal services in addition to the core services.

HRA Domestic Violence Aftercare Program

The Domestic Violence Aftercare Program (DVAP) provides intensive home-based social services to victims of domestic violence within NYCHA developments who have been approved for an Emergency Transfer. Services include counseling, advocacy, assistance with relocation, safety planning, in home case management and referrals for job training and GED classes. In February 2010, this program was transferred to HRA's and is currently implemented by the HRA Office of Domestic Violence.

During Fiscal 2011, 244 new cases were referred from NYCHA. 215 initial home visits were conducted and 141 clients and their families successfully relocated to safer apartments in neighborhoods unknown to their perpetrators. During this period, the Domestic Violence Aftercare unit serviced 354 families. The Domestic Violence Aftercare Staff linked these clients with essential resources in their new communities.

NYCHA Supportive Outreach Services (SOS)

NYCHA's Supportive Outreach Services assists residents in improving their social functioning. Staff members conduct needs assessments, design treatment plans, make referrals for direct social services and coordinate service utilization. There were 7,154 referrals received during 2010.

The Furniture Distribution Program is a component of SOS that secures donations of furniture, bedding and an assortment of household items from hotels and motels throughout the Metropolitan Area in order to assist relocated families who have lost their possessions due to a fire or other calamity and victims of domestic violence who transferred through the Emergency Transfer Program. During 2010, approximately 107 families were assisted through the program.

From January 1, 2011 through June 30, 2011 approximately 77 families were assisted through the program.

3. Alternatives to Shelter

Human Resources Administration Alternative to Shelter Program (ATS)

The program gives domestic violence victims and their children the option of remaining safely in their own homes through the provision of state-of-the-art security technology and a coordinated response. This approach emphasizes keeping the abusers out of victims' homes. In Fiscal 2011, ATS served an average of 104 clients per month.

4. Housing and Supportive Housing

Domestic violence victims who are seeking emergency shelter are referred through the citywide domestic violence hotline to emergency shelter services.

Temporary Housing and Emergency Shelter

The Office of Domestic Violence Services of the Human Resources Administration (HRA) administers 52 state licensed emergency domestic violence shelters, including one directly operated by HRA. Domestic violence victims are provided with a safe environment and a range of support services, including counseling, advocacy, and referral services. During Fiscal 2011, the emergency shelter capacity increased to 2,228 beds. During Fiscal 2011, 4,178 families entered the domestic violence shelter system. HRA administers seven transitional housing shelters (Tier II) shelters with a capacity of 243 units.

In City Fiscal Year 2011 (which began July 1, 2010), HRA allocated approximately \$79 million for the Office of Domestic Violence Services, which is a unit of the Office of Domestic Violence and Emergency Intervention Services. These funds come from three funding sources: approximately 28 percent is City Tax Levy, 25 percent comes from the State of New York and 47 percent are from Federal funds.

New Permanent Housing

New York City Housing Authority's (NYCHA) Emergency Transfer Program (ETP)

This program is available to NYCHA residents who are victims of domestic violence, intimidated victims, intimidated witnesses, or child sexual victims. The program provides a confidential transfer to another development. Between January 1, 2010 and December 31, 2010, 2,063 emergency transfer requests were received, of which 885 were for the victim of domestic violence category and 860 cases were approved for transfer, of which 449 were for the victims of domestic violence category.

Between January 1, 2011 and June 30, 2011, 917 emergency transfer requests were received, of which 417 were for the victim of domestic violence category and 410 cases were approved for transfer, of which 214 were for the victims of domestic violence category.

New York City Housing Authority (NYCHA) Witness Relocation Program

Through the Witness Relocation Program, District Attorneys, US Attorneys, or other appropriate law enforcement agencies refer intimidated witnesses who are applying for public housing or Section 8 assistance. From January 1, 2010 through December 31, 2010, 240 cases were received and reviewed by the unit, and 221 that were deemed to have met the Intimidated Witness criteria and were forwarded to NYCHA's Applications and Tenancy Administration Department for processing.

From January 1, 2011 through June 30, 2011, 118 cases were received and reviewed by the unit, and 93 that were deemed to have met the Intimidated Witness criteria and were forwarded to NYCHA's Applications and Tenancy Administration Department for processing.

d. Elderly, Including Frail Elderly

1. Housing Needs of the Elderly

Population Characteristics

The elderly population of New York City, which accounts for approximately 40% of the elderly in New York State, is represented by an estimated 1.39 million individuals age 60 and older according to the most recent 2005-2007 American Community Survey by the U.S. Census Bureau. This is an increase from 1.28 million seniors in the City in 2000. About 16.7% of New York City's current population is seniors. By 2030, the City expects that this percentage will increase to 20% of the population, or about 1.84 million.

From 2000 to 2007, the number of young elderly (age 60 to 64), increased by 18.6% and those 80 and older increased by 22.2%. The 85 and older group will see a 25% increase from 2000 to 2030, after which baby boomers start to join this group. By 2050, the cumulative growth of this group will be nearly 200%, and will constitute four percent of the total population, compared with 1.5% in 2000. Disability is prevalent among the oldest elderly, which creates a growing need for long-term care services to help these seniors remain at home.

Diversity

The racial and ethnic profile of the elderly population in New York City has changed dramatically within the past couple of decades. In 2007, nearly 49% of New Yorkers 65 and older were members of minority groups, compared with 43% in 2000 and 35% in 1990. Between 2000 and 2007, the Black population increased by 19%, the Hispanic population by 34%, and the Asian population by 55%. There are also significant linguistic differences: 25% of New Yorkers' primary language is not English, and almost 50% speak another language at home. Racial, cultural, and linguistic differences – nearly 200 languages are spoken in New York City – when coupled with the challenges of aging and disability, can result in different help-seeking patterns. Many of the City's minority elders experience difficulty accessing basic services. Some are immigrants who do not have health coverage and may not qualify for Medicare, Medicaid, or other Federal assistance programs. Clear, concise, and reliable information and assistance about benefits, services, rights, and options in multiple languages is essential. Pursuant to Local Law 73, many of New York City's social service agencies provide translation services for consumers in their primary languages and publish several documents in six languages other than English – Arabic, Chinese, Haitian Creole, Korean, Russian and Spanish. 3-1-1 as New York City's 24 hour information and services number, provides services to callers in more than 170 languages.

The median income varied significantly by race and ethnicity. In 2007, among older New Yorkers, the median household income of both Asian and Hispanic populations was \$17,500, 46% less than the White population; and for Blacks, it was \$22,500, 31% less than the White population, which earned a median household income of \$32,500. Large numbers of minority seniors live in poverty: 28% of Hispanic elderly, 26% of Asian elderly, and 19% of black elderly live in poverty compared with 14% of White elderly who live in poverty.

Because seniors of minority communities are more likely to have lower incomes and less access to market-rate healthcare and social services than their White counterparts, this dramatic rise has had a significant impact on the rise in demand for subsidized services. The percentage of minority elderly in the population is only expected to increase in the coming decades, as the large waves of minorities who moved to the City in the 1960s are now reaching their 60s, along with the continuous influx of immigrants of Asian, Hispanic, and Eastern European descent.

Women

Between 2000 and 2006, the number of New York City women aged 60 and over increased by 6.6%. As of 2007, women continued to outnumber men by nearly 3 to 2. This ratio increases to 7 to 3 among those 85 and older. By 2030, the sex ratio (number of females per 100 males) for New Yorkers is projected at 118 for those 55-64, 131 for those 65-74, 159 for those 75-84, and 213 for those 85 and older. Thus, women 85+ will

outnumber men their age by more than 2 to 1, and this higher longevity results in more women living alone during their later years.

Women comprise 69% of the frail elderly population. Frailty can lead to functional impairments, which may require long-term care. Women are also more likely to have incomes below the poverty level. Women tend to receive lower Social Security payments, due in part to time spent out of the paid workforce, as well as a prevalence of lower-paying salaries than their male counterparts during their years of employment.

Living Alone

Social isolation is a complex concern for older adults, and living alone is not the only factor that may contribute to vulnerability. Multiple factors include elder density, which measures the number of persons 65 and older in an area, poverty, disability and inadequate access to primary care. The 2000-2006 period was marked by an increase in the number of older persons in New York City living alone, a group that can be more vulnerable to social isolation. In 2007, 33% of persons age 65 and over were living alone. Among those age 85 and older, about one half live alone. Those living alone had the highest poverty rate (31%) among all elderly households. Single persons are more likely to have lower household incomes and, therefore, pay a higher proportion of their income toward housing, making them more susceptible to economic hardship. New York City's median income for all elderly that live alone is \$14,050; this represents an income far below the HUD very low income threshold of \$26,900 a year.

Many who live alone do not have informal support networks; therefore, they stand at risk for social isolation. When seniors become isolated from their community, they lose much needed social connection, as well as outlets to healthcare and additional services that help them manage challenges before a crisis situation may occur.

Frail Elderly

A frail elderly person is defined as an individual that has reported a disability, mobility impairment, and/or self care limitation. The latest American Community Survey estimates that approximately 43.4% of the City's noninstitutionalized population over 65 years old reports some sort of disability. The amount of frail elderly persons in our City continues to increase, and points directly to a growing need for support services in the communities where seniors live. Bringing support services into existing homes and/or housing communities for the frail elderly may prevent the elderly from having to seek alternative housing, such as in an adult home, assisted living situation, and/or a nursing home. For example, minor home repair services provide funding assistance to seniors in needs of maintenance and/or upkeep of their homes when an individual no longer is physically and/or financially capable. The ability of a senior to age in place, by staying in one's home often proves to be the most beneficial and appropriate option. As our City's population of elderly continues to grow incrementally, the demand for more supportive services to support our seniors will remain on the rise.

Yet, the existence of our City's supportive service programs does not mitigate the ongoing need of some frail elderly who are no longer able to live in their existing homes for either safety and/or health reasons. In the case of these frail elderly individuals, a continuum of long-term, supportive housing is the required alternative that enables them to age confidently in place.

Income

Finding safe, affordable housing in New York City is a chronic and complex problem for most New Yorkers and is not limited to our aging population. The elderly population faces even greater challenges in this difficult housing market, as most live on very low fixed incomes, and are not able to find affordable rental, and/or cope with the rising expenses associated with maintaining a house. Elderly often are displaced from their homes and, in most cases, their families must bear the burden of the costs associated with finding them a suitable living situation.

Elderly headed households pay a higher percentage of their income for housing than does the rest of the City's population, but for singleparent households. In fact, elderly renters have lower household incomes than owners,

and their income levels continue to decrease with age. Seniors are faced with even greater risks associated with displacement than are other populations, due to the income losses they experience at retirement, the death of a spouse, and/or the increase of medical expenses, which leaves many seniors in financial need. In 2007, the median household income for older New Yorkers was \$25,409, only slightly higher than the 2000 median of \$23,388, and continues to remain lower than the nation's median of \$31,185. Those living alone had the highest poverty rate (31%) among all elderly households.

Inadequate income continues to be a critical problem facing the elderly in New York City. Whereas the United States has experienced a decline in the elderly national poverty rate from 12.8% in 1990 to 9.5% in 2007, New York City's older adults have experienced a 12% increase in poverty. In 2007, nearly one-fifth of New Yorkers age 65 and older lived in poverty, compared to 9.9% nationwide, and about 18% of all elderly-headed households earned an annual income below \$10,000. The number of elderly women living below the poverty level grew from 112,078 in 2000 to 121,674 in 2006, an 8.6% increase. The Federal poverty guidelines for 2011 – \$10,890 for a single person and \$14,710 for a couple – are so low that many who are in financial need do not qualify for most public benefits.

Many elderly New Yorkers rely on existing rent regulated buildings. According to the 2008 Housing and Vacancy Survey, the median age for those in rent controlled apartments was 68 years. Nearly 60% of all rent controlled householders and 17% of all rent stabilized householders were 65 years or more. In Mitchell Lama units, 26.4% of the householders were seniors 62 years and older while in Public Housing, that percentage was nearly 31%.

In addition to elderly living below the poverty level, there is a large number living near poverty. This group's incomes may be slightly above the level to qualify for public assistance or government subsidized housing, but inadequate to meet their increasing housing, health and service needs. This creates a severe disadvantage for this population in opting for market-rate housing or assisted/supportive living.

For many reasons, a large number of older New Yorkers have remained in their homes of many years. Some have remained by choice, in order to maintain social networks and access to familiar neighborhood resources, and others have remained because more suitable options are not financially feasible. In many instances, where large concentrations of residents have "aged in place" over a period of time, Naturally Occurring Retirement Communities (NORCs) have evolved. This phenomenon is evident nationwide, and is growing rapidly in New York City. NORCs in New York City range from single-building, middle income cooperatives to large public housing complexes with multiple buildings of rental units for low-income tenants. Since NORCs were not designed for the elderly and are not usually managed with paramount attention to the needs of the aging, they often lack the support services, as well as the physical amenities, needed by a growing number of older residents.

2. Inventory of Housing for the Elderly and Frail Elderly

Housing Programs and Resources

Housing and housing based services for the elderly consist of various types of programs and residential settings, funded through a variety of sources, which form a continuum of care and housing options. This continuum ranges from programs that help elderly to "age in place" in their own homes and communities, to apartments built or set aside for this population, in which the well elderly can live independently, to various levels of supportive/assisted living which provide up to the most intensive supervision and care possible without being a skilled nursing facility.

Programs that Assist with Aging-in Place

Rather than provide for the development of new housing for the elderly, these programs help seniors meet housing and utility costs, keep up with home repair, or bring needed services into the home, thereby playing a large part in helping seniors remain in their own homes and communities.

Senior Citizen Rent Increase Exemption Program (SCRIE) offers eligible tenants with exemptions from rent increases. The owners of such buildings receive a corresponding credit against their real estate taxes from the City of New York. Tenants must be at least 62 years of age, have a household income no greater than \$29,000, reside in housing regulated by NY State Division of Housing and Community Renewal, and pay more than 30% of the annual household income on rent.

Senior Citizen Homeowner Exemption Program (SCHE) (Formerly the Sr. Citizen Real Property Tax Exemption Program), administered by the Department of Finance, provides older owners of 1-,2-, and 3-family houses, condominiums, or cooperative apartments with exemptions of 5% to 50% on their New York City real property tax. Property owners who are 65 or older and whose federal adjusted gross combined income is less than \$37,399 a year are eligible for this benefit.

Senior Citizens Homeowner Assistance Program (SCHAP) provides deferred loans, forgivable loans, and low-interest loans for energy repairs to senior citizen owners of one- to four-family dwellings. The Federally-sponsored Home Energy Assistance Program (HEAP) and Weatherization Referral and Packaging (WRAP) program assist many low-income elderly with heating and weatherization costs. In addition, CDBG, State and City funds are utilized for various home repair and modification programs that help seniors maintain or adapt their surroundings for maximum safety and mobility.

New York City Naturally Occurring Retirement Community Initiative The Department for the Aging administers City funding to coordinated housing-based supportive service programs for low and moderate-income elderly residing in Naturally Occurring Retirement Communities. These services include, but are not limited to, case assistance and case management, healthcare management and assistance, social services, educational and recreational programs, and transportation services. NORC supportive service programs are designed and administered in partnership between social service and healthcare providers, housing owners and managers and elderly residents.

The program brings together owners and managers of multi-family housing, as well as NORC residents, to create an aging-friendly environment. The NORC community with a full supportive service program has many of the benefits of senior housing, yet allows the individual to remain within the familiar, secure, and multi-generational atmosphere of his or her home and immediate community. Through this initiative, the Department funds 28 NORC Supportive Service Programs housing locations, serving more than 8,000 elderly New Yorkers.

The Department for the Aging also funds a wide array of community-based and in-home services through contracts with local service providers. These services include congregate meals served in senior centers and home delivered meals for those elderly who are unable to travel to the senior center; care management in which trained professionals assess the needs of an elderly individual and make appropriate referrals for specific services; transportation programs that take seniors to and from appointments and activities; assistance with housekeeping, personal care and other activities of daily living when needed; crime prevention programs; legal assistance programs; health promotion activities; an extensive senior employment program, and many other needed services that enable elderly New Yorkers to live as independently as possible. The Department directly provides specialized assistance to elderly crime victims, including those who allege elder abuse, and has Resource Centers for Grandparents Raising Grandchildren, for Caregivers of elderly with chronic needs, and for the families of elderly suffering from Alzheimer's disease and other forms of dementia.

Independent Living

Throughout the five boroughs, developments have been built or set aside exclusively for the elderly who are relatively independent, but who may be in need of affordable housing or some light services. Buildings in this category may be with or without supportive services, and include housing built with funds from a variety of Federal, State, and City sources as well as from private funding. Waiting lists often can be years long. Major sources of housing for the elderly include 190 residences of Section 202 Supportive Housing for the Elderly, contributing approximately 17,680 units; NYC Housing Authority, with 57 Developments that include senior-only developments and senior-only buildings (and units) in mixed developments, contributing more than 10,000

units; 18 City and State supervised Mitchell Lama sites for seniors-only or with major set asides for the elderly, contributing 3,533 units.

Community-Based and In-Home Services

The Department for the Aging offers community-based and in-home services to the older adult population in an effort to enrich the quality of life of our aging community that allows seniors to age in place and to become more active participants in civic activities. In FY 2011 more than 10 million meals were provided in Senior Centers and delivered to home-bound elderly. In addition, more than 1 million hours of personal care and housekeeping services, and more than 499,867 hours of case management were provided to frail, homebound seniors.

Section 202 Supportive Housing for the Elderly

This is the only Federal program exclusively for the development of housing for low-income seniors. This program provides interest-free capital advances to eligible non-profit sponsors to finance the development-- either new construction or substantial rehabilitation -- of housing with support services and rental subsidies for income-eligible persons age 62 or over. HUD's FY 2011 Very Low Income limits for the five boroughs of New York City are \$28,650 for a single-person household and \$32,750 for a two-person household.

As residents of Section 202 and other independent living developments have aged, their needs for services change. To bridge the gap between independent and assisted living, HUD has made funds available to operators of federally-assisted housing to hire Service Coordinators. They perform a range of functions that link residents with needed services and community resources, thus helping them to age in place. Additional services offered must be provided by the operator. Typical services offered in many Section 202 buildings include social services, recreation and social activities, transportation services, and other services deemed necessary for maintaining independent living.

Assisted/Supportive Living

This section of the continuum of care for elderly has a continuum of its own, in that there are facilities and programs that provide for increasing levels of care within a residential setting. These facilities/programs include the following:

Assisted Living Program (ALP) This New York State program operates in adult homes or enriched housing units, and is designed to bring health and nursing services into these facilities which otherwise do not provide them. The program provides a Medicaid/SSI rate for services beyond those of the Adult Home or the Enriched Housing Program, but short of skilled nursing. Non-Medicaid eligible residents pay privately in these facilities.

Currently, there are 21 assisted living programs in New York City, providing more than 3,000 beds. The ALP must be in a facility that also has either an Adult Home or Enriched Housing certification from the NYS Department of Health.

Adult Homes are state-licensed and regulated facilities that provide long-term residential care, room, board, housekeeping, and personal care to five or more dependent, ambulatory frail elderly or mentally ill adults. Nursing and medical care are not included. Although most adult homes are proprietary, some accept social security, supplementary security income or social security disability (SSI level II) amounts as payment; others charge private rates. Adult homes are licensed and monitored by the New York State Department of Health.

Currently, there are 48 adult homes in New York City, providing more than 6,000 beds, including those designated for ALP programs.

Enriched Housing: The Enriched Housing Program enables elderly persons to remain in a home-like, community-based setting by providing housing with support services to five or more adults aged 65 or

over. This program includes an efficiency apartment and makes available services such as housekeeping, one daily congregate meal, personal care, case management, transportation, and other non-medical services. The program may be based in either publicly-subsidized housing, such as Section 202 housing, or privately-owned sites. The Enriched Housing program is certified and inspected by the New York State Department of Health.

Currently there are 19 NYS Enriched Housing programs operating in NYC, providing approximately 1,760 beds, including those designated for ALP programs.

Family Type Home for Adults: Family type homes for adults (FTHA's) constitute a long term foster care arrangement, which includes room and board, housekeeping, personal care, and non-medical supervision in a private home to no more than four frail elderly or mentally ill adults. FTHA providers are private individuals, not agencies or organizations. This housing program is regulated by the NY State Office of Children and Family Services.

In addition to the NYS program, however, a number of non-licensed, market-rate facilities have been developed in the City. These residences have been developed and operated primarily by large, for-profit (often national, public) companies, and provide a wide range of hospitality and social services. Personal and nursing care services are usually provided at additional fees.

e. Persons with Physical Disabilities

People with disabilities face barriers beyond the expected problems of cost and location in their search for fair housing. Meeting the dual challenges of locating housing that is both accessible and affordable can be exceedingly difficult, particularly when accessibility relates not only to the dwelling place itself, but also to the location on an accessible route to employment, services and other features of daily living which most people take for granted.

With the definition of “disability” expanding, there are more than 3.5 million people with disabilities living in New York State - of these approximately 1.9 million live in New York City according to the 2000 census data.

The disability community in New York City has a higher rate of unemployment and under-employment than other segments of the adult population. Over 350,000 New Yorkers receive Social Security Income (SSI). In New York City a person on SSI earns approximately \$761.00 per month. HUD's Fair Market Rate for a one-bedroom apartment in the City far exceeds that figure, leaving subsidized housing as the only option, other than sub-standard housing, for this community.

New York City's primary mode of inter-borough transportation, the subway system, is undergoing large-scale renovations in compliance with the Americans with Disabilities Act (ADA), the New York State Public Buildings Law and the New York State Transportation Law. Work includes the installation of elevators and other accessibility features in over 100 major stations, allowing access for people with mobility impairments and greatly improving access between boroughs. Housing designed to meet the needs of people with disabilities will have to take into account transit linkages when sites are being planned.

Low-income tenants and homeowners make use of a HUD-funded Project Open House (POH) program, administered by MOPD. The program assesses and removes architectural barriers such as narrow doorways, and provides such adaptive equipment as wheelchair lifts and tub seats in bathrooms in dwelling units to make them accessible.

The search for affordable and accessible housing in all five boroughs continues to be a major problem for people with disabilities.

People with disabilities in New York City make use of a wide range of housing and related services provided by government at the local, state and federal levels. Some programs offer financial support for developers to operate housing that is accessible and affordable to the disability community. Other programs remove barriers from dwelling units, thereby expanding the variety of housing choice open to people with mobility impairments. Still other programs provide critical on-site services that allow a person to manage independently, but offer support to a resident in a crisis situation. Following is an inventory of government-funded housing and related services available to people with disabilities in New York City.

Housing Information and Education Service: Administered by the New York City Mayor's Office for People with Disabilities (MOPD), this service provides affordable and accessible housing referrals for people with disabilities living in New York City. These resources can also be obtained on our web site. Disability community-based not-for-profit organizations are kept apprised of housing related activities initiated and performed by MOPD and HPD. Among the organizations are United Spinal, Centers for Independent Living, United Cerebral Palsy of NY, Inc., Sinergia, Inc. and others. Other referrals are also provided to governmental agencies: the State's Crime Victims Board that makes funds available to crime victims who have acquired a disability as a result of the crime; the State's Vocational and Educational Services for Individuals with Disabilities that gives assistance so that employment or education can be pursued.

The Mayor's Office for People with Disabilities educates architects, builders, landlords, building managers, homeowners, and tenants about accessible housing for people with disabilities. Education programs cover design, construction, owner/builder obligations and tenant/owner rights. Federal, state, and local laws are addressed.

Project Open House Program: Administered by the New York City Mayor's Office for People with Disabilities. Low-income homeowners and/or tenants submit requests to Project Open House, which in turn assesses and removes architectural barriers in residential dwellings to make them accessible.

Section 811 Supportive Housing for People with Disabilities: HUD provides direct federal capital advances to private, non-profit corporations and consumer cooperatives for the new construction or substantial rehabilitation of city-owned or private sites for housing for people with disabilities. There are now over 400 units of Section 811 housing in the City of New York.

Supportive Housing Program (formerly known as the SRO Loan Program): Administered by the New York City Department of Housing Preservation and Development (HPD), the program funds the acquisition and rehabilitation of properties as well as new construction for developing new permanent housing for low-income adults, many of whom have some disability. Currently over 5,000 dwelling units have become available as a result of this program. The majority of the dwellings are offered to people who have some mental, developmental, or physical disability.

The Disabled Rent Increase Exemption Program (DRIE) provides physically disabled tenants with exemptions from future rent increases and provides landlords with a tax abatement which can be used to reduce property taxes. To qualify, an applicant must rent an apartment as defined as eligible under the law (i.e. rent-controlled, rent-stabilized, Mitchell Lama); be named on the lease or rent order, be the tenant of record, or be the spouse with a disability of either; receive eligible state or federal disability-related financial assistance; meet the DRIE income eligibility requirement (\$17,580 for a single-person household, \$25,212 for a household of two or more members); and pay more than one-third of their household's aggregate disposable income for rent.

MOPD Resource Center: MOPD maintains a website that provides a wide array of resources, including its Disability Community Resource Network, a new online search tool for New Yorkers who want to find organizations that support people with disabilities; information regarding the Disabled Rent Increase Exemption, which provides a rent freeze to qualified disabled tenants; and information about city housing programs affecting the disabled community provided by other city agencies.

Affordable Housing Resource Center: MOPD is also a partner of the Affordable Housing Resource Center, a multi-agency partnership where the user will find information on all aspects of City housing, including renting an apartment, buying a home, and apartment maintenance issues.

II. OTHER ACTIONS

Introduction

This section includes the Consolidated Plan requirements that address: citizen participation; policies that foster and maintain affordable housing, or remove barriers to affordable housing; public housing authority activities including institutional structure, governmental coordination and resident initiatives; the elimination of lead-based paint hazards; the City's anti-poverty strategy; the institutional structure and coordination between public and private housing and social service agencies; the HOME HUD requirements; the HOPWA Eligible Metropolitan Statistical Area (EMSA) requirements; the certificate of consistency chart; certifications; and monitoring standards and procedures which ensures the City's compliance with the statutory provisions of the National Affordable Housing Act.

The Volume concludes with the summary of citizens' comments and Agencies' responses.

The federally-required Anti-Displacement Plan which describes the steps the City will take to minimize the displacement of families and individuals from their homes and neighborhood as a result of federally-funded project activities is on file and available for review at the Department of City Planning

A. Citizen Participation Plan

The Consolidated Plan regulations, Section 91.105, state that a citizen participation plan is required to be adopted by the City unless a plan that complies with section 104(a)(3) of the Housing and Community Development Act of 1974 has previously been adopted. New York City has had such a complying plan in effect for many years as an integral part of its budget process. This process, specified in the City Charter provides for citizen participation, as described below, on all programs, projects and services funded by the city's expense, capital and Community Development Block Grant budgets. Since the existing citizen participation plan complies with section 104(a)(3), adoption of a new plan is unnecessary; the following sections describe the existing citizen participation plan and process including a schedule of proposed activities.

The City of New York uses the calendar year January 1 to December 31 for the Consolidated Plan Year. The City's budget process outlined below follows the City's Fiscal Year which is July 1 to June 30. Please note that because the city fiscal year overlaps the Consolidated Plan year by six months, (the first six months of the Consolidated Plan year is the last six months of the City Fiscal Year) the programs and budgets identified in the Consolidated Plan were actually adopted by the City Council in June. Thus, the Consolidated Plan programs and budgets will be subject to an amendment if needed. A substantial amendment will be presented to the public with a 30 day review period when and if programs are added, deleted or adjusted in their allocations as described in the Substantial Amendment section below. The substantial amendment is submitted to HUD after the public review period.

As stated in Volume One, this document, the Consolidated Plan, is the City's application for the four HUD Office of Community Planning and Development Entitlement Programs, CDBG, HOME, ESG, and HOPWA. The allocation of these funds will be for housing, homeless, supportive housing and community development programs and are determined in the City's Budget Process. The Consolidated Plan focuses on the money expected to be received from HUD and the matching funds that the City uses primarily from City tax levy; however, funds from the State, the private sector, and nonprofit organizations are also described.

The Department of City Planning has placed the Consolidated Plan in its entirety on the Department's web site at:

<http://www.nyc.gov/planning>

The City's budget is required to be adopted on or before July 1 every year. Citizens are encouraged to get involved in this decision-making process. The City's budget process which is voted on by the City Council and as outlined below is subject to extensive public review and participation. The City has an established citizen participation process that is divided into three phases: 1. needs assessment and budget preparation (May to November); 2. preliminary budget (November to April); and 3. executive and adopted budget (April to July). The Budget Process solicits citizens comments at several stages before the final budget is adopted.

Citizen participation in developing the budget is mandated by the City Charter. Through months of consultations with the 59 community boards, expense and capital budgets for operating agencies are established. Additionally, public hearings may be held by the individual agencies to assist in the development and enhancement of their respective programs and operations. This provides the agencies with a significant understanding of community priorities for capital project and service delivery improvements.

This schedule emphasizes the participation of the community boards at the local level because, by mandate of the City Charter, these boards are charged with monitoring city service delivery, proposing budget priorities and reviewing development and land use proposals at the community level. The 59 local community boards are the primary mechanism for citizen participation in the budget process in New York City. Others wanting input into the city's budgetary decisions find it appropriate and useful to obtain a community board's endorsement of their proposals. Each board is composed of up to 50 people who live or work in the community district. All members of the community board are unsalaried volunteers appointed by the Borough President. Half of the members are

appointed from a list submitted to the Borough President by members of the City Council who represent the district. The other half are selected directly by the Borough President. Each board is allocated a city-funded budget to rent office space, dispense information and hire a District Manager and staff to carry out its objectives. Boards have a number of standing committees, such as health and hospitals, housing and zoning, budgeting, parks and recreation, and transportation. Many boards actively encourage non-board members to become committee members. In some boroughs, such "public" members have the right to vote. Community boards have existed in some parts of the city since the early 1960's. The Charter was amended in 1975 and 1989 to further institutionalize and broaden their advisory powers.

In April during the preliminary budget phase, the Consolidated Plan committee holds a Public Hearing to hear comments on how the housing, homeless, supportive housing and community development funds should be spent. The Public Hearing is to collect comments on the preliminary budget and the formulation of the Consolidated Plan. A brief question and answer session regarding the formulation of the Proposed Plan follows the Public Hearing. The comments received are summarized, and if appropriate, incorporated in this Plan. By October, the Consolidated Planning Committee consolidates the information and releases a Proposed Consolidated Plan for public review.

In early November, the Committee holds a public hearing to hear the public's comments on the Proposed Plan, which is followed by a question and answer session with City agency representatives in attendance. The public's comments are incorporated into the submission version of the Plan. The City submits the Consolidated Plan to HUD each year on November 15 in order to receive the federal funds on the first day of the Consolidated Plan Year, January 1st.

Opportunities for individuals, community boards, and other organizations to participate in planning and budgeting occur at many points in the following budget process schedule:

Phase 1: Needs Assessment/Budget Preparation

May/June	Community Boards assess community needs to prepare District Needs Statement.
Mid-June	District Needs Statements are submitted to the Department of City Planning.
June/July	District consultations are held between agency local service chiefs and community boards.
Early July	Reservations for borough consultations are submitted by all community boards to the Office of Management and Budget's Office of Community Board Relations (OCBR).
Mid July	Agendas for borough consultations are submitted by all community boards to OCBR.
By August 15	Agency policy statements are submitted to OCBR.
August	Budget request forms and instructions sent to community boards.
August	Budget consultation materials are sent to community boards and agencies.
September to early Oct.	Borough consultations are held between community boards and agencies.
September to October	Public hearings are held by community boards in their communities on budget requests and district needs.

Early October to early Nov.	Public comment period for the Proposed Consolidated Plan. To receive comments on the use of funds for housing, homeless, supportive housing and community development activities for the Proposed Consolidated Plan.
November 1	Final budget requests with priorities are submitted to OMB (at least 30 days before departmental estimates due date).

Phase 2: Preliminary Budget

Early November	Second Public Hearing on the Proposed Consolidated Plan to receive comments on the HUD submission.
Early November	Budget requests are sent to agencies by OMB for evaluation as part of the departmental estimates.
By Nov. 15	Consolidated Plan scheduled to be submitted to HUD.
By Nov. 15	Citywide Statement of Facility Needs: community boards and Borough Presidents may comment within 90 days.
Mid December:	Budget requests are returned by the agencies to OMB with response.
January 1	Consolidated Plan Year begins.
January 16	Mayor's Financial Plan and Preliminary Budget, which includes the agency departmental estimates, is released.
January 16	Register of Community Board Budget Requests for the upcoming city fiscal year is sent to the community boards. This includes agency funding recommendations for community board requests.
February	Agency heads write to boards to explain negative response to budget requests.
By Feb. 15	Public hearings are held by the community boards on the preliminary budget.
By Feb. 15	Statement on the Preliminary Budget is sent by the community boards to the Mayor, OMB, City Council, Borough Presidents, and Borough Boards.
By Feb. 25	Borough Board public hearing is held on the Preliminary Budget and Statement of Borough Priorities is submitted prior to Borough President executive budget submission.
By March 10	Borough Presidents Capital and Expense Budget allocations are submitted (5 percent share) to the Mayor and City Council for inclusion in the executive budget. Borough Presidents recommend changes to the Preliminary Budget.
Mid-March to late March	Public comment period for Proposed Consolidated Plan Annual Performance Report (APR). To receive comments on the City's use of federal funds for housing, homeless, supportive housing and community development activities for the previous Consolidated Plan Year.
By March 25	Public hearings on the preliminary budget are held by the City Council.

By March 31	Consolidated Plan Annual Performance Report is scheduled to be submitted to HUD.
Mid-April	First Proposed Consolidated Plan Public Hearing held to receive public comments on the formulation of the next year's Plan and the past year's use of funds for housing, homeless, supportive housing and community development activities funded by entitlement programs: CDBG, ESG, HOME, and HOPWA.

Phase 3: Executive/Adopted Budget

April 26	Executive budget is released by the Mayor.
April 26	Register of community board budget requests are sent to the boards which includes OMB funding recommendations.
May 3	Borough Presidents Modify Executive Budget Borough Allocations (5 percent share), when necessary.
By May 6	Borough Presidents Modify Executive Budget Recommendations, when necessary.
By May 25	Public hearings on the Executive Budget are held by the City Council.
May-June	Mayor writes to boards to explain negative responses to budget requests.
June 5	City Fiscal Year/CD City Fiscal Year Budgets are adopted by the City Council.
By June 6	The Budget is certified by the Mayor, Comptroller and the City Clerk.
July 1	City Fiscal Year begins.
July	The Mayor updates the Financial Plan - 30 days after adoption.
August	Borough Presidents may propose a reallocation of personnel and resources.

Citizens have an opportunity to participate in the above process in several ways: participate locally with the community board and organizations represented on community board committees; attend and testify at local hearings held by community boards and those held by the City Council. Hearings held in the fall facilitate the community boards developing their Statement of Community District Needs and Priorities and their Capital and Expense/CD Budget project/program requests. In February, citizens have an opportunity to testify at a community board public hearing on the Preliminary Budget in relation to community needs. Public hearings are held by the City Council in May on the Executive Budget and the Proposed Community Development Budget. In addition, the Consolidated Plan Committee will hold public hearings on the Consolidated Plan (both before and after the publication of the proposed plan). Notice of public hearings is made by means of mailed notices, newspaper notices and/or notice in the City Record. Information pertaining to programs and projects subject to public hearings is made available at the offices of the Department of City Planning, OMB and other agencies.

The citizen participation plan regulations specify required elements in seven areas. The required elements are incorporated in the schedule shown above. They are restated here by category to respond specifically to the regulatory language:

(1) Encouragement of citizen participation. The advance notice of public hearings, the provision of technical assistance and information to community boards and others, the schedule of multiple public hearings, and the availability of line agency staff to discuss proposals at community board meetings are part of the existing City's

budget process and are all designed to encourage widespread citizen participation in the development of the Consolidated Plan, any amendments to the plan, and the performance report.

(2) Information to be provided includes budget consultation materials, budget request forms and instructions sent to community boards, consultations between agency local service chiefs and community boards, agency policy statement and other materials made available during the budget process described above. Such information includes proposed budgets for programs and projects that would benefit persons of very low- and low-income and plans to minimize displacement of persons and to assist any persons displaced. The city plans to publish the proposed Consolidated Plan in early October and to hold at least one public hearing, in accordance with the schedule noted above. The plan is scheduled to be submitted to HUD by November 15. Copies of the Consolidated Plan will be available at all offices of the Department of City Planning and other city agencies. The City will provide at least 30 days to receive comments from citizens on the plan before it is submitted to HUD.

(3) Access to records. The city provides widespread access to records through the consultations, meetings and other communications during the budget process described above. Reasonable and timely access to information and records relating to the Consolidated Plan and its use of assistance for component programs during the previous five years will be assured as it has been during the Community Development Budget process. In addition, copies of the Consolidated Plan will be made available in alternative formats to the public in buildings accessible to persons with a disability.

(4) Technical assistance to groups representative of persons of very-low and low-income has been provided for many years in the budget formation process described above. Technical assistance is provided to all community boards by the Department of City Planning and OMB regularly, and by other agencies as needed. Community boards receive technical assistance during their committee meetings, board meetings, consultation with line agencies, etc., on identifying and promoting programs, projects and service improvements that will benefit their constituent population and economic conditions.

(5) Public hearings on the Consolidated Plan are required on at least two occasions during the year. The hearings will focus on housing, homeless, supportive services, and community development needs, development of proposed activities, and review of program performance. The Department of City Planning held a public hearing in April and has scheduled an additional public hearing on the plan in November. The first hearing was held as required for comment before the proposed Consolidated Plan was published. Notice of the hearings will include locations to obtain copies and data about the plan elements so that informed comments are facilitated. The hearings will be held at times and locations that are convenient to the population and will provide accommodation for persons with a disability, including a sign language interpreter. The plan will identify how the needs of non-English speaking residents will be met where public hearings can be reasonably expected to be attended by a significant number of non-English speaking residents.

(6) Comments and complaints. The Consolidated Plan will include consideration of any comments or views received in writing, or orally at the public hearings, in preparing the final Consolidated Plan. Attached to the plan will be a summary of the comments or views, including comments or views not accepted and the reasons for non-acceptance. The City budget process calls for agency heads currently to notify community boards in writing of the reasons for non-acceptance of their recommended programs or projects. The HUD requirement that a substantive written response to every written citizen complaint be made within an established period of time (within 15 days where practicable) will be met within the existing structure.

Substantial Amendments

Following are the criteria for what constitutes a substantial amendment to the Consolidated Plan in New York City:

- * if a site or area changes from one borough to another;
- * if the city deletes an activity or adds one to the Consolidated Plan; and
- * if a change results in a reduction greater than fifty percent (50%) of total activity category funding.

According to federal guidelines, a substantial amendment is also required by a locality if the amount actually received for a specific entitlement grant (CDBG, HOME, ESG and/or HOPWA) is fifteen percent (15%) greater or less than the locality's requested entitlement grant's amount (as outlined its Proposed Consolidated Plan).

The public is notified of any substantial amendments through public notices posted in three newspapers with city-wide circulation, an English-language, a Spanish-language and a Chinese-language. In addition, notices are mailed to the Consolidated Plan mailing list of approximately 1,800 citizens, public officials and organizations. An announcement informing the public of the substantial amendment is placed on the Department of City Planning's internet website. Lastly, a notice was placed as a public service message on the New York City-operated local cable television access channel. The notices included news about the availability of information and data contained in the amended Plan to better facilitate informed comments. The public is allowed 30 days to review and comment on the amendment before it is submitted to HUD. Public notices concerning substantial amendments are posted throughout the year. An updated Consolidated Plan with both substantial and minor amendments is submitted to HUD during the month of September.

Individuals and/or organizations who wish to be placed on the Consolidated Plan mailing list may contact: Charles V. Sorrentino, New York City Consolidated Plan Coordinator, Department of City Planning, 22 Reade Street 4N, New York, New York, 10007, or telephone (212) 720-3337.

Computerized Geographic Files for Mapping

The Department of City Planning, through the BYTES of the BIG APPLE project, provides the public with several base map files and data files of New York City, and it licenses one application to the public. GIS software is needed to use the base map files. Several free readers are available that can display, print and perform other mapping functions with these files. These free readers include ESRI's ArcExplorer (www.esri.com) and MapInfo's ProViewer (www.mapinfo.com). The data files can be used with database, spreadsheet or GIS software.

Free download of some of these files, along with descriptions, metadata, samples and/or user guides for all of the products, are available at the Department's website, <http://www.nyc.gov/planning>. The BYTES of the BIG APPLE pages can be directly accessed at: <http://www.nyc.gov/html/dcp/html/bytes/applbyte.shtml>

The following sets of files can be downloaded for free from the Department of City Planning website:

- **DCPLION Single Line Street Base Map** in ESRI's File GeoDatabase format. This base map contains a single line representation of the City's streets with address ranges, street names and other geographic information.
- **NYC GIS Zoning Features** – this dataset includes five polygon feature classes representing the city's zoning districts, commercial overlay districts, limited height districts, special purpose districts and subdistricts, and one point feature class showing the approximate locations for restrictive/environmental declarations. These features are provided in ESRI shapefile and file geodatabase formats.
- **Administrative and Political Districts** are available as ESRI/ArcView Shapefiles. These files contain district outlines and district numbers. Citywide base map files are available for the following districts: Census Blocks, Census Tracts, Projection Areas, Police Precincts, Fire Companies, Health Areas, Health Center Districts, School Districts, Community Districts, Boroughs, Election Districts, City Council Districts, State Assembly Districts, State Senate Districts, Municipal Court Districts and Congressional Districts.
- **Selected Facilities and Program Sites** - Data providing the location, type and capacity of public and private community facilities in New York City, including schools, parks, libraries, public safety, day care, foster care, special needs housing, health and mental health facilities and programs. To facilitate

analysis and mapping, the data is geocoded and available in two formats: ASCII delimited text files and Microsoft Access database.

- **PAD™** - The PAD (Property Address Directory) file contains additional geographic information at the tax lot level not found in the PLUTO files (see below). This data includes alias addresses and Building Identification Numbers (BINs). It consists of two ASCII, comma delimited files: a tax lot file and an address file. The free download includes the Street Name Dictionary (SND) and SND Documentation.
- **nycProjectionAreas** – These are geographic files of Projection Areas (depicted in PLANYC 2030) as created by the Department of City Planning using whole census tracts as building blocks. They are available as an ESRI shapefile. An excel spreadsheet of equivalencies between census tracts and Projection Areas is also available.
- **NHoodNames** – This is an ESRI shapefile of neighborhood labels as shown on the New York: A City of Neighborhoods map.
- **Areas of Interest** – An ESRI shapefile of areas of interest labels as shown on the New York: A City of Neighborhoods map.
- **FRESH Zoning Boundaries** – An ESRI shapefile showing areas where zoning incentives apply to promote the development and expansion of full line grocery stores and supermarkets.
- **NYC Publicly Accessible Waterfront** – NYC Waterfront Parks shapefile, Publicly Accessible Waterfront Spaces (PAWS) shapefile and Publicly Accessible Waterfront Spaces (PAWS) Database..

The following sets of files are available through a license agreement with the Department:

- **PLUTO™** - Extensive land use and geographic data at the tax lot level in ASCII comma-delimited format. The PLUTO files contain more than seventy fields derived from data maintained by city agencies. Tax lot data for selected tax blocks or Community Districts can be extracted using the PLUTO Select application which is included with this product. The licensing fee is \$250 for citywide data.
- **MapPLUTO™** - PLUTO data merged with the Tax Lot features of the Department of Finance's Digital Tax Map (DTM). MapPLUTO is provided on five CD-ROMs, one for each of New York City's boroughs. Each CD contains datasets in ESRI Shapefile. The licensing fee is \$300 per borough.
- **Geosupport Desktop Edition™** - a Windows® based geocoding package boasting a 99% hit rate that allows for the standardization, validation and processing of geographic locations throughout New York City. The licensing fee is \$2250.
- For information on licensing these products, call (212) 720-3505.

Not-for-Profit Participation in the City's Consolidated Planning Process

In addition to the citizen participation outreach activities conducted in relation to the formulation and publication of the 2012 Plan, the Consolidated Plan Committee member agencies individually conducted citizen participation outreach activities relating to their own agency's area of expertise.

Department of City Planning

The Department encourages and fosters citizen participation in the planning process through the dissemination of publications such as, maps and reports which give citizens the opportunity to formulate informed comments.

Maps and publications include both citywide and local area planning and zoning reports; reference and statistical reports; 2000 census-based demographic reports; rules and regulations; various city-wide and borough-based maps; zoning maps, land use maps; and tax block and lot map atlases. These maps and publications are available for purchase at the Department of City Planning Bookstore, 22 Reade Street, New York, N.Y. 10007, (212) 720-3667.

Another approach available for citizens to participate in the City's planning process is called, a 197-a Plan, named after Section 197-a of the New York City Charter. In its plan, a community can portray its vision for the future by recommending strategies to address any or all of a range of concerns that may include land use, housing, economic development, environmental or social issues. The Plan may take several forms. It may be comprehensive in scope, addressing a wide range of concerns throughout the community district, or it may focus on a single issue in all or part of the community district.

Plans for the development, growth and improvement of the city and of its boroughs and community districts may be initiated by (1) the mayor, (2) the City Planning Commission, (3) a borough board with respect to land located with two or more community districts, or (4) a community board with respect to land located within its community district. A community board or borough board that initiates any such plans shall conduct a public hearing on it and submit written recommendation to the City Planning Commission.

In order to assist communities formulate their Plans, the Department has released two publications: 1) Rules for the Processing of Plans Pursuant to Charter Section 197-a, which documents the rules governing the creation, submission, and review of the proposed plan; and 2) 197-a Technical Guide, which describes the standards regarding the proper form and content of the 197-a and to foster a sound planning policy.

In addition, New Yorkers are given the opportunity to participate in land use-related planning issues through the City's Uniformed Land Use Review Procedure (ULURP). As described in the ULURP Guidelines and Procedural requirements, the review process affords citizens the opportunity for input at public hearings held on various levels of municipal government: at the Community Board level, either as a Community Board member or as a resident of the Community; the Borough President, City Planning Commission, and City Council levels; and for hearings on special permits or applications for a variance to the City's Zoning Resolution, at the Board of Standards and Appeals.

City Planning Commission public hearings are held on alternate weeks throughout the year. To obtain information on the date and times of the Commission hearings, an individual or organization may access the Department of City Planning's Internet web site at: <http://www.nyc.gov/planning>.

Please refer to Section B., Relevant Public Policies and Barriers to Affordable Housing for a description of which land use actions that require public review, i.e., ULURP.

Department of Housing Preservation and Development

HPD consistently welcomes comments and advice from the not-for-profit community to improve our programs and performance. Further, HPD is committed to a policy of providing access to non-profit organizations who seek to participate in HPD's development and rehabilitation programs, as well as in HPD's numerous community-based alternative management programs. HPD reaches out to the non-profit community by hosting regular Vendor Opportunity Sessions, which provide information on HPD and other City contract opportunities. HPD maintains a directory of not-for-profit agencies that do business with the Agency which is also used for direct outreach purposes. Firms in the directory regularly receive informational materials. Firms seeking information regarding the directory may contact the Economic Development Unit in the Office of Community Support Services and Equal Opportunity at (212) 863-7928.

Department of Homeless Services

Working with Communities

Homeless shelters are part of neighborhoods. As a result, DHS works with communities to address issues and concerns as they arise. Communication with local leaders and community residents is important for two reasons: First, as community residents understand the services offered and operations of the facility, and are made aware of the ongoing improvements that are being implemented, they usually are more accepting of facilities and programs. Second, DHS relies on feedback from community members regarding facility operations so that the Department can address ongoing issues. One mechanism for community residents to make their concerns known is through the Shelter Community Advisory Board (CAB). Residents can contact the DHS Office of Government and Community Relations to discuss setting up a CAB or any concerns and issues related to a local shelter. Local Community Boards as well as elected officials are also available to address community problems or issues. DHS Office of Government and Community Relations works diligently to maintain relationships with elected officials and community boards in order to improve the quality of life for shelter residents and residents of the surrounding communities.

Office of Client Advocacy

The Department of Homeless Service's Office of Client Advocacy was established in June 2002. The Office assists clients by working in partnership with DHS staff, provider organizations and other community agencies. The Office operates the DHS toll-free Homeless Hotline. There are nine staff members located at DHS' central office where they see clients. In addition they make site visits to meet clients at their shelters. Client advocates empower clients to resolve issues, particularly related to housing. Advocates assist clients in the following ways: Providing crisis intervention for people at risk of becoming homeless; assisting clients to overcome the barriers to obtaining permanent housing; negotiating with other agencies and providers on behalf of the clients; and helping mediate conflicts between shelter staff and clients. The Office of Advocacy is active in policy discussions within DHS and is a strong, effective voice advocating systemic reform on behalf of homeless New Yorkers.

Request for Proposal (RFP) Process

When DHS releases an RFP for homeless services, it requires that respondents submitting a proposal notify the Community Board of the Community District where the facility is located. The respondent must provide information about their proposal, including a presentation if requested by the Community Board. In addition, proposers are awarded points if they can provide letters of support from Community Boards, elected Officials, and civic and community-based groups.

Shelter Community Advisory Board (CAB)

Transitional housing facilities that receive DHS funding are obligated contractually to maintain active Shelter Community Advisory Boards that must meet regularly, unless DHS is otherwise notified in writing. Composition of an Advisory Board varies depending on the facility and its provider. Members may include the shelter director, local community residents, representatives of elected officials, and other city agencies, as well as the Police Department, community, business and religious leaders, shelter residents, etc. With help from the Shelter Community Advisory Boards, DHS is able to elicit information to mitigate issues and improve services at specific sites, and obtain broad-based feedback that can also help to refine New York City's Continuum of Care.

HUD Notice of Funding Availability (NOFA) Process

The New York City Coalition on the Continuum of Care (The Coalition) encompasses an extraordinarily broad range of homeless stakeholders to ensure a decision-making process that is inclusive of and relevant to the City's evolving needs and resources and avoids an overlap, duplication or contradiction of efforts. The Coalition is the representative body of providers, consumers, community members and government that regularly meets to handle all the details involved with the HUD Targeted Homeless Assistance Grants. Representation on the Coalition Steering Committee by the provider coalitions (each of which serve a unique element of the homeless population) ensures that the needs and concerns and the planning activities of all homeless providers are carried to the Steering Committee. The Coalition's overall structure is designed to foster

an ongoing exchange of information among consumers, direct providers, advocates, and the committees represented by the Coalition.

The Steering Committee meets monthly and is responsible for responding to the HUD NoFA. This includes: Analyzing gaps and needs in the homeless and housing systems; establishing priorities and criteria for funding; establishing annual priority setting processes; evaluating renewing programs in cooperation with DHS; and endorsing evaluation criteria and process of renewal evaluation;. It is also responsible for reviewing and planning appropriate actions with regard to advocacy and policy issues of the New York City Continuum of Care and DHS and HUD related topics.

Currently, The Coalition Steering Committee consists of representatives from each of the following constituencies:

- Coalitions of providers of services to homeless people. The Steering Committee represents eight coalitions who in turn collectively represent more than 100 not-for-profit organizations throughout NYC. The eight coalitions representing all non-public entities include the Homeless Services United, VOCAL (AIDS housing)), the Association of Housing for Runaway and Homeless Youth Organizations, the Coalition of Voluntary Mental Health Agencies, the NYC Coalition of Domestic Violence Residential Providers, the Supportive Housing Network of New York (SHHNY), the Association for Community Living (ACL), and United Neighborhood Houses. Each member coalition appoints one representative and an alternate to the Coalition Steering Committee. This representation makes the New York City Coalition on the Continuum of Care a very unique and dynamic process in which the appointed representatives convey information about the planning process to the member organizations as well as carry information from the organizations back to the Steering Committee. The coalitions are elected by the provider organizations who have received McKinney Vento Continuum of Care funding in the past three NOFA years.
- Consumers. Eight consumer representatives sit on the Steering Committee. Each consumer representative speaks for a specific constituency of people receiving homeless services: those in the single adult shelter system, veterans, domestic violence, HIV/AIDS, substance abuse, mental health, formerly incarcerated / parolee, and those in permanent supportive housing. The consumer representatives are elected directly by their peers through a series of meetings held prior to the beginning of the new NOFA year cycle. Consumers receive a stipend for their participation and travel expenses.
- At-Large Members. The at-large members represent the diverse communities and interests affected by homelessness. These three members could include: advocates for homeless people, survivors of domestic violence, formerly homeless people, veterans, community development organizations, the faith community, and the academic community. At-large members apply through the Nominating Committee and are elected by the Coalition Steering Committee.
- Government Agencies. The government representation consists of relevant staff from the following government local and state agencies: NYC Department of Homeless Services (DHS), NYC Department of Housing and Preservation Development (HPD), NYC Department of Health and Mental Hygiene (DOHMH), NYC Human Resources Administration (HRA Department of Mental Health (OMH), the NYS Office of Alcohol and Substance Abuse Services (OASAS), and NYS Office of Temporary and Disability Assistance (OTDA).

The NYC Continuum of Care (NYC CoC) process generates considerable interest and involvement on the part of the public. The NYC CoC has a website www.nychomeless.com for all parties interested to keep up to date on happenings within the Continuum. The NYC CoC has a fully operational Homeless Management Information System (HMIS) with over 90% participation rate among CoC provider agencies.

In 2009, the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act was enacted. While federal regulations are still being developed, the HEARTH Act codified into Federal law the requirement that communities demonstrate a collaborative, coordinated planning process for the expenditure of Federal Homelessness Assistance funding. It is anticipated that the HEARTH Act will impact the NoFA application process, beginning in 2012.

HUD Emergency Solutions Grant Substantial Amendment Process

In New York City (NYC), the CoC primary decision-making group is the NYC Coalition on the Continuum of Care (NYC CCoC) Steering Committee. The twenty-seven members of the NYC CCoC Steering Committee include 8 government representatives, 8 consumer representatives, 8 coalition representatives, and 3 at-large representatives. The Steering Committee is led by co-chairs elected annually by the Committee. The NYC Department of Homeless Services (DHS) serves as the CoC lead agency for the CCoC and as the coordinator of the annual project evaluation process. DHS also serves as the HMIS lead for the CoC and receives HUD funding for this purpose. As the lead agency of the NYC CCoC, and the grantee of this funding, DHS is primed to coordinate collaboration with the CoC on the use of the funds. The Department of Homeless Services (DHS) is invested in making sure the CCoC is consulted on the use of ESG funds and that the activities funded using this grant are in line with the CoC's strategic plan and that of the City's larger plan to overcome homelessness in New York City.

On March 16, 2012 the Deputy Commissioner for Prevention, Policy and Planning presented the framework of the plan to the Steering Committee of the NYC CCoC. The program activities, performance standards, and HMIS-related issues were all discussed. The presentation was also posted on the CCoC website for members to review and comment.

In addition, on March 14, 2012 the Data Management Committee of the NYC CCoC discussed the ESG programs and how they would be incorporated into the local HMIS.

Individuals who are homeless or who are formerly homeless sit on both the Steering Committee as well as the Data Management Committee and had input on the plan via both channels, thus satisfying Sec. 576.405(a).

DHS strives to maintain and create collaborative relationships with our public and private partners engaged in the work of overcoming homelessness in New York City. DHS worked with the Department of City Planning to ensure a process that encouraged citizen participation regarding this proposed substantial amendment, in accordance with federal regulations.

Outreach

In accordance with federal regulations 24 CFR 91.105(c)(2), regarding Consolidated Plan citizen participation requirements, the City of New York conducted outreach to solicit comments on the amendment. The public was notified of the comment period in several ways. A letter announcing the public comment period was sent to approximately 2,200 New York City residents, organizations and public officials. Second, the notice was posted on the Department of City Planning's Consolidated Plan-related Internet webpage (the Department of City Planning is the City of New York's lead agency for its Consolidated Plan-related submissions). Third, a notice of the public comment period was published in three newspapers with city-wide circulation, an English-language, a Spanish-language and a Chinese-language. Lastly, a brief notice regarding the comment period was posted as a public service message on the New York City-operated local cable television access channel.

Availability of the document

In accordance with federal regulations 24 CFR 91.105(g), regarding Consolidated Plan citizen participation requirements, the City of New York made copies of the amendment available to the public, free of charge, at the New York City Department of City Planning's Bookstore, 22 Reade Street, Lobby, New York, New York, 10007. In addition, an Adobe PDF version of the amendment was made available for free downloading from the Internet via both the Department of Homeless Services' and the Department of City Planning's websites at: www.nyc.gov/dhs and www.nyc.gov/planning, respectively.

Department of Health and Mental Hygiene/Office of AIDS Policy Coordination

For a discussion on the opportunities individuals and not-for-profits are given to participate in HOPWA-related activities, please refer to Part I, Section D2., Supportive Housing Continuum of Care for Special Needs Populations, b. Persons with HIV/AIDS.

New York City Housing Authority

NYCHA's Annual Plan process, a HUD-mandated report, includes multiple opportunities for resident and general public involvement. The Plan is developed in consultation with 71 duly elected public housing resident leaders, the Resident Advisory Board (RAB), which consists of 52 delegates, 19 alternates, and 5 participants from the Section 8 program. In addition, NYCHA holds five (5) Community Roundtable meetings and one public hearing on the formulation of the Plan, which are open to the general public. NYCHA's Community Operations Department facilitates and supports the activities of the RAB as they seek input from residents and fulfill their responsibility to (1) make recommendations and provide advice to NYCHA as it develops the Agency Plan and (2) disseminate information regarding the Plan to NYCHA residents.

NYCHA's Department of Community Operations works cooperatively with public, community-based and other not-for-profit agencies to facilitate the delivery of essential social, cultural, health, educational and recreational services to public housing residents. These services may be provided at community, senior, day care, and Head Start centers on the grounds of public housing developments or at non-NYCHA sites. Service providers may contract with NYCHA or another not-for-profit agency, operating under a sponsorship agreement with NYCHA. Center sponsorship agreements may be developed through direct application to NYCHA .

If a government agency or not-for-profit organization assists unemployed or under-employed public housing residents to achieve self-sufficiency through job readiness, workforce development, employment placement, financial literacy and asset building programs, they are encouraged to contact NYCHA's Office of Resident Economic Empowerment and Sustainability at 787 Atlantic Avenue, Brooklyn New York 11238.

Not-for-profits interested in program sponsorships should contact NYCHA's Department of Community Operations at 90 Church Street, 5th Floor, New York, N.Y. 10007.

Department for the Aging

DFTA develops a Four Year Plan, updated annually, which outlines senior citizen needs and the Department's plans in all areas of services to the elderly, including community development and housing. Input from the public assists the Department in updating its plans for the City Fiscal Year and in enhancing its long-range planning efforts on behalf of the City's elderly. DFTA invites the public, and especially New York's seniors to attend annual public hearings, held each fall in all five boroughs, to present testimony, offer recommendations and deliver comments on the Plan and all issues of concern to older New Yorkers. The Plan is widely distributed prior to the hearings and is available on DFTA's website, with an appeal for response from the community. After the public hearings, DFTA prepares an executive summary and response which is available for viewing on the DFTA website at: www.nyc.gov/aging.

To obtain information on the date and times of hearings, an individual or organization may contact 3-1-1 in September, or access the Department for the Aging website at <http://www.nyc.gov/aging>.

In addition to the public hearings, DFTA regularly hosts meetings with a Senior Advisory Council of elderly consumers and community partners, who represent a wide range of expertise, interests and perspectives. DFTA meets formally with community boards, advisory committees, interagency councils on aging, and many other organizations to solicit further community input and participation. Information on senior-related activities in the community may be obtained from each community board office.

Mayor's Office for People with Disabilities

MOPD maintains a working relationship with a variety of community-based not-for-profit organizations reflecting its role as a referral provider and liaison to the disability community, and its responsibility for developing and coordinating City policies that affect people with disabilities. Among the organizations MOPD works with are the Independent Living Centers, United Cerebral Palsy of N.Y., Inc., United Spinal, the

Lighthouse for the Blind, Disabled in Action, N.Y. Society for the Deaf, Open Housing Center, Jewish Guild for the Blind and others. These, and other organizations and individuals, are informed of the housing activities initiated and performed by MOPD, and are given the opportunity, through mailings, public presentations and MOPD's Internet web site, to share their ideas and perspectives. Organizations and individuals are invited to participate in the Consolidated Planning process, including hearings on the draft of the proposed Consolidated Plan. To obtain information on the date and time of hearings, an individual or organization may also contact MOPD directly by telephone (212) 788-2830, FAX (212) 341-9843, or TTY (212) 788-2838 or web site <http://www.nyc.gov/mopd>.

Human Resources Administration (HRA)

Commissioner Doar reestablished the HRA Commissioner's Advisory Committee (CAC) meeting which is held three times each year. The CAC was initially established under State Executive Order 521 on July 7, 1975. The state regulation requires that the CAC function in an advisory capacity in an effort to ensure public participation in the provision of social services within the City of New York. The CAC is comprised of approximately 30 representatives from the social service community such as the Food Bank for New York City, Safe Horizon, and the Children's Aid Society, as well as consumers of HRA services. Its mission is to serve in an advisory capacity to the Commissioner with regard to the policy and funding decisions pertaining to the use and delivery of social services provided by the City of New York.

HRA funds over 400 social service contracts with Community Based Organizations with an annual value over \$1.2 billion. HRA sends notifications of planned contract awards to the five Borough Presidents for distribution to all the 59 Community Boards. HRA notifies an extensive bidder's list that includes not for profits human services providers throughout the City of contracting opportunities. Human services providers can request to have their program added to the City's bidders list by requesting an application from the Vendor Enrollment Center, Office of the Mayor, Office of Contracts, 253 Broadway, 9th Floor, New York, NY 10007. The vendor can also obtain an application by calling the Vendor Enrollment Center at (212) 857-1680. The Vendor Enrollment Center can only distribute the NYC FMS Vendor Enrollment Application to vendors. The vendor needs to fill out the NYC FMS Vendor Enrollment Application, available on line at (www.nyc.gov/selltonyc). Community Based Organizations are also encourage to consult the HRA website (www.nyc.gov/hra) to review current opportunities to provide services, including solicitations and Concept Papers.

Department of Health and Mental Hygiene

The Department of Health and Mental Hygiene encourages and fosters citizen participation through Citywide mechanisms for citizen input such as budget hearings, Town Halls and Community Board Meetings. Its Community Relations Unit acts as an interface between DOHMH and other government agencies and citizens, as well as the City's 59 Community Boards, various civic and block associations. The Unit provides outreach related to episodic or crisis issues and handles complaints related to public health and mental hygiene issues. The Department places particular emphasis on planning community-based strategies to address public health issues, targeting services on a neighborhood-by-neighborhood basis and tracking the effectiveness of interventions.

The Division of Mental Hygiene, which is responsible for planning and providing an integrated, community-based system of contracted mental hygiene services, funds services through not-for-profit community-based organizations, municipal hospitals and other City agencies. Service provider agencies, consumers, advocates and others participate in planning mental hygiene service delivery through established networks and planning and advisory bodies. The Division routinely works with mental hygiene professionals and consumers in developing service plans. The Planning Office prepares and disseminates planning and resource documents and hosts public forums and public hearings to assist planning mental hygiene services.

Planning Councils have been established for each of the three mental hygiene components -- mental health, developmental disabilities and chemical dependency --in each of the City's five boroughs. The Councils provide valuable input into needs assessment, planning and evaluation. Each Council has representatives from the provider and consumer/advocate networks. The Councils conduct monthly meetings to address problems,

priorities and policies as they relate to the borough neighborhoods and input directly into plans and actions under review by the City and the State mental hygiene sectors.

Two advisory bodies provide important input into the Division's policy development. The Community Services Board meets on a monthly basis and is comprised of fifteen citizens appointed by the Mayor. The New York City Federation for Mental Health, Mental Retardation and Alcoholism Services is a comprehensive structure which represents not-for-profit organizations, consumers and advocates. It is comprised of borough council representatives and other public/private participants. It convenes its Executive Committee on a bi-monthly basis for briefings from the Deputy Executive Commissioner for Mental Hygiene and to provide input into service planning and policy development. The Division uses formal records of these and other meetings and workgroups as planning tools in establishing goals and in constructing Local Government Service Plans.

The Department produces a number of publications that report important initiatives and community events, examine policy issues, and review new diagnostic tools and treatment methodologies. It also maintains and publishes comprehensive monthly schedules of community meetings and other resources available to the public. It responds to citizen inquiries, prepares informational mailings, periodically holds public hearings, provides training for professionals and maintains the Internet WEB. The Office of Communications is responsible for developing media campaigns that educate the public regarding important health and mental hygiene issues.

The Division of Mental Hygiene's Office of Consumer Affairs was established in 1994 to inform and educate consumers and advocates. It affords another formal mechanism for public input. Its publication, *From the Edge*, provides information and perspectives on issues of vital importance to consumers and providers as well as a forum for consumer input on a wide variety of topics and experiences through poems and other writings. A Resource Page provides names and phone numbers of key contacts for information and support.

Persons interested in participating in Departmental activities can contact the Office of Communications by visiting the Department's web site at: <http://www.nyc.gov/health>.

Department of Youth and Community Development

Department of Youth and Community Development

Public Participation Activities of the Department

The Department of Youth and Community Development (DYCD) receives input from the public through numerous advisory boards: The New York City Youth Board; the Workforce Investment Board Youth Council; the Neighborhood Advisory Boards; the Community Action Board; the Joint Youth Services Planning Committee; the Interagency Coordinating Council on Youth; and the interagency work group comprising DYCD, the Administration for Children's Services, and the Human Resources Administration, which prepares the Child and Family Services Plan for the New York State Office of Children and Family Services (formerly known as the Integrated County Planning Work Group).

The New York City Youth Board/The Workforce Investment Board Youth Council

The New York City Youth Board serves as an advisory body to DYCD. The Board identifies youth priorities and recommends strategies and services that address the needs of youth, makes recommendations on the formation of programs and policies that promote youth development, advocates for youth with the executive, administrative, and legislative bodies of government and the community at large. The 28 members of the Youth Board are appointed by the Mayor, half of whom are recommended by the City Council. The membership comprises leaders from business, academia, government, foundations, and community-based organizations, as well as two youth representatives.

The Youth Council of the Workforce Investment Board makes recommendations on youth services that would strengthen the capacity of education, youth development, and training programs to provide high-quality services that are aligned with workforce skills required for employment and civic success in New York City. The Youth Council consists of youth representatives and representatives from industry, human service organizations, and

government agencies who have special interest or expertise in youth workforce development policy. The Youth Council and the Youth Board share members and jointly conduct meetings.

The Youth Board/Youth Council appoints advisory groups and committees as needed to carry out its work. Currently, these include: a Youth Board Executive Committee; a Funding and Resources Allocation Committee; a Standards, Rules and Nominations Committee; and an Out-of-School Time Sustainability Committee. Youth Board/Youth Council initiatives include: working with DYCD to develop programs and partnerships that address the needs of disconnected youth; developing corporate sector youth employment opportunities; overseeing implementation of the Out-of-School Time initiative and other youth-oriented programs; advising on DYCD's concept papers for upcoming Requests for Proposals; and advocating for youth development and workforce programs. Additional information and meeting minutes can be accessed via DYCD's website at: http://home2.nyc.gov/html/dycd/html/advisory_boards/youth_board.shtml

Neighborhood Advisory Boards

The Neighborhood Advisory Boards (NABs) participate in the community development planning process for their low-income communities, designated as Neighborhood Development Areas (NDAs). The NABs identify the communities' service needs and guide DYCD in allocating federal Community Service Block Grant (CSBG) funds. These funds support community-based human service programs in areas such as education, employment, health, housing, immigrant services, senior services, and youth development. NABs are composed of local community residents within each of the 43 corresponding NDAs. Each NAB has up to 12 members appointed by DYCD, six of whom are nominated by public officials representing the area.

The Community Action Program

This program was instituted as a result of the Economic Opportunity Act (EOA) of 1964 to address the causes and consequences of poverty in the United States. CSBG funds support the operation of networks of local Community Action Agencies (CAAs) that create, coordinate, and deliver many programs and services to low-income Americans. In keeping with federal and state mandates, CAAs use allocated funds to mobilize additional resources from local businesses and foundations, as well as other public sources, to assist low-income individuals to achieve self-sufficiency and combat the central causes of poverty in their communities. As the CAA for New York City, DYCD distributes CSBG resources to 43 Neighborhood Development Areas (NDAs) that qualify for CSBG funding in the City's five boroughs. In FY 2011, CSBG funds supported more than 400 Community Action Programs to provide a broad range of services that combat poverty, offer emergency services to low-income people, and empower people to achieve self-sufficiency which leads to revitalizing low-income communities in the NDAs. These services address the unique needs and assessments of each community and its residents. Services include youth academic support and leadership programs, adult literacy instruction, immigrant support, fatherhood, housing assistance, seniors and family support services, and health insurance enrollment.

The Joint Youth Services Planning Committee:

The Joint Youth Services Planning Committee (JPC) serves as an advisory body to DYCD in fulfilling its City Charter responsibilities concerning neighborhood youth services. The JPC was originally created as a forum for DYCD officials and local government representatives to discuss youth issues and programs, and to provide an opportunity to plan for and coordinate neighborhood youth services. The JPC consists of 20 representatives, including the five Borough Presidents or their representatives and 15 Community Board members, three from each borough selected by the respective Borough Presidents.

The Interagency Coordinating Council on Youth:

The Interagency Coordinating Council on Youth (ICC) was created in 1989 to promote interagency collaboration on issues relevant to New York City youth. Pursuant to provisions of the New York City Charter, the ICC comprises representatives of each city agency providing services to youth, as well as representatives of the DYCD Youth Board and the City Council. The ICC is directed by DYCD Commissioner Jeanne B. Mullgrav. The ICC meets quarterly; meetings are rotated among member agencies. The ICC holds at least one public hearing annually. Work groups on special topics are formed as needed. Current work groups include the

following. The Court-Involved Youth Work Group was created to develop and strengthen interagency collaborations to improve the effectiveness of services to court-involved youth and their families. The After School Work Group promotes quality after-school and extended-learning opportunities for New York City youth. The Accessing Information Work Group's goal is to identify and map existing resources and to develop a plan to communicate this information to youth, families, providers, and government agencies. The Youth Violence Prevention Work Group's mission is to promote the well being of youth and families by utilizing the City of New York's multitude of resources and improving programs and policies aimed at preventing youth violence.

In FY2011, the ICC member agencies were presented with the findings and recommendations of the Mayor's Commission on LGBTQ Runaway and Homeless Youth, engaged in the kick-off of a citywide Fatherhood Initiative and alerted to the City's efforts to raise private funding to support the Summer Youth Employment Program. Additional information, including the ICC's annual report, can be accessed via DYCD's website at http://home2.nyc.gov/html/dycd/html/advisory_boards/interagency_coordinating_council_on_youth.shtml

Commission on Human Rights

The Commission on Human Rights may receive input from citizens through Commissioners' meetings, community activities, its website and 311 referrals, and community activities where the Commission serves the public directly.

The Commission on Human Rights holds quarterly meetings of its Commissioners that are open to the public. The Commissioners are appointed by the Mayor and serve without compensation. They come from the diverse communities of New York City and advise the Commissioner/Chair on matters of policy pertaining to the mission of the Commission on Human Rights. At regularly scheduled meetings of the Commissioners, members of the public may comment on Commission policies and activities. Members of the public interested in attending the meetings may check with the Public Information Office of the Commission to verify the time and place of Commission meetings. The names of the Commissioners are listed in the Green Book. They can also be obtained from the Commission's Public Information Office (212) 306-7530 or from the Commission's website: <http://www.nyc.gov/cchr>.

Citizens may also reach the Commission on Human Rights with questions or concerns by going to the website and sending an e-mail, or by calling the City's 311 system.

The Commission periodically holds public hearings on issues relevant to the agency's mission. Public officials, experts and members of the public are invited to testify.

The Commission's 5 borough-based Community Service Centers provide community-centered services. Members of their staffs regularly attend hundreds of community board meetings, block association meetings, and community-wide events. The Commission's Community Service Centers are open five days a week and welcome groups and individuals with Commission-related concerns to contact them. Commission staff regularly works with not-for-profit organizations, neighborhood associations, tenant groups, and private and public officials on education and advocacy projects. Organizations concerned with discrimination in housing, public accommodations, and employment or with cultural diversity and intergroup relations co-sponsor or participate in Commission events. In addition, the Commission often helps these groups to organize activities.

Please refer to Volume 1, Part I., Action Plan, Section C., Program Descriptions, for Commission on Human Rights Neighborhood Human Rights Program locations and telephone numbers of the Community Service Centers.

Other information about the Commission, including downloads of its publications, can be obtained through the Commission website at <http://www.nyc.gov/cchr>.

B. Relevant Public Policies and Barriers to Affordable Housing

Although this Section addresses the HUD Consolidated Plan regulations titled, Barriers to Affordable Housing, the following discussion describes the ways the City of New York's strategy promotes the construction of new low income housing as well as the preservation of existing low income resources which would remove or ameliorate negative effects that serve as barriers to affordable housing. In addition to providing direct funding for the construction and rehabilitation of low income housing, the City has also encouraged the development of these resources through various means, including its zoning resolution and the real property tax system.

In addition, this Section will explain how the City's public policies address the cost of housing and provide incentives to develop, maintain, or improve affordable housing. In particular, the City's policies including tax policies affecting land and other property, land use controls, zoning ordinances, building codes, fees and charges, growth limits and policies that affect the return on residential investment help accomplish this goal.

Tax Policies

Tax incentive programs are integral part of the City's effort to produce affordable housing. The incentives provide a method of inducing developers to either construct new housing or rehabilitate existing housing for low- and moderate-income households without the increased costs associated with increased property assessments. By limiting the tax assessment, developers are able to maintain a margin of profit without the need to increase existing rents to cover the costs associated with the increased assessment. The City sponsors two tax incentive programs; 421(a), and J-51 which assist in the production of thousands of units. In previous years the City also offered the 421(b) exemption program for new private housing. The 421(b) exemption, which expired effective July 1, 2006 had been periodically extended throughout the ensuing years. For the 2011 Consolidated Plan program year, the exemption applied only to projects whose construction started between July 1, 2002 and July 1, 2006 and who reached completion by July 1, 2011. For CFY11 approximately \$20.8 million in City property taxes was exempted for new private homes constructed during this time period.

421(a) Partial Tax Exemption Program

The 421(a) Partial Tax Exemption Program refers to Section 421(a) of the Real Property Tax Law of the State of New York and Section 11-245 of the New York City Administrative Code which provides for partial property tax exemption benefits for new multiple dwellings. Newly constructed Class A Multiple Dwellings of three units or more, including cooperatives or condominiums, are eligible provided they meet all program requirements. The site on which any qualifying multiple dwelling is constructed must have been vacant, predominantly vacant, underutilized, or nonconforming, as of 36 months prior to the commencement of construction.

Properties which receive 421(a) "Certificates of Eligibility" are partially exempt for a set period of years from taxation on the increase in assessed valuation resulting from the construction or improvement. Depending on where a property is located, whether the units are developed with substantial government assistance and whether the units are developed under the Low Income Housing Production Program, four tiers of benefits are provided for these buildings: 10, 15, 20 or 25 year exemption.

The 421(a) Program benefits the City's renter (elderly renter, small-related, large-related, and other renter household); homeless (homeless individuals, homeless families with and without children, and homeless youth), and homeowner (existing and first time) populations in all income categories (very low-, low-, moderate-, and other moderate-income) while addressing slums and blight conditions in low- and moderate-income areas.

For rental properties, HPD will set the maximum rents which may be charged, and the units receiving benefits are fully subject to rent regulation during the period for which they are receiving tax exemption.

In CFY11 approximately \$865 million in City property taxes were exempted for New Multiple Dwellings under the 421(a) program for residential properties.

J-51 Tax Exemption/Abatement Program

The J-51 Tax Exemption/Abatement Program refers to Section 489 of the Real Property Tax Law of the State of New York and Section 11-243 of the Administrative Code of the City of New York provides a real estate tax exemption and/or abatement to property owners who either rehabilitate existing dwellings or convert other buildings to multiple dwellings. In order to receive benefits under the HPD-administered J-51 Program, eligible improvements must be completed within 36 months after it begins. Originally enacted in 1955 to encourage landlords to upgrade cold water flats, the program has expanded to provide benefits for major capital improvements (such as the replacement of heating, plumbing or roofing systems, installation of new windows, or exterior and parapet wall repointing), substantial rehabilitation of existing multiple dwellings, conversions of other buildings, and the moderate rehabilitation of occupied buildings.

Under the program's tax exemption provisions, eligible properties may receive an exemption from taxation of any increase in assessed valuation which results from the qualified (approved by HPD) improvement. The program provides a 100 percent exemption on the increase in assessed value for a specified period of years. This is followed by a period in which the exemption percentage declines until it becomes fully taxable. While most eligible properties will be exempt from taxation on increases in assessed valuation for 14 years, improvements qualifying as a moderate rehabilitation of a substantially occupied building will receive a 34-year exemption.

Under the tax abatement provisions, eligible properties may receive an abatement of their annual tax bill equal to 8 1/3 percent of the Certified Reasonable Cost (CRC) of the improvement for a maximum of 20 years. The majority of eligible projects may utilize up to 90 percent of the CRC, while moderate rehabilitation projects may utilize 100 percent of the CRC, and eligible conversions in Manhattan may utilize up to 50 percent of the CRC to abate real estate taxes. Government-assisted moderate and substantial rehabilitations, or conversions receive an annual abatement equaling 12.5 percent of the CRC. These projects may utilize 150 percent of the CRC, or the actual cost of the improvement, whichever is less.

In many cases an exemption is not applied because the work performed did not result in a reassessment of the building. For example, when only major capital improvements are done the building's assessed valuation does not ordinarily increase. Therefore, no exemption is necessary.

In addition, since tax exemptions are given according to the increased assessed valuation resulting from improvements a property may benefit from more than one exemption and/or abatement in one year.

In CFY11, approximately \$159.9 million and \$95.4 million in City property taxes on residential property were exempted and abated under the J-51 program, respectively.

In addition, HPD administers the federal Low Income Housing Tax Credit (LIHTC) Program, a subsidy program for the creation or rehabilitation of rental housing for persons at or below 60% of the area median income. HPD programs that use LIHTCs include the Multifamily Rental-Mixed Program and the Supportive Housing Loan Program.

In addition to competitive 9% credits, HPD also issues so called 4% "as-of-right" credits for HDC tax-exempt bond projects through programs such as the 80/20 Program.

In allocating the credits HPD works with various tax credit syndicators although historically the New York Equity Fund, which is affiliated with the Local Initiatives Support Corporation and Enterprise Community Partners Inc, has syndicated the majority of projects.

Rent Regulations

New York State Law provides for a system of rent regulation in times of emergency shortages of housing. About two-thirds of the housing units in the city are rental units, which is a much larger proportion than in other areas of the country, and more than half of these units are regulated. The aim of these regulations is to protect tenants while at the same time preserving the owners' interest in maintaining the rental housing stock. There are

several mechanisms for controlling rents such as the rent control law; rent stabilization law; and the Senior Citizen Rent Increase Exemption (SCRIE). A discussion of the SCRIE program is found in the Continuum of Care for Non-Homeless Special Needs Populations; the Elderly and frail Elderly.

Rent controlled units are in private occupied rental building in existence before February 1, 1947 in which the tenants has been living in continuous occupancy since before July 1, 1971. Rent controlled units are regulated in New York City under the New York State rent control law. Rent protection applies to the unit and is not transferable with the tenant if he moves from a rent controlled apartment. The rent control law is administered by NYS-DHCR. All increases in rent are set and must be approved by DHCR. Annual rent increases of up to 7.5 percent are permitted until the unit reaches its maximum base rent, which is set by DHCR. If a rent controlled unit is voluntarily vacated, it is decontrolled, unless it is in a building with 6 or more units. In that case, the unit may become rent stabilized providing the legal monthly rent cannot be increased above \$2,500.

Rent stabilization in New York City provides regulation of rents for housing units in structures with 6 or more units built between 1947 and 1973. Tenants in buildings, of six or more units, built before February 1, 1947, who moved in after June 30, 1971, are also covered by rent stabilization. In addition, units built later which received a tax abatement are covered by rent stabilization. The rent stabilization law is administered by NYS-DHCR. Rent protection applies to the unit and is not transferable with the tenant if he moves from a rent stabilized apartment. Rent increases are determined annually by the Rent Guidelines Board, taking into consideration operation and maintenance costs, tenant and owner testimony and other factors.

Maximum increases for the year beginning October 1, 2011 and ending September 30, 2012, are 3.75% for one-year leases and 7.25% for two-year leases).

Under rent stabilization, an owner is entitled to a rent increase above the legal regulated rent under certain conditions:

If increased services or space are provided in an apartment, an increase is allowed as a permanent adjustment to the monthly rent.

If there is a building wide major capital improvement (MCI), an increase is allowed. The major capital improvement provides for a rent increase based on the cost of the improvement. However, the rent increase is permanent after the cost has been recouped.

Owners are provided with some protection when they can show hardship, for example, where income is insufficient to yield an adequate return as defined by law.

Increases under MCIs may not exceed 6 percent in any year.

Both rent controlled and rent stabilized units may be subject to deregulation dependent upon income and legal monthly rent levels. As stated previously, if a rent controlled unit is voluntarily vacated, it is decontrolled, unless it is in a building with 6 or more units. In that case, the unit becomes rent stabilized. However, if the legal monthly rent for the vacated unit can be legally increased to \$2,500 or more, the apartment may then be deregulated. Similarly, if a rent stabilized unit is voluntarily vacated and the legal monthly rent can be increased to \$2,500 or more, the apartment may also be subject to deregulation.

If households occupying either a rent stabilized or rent controlled unit earn \$200,000 or more for two consecutive years and their legal monthly rent is \$2,500 or more, the apartment may also be deregulated.

Land Use Controls and Zoning Ordinances

The following discussion on land use controls and zoning ordinances shows that these laws are designed to protect the public health and safety of residents and at the same time provide for orderly development when needed.

Uniform Land Use Review Procedure (ULURP) The Uniform Land Use Review Procedure (ULURP), as mandated by the City Charter, prescribes the City's land use review process, including public hearings and several levels of government approvals. At each level, review of ULURP applications by government and non-government sectors is conducted within discrete, Charter-specified time periods. The resulting timeline is structured to move an application through the review and approval process within a specified maximum time frame.

ULURP is triggered when a project involves any one of the following government actions:

- Changes to the official City Map (e.g., the addition, removal or remapping of a street or park);
- Designation of zoning districts, including conversion from one land use to another land use;
- Acquisition of land by the City, and disposition, sale, lease or by other means of City-owned property;
- Site selection for City facilities;
- Urban renewal and housing plans pursuant to city, state and federal housing laws;
- Special permits from the City Planning Commission (CPC);
- Landfills; and
- Franchises, concessions or revocable consents with significant land use issue impacts.
- Mapping of Subdivisions or platting of land

ULURP applications are reviewed by the affected Community Board(s), where a public hearing is conducted and recommendations are sent to the City Planning Commission. The Borough Board, if the application affects more than one community board, may conduct a public hearing. The Borough President of the affected borough, and the Borough Board, may also submit recommendations to the CPC or waive the right to do so. The CPC also conducts a public hearing as part of the ULURP process. Depending upon the particular nature of the application, a City Council review, and approval, may be required.

Not every housing project requires a ULURP action. A majority of housing preservation, rehabilitation and renovation projects, as well as new construction may be done as-of-right (e.g., the rehabilitation of privately-owned housing stock without landmark status or located outside of a special historical district) or are exempt from ULURP under the accelerated UDAAP (e.g., the new construction of less than four (4) housing units on disposed City-owned property).

The following table indicates projects that require city review:

<u>Type of Activity</u>	<u>Action</u>
Rehabilitation of any # of units on City-owned property to be disposed.	ULURP Exempt (City Council Project Approval Required under Accelerated UDAAP)
New Construction of 1-4 units on City-owned property to be disposed.	ULURP Exempt (City Council Project Approval Required under Accelerated UDAAP)

New Construction of >4 units on City-owned property to be disposed.

ULURP Review Required (the action reviewed is both the project and the disposition)

Projects which require change in zoning or special permits (e.g., commercial to residential)

ULURP Review Required

City Environmental Quality Review (CEQR)

The City Environmental Quality Review (CEQR) process is defined in Executive Order No. 91 of 1977, City Environmental Quality Review, and the Rules of Procedure of 1991, and is considered the City's equivalent to the National Environmental Policy Act (NEPA). The CEQR process is required for all discretionary ULURP actions. Although independent of ULURP application review, the CEQR process must also be conducted in a timely manner. Review of a site's environmental quality is necessary to ensure that the health, safety and well-being of the future occupants will not be endangered.

The CEQR process is conducted by each lead City agency (the agency which has submitted the ULURP application or is principally responsible for approving, funding, or executing the proposed project) pursuant to Section 8 of the New York State Environmental Conservation Law 6 NYCRR Part 617, New York City Executive Order No. 91 and the CEQR rules of procedure as amended 1991. The CEQR process identifies and discloses potentially significant adverse environmental impacts of proposed projects and discretionary government actions. The CEQR process ensures that the City Planning Commission and City Council make informed decisions prior to taking official action.

The CEQR Technical Manual (revised in 2010), is intended to guide lead agencies and standardize analytical methods. The CEQR manual guides the Department of City Planning's efforts to prepare and implement area-wide rezoning actions. Area-wide rezoning actions, particularly from manufacturing or commercial use to residential use, may increase as-of-right housing development, and spur private investment.

Zoning

New York City has the highest density residential zoning in the nation. At the same time, care has been taken to provide a healthy and attractive environment. New approaches have been developed since passage of the 1961 Zoning Resolution. These include incentive zoning, contextual zoning, special districts, air-rights transfer and restrictive covenant techniques. These approaches have been used to make zoning a more responsive and sensitive planning tool.

Density controls are one of several ways to control the intensity of development. The following table shows the maximum density in each zoning district.

<u>Zone</u>	<u>Description</u>	<u>Maximum Dwelling units per acre</u>
R1	Single-family detached residences	4 to 7
R2	Single-family detached residences	11 to 15
R3	Two-family detached, semi-detached, and general residence districts	26 to 42
R4	Two-family detached, semi-detached, and general residence districts	30 to 65
R5	General residence districts (provides a transition between lower and higher density neighborhoods)	65 to 80
R6	General residence districts (medium density housing between 3 and 12 stories)	129 to 192
R7	General residence districts (medium density apartment houses with good access to public transportation)	192 to 322

R8	General residence districts (high density residential districts)	258 to 427
R9	General residence districts (high density residential districts)	444 to 495
R10	General residence districts (highest density residential district)	551 to 700

These density controls have no negative impact on the affordability of housing. Zoned densities are generally correlated with the distance from the central business district and the availability of mass transit.

The lowest cost housing to build is in the R3-2, R4 and R5 districts. These are the lowest density zones in which multiple dwellings are allowed and are widely mapped in the boroughs outside Manhattan. The densities permitted in these districts are greater than the densities permitted in most areas of the country. Moreover, they permit a variety of housing types, including low-rise rowhouses, garden apartments, and multiple dwellings. These housing types, such as the two-story back-to-back rowhouse, are among the lowest cost housing types to build. In addition, two-family houses in all districts, except R1 and R2, can allow a small second unit which provides rental income.

Housing affordability is also enhanced by the Quality Housing Program in R6 through R10 districts. This expands the potential for new residential development in the city by establishing as-of-right requirements permitting lower-rise, higher coverage apartment house development (thus allowing for more economical types of construction). In 1994, the City adopted numerous changes to the Quality Housing Program to facilitate and simplify development. The changes include the facilitation of development on irregularly-shaped lots in a manner consistent with neighborhood context, more economical building envelopes and greater design flexibility. This makes many more sites available for multifamily housing by making smaller sites easier to develop, while maintaining standards for housing quality.

The Inclusionary Housing Program provides as-of-right floor area bonuses in exchange for development of low income housing. The program was introduced in 1987 in the high density areas of the city, and was expanded in 2005 to include moderate and middle income housing and medium density districts. The city continues to expand the applicability of the program. In 2009 the program was amended to include a permanently affordable home ownership option.

Building Codes and Enforcement

Scope of Agency Operations

The Buildings Department ensures the safe and lawful use of more than 975,000 buildings and properties by enforcing the City's Building Code, Zoning Resolution, New York State Labor Law and New York State Multiple Dwelling Law. Each year it reviews more than 75,000 construction plans, issues more than 163,000 new and renewed permits, performs more than 440,000 inspections and issues 25 types of licenses and registrations. The Department facilitates compliant construction by continually streamlining the permit application process and delivers services with integrity and professionalism.

Codes

In an effort to improve New York City's construction codes governing building standards and address current practices, the Buildings Department recently amended the Electrical and Plumbing Codes. Additionally, new buildings and all alterations must comply with the NYC Energy Conservation Code, which regulates the energy efficiency standards of building envelope, lighting and mechanical systems. These code improvements will impact construction standards in fiscal year 2012 and beyond.

Electrical Code. In June 2011 the Electrical Code was updated with several technical and administrative amendments. Designed to keep the Electrical Code current, the amended law adopts the 2008 version of the National Electrical Code and tailors national standards to the specific needs of New York City's high density urban environment. New provisions reflecting the latest industry standards for transmission of electricity for

light, heat, power, signaling, communication, alarm and data transmission will apply to work being performed on or after July 2, 2011. Currently, objections are issued for non-Code compliant conditions, a milder enforcement effort in comparison to violations; however, by early 2012, agency inspectors will issue ECB violations for conditions not conforming to Electrical Code standards.

NYC Energy Conservation Code. The Greener, Greater Buildings Plan helps New York City building owners embrace green retrofits and dramatically reduce energy use. As of 2013, owners of large buildings must conduct an energy audit once every ten years to identify potential energy upgrades to base building systems and establish energy-efficient maintenance practices.

Plumbing Code. Effective July 2012, the maximum flow rates and water consumption of bathroom fixtures will be reduced. Showerheads, private lavatory faucets and toilets will be required to meet the lower specifications required by the federal WaterSense program, a program of the U.S. Environmental Protection Agency. New federal standards will require a third-party certification by an independent laboratory of the performance and efficiency level of installed plumbing fixtures.

Fees

Municipal fees for filing construction jobs and resolving penalties are an important consideration of a construction project budget. The scope and payment of fees must be factored into a project's total cost of construction and can impact a project's availability of funds. Recent changes to and current aspects of the Department's fee schedule for the coming fiscal year are included below for their overall relevance to construction projects.

Accelerated Inspection Fee. Upon request, the Buildings Department will perform after-hours inspections of construction work or accelerated inspections occurring outside normal inspection hours of 8:00 am to 4:30 pm, Monday through Friday. The fee for each after-hours inspection is \$95, plus \$50 for every 2,000 square feet of floor area, with a minimum fee of \$50 per story.

Fee Deferral. The Buildings Department may defer filing fees for residential construction until the issuance of a certificate of occupancy at a project's completion. Fee deferrals may be applied to housing designated to be transferred to private ownership by the NYC Department of Housing Preservation and Developments. The deferral of fees until a project's completion helps to lighten fiscal constraints until the project can become financially self-supporting.

Fee Exemption. The Buildings Department exempts government-owned properties and certain government-supported construction projects from standard agency fees assessed for filings, permits and inspections. The fee exemption applied to NYC Housing Authority buildings and other construction projects helps to facilitate construction by reducing financial encumbrances resulting from agency fees.

Civil Penalty Waiver. When a court issues a foreclosure judgment allowing the City to transfer title of a foreclosed property to a new owner, any civil penalties for work without a permit accrued before the closing date of the transfer will be waived. The new owner must provide a letter from HPD stating that there was a third party transfer and that existing penalties should be waived. In a similar manner, civil penalties for work without a permit for emergency work or work on unsafe buildings performed by HPD or other agency, or for violation of a stop work order for any work to remedy an unsafe or hazardous condition, as authorized by the Commissioner, will also be waived.

Filing Fee Increase. The minimum application filing fee for building alterations will increase in FY 2012, effective as of September 9, 2011. Currently the minimum filing fee for all building types is \$100. However, a new local law concerning application filing fees separates small dwellings of one-, two- or three-family residential buildings from larger apartment buildings of four-families or more and creates a separate range of filing fees for each group. New minimum filing fees for alterations of one- to three-families dwellings will be \$170 for major alterations or Alt 1s, \$130 for minor alterations or Alt 2s and \$130 for smaller alterations or Alt

3s. For larger residential buildings, the fees for Alt 1s, Alt 2s and Alt 3s will be \$280, \$225 and \$195, respectively.

Enforcement

The Buildings Department continues to improve its enforcement efforts through educating the public about conditions that are hazardous and can result in violations.

Illegally Converted Apartments. The Buildings Department has distributed more than 150,000 flyers in multiple languages to warn New Yorkers about the dangers of illegally converted apartments. The Department has also issued a guide for New Yorkers, available at nyc.gov, with 10 tips on how to recognize an illegally converted apartment and avoid renting one.

Plan Examination

Development Center. As an extension of the Department's FY 2011 experimental Get It Done Together Program, the agency will create a Development Center in FY 2012 to streamline the plan examination approval process. The Development Center will provide a comprehensive plan examination process that involves representatives from other City agencies as well as the Buildings Department in the review process.

Community Partnership

Affordable Housing Collaboration. Once again, Buildings Department employees agreed to commit their time, labor and varied skills to volunteer to work with Habitat for Humanity – New York City this fiscal year. In July 2011, Buildings Commissioner Robert LiMandri and Acting First Deputy Commissioner Thomas Fariello, R.A., along with 20 Buildings Department employees, spent a full day doing construction work in the interior of new homes under construction. For the second year in a row, Department inspectors, architects, engineers, lawyers and administrative assistants volunteered a day of their time to construct walls and install sheetrock to build affordable homes with Habitat-NYC. Habitat-NYC is the local branch of the nationally renowned non-profit organization that builds affordable housing program for individuals and families in need.

Customer Service

The agency offers support services for construction projects designated as affordable housing by the New York City Department of Housing Preservation and Development or a New York State agency. Support services may include project advocacy, expedited plan examination and inspection, and/or fee exemptions and deferrals.

Project Advocacy. When requested by a supporting governmental agency, the Department assigns a project advocate within the agency to monitor a City or State supported job from its inception to completion. A project advocate interfaces with various units of the Buildings Department and other agencies as required to facilitate the review and approval process.

Expedited Plan Examination and Inspection. On a case-by-case basis, the Department will expedite the plan review and inspection of an affordable housing project if the need is substantiated by a supporting City or State agency. The expedited process is designed to shorten the start of construction and thus the construction job. Similarly, the Department may expedite the application process, plan review and inspection of inclusionary housing when a percentage of a project's market-rate dwelling units is designated as affordable dwelling units.

Heating Cost Relief

In addition to rent, utility costs (water, electricity and heating) impact housing affordability. New York City administers various programs which provide heating cost relief to low-income households.

The Home Energy Assistance Program (HEAP) is a federally sponsored program that assists many low-income persons with heating and weatherization costs. This program was created by the Low Income Home Energy Assistance Program Act of 1981. The act authorizes federal block grant funds for allocation to income eligible households to assist in meeting the costs of home energy.

The HEAP Program provides financial assistance to low-income households to help defer energy costs and to supplement fuel for income eligible households or their households vendor. Financial assistance is provided in one of three ways: as a regular grant, which is paid directly to the household's vendor that qualifies for the program; as an emergency grant, which is provided only to those households that pay for their own heat and have a verified threat of discontinuance of heat in the home; and through the Weatherization Program that helps reduce the energy cost of the households. HEAP-eligible households may also receive assistance in repairs of heat-related equipment and/or replacement if their heating equipment becomes inoperable during the heating season.

HRA certifies the HEAP eligibility of low-income families. The Department for the Aging (DFTA) is responsible for intake and outreach to recipients who are age 60 and over.

HRA issued approximately 839,026 regular heating and emergency grants totaling \$50,369,872 for HEAP XXX (November 2010 through June 2011). Of this amount, HRA issued approximately \$32,544,719 in automatic payments to Public Assistance, Food Stamp and Supplemental Security Income (SSI) households that were eligible during the HEAP season.

The Weatherization Referral and Packaging Program (WRAP) is administered in the same manner as the HEAP program. Eligibility criteria for this weatherization program is the same as for HEAP. WRAP provides free home energy-related services to low-income residents of one to four family homes. The services are designed to lower energy bills and improve physical comfort of eligible low-income occupants. WRAP program provides direct service to target group HEAP eligible individuals at either of two levels, depending on the needs of the customer's needs:

Level I Qualified referrals to the weatherization assistance provider, when the services provided by the weatherization assistance grantee will fulfill the needs of the customer.

Level II packaging of services and resources to the customer when, after screening for eligibility, the liaison determines the need for comprehensive assessment of need, which ascertains that the customer would be better served by the packaging process which includes, (in addition to the needs assessment):

- Exploration and discussion of the client's needs;
- Provision of information regarding possible solutions;
- Encourage energy conservation;
- Development with the client of a plan of action;
- Development and maintenance of a directory of resources available to the target population;
- Implementation of the plan of action;
- Monitoring and follow-up of the plan of action and its desired results.

Services include: home visits to assess weatherization needs; referrals for emergency boiler and furnace repairs; and social service assessments and referrals. The WRAP program is responsible for coordination and follow-up of service delivery.

Please refer to Part I, Section D2. Supportive Housing Continuum of Care for Special Needs Population, d., Elderly and Frail Elderly and Part I, Action Plan: One Year Use of Funds, Section C. Program Descriptions for various home repair and modification programs which assist the elderly, reduce heating through energy efficiency and modernization activities.

Barriers to Accessibility for Persons with a Physical Disability

Historically, land in New York City was subdivided into tax lots typically 20-25 feet wide by 100 feet deep. The main entrances of most multiple dwellings were raised above the level of the adjacent public sidewalks to increase privacy for the first floor residents. The buildings, accessed by steps, created barriers to housing for people with mobility impairments. This was also typical of older structures covering larger lots. No laws

required them to be accessible to people with disabilities and generally no thought was given to this concept. Many of these buildings are still occupied today, some never renovated. Often it is impossible to make entrances to these buildings accessible because there is not enough property on which to construct a usable ramp.

It was not until 1968 that New York City's Building Code was amended to include provisions for accessibility in housing and other structures. When the code was amended, provisions covering accessible entrances and an accessible route to elevators were added. No provisions covering the design of the dwelling units were included.

An August 1987 Building Code amendment introduced significant features so that buildings, including housing, when newly constructed or renovated, included access features for people with disabilities. These provisions, known as Local Law 58 of 1987, cover areas such as the interiors of the dwelling units and common spaces. The interiors of existing buildings, when renovated, must include accessible features even when it is impossible to make the building entrance accessible.

The Department of Housing and Urban Development reviewed Local Law 58 of 1987 when it sought to draft the Federal Fair Housing Amendments Act of 1988. Unlike previous Federal laws covering access for people with disabilities in housing, the City's law requires that all units in multiple dwellings with elevators and ground floor units in buildings without elevators be accessible to people with disabilities, a strategy meant to increase housing options for people with disabilities at all income levels, since it covers both public and private housing.

The majority of construction in the City involves renovation since much of the land already contains structures. Over time, new housing, and renovated housing to the extent possible, will be accessible. To enhance the possibility of making housing built before 1968 accessible, the 1987 amendments to the Building Code included a provision permitting building owners to build ramps on a portion of the public right-of-way. Further enhancement efforts by the City's Department of Transportation (DOT) allow, with special permission, even greater encroachment into the sidewalk. DOT is also making all curb cuts accessible.

Beginning in July 2008, a new building code for the City of New York was put into effect that contains many of the provisions laid out in Local Law 58 of 1987. The new building code is largely based on the national International Building Code, which meets federal standards for accessibility.

For the first time, in 1996, the New York Housing and Vacancy Survey (HVS) included a number of questions meant to produce information regarding housing accessibility. The raw survey data indicates that approximately 62% of all housing units surveyed are in buildings with inaccessible entrances¹. However, this same raw data for rental units where rents are below market rate (public housing, Mitchell-Lama, and rent stabilized, built 1947 or later) consistently show that the number of units in buildings with accessible entrances outweighs the number of units in buildings without them. To advance policy decisions, the City retained these questions in subsequent Surveys to track the expected increases in access.

After previous surveys in 1999 and 2002, the HVS collected accessibility data in 2005. The survey asked a number of questions regarding accessibility of the building entrance, dwelling unit door, and elevator cab sizes². According to the 2005 HVS, in all renter-occupied housing units with elevators in the City, 633,124 out of a total of 1,042,119 elevators (60.8%) have been determined to be accessible to people with disabilities. Further, out of 924,364 renter-occupied housing units that have an elevator, 491,816 (61.2%) are accessible to people with disabilities requiring the use of a wheelchair from the outside sidewalk to the elevator without using stairs. Out of 2,027,626 renter-occupied units providing direct access from the sidewalk to the unit itself without using

¹ For the Survey's purpose, the following items were considered: the presence of steps only, at the building entrance and vestibule (if provided); door widths at same locations.

² An accessible building entrance and residential entrance must be at least 32 inches wide to allow a wheelchair to move in and out. An elevator is considered accessible if the door is at least 36 inches wide and the cab at least 51 inches deep.

stairs (or an elevator), 488,599 of the units (26.7%) are accessible to people with disabilities requiring the use of a wheelchair, a jump of 3.3 percentage points from 2002. Finally, out of 2,027,626 renter-occupied housing units, 775,187 of the units' building entrances (38.7%) and 1,064,689 residential unit entrances (53.3%) have been determined to be accessible for people with disabilities requiring use of a wheelchair. This represents an increase of 7.6 percentage points over the number of accessible building entrances and an increase of 9.3 percentage points over the number of accessible residential unit entrances in 2002.

The 2005 HVS Survey also provided information regarding vacant units. Accessible, vacant rental units represent a potential pool of accessible, affordable housing for persons with limited mobility or disabilities. Out of 64,737 vacant-for-rent units, 23,117 of the units' building entrances (36.2%) and 29,462 residential unit entrances (46.3%) have been determined to be accessible for people with disabilities requiring use of a wheelchair.

In the same units, 19,661 out of a total of 34,724 elevators (56.6%) have been determined to be accessible. Further, out of 27,869 of these units that have an elevator, 17,555 (63.8%) are accessible to people with disabilities requiring the use of a wheelchair from the outside sidewalk to the elevator without using stairs. Out of the 64,737 of these units providing direct access from the sidewalk to the unit itself without using stairs (or an elevator), 17,213 of the units (27.2%) are accessible to people with disabilities requiring the use of a wheelchair from the sidewalk.

As for all other vacant units not considered "vacant-for-rent" units, out of 158,122 of these units, 58,797 of the units' building entrances (38.4%) and 70,150 residential unit entrances (46%) have been determined to be accessible for people with disabilities requiring use of a wheelchair.

In the same units, 46,553 out of a total of 73,908 elevators (63%) have been determined to be accessible. Further, out of 62,191 of these units that have an elevator, 42,010 (71.1%) are accessible to people with disabilities requiring the use of a wheelchair from the outside sidewalk to the elevator without using stairs. Out of the 158,122 of these units providing direct access from the sidewalk to the unit itself without using stairs (or an elevator), 45,192 of the units (30%) are accessible to people with disabilities requiring the use of a wheelchair from the sidewalk.

As stated previously, the year in which a building was constructed is generally a strong predictor of its degree of accessibility. It is expected that future Housing and Vacancy Surveys will disclose increases in the number of accessible public housing units. This expectation arises from a growing public-sector response to the needs of tenants with disabilities, and compliance with Section 504 of the Rehabilitation Act. Similarly, it is expected that increasing residential construction and renovation, an expanding market for New York City rental units, and growing private-sector awareness of accessibility requirements, has and will continue to contribute to increases in the number of accessible private-sector units.

Again in 2008, the HVS collected accessibility data. The survey again asked a number of questions regarding accessibility of the building entrance, dwelling unit door, and elevator cab sizes. According to the 2008 HVS, in all renter-occupied housing units with elevators in the City, 685,115 (an increase of almost 52,000 from 2005) out of a total of 1,122,599 elevators (61%, representing a 0.2% increase from 2005) have been determined to be accessible to people with disabilities. Further, out of 958,294 renter-occupied housing units that have an elevator, 532,206 (55.5%) are accessible to people with disabilities requiring the use of a wheelchair from the outside sidewalk to the elevator without using stairs (representing an increase of more than 40,000 of the total number of these units from 2005). Out of 2,081,953 renter-occupied units providing direct access from the sidewalk to the unit itself without using stairs (or an elevator), 543,064 of the units (26.1%) are accessible to people with disabilities requiring the use of a wheelchair (representing an increase of almost 55,000 of the total number of units available in 2005). Finally, out of 2,081,953 renter-occupied housing units, 878,200 (representing an increase of 103,013 more than the total number of units available in 2005) of the units' building entrances (42.2%, a 3.5% increase from 2005) and 1,087,807 (representing an increase of more than 23,000

units more than 2005) residential unit entrances (52.2%) have been determined to be accessible for people with disabilities requiring use of a wheelchair.

The 2008 HVS Survey also provided information regarding vacant units. Accessible, vacant rental units represent a potential pool of accessible, affordable housing for persons with limited mobility or disabilities. Out of 62,499 vacant-for-rent units, 24,277 (representing an increase of 1,160 more units than 2005) of the units' building entrances (38.9%, a 2.7% increase over 2005) and 28,653 residential unit entrances (45.9%) have been determined to be accessible for people with disabilities requiring use of a wheelchair.

In the same units, 17,824 out of a total of 29,473 elevators (60.5%, a 3.9% increase over 2005) have been determined to be accessible. Further, out of 23,874 of these units that have an elevator, 13,531 (56.7%) are accessible to people with disabilities requiring the use of a wheelchair from the outside sidewalk to the elevator without using stairs. Out of the 62,499 of these units providing direct access from the sidewalk to the unit itself without using stairs (or an elevator), 14,696 of the units (23.5%) are accessible to people with disabilities requiring the use of a wheelchair from the sidewalk.

As for all other vacant units not considered "vacant-for-rent" units, out of 164,598 of these units, 63,842 (representing an increase of more than 5,000 over 2005) of the units' building entrances (38.8%, a 0.4% increase over 2005) and 65,160 residential unit entrances (39.6%) have been determined to be accessible for people with disabilities requiring use of a wheelchair.

In the same units, 47,317 (an increase of almost 800 over 2005) out of a total of 84,354 elevators (56.1%) have been determined to be accessible. Further, out of 65,751 of these units that have an elevator, 43,877 (66.7%) are accessible to people with disabilities requiring the use of a wheelchair from the outside sidewalk to the elevator without using stairs (representing an increase of 1,867 over 2005). Out of the 164,598 of these units providing direct access from the sidewalk to the unit itself without using stairs (or an elevator), 46,268 of the units (28.1%) are accessible to people with disabilities requiring the use of a wheelchair from the sidewalk (representing an increase of over 1,000 from 2005).

As stated previously, the year in which a building was constructed is generally a strong predictor of its degree of accessibility. It is expected that future Housing and Vacancy Surveys will disclose increases in the number of accessible public housing units. This expectation arises from a growing public-sector response to the needs of tenants with disabilities, and compliance with Section 504 of the Rehabilitation Act. Similarly, it is expected that increasing residential construction and renovation, an expanding market for New York City rental units, and growing private-sector awareness of accessibility requirements, has and will continue to contribute to increases in the number of accessible private-sector units.

C. New York City Housing Authority

The following section describes the activities of the New York City Housing Authority (NYCHA or the Authority). The section satisfies the federally-required Consolidated Plan information concerning public housing authorities: institutional structure, public housing resident initiatives, government coordination and consultation; program descriptions for Public Housing Capital Fund; the Continuum of Care for public housing residents with special needs; and relevant public policies.

Please refer to Section D., Elimination of Lead-Based Paint Hazards for NYCHA's lead-based paint abatement activities, and Section A., Citizens Participation, for a description of the Authority's outreach to not-for-profit organizations, respectively.

Funding Sources

The New York City Housing Authority is funded through HUD Public Housing Capital Fund and Public Housing Operating Subsidy funds. In addition, NYCHA has applied for, and in the past, received other HUD Competitive Grant funds (e.g., HOPE VI, ROSS). Please refer to Volume 1, Part I., Action Plan; One Year Use of Funds for a description of the funding sources received by the Authority.

Institutional Structure

NYCHA is governed by a Board comprised of four members appointed by the Mayor. The Chair and the Resident Board Member serve at the Mayor's pleasure and the other two members serve fixed terms. The Board sets and administers programs and policies. NYCHA's General Manager and Deputy General Managers are responsible for day to day operations. A majority of the departments within NYCHA are clustered into seven groups: Operations, Administration, Finance, Information Technology, Community Programs and Development, Capital Projects, and Leased Housing, each reporting to the General Manager.

The Executive Group consists of the following: the Law Department, the Office of the Secretary, the Department of Communications, Office of State and City Legislative Affairs, the Audit Department, the Department of Equal Opportunity, the Development Department, Research and Management Analysis Department, and the Office of Strategic Planning and Change Management.

The Operations Group consists of the following: Technical Services Department, Applications and Tenancy Administration, the four Borough Management Departments, Emergency Services, the Customer Contact Center, Management and Customer Relationship Systems, Mixed Finance, and Social Services. Each of the departments in this group runs a primary service operation, helping to provide decent, safe and sanitary shelter to New York's low- and moderate-income community.

The Capital Projects Group consists of the following Departments: Bronx / Queens Program Unit, Brooklyn / Staten Island Program Unit, Manhattan Program Unit, the Office of Design, Technical Support and Capital Projects Administration.

The Administration Group consists of the following: the Office of Facility Planning and Administration, Human Resources Department, General Services, Office of Security, Supply Chain Operations, Procedures Development and Administration.

The Finance Group consists of the following Departments: Accounting and Fiscal Services, Budget and Financial Planning, Energy, Office of Business and Revenue Development, and Risk Finance.

The Community Programs and Development Group consists of the four Borough Community Operations Departments, Administration, Citywide Programs and Assessment, Department of Resident Support Services, the Office of Public and Private Partnerships, and the Department of Resident Economic Empowerment and Sustainability.

The Inspector General's Office reports to the New York City Department of Investigation.

NYCHA Resident Initiatives

The Authority is committed to developing and operating housing in wholesome living environments for low and moderate income households with innovation, sensitivity, and excellence through a partnership with its employees, residents, and communities. Meeting this mandate represents a significant challenge in light of substantially decreased federal operating subsidies and limited modernization dollars.

Within NYCHA's Community Operations Division, a group of departments coordinate resident programs, community relations, and initiatives to improve the quality of life of NYCHA's residents. The following is a description of those initiatives by department.

1) Department of Community Operations

As of July 5, 2011, NYCHA housed a total of 82,442 seniors age 60 and over who are legal residents of public housing; 24.9% (20,533) of the senior residents are 75 to 84 years of age; 8.6% (7,101) are 85 to 94 years of age; and nearly 1% (690) are 95 years of age or older. Some of the Authority's initiatives to address the needs of its seniors and other populations are listed below.

Naturally Occurring Retirement Community (NORC) Program

The NORC Program was developed to address the needs of concentrations of seniors who have aged in place, in non-elderly housing. The program was designed to provide comprehensive support and health care services for well and frail elderly residents, 60 years of age and older, who continue to live independently in their apartments and communities. As of July 5, 2011, 20.4% of the NYCHA population is over age 60, and not all live in senior-designated buildings.

The NORC program provides services including on-site assessment, information and referral services, case management, counseling, education/prevention/wellness programs, recreational/socialization programs, and volunteerism. One of the key components is the assistance to access needed health care services, which includes nursing, health screenings, in-home assessments, medication management, and home visits by doctors, when needed. Additionally, the program provides ancillary services such as transportation, shopping, financial management, housekeeping, personal care, support groups, and intergenerational activities, among many others.

DFTA sponsors 80 senior centers in NYCHA developments and also provides funding for 10 NORC programs.

Based on the DFTA's reports, for the City Fiscal Year 2011 the NYCHA NORC program provided the following core services:

	<u>Units of Service</u>
Case Management	- 10,197
Case Management Assistance	- 10,212
Health Care Management	- 2,259
Health Care Assistance	- 2,040
Residents receiving Core Services	- 8,334
New This Fiscal Year	- 555

Grand Street Settlement Baruch Elder Services Team (B.E.S.T. Program)

The Cabrini Center for Nursing and Grand Street Settlement provide age appropriate, culturally sensitive services to senior adults residing in the NYCHA Baruch Houses with the goal of building a strong community of caring in order to foster, support and maximize each member's overall personal well-being. The BEST Program also provides comprehensive services in Baruch Houses and Baruch Addition that will improve the quality of life for the seniors, enabling them to remain in their homes and helping them to lead independent, healthy and active life-styles within their home community. These services include advocacy, health promotions services, social work services and opportunities for socialization.

Bilingual Social Services – case assistance, case management, entitlement/benefits assistance, service linkage and coordination, crisis intervention, support services, advocacy.

Recreational Services – group activities, trips, bingo, arts & crafts, physical fitness activities, dance and music activities, light snacks.

Bilingual Health Services – health education services, health screening, health promotion and prevention, linkage to appropriate follow-up services.

Services For Home-Bound Seniors – friendly visits, telephone reassurance calls, escorts.

Based on B.E.S.T. reports, for the City Fiscal Year 2011 the Grand Street Settlement NORC program provided the following core services to the following number of residents:

	<u>Residents</u>
Case Management & Assistance	- 1,245
Health Care Management & Assistance	- 304
Residents receiving Core Services	- 1,373
New This Fiscal Year	- 33

Service Coordinator Program

The Service Coordinator Program is operated in clusters of developments in upper Manhattan, Brooklyn, Queens and Staten Island. Service Coordinators provide services during office hours, which include helping elderly/disabled residents to access government benefits, assistance in daily living, monitoring health care needs, "Meals on Wheels", and other types of assistance as needed.

From July 1, 2010 through June 30, 2011 the program provided 23,898 units of supportive services to an average of 726 residents monthly, and conducted 5,117 home visits.

Senior Resident Advisor Program

The Senior Resident Advisor Program consists of trained paraprofessionals (some who live on-site) who provide crisis intervention services and case management coordination. Services provided include assistance in obtaining entitlements, health services, mental health services, assistance in maintaining independent daily living, home care services, senior legal services, outreach, meals for the homebound, and recreational activities (through NYCHA Senior Centers). Each program includes a substantial resident volunteer component (Floor Captains) to ensure daily contact with each elderly resident; these Senior Resident Advisors (SRA's) are supervised by certified social workers. NYCHA operates this program at twenty-two senior-only developments.

From July 1, 2010 through June 30, 2011, the program provided 50,895 units of support services to an average of 1,502 residents monthly, and conducted 11,665 home visits.

Senior Companion Programs

This program, which is a cooperative project with the New York City Department for the Aging, the Henry Street Settlement and the Corporation for National Service, provides assistance to sick, socially isolated, and frail elderly residents at selected NYCHA developments. Working with a corps of resident volunteers called Senior Companions; the program provides friendly home visits, crisis intervention, telephone reassurance, and errand and escort services. From July 1, 2010 through June 30, 2011, the Senior Companion Program conducted 3,394 home visits, and provided 74 Escort Services to approximately 31 elderly residents monthly.

Supportive Outreach Services (SOS)

Supportive Outreach Services assists residents in improving their social functioning. Staff conducts needs assessments, design treatment plans, make referrals for direct social services and coordinate service utilization. From July 1, 2009 through June 30, 2010, 6,950 new referrals were received.

The Furniture Distribution Program is a component of SOS that is administered by Community Operations' Social Services Department. This program secures donations of furniture, bedding and an assortment of household items from the private sector, hotels and motels throughout the metropolitan area in order to assist relocated families who have lost their possessions due to a fire or other calamity and Victims of Domestic Violence who transferred through the Emergency Transfer Program. From January 1, 2010 through December 31, 2010 approximately 107 families were assisted through the program. From January 1, 2011 through June 30, 2011 approximately 77 families were assisted through the program.

Senior Benefit & Entitlement Fair

NYCHA's Department of Resident Support Services sponsors an annual Senior Benefit and Entitlement Fair (SBEF) to provide NYCHA's senior residents with access to resources and services geared towards their needs. The 5th annual Senior Benefit & Entitlement Fair's theme was "Health & Financial Fitness II". Over 1,500 seniors attended the event and were provided with box lunches we arranged for 1,000 residents to be bused from NYCHA developments citywide. There were a series of 20 minute workshops held on "Identity Theft" and "How to Make the Most of Your Money". One-to-one financial counseling was provided at private tables. Representatives from banks and financial advocacy organizations were available to present information and answer questions. Additionally, health information and screenings were offered, including screenings for Diabetes/Glucose, cholesterol, vision/Glaucoma, blood Pressure and flu-shots. Group exercise classes, dancing, massage therapy and cooking demonstrations were also provided. Sixty-two (62) agencies and senior focused organizations participated. Eighty percent of expenses were covered by outside contributions. The event was a major success.

NYCHA Senior Project

The Resident Support Services Department, in partnership with NYCHA's Department of Research and Management Analysis, initiated a project to assess the health and social needs of NYCHA's older adult population. Currently there are approximately 60,000 residents 65 years and older. These Departments worked with the NYC Department of Health and Mental Hygiene, Division of Epidemiology Services in developing an instrument to measure self-reported physical health status, quality of life, mental health, modified risk factors, injury and safety, service utilization, activities of daily living and multiple chronic conditions. The Baruch College Survey Research Unit administered the survey by telephone. The Department of Resident Support Services and the Department of Research and Management Analysis worked with DOHMH, and the CUNY School of Public Health Program to draft a comprehensive report. It was presented to various NYCHA and outside entities to solicit and incorporate suggestions to plan for future remedies. The report was recently published in 2011 and is available on NYCHA's web site at <http://www.nyc.gov/html/nycha/downloads/pdf/senior-report-nycha.pdf>.

NYCHA Operated Senior Centers

NYCHA directly operates 38 senior center facilities and provides educational, recreational, cultural and social activities. Programs at these centers vary according to the level of staffing, availability of overall funding, physical space, and funding for meals and/or satellite lunches provided directly or from nearby DFTA-funded Senior Centers. In some cases, discretionary funds from the City Council Members subsidize expenditures for volunteer lunch programs or center activities. In addition to meal programs, many centers provide music programs such as singing and keyboard instruction; arts and crafts such as ceramics and painting; workshops on entitlements and nutrition; drama and playwriting classes; basic computer education classes; ESL classes; gardening; exercise and a host of other activities. The centers celebrate many holidays as well as, cultural and historical events, such as Thanksgiving, Christmas, Chanukah, Kwanzaa, Hispanic Heritage, Black History Month and Women's Month. They also organize day trips to plays, talk shows, family resorts, fishing, shopping and other activities.

HealthStat

HealthStat is a citywide initiative designed to identify and enroll eligible low and moderate income New Yorkers into health insurance plans such as Child Health Plus and Family Health Plus. During 2010, NYCHA facilitated a total of 31,169 resident enrollments into health insurance plans. For the past 7 years NYCHA has led all other participating NYC agencies in the number of health insurance enrollments.

Strategic Alliance Collaboration

DOHMH received a grant to develop the Strategic Alliance for Health initiative in the South Bronx, and East and Central Harlem over a 5 year period. DOHMH's District Public Health Offices in East Harlem and in the South Bronx are the hubs for the initiative. NYCHA's Department of Resident Support Services is an active participant given the large number of NYCHA developments in both areas.

The goal is to provide opportunities for residents in these areas, which have high rates of poverty and chronic illness, to reduce smoking, increase physical activity and improve access to healthy foods. Their methods include; training classroom teachers to lead in-class physical activities, closing streets near schools to increase opportunities for outdoor play, creating walking paths, expanding participation in free school-breakfast programs and reducing tobacco promotion in the target communities.

A Walking Path Initiative is in place at St. Nicholas (Manhattan) and Mott Haven (Bronx). Residents trained and hired as walking leaders are leading groups of residents on walks along prepared walking paths. Signs and markers are in place along the paths. Participants progress is tracked they receive awards upon reaching various milestones.

Goals of the St. Nicholas Walks and Mott Haven Walks Walking Path Initiative

- Promote the benefits of walking i.e. lowers blood pressure, reduces the risk of heart disease, diabetes, stress and more.
- Establish walking clubs within St. Nicholas and Mott Haven respectively
- Encourage and increase access to physical activity among residents at both St. Nicholas and Mott Haven Houses.
- Promote healthy lifestyle behaviors and changes via complementary initiatives within the St. Nicholas Walks and Mott Haven Walks initiatives i.e. WeCoach and Shape Up NY programs.

Earned Income Tax Credit (EITC)/Tax Assistance

In 2010 NYCHA's Resident Support Services Department coordinated the annual campaign to maximize the participation of qualified residents in this tax refund program for low income wage earners. Approximately 30,000 NYCHA families are eligible for the program and can receive as much as \$7,637 in refunds when they file for the EITC through their federal, state and city returns. Our department coordinated the mailing of letters to 30,000 potentially eligible NYCHA families that encouraged them to file for the EITC. Information was provided in the NYCHA Journal and flyers and posters were disseminated system-wide. Notices were placed on rent bills encouraging residents to call 311 to identify the nearest free tax assistance site.

Flu Immunization Program

The Flu Immunization Program is an annual collaboration between NYCHA's Resident Support Services and DOHMH to ensure that NYCHA residents have access to the flu vaccine and to encourage participation in the vaccination program. The program places special focus on high risk populations such as the elderly, the very young and immune-compromised residents. NYCHA's health promotion tools include the NYCHA Journal, presentations to resident groups, posters and flyers, and scheduled vaccinations at select NYCHA sites. Also, during the past three years hundreds of NYCHA senior residents were vaccinated at the Senior Benefit & Entitlement Fair.

Senior News Column (NYCHA Journal)

NYCHA's Department of Resident Support Services writes a monthly column in the NYCHA Journal designed to keep senior residents informed about issues of importance to them. Most topics are health-related and/or concern benefit programs. Simplified instructions to re/apply or receive more information are included.

The table below outlines topics covered in the last two years:

2010 Senior News Topics:

Month	Topic
January	Free Tax assistance/EITC
February	Identity Theft Prevention Do Not Call Registry
March	Medicare Advantage Open Enrollment Period, in which all people with Medicare can again switch their Medicare plan choice – ends in March
April	Food Card
May	Free Summer Events/Concerts
June	SSA/SSI Stimulus Checks
July	Emergency Cooling Centers West Nile Virus Prevention
August	Transportation Benefits Resources for Grandparents
September	Diabetes Expo
October	Flu Shots
November	Medicare Part D Open Enrollment Period

2011 Senior News Topics:

Month	Topic
January/February	Free Tax assistance/EITC - Beware of Refund Anticipation Loans
March	Fall Prevention
April	Smoking Cessation
May	All Federal Benefit Payments Going Electronic
June	Hearing Loss
July / August	NY Drug Discount Card West Nile Virus Prevention

I Have a Dream Program

The IHAD Foundation collaborates with NYCHA, local not-for-profit organizations, learning institutions, and private financial institutions to provide a comprehensive program to NYCHA youth. NYCHA provides space and an annual cash grant to the IHAD Foundation for each participating site. The IHAD Program currently operates four programs in four NYCHA developments: Chelsea-Elliott Houses and DeHostos in Manhattan, Melrose Houses in the Bronx, and Ravenswood Houses in Queens.

The program has “adopted” third-graders from the above-referenced developments and will continue to follow these children’s progress from elementary through high school graduation. The goal of the program is to keep this group of residents (called “Dreamers”), in school. IHAD provides tuition assistance to those Dreamers who graduate from high school and attend college or vocational college. The program also offers the Dreamers social and cultural activities that increase the Dreamers’ chance for success.

Currently, there are 96 Dreamers enrolled at Chelsea-Elliott; 42 at DeHostos; 35 at Melrose II, and 57 at Ravenswood Houses.

Fatherhood Initiative

In support of the Mayor's citywide Fatherhood Initiative, NYCHA's Fatherhood Initiative (NFI) program launched July 31, 2010 at the Williamsburg Community Center in Brooklyn. The program is conducted by two Department of Youth and Community Development contractor agencies: The Coalition of Hispanic Family Services conducts Fatherhood programming for fathers ages 25 and older, while Friends of Island Academy focuses on fathers younger than 25. The program brings NYCHA and principle city agencies together to provide workshops, services, and resources that will foster an environment where fathers will be encouraged not only to remain active in their children's lives, but to also support one another. The program has since expanded to an additional 5 sites (Justice Sonia Sotomayor and St. Mary's Community Centers in the Bronx, King Towers in Manhattan, Beach 41st and Woodside Community Centers in Queens). In June a seventh site will be rolled out to Berry Community Center on Staten Island. Current partners include Claremont, Visiting Nurse Services, Dads United for Parenting, Fund for the City of New York/Center for Court Innovation, and Forestdale Inc. The program is also serving as a national model for HUD for implementation throughout other public housing authorities.

Mary J. Blige and Steven Stoute Foundation for the Advancement of Women Now (FFAWN) -The Mary J. Blige and Steven Stoute Foundation for the Advancement of Women Now (FFAWN) was founded in 2007 by singing sensation Mary J. Blige and music mogul Steve Stoute to inspire women from all walks of life to gain the confidence and skills they need to reach their individual potential. NYCHA will partner with FFAWN to develop workshops and programs for the young women in public housing developments in a first-ever young women's initiative.

The NYC Imagination Library Initiative

The Imagination Library is a birth-to-five early literacy program targeting all NYC children founded by singer-songwriter Dolly Parton. The program assists pre-school children in developing their vocabulary, school readiness, and love of learning and reading by ensuring that FREE, high quality, age-appropriate books are mailed once a month directly to their homes encouraging parents to regularly read aloud to their preschool children. For the 2010-2011 school year, the New York City Department of Education is partnering with the Dolly Parton Imagination Library, NYCHA and other New York City agencies, to pilot an enhanced version of the Imagination Library in targeted high-need school communities in Manhattan, Brooklyn, the Bronx, and Queens, with the goal of citywide expansion of the piloted NYC Imagination Library Initiative beginning in the 2011-2012 school year.

Broadband Technology Opportunity Program (BTOP)

The National Telecommunications and Information Administration, ("NTIA"), United States Department of Commerce is provided funding under the Broadband Technology Opportunities Program ("BTOP"). In partnership with DoITT and other City institutions, the Authority submitted a joint application through the NYC Connected Communities initiative established by DoITT. As a partner in NYC Connected Communities, NYCHA will bring broadband internet technology to community centers in 13 public housing developments throughout the five boroughs. These centers will serve vulnerable populations residing in these developments together with other members of the general public living within proximity to the Centers. There is a growing need for low-income New Yorkers, predominantly African-American and Latino-American, to improve their Broadband opportunities for success in school and in life. The unemployed, senior citizens, children and people with disabilities will benefit from greater access to Broadband Internet resources, and from a variety of Internet employment training and job search skills.

2) Office of Resident Economic Empowerment & Sustainability (REES)

The Office of Resident Economic Empowerment & Sustainability (REES) develops and implements programs, policies and collaborations to measurably support residents' increased economic opportunities with a focus on asset building, employment, advancement and business development. Outreach, pre-screening, referral and placement assistance services are provided to public housing residents both directly and through partner

organizations including the Workforce 1 Centers and the Human Resources Administration's (HRA) Back to Work vendors.

Over the course of 2011, NYCHA is transitioning from primarily providing direct employment services to coordinating and facilitating greater access to services for NYCHA residents. NYCHA is one stakeholder within a broader community economic development ecosystem - community colleges, City agencies, non-profit social service organizations, workforce agencies, financial institutions, employers, residents, and philanthropies. Rather than duplicate services provided by other organizations, REES is developing additional service coordination capacity – better enabling it to become a strong partner and driving more resources and investment into public housing neighborhoods. Understanding that every public housing community is different with different needs and resources, NYCHA will use its assets to work with local partners to ensure that NYCHA residents are maximizing the use of existing resources including adult literacy programs, job training, support services, financial literacy and asset building programs and job placement assistance. At the same time, NYCHA will work with local partners to identify gaps in service offerings and develop strategies to attract the high-quality and relevant resources and proven economic opportunity models into public housing neighborhoods.

NYCHA Resident Training Academy (RTA)

Launched in late 2010, NYCHA partnered with Robin Hood – a non-profit organization whose mission is to fight poverty in New York City, to launch a pilot program that trains residents in janitorial services and basic construction for employment at NYCHA developments, or construction-related jobs with NYCHA contractors. The program exceeded first-year goals with 138 residents completing training; 85 percent of graduates (118) were hired by NYCHA as maintenance aides or caretakers or secured positions with NYCHA contractors as construction workers. The RTA is being expanded in its second year of operation to include a pest control training track with the goal of placing 300 public housing residents into jobs.

Jobs-Plus Sites

Jobs-Plus is a proven place-based employment program that offers services to all working-age residents in one or a cluster of public housing developments. Jobs-Plus, when implemented well, has been proven to increase earnings for public housing residents by more than 16%. The first City-sponsored site launched in late 2009 at Jefferson Houses in East Harlem as a collaboration between the Center for Economic Opportunity (CEO), CUNY, Human Resources Administration and NYCHA. Since its inception, the program has been instrumental in facilitating over 230 placements and/or promotions for residents of Jefferson Houses. In 2011, NYCHA is looking forward to the launch of the third New York City Jobs-Plus site in the South Bronx in collaboration with the NYC Center for Economic Opportunity, Office of Financial Empowerment and Bronx Works.

Section 3 and Resident Employment Program (REP)

Section 3 is a HUD mandate that stipulates employment and other economic opportunities generated by federal assistance to public housing authorities shall be directed, to the greatest extent feasible, to public housing residents and other low and very low income persons. Section 3 requires that 30% of all new hires be residents of public housing, and/or low or very-low income residents of the community. The first priority for hiring under Section 3 is for residents of the developments. Section 3 goals also apply to contracting with resident-owned businesses and training. To further support compliance and maximize employment opportunities for public housing residents, the Resident Employment Program (REP) requires 15% of the labor costs on a contract be expended on resident hiring. With few exceptions, REP applies to contracts valued in excess of \$500,000. During 2010, there were 621 Section 3/REP placements with NYCHA contractors. Additionally, 48% (862) of NYCHA's direct hires were Section 3 NYCHA residents.

FY 2007 ROSS/Resident Service Delivery Model (RSDM) Grant

With a grant from HUD, NYCHA has partnered with the City College of New York Adult and Continuing Education (CCNY/ACE) and Year Up New York (Year Up), to provide vocational training, job search assistance and job placement for 100 residents. CCNY is offering slots in its existing educational and vocational programs for the following: Teacher's Assistant, Bookkeeping, Medical Administrative Assistant, Construction

Management, Building Trades and Solar Panel Installation. Year Up is offering offer a one-year intensive education and apprenticeship program to urban young adults ages 18-24.

Community & Supportive Services- Prospect Plaza

NYCHA's Office of Resident Economic Empowerment & Sustainability (REES) is re-orienting the Community and Supportive Services (CSS) activities for former residents of Prospect Plaza under the HOPE VI grant by contracting with Credit Where Credit Is Due (CWCID) to provide financial education and management services. Through this initiative, interested residents will receive support to become financially-ready and eligible to exercise their right of first refusal for the affordable housing being developed as a result of the HOPE VI grant. Job readiness, workforce development and placement assistance continues to be available for residents through REES and referrals to other agencies and community-based organizations.

Financial Independence Today – United Way/ERDA Initiative

The Financial Independence Today (FIT) program is an innovative partnership between the East River Development Alliance (ERDA) and the United Way NYC (UWNYC), in collaboration with the New York City Housing Authority (NYCHA), focused on increasing financial stability of public housing residents, particularly those facing rental arrears. Over 1,000 residents of public housing in Western Queens have been served to date through Financial Independence Today interventions, including crisis one-on-one counseling for residents facing rental arrears, non-rental arrears long-term counseling, tenant advocacy services, comprehensive public benefits screening and enrollment, financial education workshops, and NYCHA rent payment at the ERDA Federal Credit Union. Intensive one-on-one program outreach targets all residents of Astoria, Pomonok, Woodside, Ravenswood, and Queensbridge Houses.

NYCHA Family Self Sufficiency

REES restarted the Housing Choice Voucher (HCV) (Section 8) Family Self Sufficiency (FSS) program in the fall of 2010 which was discontinued in 2008 due to insufficient funding. The FSS program is a national HUD program that encourages communities to develop local strategies to help voucher families obtain employment that will lead to economic independence and self-sufficiency. The goals of the program are to assist participating families in increasing earned income, reduce or eliminate the need for welfare assistance, increase financial literacy and promote asset building through the maintenance of an escrow account. Upon restarting the program, REES offered enrollment priority to families who were participants when the program was discontinued. Subsequently, enrollment will be offered to other Section 8 voucher holders. To date, the program has reenrolled 50 participants, 10 of whom have escrow accounts averaging \$4,938.

3) Department for Development

For a description of NYCHA's HOPE VI-Programs at Ocean Bay and Prospect Plaza, please refer to Volume 1, Part I., Action Plan: One Year Use of Funds, Section C., Program Descriptions; New York City Housing Authority Funds.

Homeownership Opportunities

NYCHA's website includes a link to the City's Affordable Housing Resources website, <http://www.nyc.gov/html/housinginfo/html/home/home.shtml>, which provides information about affordable homeownership programs in New York City. In addition to HPD's HomeFirst campaign, NYCHA promotes homeownership among residents on an ongoing basis through the following activities:

Through the collaborative effort between NYCHA and HPD under Mayor Bloomberg's New Marketplace Initiative, homeownership opportunities are being made available to NYCHA residents. The redevelopment of Markham Gardens in Staten Island has provided 25 attached two-family townhouses for homeownership with purchase priority given to former Markham Gardens residents. Affordable homeownership opportunities will also be provided in the Bronx through development of 16 two-family townhouses as part of a larger rental project at Soundview Houses. NYCHA residents interested in purchasing a home will be required to enroll in a

homeownership education course. Potential homebuyers may be eligible for down payment and closing cost assistance for up to 6% of the purchase price, up to \$15,000 through HPD's HomeFirst program.

NYCHA residents will be given preference to purchase their homes through NYCHA's Multifamily Homeownership Program (MHOP), financed through HOPE I Grants. The MHOPs consisted of 455 public housing units in the Bronx and Manhattan that will be sold to eligible applicants. As of June 30, 2011, all units in the Bronx have been converted to homeownership. NYCHA anticipates converting the Manhattan site by the end of calendar year 2012.

NYCHA is offering Section 8 subsidies to current residents of MHOP Developments who qualify for Section 8 and who wish to purchase their dwelling units and to current residents of MHOP Developments who qualify for Section 8 and who wish to remain in their units as non-purchasing tenants of the MHOP Development once it converts to cooperative ownership.

NYCHA Continuum of Care for Public Housing Residents with Special Needs

NYCHA serves the elderly through several programs, which have been described above.

Families at-risk

Family Unification and Independent Living Programs

The Family Unification Program provides public housing apartments and Section 8 rental assistance to families, who are not NYCHA residents and who are at-risk for having their children retained in foster care due to the lack of adequate housing. Once adequate housing is provided, children are returned to their families. The Independent Living Program provides public housing apartments and Section 8 rental assistance to young adults leaving foster care who have a goal of Independent Living. The Administration for Children's Services (ACS) certifies families and young adults that meet these requirements.

From July 1st, 2009 to June 30, 2011, there were a total of 126 apartment units rented as a result of the issuance of Section 8 vouchers to persons serviced through ACS' Housing Support and Services (HSS) unit. Of that total, 94 apartments were rented to Independent Living youths and 32 apartments were rented to families reunified with their children. Additionally, there were 439 public housing units rented as a result of HSS services, for the same time period. Of that sum, 334 public housing units were rented to Independent Living youths and 105 public housing units were rented to families being reunified.

NYCHA assigns a high transfer priority to those families that have been referred by ACS for the purpose of Family Unification. For example, applicants with children in foster care whose only barrier to reunification is housing and who are not eligible for rental assistance through the City's Housing Stability Plus Program will be assigned a high transfer priority.

Persons with Disabilities - Section 504

In accordance with the Voluntary Compliance Agreement (VCA) signed jointly with the Department of Housing and Urban Development in 1996, NYCHA agreed to make five percent of its total units, equivalent to 9,100 apartments, handicap accessible and made available to residents / applicants with mobility impairments. In addition, NYCHA will provide reasonable accommodations and 504 modifications to existing conventional apartments.

As of June 30, 2011, NYCHA has converted 7,695 units to 504 and completed approximately 11,446 partial modification in NYCHA units including but not limited to widened doorways, roll-in showers, modified kitchen cabinets, lowered kitchen sink counters, bathroom grab bars, raised or lowered electrical outlets, raised or lowered toilet seats as well as audio/visual alarms. NYCHA also offers reasonable accommodations in policies, procedures and practices that will make non-dwelling facilities, services and programs accessible to persons with disabilities.

Domestic Violence

For information on NYCHA's Domestic Violence programs: Outreach & Referral to Problem & Relocated Families; Emergency Transfer Program; Domestic Violence and Intervention Program; and the Aftercare Program, please refer to Part I. Section D., Continuum of Care for Homeless and Other Special Needs Populations; Victims of Domestic Violence for program descriptions. All programs are administered by the Department of Community Operations.

Relevant Public Policies

Wicks Law Reform

As of July 1, 2008, changes have been enacted to the New York State Wicks Law (Section 151-a of the Public Housing Law), which formerly required NYCHA and other New York State housing authorities, on certain public works contracts exceeding \$50,000, to award separate construction contracts for plumbing, electrical and heating/ventilation/air conditioning. Although the revised legislation increased the threshold from \$50,000 to \$3,000,000, it added an additional bid requirement. Each bidder must now submit with its bid, a sealed envelope containing the names of the subcontractors they intend to use to perform the work and the cost for each subcontract. After the bid submission, the selected contractor can only change subcontractors, or the amounts such subcontractors are to be paid, upon showing a "legitimate construction need" for such change and, with the approval of the Authority.

Mixed-Finance Development Method

The Quality Housing and Work Responsibility Act (QHWRA) of 1998, provided public housing authorities (PHAs) with an unprecedented level of financial flexibility, encouraging mixed-finance and mixed-income housing development for both public housing families and other families within a range of income levels.

NYCHA has undertaken the development of new housing units using mixed-finance development initiatives in connection with its Prospect Plaza HOPE VI revitalization effort in Brooklyn. This Project is divided into three sites: A, B and C. The first phase is Site A, where 37 two-family homeowner townhouses were completed in 2005, with thirty-two of the homes being purchased by first time home buying, public housing residents.

The second phase, site B with a total of 150 units, was completed by a private developer in 2009. Forty-five units were rented with priority to former Prospect Plaza residents who were eligible for Section 8 rental subsidies. The remaining NYCHA preference units were filled by transfer voucher holders who met the admission criteria of the new building.

It is anticipated that the balance of the Prospect Plaza Houses redevelopment will be accomplished through mixed-finance, mixed-income projects, comprised of rental units owned and managed by private, third party development and management entities. The proposed scope includes development of rental units, with public housing and other affordable units mixed across the site. It is further intended that any non-public housing units will be affordable to low- and moderate-income households, and incorporate federal Low Income Housing Tax Credits and Section 8 vouchers. A new, multi-use community, educational and day care center is also planned at Prospect Plaza.

Preference for the lease up of the public housing apartments will be given to relocated Prospect Plaza public housing residents in good standing, who wish to return to the redeveloped community. A site-based waiting list created from the Authority's existing public housing waiting list for the public housing units will be used to tenant the public housing units.

Additional NYCHA Affordable Housing Development Initiatives

Brook Willis Apartments (BWA)

In June 2006, title to eight tenement buildings, formerly part of Betances Houses, were conveyed to a developer selected via a Request for Proposals issued in 2004. The properties, consisting of 121 apartments located on

136th, 143rd, 145th and 147th Streets in Community District 1 in the Bronx, have been rehabilitated for occupancy by low-income tenants.

Ten percent of the BWA units are reserved for the homeless, and 25% for NYCHA families living in the Bronx who are eligible to receive Section 8 vouchers, to current Section 8 voucher holders who are seeking transfers, and eligible families from the Authority's Section 8 waiting list. NYCHA has contributed property, land and Section 8 vouchers; project financing was provided by the Housing Development Corporation, the Department of Housing Preservation and Development, and the Low Income Housing Tax Credits program, among other sources. The first four buildings were completed in 2007, and the remaining four buildings were completed in summer 2008. Forty-two NYCHA families currently occupy the redeveloped Brook Willis apartments; All of the 121 rental units are tenanted.

Markham Gardens

On December 28, 2006, NYCHA transferred title to a 9.4 acre portion of the 12.4 acre Edwin Markham Gardens housing development, located on Staten Island, to the Markham Gardens Tenants Housing Development Fund Company, Inc. It is the third NYCHA site to be redeveloped through collaboration between NYCHA, HPD and HDC as part of the Mayor's New Housing Marketplace Plan. The redevelopment initiative at Markham Gardens has created a total of 290 affordable residential units, including 240 rental apartments and 25 "for-sale" two-family homes. Eligible former Markham Gardens' residents have priority to rent the apartments or purchase the townhouses.

Financing for the project's rental portion included \$25 million in tax-exempt bonds from the New York City Housing Development Corporation (HDC), \$16 million in equity generated from the sale of 4% low income housing tax credits from the New York City Department of Housing Preservation and Development and \$17 million from the sale of 421-a negotiable certificates.

Of the 240 mixed-income rental units, 150 were reserved for Section 8 voucher recipients referred by NYCHA, including former Markham Gardens' residents. Rental of the remaining 90 units were targeted at residents with incomes between \$30,082 and \$85,080 for a family of four.

Designed with environmentally sustainable, energy-efficient building techniques, the redevelopment included 50 units in 25 for-sale two-family homes (one owner and one rental unit in each) for moderate-income families, as well as a park, outdoor seating areas, and a recreational center.

About an acre of the site was set aside for future development of an 80-unit senior residence. The Sisters of Charity organization was awarded Section 202 funding from HUD and is expected to start construction in August 2011.

Metro North Rehabs

Metro North Rehabs was a NYCHA-owned, project-based Section 8 development consisting of 17, six-story walk-up tenement buildings in Manhattan with a total of 321 units. Five buildings are located on East 100th Street, six buildings on East 102nd Street and six on East 103rd Street, all mid-block between First and Second Avenues. Phipps Houses, along with Urban Builders, were selected pursuant to an RFP issued in December 2006 to rehabilitate the 100th Street buildings and redevelop the 102nd Street and 103rd Street properties, for the creation of a total of 340 residential units under a long term ground lease. Former Metro North Rehab residents in good standing who choose to return will be given rental priority. Up to 300 units will be rented to residents eligible for Section 8 vouchers. Closing on Metro North occurred June 30, 2009 and Phipps Houses is scheduled to complete new construction on the 102nd Street site and substantial rehabilitation of the 100th Street buildings by September 2011.

West Side Sites

In collaboration with HPD as part of the Mayor's New Housing Marketplace Plan, NYCHA issued a Request for Proposals in December 2006 to develop three sites at Harborview, Elliot/Chelsea and Fulton (described below).

Harborview

NYCHA selected a developer in September 2007 to construct two buildings with a minimum of 210 units on the Harborview parking lot mid-block on West 56th Street between 10th Avenue and 11th Avenue. The required ULURP land use review procedure was completed in November 2008; however due to changes in the City's inclusionary housing program and the affordable housing finance markets, this project is currently being reevaluated by NYCHA and HPD.

Elliott/Chelsea

NYCHA selected a developer in September 2007 to construct a building with approximately 128 units on the Chelsea Houses parking lot at West 25th Street and 9th Avenue. The approved development has increased in height to 22 stories for a more economical building with 168 units and retail stores on the ground floor, following review of affordability levels and unit mix with community stakeholders including elected officials, residents and community board members and the City's Department for City Planning. The necessary public and governmental land use approvals were obtained before conveyance in July, 2010 for development. Construction is expected to be completed in 2012.

Fulton

NYCHA selected a developer in September 2007 to construct a building with approximately 100 units on the Fulton Houses parking lot on West 18th Street (mid-block) between 9th Avenue and 10th Avenue. The proposed development requires a revised design to accommodate a more family oriented unit mix as well as sufficient financing for construction and land acquisition from NYCHA.

Stapleton

A 105 unit, low-income senior housing development was approved for a portion of the Broad Street parking lot located at NYCHA's Stapleton Houses public housing development. Closing took place in April 2009. Construction is complete for both the new senior building and the grounds improvements to the public housing development. All units are now tenanted.

Pomonok

In 2009, NYCHA disposed of a parking lot with access off 71st Avenue between Parsons and Kissena Boulevard to a non-profit housing sponsor to facilitate the provision of low income housing for seniors requiring supportive services. The sponsor won an allocation of Section 202 funding from HUD for the proposed 8 story, 78 unit senior housing development. NYCHA seniors have rental priority for 19 units. Marketing to NYCHA seniors has begun well in advance of building completion which is targeted for January 2012.

Bronx Affordable Housing

In collaboration with HPD as part of the Mayor's New Housing Marketplace Plan, NYCHA issued a Request for Proposals in September 2007 to develop four vacant sites at Highbridge Gardens, Soundview, Forest and University Avenue Consolidated (described below).

Highbridge Gardens

NYCHA has disposed of a vacant site at the intersection of University Avenue and West 167th Street. A developer was selected to build two buildings with approximately 220 rental units for low-income households. One of the new buildings will include a community room with a Resident Services Plan focusing on recreational activities for youth and services for seniors. The developer was recently awarded low income housing tax credits to provide equity for the project. In January 2011, construction commenced on the first (65 unit) building. The second building is in the predevelopment phase.

In addition, NYCHA negotiated the sale of an adjacent site to the NYC School Construction Authority for a 390 seat middle school to be constructed for opening in 2012.

Soundview

NYCHA intends to dispose of a vacant site including an under-utilized parking area at Rosedale Avenue and Lacombe Avenue along Soundview Park. A developer was selected to build approximately 200 low income rental units and 16 two-family townhouses for affordable homeownership. Predevelopment work is underway for closing in 2012.

Forest

NYCHA disposed of a lot within Forest Houses at the corner of Tinton Avenue and E. 166th Street. A developer was selected to build 123 rental units for low-income households. Construction is underway, with occupancy scheduled for December 2012.

University Avenue Consolidated

Developers have been selected to renovate 463 apartments in two phases. The first six buildings (270 units) were conveyed to Arista Development in June 2009; and the remaining four UAC buildings (173 units) were conveyed to Bronx Pro Real Estate Management at the end of 2009. Both developers have agreed to set aside 25% of their rehabilitated units for NYCHA with rental preference to former UAC residents who wish to return and are eligible for Section 8 rental subsidies. Tenanting of the first six buildings is complete; tenanting of the remaining four buildings is underway.

East 173rd Street and Vyse Avenue

NYCHA conveyed a site for an 84 unit low-income housing in December 2009 as the first phase of a 224 unit housing development project. With funding and financing from both the State and City agencies, Phase I is under construction for completion by 2011. Income eligible NYCHA residents and Section 8 voucher holders have rental priority for 25% of the units.

George Washington Houses

NYCHA intends to convey a parcel of land at George Washington Houses for the development of a 450 seat Charter School serving grades K-8, as well as approximately 90 units of affordable housing. This project is in the planning phase with closing targeted for 2012.

D. Elimination and Treatment of Lead-Based Paint Hazards

Lead-Based Paint (LBP) abatement activities were conducted by the Department of Housing Preservation and Development, the City's local housing agency, the New York City Housing Authority (NYCHA), responsible for public housing and homeownership developments under its direction, and the Department of Homeless Services (DHS), responsible for shelters and transitional housing for homeless individuals and families.

Housing Preservation and Development (HPD)

The City of New York places a high priority on preventing childhood lead poisoning and reducing lead paint hazards. The City is sensitive to the potentially detrimental effects of lead exposure upon children. Lead hazard reduction activities target residences of children less than 6 years of age, who are especially at risk for lead poisoning. Intervention efforts are also provided to children with elevated blood levels

As a result of the tremendous concern regarding this issue, the use of lead paint on interior residential surfaces was banned in New York City in 1960.

In December 2003, the City Council enacted its third version of a law related to protecting children from the hazards of lead-based paint. Local Law 1 of 2004 ("Local Law #1") became effective on August 2, 2004. The law continues the requirement from previous laws that owners maintain units free of lead based paint hazards. However, the new law additionally requires that when any work is performed that disturbs lead based paint in a dwelling unit in a multiple dwelling building (3 units or more) with a child under 7 (the age of the child was subsequently changed to a child under 6), whether the work is done in response to issuance of a violation, or is just a routine repair or renovation, the workers performing such work must be trained, and safe work practices must be utilized. Local Law #1 requires that owners affirmatively ascertain which units are occupied by children under age 6 and perform annual inspections for lead based paint hazards. Owners must also remediate and in certain cases abate lead paint hazards in units when they become vacant, prior to re-occupancy. HPD and the New York City Department of Health and Mental Hygiene (DOHMH) have worked together to implement the law. Each agency promulgated rules that included standards for trained workers and safe work practices.

Under Local Law #1, when DOHMH receives a report of a child with an EBL of 15 micrograms of lead per deciliter of blood or greater, DOHMH inspects the child's residence to identify possible sources of lead exposure and orders the owner of the property to abate any lead paint hazards found. If the landlord fails to correct the condition, a referral is made to HPD's Bureau of Emergency Repair and Environmental Hazards unit. Upon verification that the property owner has failed to comply, HPD assigns a contractor to abate the condition. Both HPD and DOHMH inspect completed work to verify that the condition has been abated.

The U.S. Department of Housing and Urban Development (HUD) has issued extensive regulations and guidelines under the Residential Lead-Paint Hazard Reduction Act of 1992. In October, 1999, HUD issued final rules concerning notification, evaluation and reduction of lead-based paint hazards in housing receiving federal assistance. The City relies upon a variety of federal programs to achieve its housing and community development objectives, including the Community Development Block Grant (CDBG) Program, HOME, HOPWA and the McKinney Homeless, Housing Programs. The rules became effective on September 15, 2000. However, HUD granted several extensions of time to comply with the rules. On August 3, 2001, HUD issued a notice granting a final extension until September 10, 2001 for jurisdictions, like New York City, that had applied for earlier extensions. HUD also granted a further extension until January 10, 2002, for jurisdictions that submitted an updated transition implementation plan by September 10, 2001. The City did not submit a plan, and on September 10th, the rules became effective in New York City. However, due to the events of September 11th, at the City's request, HUD granted a new extension of time to comply with the rules until April 10, 2002.

On April 22, 2002, HUD granted HPD's Bureau of Emergency Repair and Environmental Hazards (BEREH) an exemption from Subpart J (Title X). Nevertheless, BEREH has implemented safeguards when conducting work which may affect lead based painted surfaces (i.e., breaking walls), including: XRF testing, requiring contractors to use safe work practices, and notifying tenants and owners of the presumption or presence of lead based paint

hazards. On July 12, 2007, HUD renewed its approval of the request of a waiver for *in rem* housing. The waiver will expire at the time that a building undergoes substantial rehabilitation, or in two years, whichever is less. HPD will continue to implement lead poisoning prevention activities in its *in rem* properties that are at least as stringent as the requirements under Local Law #1.

One-Year Plan

The City operates several programs to investigate, treat and eliminate lead-based paint hazards. The City investigates, abates and remediates lead-based paint hazards in City-owned dwellings and in privately owned dwellings where owners are unwilling or unable to do so.

The City's Department of Health (DOHMH) and the Department of Housing Preservation and Development (HPD) run a coordinated program to address hazards where there is a lead-poisoned child identified by the DOHMH. In August 2004, the blood lead level at which DOHMH initiates environmental intervention was changed to one blood lead test of 15µg/dL or greater. Previously, environmental investigations occurred for children with one blood lead level of 20 µg/dL or greater or two BLLs of 15-19 µg/dL taken at least three months apart. In calendar year 2010, 430 NYC children (ages 6 months to less than 6 years old) with blood levels initiating environmental intervention were identified. Of these, 178 children had a first-time blood lead level of 20 µg/dL or greater and 252 children had a first-time blood level that was between 15 and 19 µg/dL.

Where a lead-poisoned child is identified, the DOHMH orders the owner to abate lead paint hazards. If the owner fails to do so, HPD's Bureau of Emergency Repair and Environmental Hazards will do the work and place a lien against the property for the cost. HPD currently maintains six (6) contracts of approximately six million three hundred thousand (\$6,300,000) dollars total for remediation and abatement and three (3) contracts of approximately \$300,000 for dust wipe analysis.

The DOHMH also administers several primary prevention initiatives that focus on lead paint hazard remediation in homes of young children who do not have elevated blood lead levels. For these children, the DOHMH orders the owner to remediate lead paint hazard(s). If the owner fails to do so, HPD will do the work and place a lien against the property for the cost. HPD and DOHMH have established protocols for joint inspections where necessary, updating both agencies' computer systems so they communicate, and assigning staff to act in a project-management capacity in order to facilitate lead abatement work in cases where the landlord or tenant may impede the performance of such work. In calendar year 2010, 255 jobs to abate DOHMH violations were completed by BEH in privately owned buildings.

As a result of Local Law #1, DOHMH amended the safety rules to be used when lead-paint violations are being corrected in units where a lead poisoned child has been identified. These rules specify the approved methods of abatement, and the required safety procedures, including clearance testing prior to re-occupancy of a dwelling. Owners are required to file with the DOHMH prior to commencement of each job and are subject to work-in progress inspections. The rules also require safe work practices when repair and renovation work that disturbs paint is performed in units with children under 6. HPD's rules contain the same requirements HPD performs additional lead hazard reduction in City-owned buildings and informs tenants of the dangers of lead based paint. In addition to the above efforts in which the City is responding to complaints regarding lead based paint hazards, HPD also acts affirmatively to alleviate potential hazards by improving conditions in targeted residential properties. First, the City's moderate rehabilitation loan programs serve to reduce lead paint hazards by funding the removal or repair of existing hazards in buildings undergoing rehabilitation. In FY 2009, the City commenced moderate-rehabilitation work on 2,909 units of occupied housing.

HPD has also sought specially targeted funding for lead hazard reduction. The City received a \$6.75 million HUD grant in 1994 to reduce lead paint hazards and incorporated it into some of its rehabilitation programs to determine the feasibility of combining lead-paint hazard reduction with moderate rehabilitation. This grant was completed in May, 1999, resulting in the lead treatment of 697 units. In September 1996, HPD and DOHMH were awarded an additional \$1.6 million in response to a new Notice of Funding Availability by HUD for Lead Paint Hazard Control in Priority Housing. With these funds, the City in June 2000 was able to treat a total of 220

units through the Primary Prevention Program, a low-level lead treatment program. HPD has also received an additional \$3 million grant in Round VIII of this program. This grant had a duration of three and a half years, ending November 2004. The total number of units completed was 397 units.

In September 2003, HPD was awarded \$500,000 under the HUD Lead Outreach grant program. In addition, HPD received the HUD Lead Hazard Reduction Demonstration Grant in September 2003 in the amount of \$2.6 million. This grant ended in March, 2007, and resulted in the treatment and completion of 306 units or 6 units above goal. City Capital Match funding supported 100 units of this grant initiative. During the two-year Lead Outreach grant, HPD enrolled and completed 175 units by September 2005, supported by City Capital match funding. In July 2004, HPD also received HUD's 2004 Lead Hazard Reduction Demonstration Grant in the amount of \$4 million and a 2004 Lead Outreach Grant for \$500,000. The 2004 Demonstration Grant completed 439 units by March, 2009. The Lead Outreach 2004 Grant enrolled and completed 150 units. In September 2005, HPD received a 2005 Lead Outreach Grant for \$500,000; a 2005 Demonstration Grant for \$4 million; and a Lead-Based Paint Hazard Control Grant for an additional \$3 million: under the three grants, HPD planned to enroll and treat a total of 620 units. The 2005 Outreach grant enrolled and completed 120 units by October 30, 2007. The Demonstration 2005 grant ended on June 30, 2009 and the Lead Hazard Control 2005 grant ended on September 30, 2009. Both grants completed 615 units, or 89 units above goal.

In September 2007, HPD was awarded two additional grants, the Demonstration Grant for \$4 million and the Lead Hazard Control Grant for \$3 million. Under the two grants, HPD planned to enroll and treat a total of 612 units. Both grants completed and cleared 900 units, or 288 units above the original goal, by July 2011. City Capital and Community Development Block Grant (CDBG) Match funding supported 412 of the 900 units completed and cleared under both grant initiatives.

In January 2011, HPD was awarded the 2010 Demonstration Grant for \$4.5 million. Supported by a City Capital Match commitment of \$900,000, the goal for this grant is the completion and clearance of 300 units by August 30, 2014. City Capital Match funding will support 86 of the planned 300 units under this grant initiative. (For a description of both the Lead Outreach and Lead Hazard Reduction Demonstration Grant Programs, please refer to Volume 3, Part III, Action Plan, Section C.2., Description of Programmatic Activities, respectively.)

Primary Prevention Program

The Primary Prevention Program (PPP) is a low-level interim treatment scope of work funded by HUD's Federal Lead-Based Paint Hazard Control Grant. The program began in the Fall of 1996, with funding provided by HUD under Rounds II and IV and VIII of its Lead Hazard Control initiative, the Lead Outreach grants of 2003, 2004 and 2005, the Lead Hazard Reduction Demonstration grants of 2003, 2004, 2005, 2007 and 2010, as well as the Lead Hazard Control grants of 2005 and 2007. In conjunction with the DOHMH, HPD's PPP targets areas with high incidence rates of childhood lead poisoning. The goal of this program is the primary prevention of lead poisoning in high-risk areas. The existing target areas now include: Flatbush, Borough Park, Bushwick, East New York, Bushwick-Bedford Stuyvesant, Kensington-Windsor Terrace and Greenpoint in Brooklyn; Wakefield, Morrisania, Highbridge and Tremont areas in the Bronx; and Corona, Ridgewood-Glendale in Queens.

Under the program's selection criteria, a building can qualify for PPP funding only if there is a pregnant woman or a child under six years of age in residence. Each building must be built prior to 1960, must contain a substantial number of dwelling units with children under six years of age in residence. In addition, households earning less than or equal to 50 percent of the area median income must occupy 50 percent of the dwelling units in the building. The remaining units must be occupied by households earning less than or equal to 80 percent of area median income. The scope of work for the PPP interim control treatment measures includes: wet scraping; spot patching; and restoration of all painted surfaces to an intact condition. All friction and impact surfaces, including windows, doors and cabinets, are also treated to reduce the creation of lead dust. Some components will be abated by way of removal and replacement with new components, depending on their existing condition.

PPP plans to treat approximately 45 units in Fiscal Year 2012. The average cost for each unit is between \$10,000 and \$10,500. Under the Demonstration 2003, 2004, 2005, 2007 and 2010 Grants, the Lead Hazard Control 2005 and 2007 Grants, and the Lead Outreach 2003, 2004 and 2005 Grants, HPD has completed 2,554 of its committed 2,889 units. Of the completed units, 1,351 apartments were supported by City Capital funds as part of HPD's match contributions under the current HUD grants. The owner is obligated for five years from the completion of the intervention work to continue to rent to low-income families, and to give preference to families with children under six years of age at turnover of the rented apartments during that same five-year period.

Five-Year Plan

The City has also been working with the New York State legislature to obtain the passage of a bill to license lead-paint inspectors and contractors. To date no such bill has passed.

Other elements of the City's plan include:

- Discussions locally and at the state level concerning licensing of lead-paint contractors, in part to provide liability protection in New York State for lead abatement companies. Other states have this protection; without it, companies in New York State are reluctant to conduct this work.
- Increasing public awareness of dangers of lead paint through community campaigns in schools and media.
- Petitioning the State and Federal governments to increase funding for lead-paint testing and hazard reduction.
- Devising and implementing cost-efficient methods for lead-based paint hazard reduction.
- Continued training and certification of HPD's lead staff to ensure an informed and professional response to lead hazard reduction at all levels of complexity and scope.
- Training contractors, workers and developers in safe work practices.
- Continued development of HPD's computer system to automate the process of conducting inspections, compiling test results, and performing remediation.
- Continued maintenance of an HPD requirement contract for medical exams and blood tests to monitor the lead levels of all staff that may be exposed to lead paint or dust.

Marketing and Inventory Conditions

ESTIMATE OF OCCUPIED UNITS WITH LEAD-BASED PAINT

Year Built	Total Units	Estimate of Percent of Units with LBP	Estimated Units with LBP	LBP Occupied Families Than or Equal to 50% of Median	Units By Less Than or Equal to 80% of Median
1960 +	779,347	0%			
1947 - 1959	458,592	69%	316,428	119,294	170,555
Before 1947	1,800,057	90%	1,620,051	562,158	840,807
TOTAL	3,037,996		1,936,479	681,452	1,011,362

New York City prohibited the use of lead-based paint in residential dwellings in 1960. Therefore, our estimate assumes that housing units built after 1960 do not contain lead-based paint.

New York City has approximately 2.9 million units of occupied housing, the vast majority of which were built before 1960. Since our survey breaks down age of building by pre- and post-1947, we have used 1947 for estimating purposes rather than 1946.

New York City's Housing and Vacancy Survey for 2005 shows that approximately 35% of units built prior to 1947 and 38% of units built between 1947 and 1959 are occupied by households earning less than 50% of area median income. For the same periods, approximately 17% and 16%, respectively, of units are occupied by households earning between 50% and 80% of the median. We used these percentages against the estimated units with lead-based paint to estimate the number of very low-income and low-income households residing in units with lead-based paint. (Calculations based on unrounded numbers.)

New York City Housing Authority

NYCHA complies with Federal, State, and City regulations concerning lead and executes HUD directives regarding lead-based paint (LBP). NYCHA identifies hazards posed by paint, dust and soil, and implements programs designed to control or mitigate such hazards safely and efficiently.

In an effort to prevent lead exposures to the housing population and workforce, NYCHA educates residents and staff on how to live safely with LBP and LBP hazards (e.g., Lead Disclosure Program, lead specific procedures and directives), and implements a strategic framework for lead hazard control. The framework is a combination of evaluating and controlling LBP hazards, (i.e., any condition that causes exposure to lead from dust-lead hazards, soil-lead hazards, or LBP that is deteriorated or present in chewable surfaces, friction surfaces, or impact surfaces). NYCHA evaluates LBP hazards through a combination of inspections and Risk Assessment Reevaluations (Reevaluation). An inspection is a surface-by-surface investigation to determine the presence of LBP; a Reevaluation is an on-site investigation combining visual assessment with collection of environmental samples to determine if a previously implemented lead-based paint hazard control measure is still effective and if the dwelling remains lead-safe. Reevaluations are required at developments where LBP hazards were identified during an initial Risk Assessment. A Risk Assessment is an on-site investigation that determines the existence, nature, severity, and location of LBP hazards. At this time NYCHA has performed Risk Assessments at all required developments.

After LBP hazards have been identified by a Reevaluation or by inspection, NYCHA reduces the hazards through either abatements or interim controls. Abatement is the elimination of LBP hazards using strategies such as paint removal, enclosure or component replacement. Interim controls temporarily reduce exposures to lead by correcting LBP hazards and stabilizing LBP through activities such as repainting, specialized cleaning and implementing procedures to reduce lead hazards that may be caused by operation and maintenance activities.

Program Highlights

NYCHA manages various lead hazard reduction programs and projects. The following are brief descriptions of major programs and projects:

Department of Health Violations DOHMH & Litigation Support Program

Children with blood lead levels equal to or greater than 15 micrograms per deciliter ($\mu\text{g}/\text{dl}$) are considered lead-poisoned. If a lead-poisoned child or Elevated Blood Level (EBL) is identified, the New York City DOHMH will inspect the child's residence for the presence of Lead Based Paint (LBP). The intent of the inspection is to identify if there are any sources of lead within the apartment that may contribute to the child's EBL. If the DOHMH identifies LBP on friction, impact, mouthable or defective surfaces, a Health Code violation for LBP is issued to the landlord. The violation mandates the landlord to make specific corrective actions. The landlord can either implement the corrective actions or contest the violation by testing the cited surfaces. After either correcting the cited conditions or successfully contesting the violation, the DOHMH will dismiss the violation. NYCHA contests each DOHMH LBP violation, and if LBP is present, performs the corrective action specified by the Health Code.

Risk Assessment Program

Developments constructed before 1980 are assessed for Lead Based Paint (LBP) hazards. Consultant firms under contract with NYCHA provide the Reevaluation services and subsequent report, which explains the results of the investigation and options for reducing LBP hazards.

Local Law 1 of 2004

On August 2, 2004, Local Law 1 went into effect, calling for the comprehensive prevention of childhood lead poisoning through the remediation of lead-based paint hazards in housing and day care facilities (child occupied facilities). Local Law 1 applies to apartments and common areas of all buildings built before 1960, or between 1960 and 1978 if Lead Based Paint (LBP) is present, and where a child under 6 years of age lives. The initial law was for children under the age of seven, but as of October 1, 2006, the law was changed to include children under the age of six. NYCHA has identified 89 developments totaling 84,439 apartments constructed prior to 1960 or between 1960 and 1978 where LBP is present or presumed to be present. NYCHA has submitted a request for exemption of 113 properties built prior to 1960 or between 1960 and 1978 that were identified as not containing LBP in apartments. As of June 30, 2011, 67 developments have been exempted.

The Law requires NYCHA to:

- Inquire at initial leasing and at renewal if a child under 6 years old resides in the apartment.
- Notify residents of their rights under the law (Provide DOH Pamphlet at lease signing).
- Send an annual notice to tenants inquiring as to whether there is a child under 6 years old in the apartment.
- Conduct investigations annually, to determine whether there are lead hazards.
- Remediate all lead hazards in common areas and apartments with children under 6 using trained workers; a third party must collect clearance wipes for projects that disturb more than two square feet.
- Make apartments lead safe when they become vacant (abate doors and door frames).

In response to the new regulation, NYCHA has tested over 19,600 apartments and abated approximately 9,300 that tested positive for Lead-Based Paint. The balance was submitted immediately to HPD for exemption.

LBP Inspection & Abatement Program

NYCHA conducts LBP testing in dwelling units and public spaces in all pre-1978 developments, where children under the age of 6 live or are expected to live. NYCHA will test entire developments, (i.e., for multifamily housing, only a random sample of dwelling units needs to be inspected to determine if LBP is present.), individual dwelling units, public spaces, and common areas for LBP. The testing is performed in response to HUD mandates, DOHMH Violation, Court Order or requests from any of the following internal departments:

- Capital Projects Department
- Development Manager or Resident with a child under the age of 7 (including privately managed developments)
- Community Operations Department
- Facility Planning Department

LBP Disclosure Program:

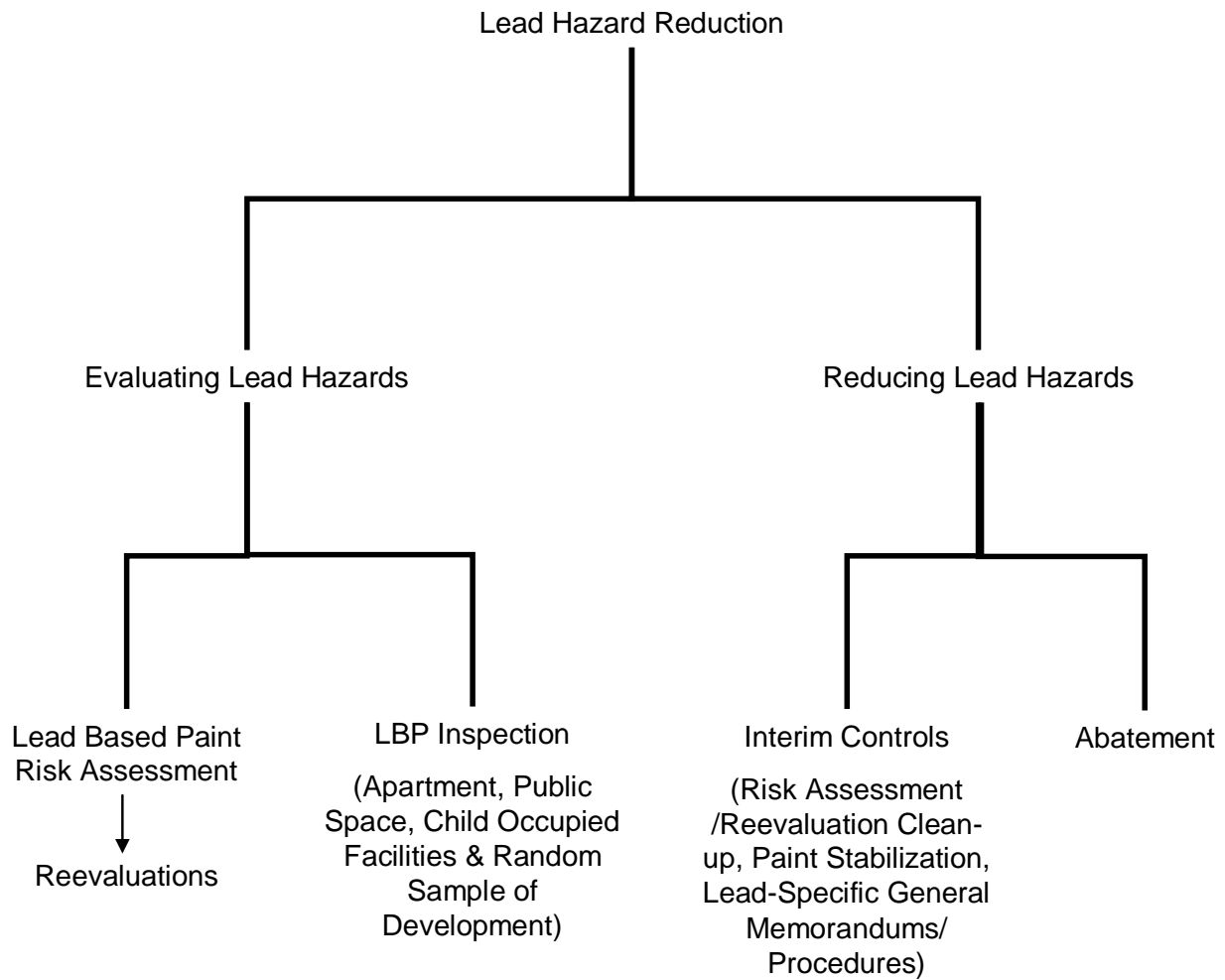
The Residential Lead-Based Paint Hazard Reduction Act of 1992 requires NYCHA to disclose to its tenants any information relevant to LBP and LBP hazards that may exist in housing built before 1978. The program is complex and requires coordination with all NYCHA Departments and Management.

Summary of Activities

Description	January 2011 (through June 30, 2011)
New DOH Violations Received*	18
Number Of Violations Dismissed	1
Number Of Violations Rescinded	17
Total Number Of Apartments Abated (LBP)	550
Number Of Child Occupied/ Multi-Use Facilities Inspected For LBP (XRF)	0
Total Number Of Apartments Tested For LBP (XRF)	1,074
Total Number Of Public Spaces Tested For LBP (XRF)	1
Number Of Apartments Tested For Elevated Lead Dust Levels (Dust Wipes)	2,050
Number Of Public Spaces Tested For Elevated Lead Dust Levels (Dust Wipes)	3,607
Distribute LBP Disclosure Information to developments Constructed Prior To 1980 (Development Wide Disclosure, Reevaluation)	31
Distribution of Single Family LBP Disclosure Packages In developments Constructed Prior To 1978	986
Development Wide Testing Of Developments Constructed Prior To 1978 For LBP (i.e., Reevaluation)	81
Local Law 1 – Move Out Apartments Tested	1,006
Local Law 1 – Move Out Apartment Lead Abatements Completed	532

New York City Housing Authority

Strategic Framework for Lead Hazard Reduction



Department of Homeless Services

The Department of Homeless Services oversees and manages several initiatives to investigate, treat and eliminate lead-based paint hazards in homeless shelters that are operated by the agency, or are operated under contract with the agency. All construction, renovation and repair work at DHS facilities must be preceded by certain lead-based paint related activity. Such activity may consist of inspecting, sampling, air monitoring, laboratory analysis, encapsulation or abatement. These tasks are contracted out by the agency. The contractors, available on-call, responding on an as-needed basis to emergency situations are used also for planning long term projects. In-house staff at DHS ensures that all contracted services are conducted in conformance with HUD/EPA established guidelines.

A major component of DHS' policies concerning lead-based paint is risk assessment. Adhering to the goal of the Agency's Office of Technical and Construction Services (OTCS) in providing a safe environment for its staff and clients, Lead Inspectors conduct lead paint hazard investigations on a routine basis. If lead paint presence is known or detected, remedial steps are taken to eliminate the risk of exposure. DHS will continue its efforts to create comprehensive lead-based paint profiles of each city-owned DHS operated or contracted site, with family shelters being the first priority. This effort is not necessarily limited to facilities operated by DHS, but encompasses all city-owned shelters under the jurisdiction of the agency.

Lead inspectors respond to calls for inspections from DHS shelter staff concerned about possible exposure during renovation, construction, or maintenance activities. An outside contractor is called for bulk sampling, if there are indications of chipping and peeling paint when renovation work or construction work is planned or if maintenance activities are planned that may disturb existing paint. During activities where lead paint is disturbed, an outside contracted third party air monitor and inspector are also brought on-site and an accredited laboratory analyzes dust wipes and/or air samples.

With Local Law 1 of 2004 in effect since August 2004, the Agency has dedicated special attention and concentrated efforts to identify, inspect and remedy lead paint hazards at eighteen (18) DHS family facilities built prior to 1960, where children under seven years of age reside. A follow-up inspection program has been instituted for all dwellings and common areas where lead-based paint has been identified to include re-inspections when tenants move out. It must be noted that not all eighteen (18) family facilities (1,114 units) contained lead. At lead paint containing sites, follow-up inspection results have indicated that an estimated 52% of the units require remediation.

The Office of Construction and Technical Services (OCTS) continues to compile a comprehensive 'Lead Paint Hazard Checklist' for all of their owned/operated/contracted facilities where such hazards once identified, are slated for remedial action by licensed and certified contractors. During Fiscal Year 2011, DHS has responded to lead paint related activities at eight (8) Adult and Family facilities on thirty one (31) occasions.

E. Anti-Poverty Strategy

This section describes the City's goals, policies, and procedures for reducing the number of poverty level households. Despite considerable regional economic growth and changes in federal, state and local welfare and related policies over the last two decades, according to the federal poverty measure, one out of five New Yorkers and a third of New York City's children live in poverty. Moreover, poverty in New York City is concentrated geographically, creating "pockets" of extreme poverty – where more than 40% of the population lives below the Federal Poverty Line. These pockets of extreme poverty serve as the foundation for persistent poverty – poverty that spans more than one generation.

The City of New York has engaged a multi-pronged approach to reducing poverty: 1) increase the labor force attachment and human capital development of men and women with children living in poverty in New York City by helping them obtain work and providing them with opportunities for training; 2) diversify and strengthen sectors of the City's economic base to make the labor market less reliant on the financial sector as the main driver of the local economy; and, 3) foster the development of small- and medium-sized businesses thus increasing low- and middle-wage employment opportunities for poor and near-poor persons.

In late 2006, Mayor Michael Bloomberg established the new Center for Economic Opportunity (CEO) under the leadership of Veronica M. White. CEO is guided by the recommendations made by the New York City Commission for Economic Opportunity. Programs created as a result of the recommendations are aimed at reducing poverty in three key populations throughout the City: the Working Poor, Young Adults 16-24, and Young Children & Families. In December 2007, the Center for Economic Opportunity released its first Strategy and Implementation Report (SIR). Since then the Center has released annual reports to document its achievements, as well as multiple evaluation reports on its programs. Together, these reports describe CEO's anti-poverty pilot programs, their implementation, and results. Furthermore, several of the respective New York City agencies responsible for administering CEO-initiated programs have reviewed and released their own progress reports to gauge the impact and effectiveness of their programs.

Through the past 5 years, the Center successfully continued to design, implement and refine a range of programs that addressed each of the Commission's recommendations.

Initiatives for Working Poor adults

In New York City, approximately 350,000 individuals are working yet remain in poverty, and nearly 50% of all poor households include an employed adult. CEO's workforce programs break down silos within government and incorporate agencies that do not traditionally have a workforce development role.

- Community Partners connects job-ready residents of high-poverty communities who are engaged with community-based organizations to the WorkForce1 Career Centers' (WF1CC) employment opportunities. A CEO evaluation found that Community Partners Program participants are 4.3 times as likely to be placed in a job than a comparison group served through the general public workforce system. The evaluation also documented that the program successfully engages with a more disadvantaged population than that the typical WF1CC clients. This program is now fully integrated into the on-going work of the Workforce1 Career Centers.
- Nursing Career Ladders initiative develops career prospects for low-wage health workers and other low-income individuals by preparing students through an accelerated program for sustainable careers in nursing. There are two (2) programs: Licensed Practical Nurse Program (LPN); and, the Registered Nurse Program (RN program). The LPN program expands the Department of Education's eleven-month training course. Graduates are placed in an LPN position within the Health and Hospitals Corporation (HHC) and other facilities upon completing the program and obtaining their professional license. Similar to the LPN Program, the RN program prepares individuals who are currently living at or below 130% of the Federal poverty-level for careers as Registered Nurses (RNs). For the first two years of the program, participants take pre-clinical coursework required for the Bachelor of Science in

Nursing (BSN) degree. Participants who maintain a 2.75 GPA are then eligible to transfer to the HHC/Long Island University Nursing School to complete the two-year clinical program required for the BSN degree. [do we want to add anything about the success of the program, to align with other blurbs?]

- The Sector-Focused Career Centers create a new type of job placement and training center for the City that focuses services on a single economic sector. The sector-focused Workforce1 Career Centers meet the needs specific to businesses within the targeted sector as well as provide low-income workers with access to good jobs with career advancement opportunities. Currently there are three sector-focused career centers- Manufacturing, Transportation, and Health Care. An independent data evaluation of the Transportation Center found that compared to a similar population served by the general public workforce system, participants in the Sector Center are three times more likely to be placed in a job or receive a promotion; earn about \$1.90 more per hour; and work, on average, four more hours per week.
- The Office of Financial Empowerment (OFE) within the Department of Consumer Affairs (DCA) was designed to educate, empower, and protect city residents with low incomes and help them make the best use of their financial resources. OFE helps New Yorkers manage their finances, link them to financial education classes and counselors, and provides them with information on how to get out of debt, open a bank account, and spot a scam through the Financial Education Network and Financial Empowerment Centers. In addition, OFE helps New Yorkers get and save financial resources through programs like the Earned Income Tax Credit through the City's Tax Credit Campaign.
- Several initiatives target the specific employment needs of incarcerated or formerly incarcerated persons with the goal of promoting their economic self-sufficiency.
 - The Employment Works initiative provides workforce development services to probationers to assist them in obtaining and retaining jobs, building skills and receiving educational training. The initiative coordinates programming among the public workforce system, the City's Department of Probation, and workforce development providers to provide the necessary education, training and support services. A new procurement for this initiative was recently completed and the 2 selected providers will be announced in Fall 2011.
 - The Food Handlers Certification Program offers Food Protection certification courses to individuals currently detained or sentenced to the Rikers Island correctional facility. This initiative, in partnership with the Department of Health and Mental Hygiene, trains and certifies inmates as food handlers, providing them with a tangible employment asset for re-entry.

Initiatives for Young Adults, Age 16 to 24

With nearly a quarter-million young adults between the ages of 16 and 24 living below the poverty line in New York City, CEO offers educational, employment, and health programs tailored to young adults. To meet the needs of this varied population, CEO programs range from basic literacy to higher education; innovative evidence-based approaches to pregnancy prevention such as community service opportunities for students; and employment programs for disconnected and court-involved youth. Some of CEO's young adult programs are described here:

- The Teen ACTION (Achieving Change Together in Our Neighborhood) Program is an after-school service learning initiative offered to youth aged 13-21. Through the program, the youth design and implement meaningful service projects in their communities. The service experience is combined with reflection activities and a learning experience that includes a comprehensive curriculum that emphasizes the development of leadership skills and healthy behaviors. Each program is linked to a local health care provider that provides participants with information on resources available to them and strategies for avoiding risky behavior. Evaluation results suggest that the program is having a positive effect on education. Teen ACTION participants are more likely to attempt more credits and earn more credits relative to a comparison group of students who are not enrolled in the program. A new procurement for contracts was completed in early 2011.
- The Young Adult Literacy Program (YALP) began in 2008 with the aim of improving the reading, math and job readiness levels of disconnected youth 16-24 years old who are reading at the pre-GED level (4th to 8th grade levels). The initiative includes five community-based programs contracted through

DYCD as well as programs at *six* sites within the City's three public library systems. The program has exceeded its targets for literacy gains in each year of operations. In its first year, 258 young adults achieved a one or more grade level increase in their reading levels, 292 attained gains in the second year, and 302 attained gains in the third year. In the summer of 2009, a CEO evaluation studied the impact of adding paid internship and community service experiences as an incentive to participants for program attendance. Evaluation results of this pilot demonstrated that the addition of paid internships resulted in increased program attendance and retention as well as improved math scores by a full grade level compared to students in the program that did not have internships. As a result, paid internships were added to all program sites for the past fiscal year (FY11) and continuing forward as a standard program element. During the past year 303 participants completed internships.

- The Young Adult Internship Program (YAIP) is a workforce development program targeting young adults aged 16-24 who are not working and not in school. Established in 2007, YAIP is now in its fourth year and features a combination of educational workshops, counseling, and short-term paid internships. The program operates three 14-week cycles each year and serves approximately 1,360 disconnected youth annually in high poverty communities. This innovative model is obtaining positive results and achieving national recognition. A new RFP, released in November 2010, funded 11 programs that began providing services July 1, 2011.

In 2010, using American Recovery and Reinvestment Act (ARRA) funds, YAIP worked with non-custodial fathers aged 25 years and older who have been involved in the criminal justice system. The goal was to help low-income, non-custodial fathers obtain and sustain employment and engage financially and emotionally with their children. The program operated two 14-week cycles and served 344 fathers. YAIP partnered with DYCD's Fatherhood Initiative and the Human Resources Initiative to implement this one-year program which has since ended.

- City University of New York (CUNY) Prep offers out-of-school youth between the ages of 16 and 18 with an opportunity for full-time study in order to qualify for admission to college by obtaining a General Equivalency Diploma (GED). Instruction emphasizes college preparation in humanities, math and science. In addition to the three subject-area classes, students also take a literacy enhancement course to build the skills they will need for college and work. The program also teaches college survival skills and provides social supports such as counseling, career advising, and referrals to health care centers and part-time job opportunities.
- CUNY Accelerated Study in Associate Programs (ASAP) provides academic and economic support to help low-income students complete Associate degrees in an accelerated manner, thereby potentially positioning themselves for higher income employment opportunities than those available to young adults with only a high school diploma (traditional and/or GED). Supports include advisement and tutoring, tuition waivers, free text-books and Metrocards for travel to and from campus. In addition, the program offers block-scheduling to accommodate student work schedules, and job developers to help students with job placement and career development; the program has impressive three year graduation rates (54%) relative to a comparison group (24%).
- The Youth Financial Empowerment (YFE) program teaches essential financial literacy skills to youth aging out of the foster care system. The program also provides matching funds to contributions made by youth into Individual Development Accounts (IDAs). Program participants in the program receive matching funds of up to \$2,000 by saving \$1,000 in the IDA. These savings can be applied to secure and maintain stable housing, to pursue educational opportunities, and to obtain vocational training.

Several of the above initiatives are being expanded with additional funding through the Young Men's Initiative, announced by Mayor Bloomberg in August 2011 to reduce disparities between young black and Hispanic men and their peers. Over the course of 2012, many new programs will be launched through this initiative to promote mentoring, education and employment strategies. CEO will assist in the implementation of the newest innovations, bringing the same evaluation rigor and accountability to this set of investments as with the design and testing of the other anti-poverty initiatives described above. This cross-agency effort will include the expansion of several CEO programs, including young adult internship and literacy programs, and Jobs-Plus, a

workforce development program for residents of public housing. Providers will be selected through Requests for Proposals to be posted on City Agency websites in the coming months.

Young Children & Families

The CEO poverty measure estimates that New York City is home to 223,118 young children in poverty, similar to the 213,574 children counted under the Federal measure. Although poverty alone does not place children's development at risk, children living in poverty are more susceptible to risk factors that can jeopardize their well being and life outcomes. The CEO initiatives for young children and families focus on providing a good start to life and education.

- Child Care Tax Credit (CCTC), initiated in 2007, combines with Federal and State refundable Child and Dependent Care credits to provide low-income households a City tax credit of up to \$1,700 to work while providing young children with quality child care. In CFY2011, over 40,000 low-income households received credits totaling over \$22.9 million.
- The Nurse-Family Partnership (NFP) initiative expands the capacity of the existing NFP program, a national home visitation model that seeks to improve the health, well-being, and self-sufficiency of low-income, first-time parents and their children through regular home visits. Nurses follow guidelines established by the NFP National Service Office, focusing on the mother's personal health, quality of care-giving, and life-course development, as well as the child's growth and development.

Social Innovation Fund:

In 2010, the Federal government launched a new initiative that reflected a mission that CEO actively advocated for at the national level- supporting and scaling up performance driven effective local programming that has proven the ability to address the needs of low-income families. Created through the Edward M. Kennedy Serve America Act of 2009, and launched by the Corporation for National and Community Service, CEO became one of the inaugural recipients of Social Innovation Fund (SIF) funding.

The Social Innovation Fund grant provides a unique opportunity for cities to work together to expand and test innovative antipoverty programs piloted by the NYC Center for Economic Opportunity. With this prestigious and significant Federal grant, CEO is replicating several of its programs in New York City and seven other cities. Through this project, the cities plan to further refine and test program models, building a multi-site body of evidence in support of promising, high-impact, cost-effective interventions that will influence national policy discussions.

CEO is partnering with the Mayor's Fund to Advance New York City (a not-for-profit organization, which facilitates innovative public-private partnerships throughout NYC) and MDRC (a social policy research organization), as well as several local funders, to implement the following programs in New York, Kansas City, MO; Memphis, TN; Newark, NJ; Cleveland, OH; San Antonio, TX; Tulsa, OK; and Youngstown, OH. The five CEO programs being replicated through the SIF are:

- Family Rewards. Built on the success of similar programs in more than 20 countries and learnings from an earlier pilot program in New York City, this conditional cash transfer program will provide cash incentives to families for achieving milestones that lead to better health, education, and employment outcomes, all of which increase human capital. Building on preliminary results from the New York City pilot, the SIF-supported program will focus on the incentives that evaluations have shown to be most promising.
- Jobs-Plus. The place-based Jobs-Plus program addresses entrenched poverty among public housing residents by saturating a development with job and career support, community building, and rent incentives. In a previously evaluated national pilot, residents' earnings continued to rise for three years after the program ended, greatly outpacing the income of a comparison group.
- SaveUSA. First piloted by the City's Office of Financial Empowerment as \$aveNYC, SaveUSA, offers a matched savings account to low-income tax filers. Although nearly half of New York City

participants in the pilot reported no history of savings, 80 percent saved for at least one year to receive the match and 75 percent continue to save today.

- **WorkAdvance.** A sector-focused career advancement initiative to help low-wage workers get good jobs with career ladder opportunities. CEO built upon existing NYC programming and national evaluations of advancement and sector strategies to create WorkAdvance, which will combine the best practices from these efforts to create a single, replicable workforce intervention. Program sites will each focus on a particular industry, with sectors such as healthcare, manufacturing, and transportation.
- **Young Adult Program.** The Young Adult Program is an education-conditioned internship program designed to improve the long-term economic opportunities of young adults age 18-24 who are out of school, out of work and who lack a high school diploma or GED. The year-long program pairs quality educational instruction with a paid internship and case management. This program combines promising strategies from the Young Adult Literacy and Young Adult Internship Program to reach particularly disconnected young adults.

As part of the SIF, CEO and the Mayor's Fund have created a learning network of program providers and other partners, which will allow CEO's SIF partners to share best practices and address common challenges. The SIF presents an opportunity to expand CEO's evaluated programs and best strategies, and to tackle poverty across diverse demographics and geographic settings.

Poverty Research:

In August 2008, CEO published its first working paper on poverty in New York City. The paper applied recommendations made by the National Academy of Sciences for an alternative measure of poverty to New York City. This report made New York the first local government in the nation to reformulate the official, and antiquated, federal poverty measure.

The CEO poverty measure addresses two shortcomings of the official measure. It accounts for a wider range of resources available to families to meet their needs. In addition to pre-tax cash (the only income counted by the official measure) it includes the effect of taxation, nutritional assistance, and housing subsidies. It also compares these resources against a more realistic poverty threshold, one that recognizes the high cost of living in New York City. In CEO's initial report, the alternative measure found that 23.0 percent of the City's population was poor in 2006. The corresponding poverty rate using the official method is 18.0 percent.

The CEO poverty measure has caught the attention of policy makers nationwide. In the 111th and 110th Congresses, legislation was introduced by Congressman Jim McDermott and Senator Christopher Dodd proposing that the methodology used to calculate the Federal poverty measure be revised based on the same National Academy of Sciences' recommendations that inform the CEO poverty measure. CEO work has also spurred the Obama administration to announce plans to create a similar measure, called the Supplemental Poverty Measure, which will be released in the Fall of 2011.

CEO has published two subsequent reports, each of which refines our measure and updates our poverty rates to include the most recent data available. Our latest report, issued in March 2011, focused on the impact the Bush and Obama economic stimulus programs had on the City poverty rate.

The Center has consulted with several other localities that want to develop similar poverty measures including: Chicago, IL; Los Angeles, CA; San Francisco, CA; Washington, DC; Philadelphia, PA; Oakland, CA; San Jose, CA; along with the states of New York and California.

Following the 2008 economic downturn New York City's, labor market slowly started to improve, but overall job growth from 2009 to 2011 has been relatively modest. From July 2009 to July 2011, total non-farm jobs increased 1.8% and total private sector jobs increased 3.6%. The result has been relatively high unemployment rates from a historical perspective for New York City; however, as of July 2011 the unemployment rate was 8.8%, which represents an overall decline from the peak of 10.4% in January 2010. The Education and Health Services sector remained strong during the economic downturn, adding 50,000 jobs from July 2009 to July

2011, the majority of gains (approximately 68%) coming in the Education sub-sector. Professional and Business Services added 38,000 jobs during this time.

Five-Borough Economic Opportunity Plan

As the result of the recent economic recession brought on by the collapse of the financial markets, The Five-Borough Economic Opportunity Plan, the Mayor's economic diversification program, has received increased attention. Originally presented in 2002, the Plan attempts to create employment opportunities in a variety of fields that New York City either has existing competitive advantages or identified potential advantages which have not been fully exploited. These job areas include bioscience, fashion, media/technology, manufacturing/distribution, tourism, "Green" building design and construction initiatives that promote sustainable business practices have also been identified as areas for further development.

Bioscience

- Support the NYC Bioscience Initiative to grow bioscience and life science industries at locations such as BioBAT (Brooklyn Army Terminal) in Brooklyn and the East River Science Park.

Fashion

- Expand Fashion Week at Damrosch Park (Lincoln Center) and develop strategies that grow the Fashion and Wholesale Retail Sector, which employs more than 175,000 New Yorkers. Strategies include improvements to Buyers' Week and the revitalization of the Garment Center.

Media/technology

- Partner with the private sector to develop and implement a strategy to grow the emerging new media, gaming and technology sectors. Encourage innovation and entrepreneurship through partnership with the hi-tech sector.
- Encourage further innovation and collaboration in the media industry; attract top talent to the City; recruit leading foreign media companies; and help New York City-based companies expand abroad.

Manufacturing/distribution

- Continue to support 16 Industrial Business Zones and additional industrial ombudsmen areas throughout the five boroughs to encourage industrial and manufacturing job growth and business expansion.
- Work with private sector partners to create industrial and maritime jobs by expanding the New York Container Terminal in Staten Island, and reactivating waterborne industry along the Brooklyn Waterfront in Red Hook and the South Brooklyn Marine Terminal.

Tourism

- Invest in tourism infrastructure including improved trade show space that can attract more national and international conferences.
- Use the new Visitor Information Center, online resources, and international offices to achieve goal of attracting 50 million visitors by 2012.

Green Initiatives

- Implement sustainability initiatives, like the "Greener, Greater Buildings Plan to reduce the City's energy usage and save consumers money, while simultaneously creating thousands of well-paying green jobs.
- Provide workforce training in green sub-sectors such as renewable energy and carbon finance, in order to ensure that New Yorkers are well-trained for these jobs.

In June, 2011 Mayor Bloomberg expanded his economic diversification plan when he announced 22 new initiatives to assist small industrial businesses remain and grow in New York City. The initiatives will support and strengthen the City's industrial sector that has faced serious challenges in recent decades, but currently offers opportunities for growth and development.

The new programs and initiatives fall into three categories: Increasing access to updated, affordable, and right-sized industrial spaces; creating new financing resources and increasing access to existing programs; and better aligning City resources with industrial businesses' needs.

1. Increase access to modern industrial space and strengthen Industrial Business Zones

- Allocate \$8 million in the City Council Small Manufacturing Investment Fund through a competitive bid process for the reactivation, renovation and subdivision of privately held vacant industrial loft building/space in New York City.
- Use of \$2 million from the newly formed City Council Small Manufacturing Investment Fund and create a food manufacturing step-up space by renovating and reactivating Building 3 at La Marqueta in East Harlem. NYCEDC will offer the newly renovated space to small business looking to expand their production capacity and create jobs and will complement the adjacent food incubator, launched by the Council, NYCEDC, and Hot Bread Kitchen in 2010.
- Release a Request For Proposals (RFP) offering low cost rent, or rent abatements to businesses/developers willing to renovate an approximately 20,000 square foot currently vacant City-owned industrial property at Brooklyn Army Terminal. By offsetting renovation costs with low cost space, this initiative will spur local industrial growth in Brooklyn.
- Development of the Federal Building in Sunset Park, Brooklyn for light manufacturing purposes. This project will create as many as 1,300 permanent industrial jobs and 400 new construction jobs, serving as a catalyst for more industrial redevelopment on the Brooklyn waterfront and in the rest of the City.
- Release an RFP for industrial and food-related development at the Hunts Point Halleck industrial Site. The site is among the most desirable parcels of land in Hunts Point and is expected to receive considerable interest from the development community.
- The City and State are contributing at least \$112.5 million in value toward the redevelopment of a new market facility for the Hunts Point Terminal Produce Cooperative in the Bronx. The 660,000 square foot new facility will modernize and upgrade a critical piece of the City's food infrastructure and serve as a source of good industrial jobs. The Co-op recently signed a lease extension, keeping it in the Bronx for at least an additional three years while continuing to work towards a long-term lease extension and plans for a new market.
- NYCEDC has dedicated up to \$9.6 million towards the renovation and subdivision of larger floor plate spaces at Brooklyn Army Terminal. Approximately 300,000 square feet of large vacant units in Building B at Brooklyn Army Terminal will be subdivided into smaller units, ranging from 2,500 to 10,000 square feet.
- NYCEDC will continue to prioritize industrial uses for City-owned industrial sites through its competitive RFP process.

2. Create new financing resources and increase access to existing programs

- Through its *10,000 Small Businesses Initiative*, Goldman Sachs and NYCEDC will create a \$10 million fund to provide loans to food entrepreneurs to grow their business in New York City. This significant public-private partnership represents a unique opportunity to expand the City's economy while catalyzing the entrepreneurial community. Small businesses in the food manufacturing industry looking to expand confront an exceedingly difficult financing environment. Providing capital to these underserved businesses during critical growth stages is important to ensure the overall success and expansion of this industry. NYCEDC will issue an RFP to select a Community Development Financial Institution lending partner that will provide financing to qualifying food manufacturers in the City.
- NYCEDC has formed the Industrial Development Program to provide construction and permanent financing, alongside typical lenders, for City-sponsored industrial projects. This innovative financing program will be launched with the Hunts Point Halleck Industrial Site RFP.
- The Industrial Development Authority is committing to increase its transactions over the next fiscal year, resulting in assistance to at least twenty new businesses.
- The Department of Small Business Services will establish a practice dedicated to providing industrial and manufacturing businesses with one-on-one consultations regarding incentives programs that can

lower their costs when relocating, expanding their facilities, purchasing equipment, modernizing, or growing their workforce. Qualified industrial and manufacturing businesses of all sizes will be able to learn about and receive in-depth technical assistance in applying for these programs.

- A newly formed Industrial Business Advisory Council made up of local industrial businesses, property owners and industry advocates will advise the City on issues facing the industrial sector.
- NYCEDC will provide \$300,000 in funding and release an RFP for the creation of approximately three new industrial Business Improvement Districts (BIDs) within Industrial Business Zones and Ombudsman areas. New industrial BIDs will serve as a sustainable source of funding to provide additional services desired by industrial businesses, including, but not limited to, sanitation, public safety and graffiti removal.

3. Better align City resources with industrial businesses' needs

- NYCEDC will establish a full-time "desk" at NYCEDC's Center for Economic Transformation dedicated to industrial sector policy. The head of the policy desk will serve as the City's point person on all industrial policy development and implementation, and will work in coordination with the Department of Small Business Services staff dedicated to Industrial Business Zone Service Provider administration and other Small Business Services programs, such as Manufacturing Workforce1, Business Solutions, Business Express and incentive programs.
- NYCEDC will manage a public competition to identify innovative ideas for new industrial or manufacturing start-up companies, with grants, subsidized office or industrial space, guidance and technical assistance, and free promotion and press coverage to winning companies.
- A new Industrial Business Zone will be developed in Staten Island, in line with the findings of the North and West Shore interagency studies, to protect its important maritime and industrial areas.
- NYCEDC is conducting a study to determine ways to enhance the City's value proposition in the rapid prototyping and fabrication sub-sector. The study will examine the level of demand, existing capabilities already available in NYC, and recommend how to provide and market the necessary resources to meet NYC entrepreneurs' prototyping and fabrication needs.
- The City will initiate business and agency networking events to hear directly about operational concerns and encourage networking and collaboration amongst industrial businesses

In total, the programs will revitalize, modernize, and preserve up to 9 million square feet of underutilized industrial space, and create and retain up to 30,000 direct and indirect industrial jobs, generate annual payroll earnings of more than \$900 million and more than \$150 million in City tax revenue.

Outside of these recent initiatives, the City has long provided a wide variety of services designed to assist NYC residents living poverty and help them move toward economic self-sufficiency. Central to this effort are the employment services and work supports provided to cash assistance recipients by the Human Resources Administration/Department of Social Services (HRA). Cash assistance recipients receive an individualized employment plan. Based upon that plan, employable cash assistance recipients are assisted in their search for a job. When they obtain the job, they qualify for a continuation of public benefits (such as food stamps and Medicaid) despite their employed status. Cash assistance recipients who qualify also continue to receive cash benefits through earnings disregards. For cash assistance recipients who possess barriers to employment, HRA works with them to address these barriers, and if that is not possible, assists them in applying for disability benefits. HRA also serves many individuals and families living below the poverty line who do not receive cash assistance through its Food Stamps Program, Medical Assistance Program (Medicaid) and various housing programs. As of June 2010, the cash assistance program served 355,568 NYC residents, including 168,540 adults.

HRA's employment services are designed to meet the needs of an extremely diverse caseload. Since the key to self-sufficiency for most cash assistance recipients is obtaining a job, HRA devotes many of its resources to its Back to Work (BTW) Program. BTW refers to a set of outside contractors who provide a combination of job readiness and job search assistance. Typically, these activities last two days a week, with the remainder devoted to participation in HRA's work experience program (WEP), where recipients go to a site and perform a work

activity. During FY2011, HRA successfully placed more than 78,000 cash assistance recipients in jobs. When appropriate, the cash assistance program also supports clients engaged in vocational education, often training at a postsecondary educational institution. Finally, clients who are unsuccessful in finding unsubsidized employment may be offered short-term subsidized positions with the NYC Parks Department or other public or private employers. NYC HRA also participated in the American Recovery and Reinvestment Act of 2009 subsidized employment program that expanded subsidized employment opportunities over the last two years.

For individuals who are disabled or have other significant barriers to employment, specialized services are available. Cash assistance clients in need of basic education or literacy skills can qualify for education and literacy classes. The Wellness, Comprehensive Assessment, Rehabilitation and Employment (WeCARE) program serves clients with health or mental health limitations, helping them either prepare for employment or apply for federal disability assistance, as appropriate. WeCARE begins with a biopsychosocial assessment, which was administered to nearly 50,000 cash assistance recipients in 2010. In 2010, 35,000 cash assistance recipients with substance abuse problems were referred to substance abuse treatment. In addition, HRA's HIV/AIDS Services Administration (HASA) provides case management services that helped more than 32,000 people living with HIV/AIDS in NYC access essential benefits and social services during 2010. HRA also serves adults who are no longer able to take care of themselves through its Adult Protective Services (APS) program, and provides home care to adults who are still able to function at home if supported by home care services. A total of 19,000 referrals were made to APS in 2010, and HRA had a home care caseload of 43,000 in that year.

The City's anti-poverty efforts also include programs that prevent poverty by helping those with jobs maintain stable employment and make ends meet while working for low wages, referred to as work supports. NYC's Food Stamp Program, for example, served 1,830,907 recipients in June 2010. HRA has taken a number of steps to ensure that food stamps reach not only the City's neediest families, but also working families with income below or just above the federal poverty line. Such efforts have included implementing public education campaigns and partnering with community-based organizations to facilitate enrollment. In addition to receiving food assistance, food stamp recipients have access to free employment services if they need help finding work; for some recipients, these services are mandatory.

Public health insurance is another critical work support for the many low-income working families who lack access to employer-based coverage. New York is one of the few states that extend coverage to children in both low- and moderate-income families as well as to adults with income below the poverty line; parents of dependent children are eligible up to 150 percent of poverty. As discussed in more detail below, NYC has also implemented a range of measures designed to facilitate Medicaid enrollment and recertification. In all, 2.9 million NYC residents were insured through Medicaid in June 2011. This compares to 2.8 million in June 2010, for an increase of 70,000 enrollees, or 2.5%. Of these enrollees, 2.1 million are "Medicaid only" enrollees, meaning that they are not obtaining Medicaid as a result of being on cash assistance or Supplemental Security Income (SSI).

Low-income working families can also receive a tax break on their federal, state, and local income taxes through the Earned Income Tax Credit (EITC). The EITC is widely recognized as one of the country's most effective anti-poverty programs, and NYC is one of only a few places nationwide that offers a local credit in addition to the state and federal provisions. Depending on income and family structure, NYC workers could qualify for a total of more than \$7,600 in EITC benefits in tax year 2010. Other important supports for poor and low-income families in NYC include the Home Energy Assistance Program and multiple housing assistance programs, as discussed in other sections of this report.

Finally, HRA's Office of Child Support Enforcement (OCSE) makes significant contributions to the NYC's fight against poverty. In 2010, OCSE collected a record of \$699.9 million in child support payments; each month, an average of 124,802 families received payments. Much of this money goes to children in poor and low-income families as the majority of the children OCSE serves are current or former cash assistance recipients. For families formerly on cash assistance, the average annual collection in 2009 (among those with

payments) was \$5,605. Moreover, through the Support Through Employment Program (STEP), NYC DADS, and other initiatives, OCSE works to help low-income non-custodial parents navigate the child support system, obtain employment and build relationships with their children.

Expanding access to health insurance is one of the most important ways a municipality can improve the lives of its low income residents. Public health insurance programs available to New York City residents include: Child Health Plus (Child Health Plus is a comprehensive health insurance program that covers a wide range of children's health care and dental needs. The income requirements make it possible for working families to get free or low-cost health insurance for their children); Medicaid for low income children and families; and Family Health Plus (Family Health Plus is a public health insurance program for adults between the ages of 19 and 64 who do not have health insurance - either on their own or through their employers - but have incomes too high to qualify for Medicaid.) New York State provides premium subsidies for children and adults eligible for public health insurance with access to employer-sponsored insurance, permits employers and Taft-Hartley Funds to purchase Family Health Plus for their members/employees, and simplifies enrollment and recertification in public health insurance. With the help of these HRA programs, New York City had the lowest rate of uninsured children (4.5%) out of the eight most populous cities in the U.S., according to 2009 Census Bureau data. Overall, as of June 2011, 2,912,686 people were enrolled in Medicaid, of whom 2,150,868 were enrolled in Medicaid only (meaning that they were not also enrolled in cash assistance or SSI).

Much of this success may be due to efforts by HRA to provide information on the various health insurance options available through both public and private programs through HRA's Office of Citywide Health Insurance Access (OCHIA).

To ensure that all those who are eligible for public health insurance are enrolled, OCHIA promotes and manages the collaborative work of 12 City agencies, 10 managed care plans and a wide array of community- and faith-based organizations to provide outreach and facilitate enrollment in neighborhood venues such as public schools, diverse places of worship, public housing developments and community events. Known as the HealthStat Initiative, this collaboration has facilitated enrollment in public health insurance programs for 50,000 New Yorkers in FY 2011. Through HealthStat, OCHIA makes New Yorkers aware of the expanded eligibility for children in the State's Child Health Plus program and the public health insurance options for eligible low-income and working adults.

OCHIA also has initiatives to expand health insurance offerings by the City's small businesses. In 2007, OCHIA, in partnership with the Mayor's Office, completed negotiations with New York City's insurers to make domestic partner coverage available for small businesses in New York City. Unavailable to the small group market prior to the City's efforts, domestic partner coverage is now provided by all insurers for New York City's businesses with 2-50 employees. OCHIA has also worked to promote Healthy NY, a state subsidized insurance product targeted to low-wage workers and their small business employers. OCHIA's broker education and other outreach efforts has contributed to significant enrollment increases in New York City.

In September 2009, OCHIA launched a new website, NYC Health Insurance Link (www.nyc.gov/hilink), to help small businesses and city residents find private health insurance, including lower-cost plans like Healthy NY. It allows consumers and business owners to compare plans across all insurers operating in New York City and is designed to educate consumers and respond to the many questions they have as they look for insurance. The website also features tips for making coverage more affordable, such as pairing public and private coverage and setting up Section 125 cafeteria plans to make insurance less costly for workers. Since its inception, the site has helped over 75,000 New Yorkers learn about their health insurance options. Starting in the fall of 2010, the content of NYC Health Insurance Link included information about federal health care reform to help New Yorkers understand the ways that it will impact their health insurance choices and options.

New York City recognizes affordable child care as an essential element in making employment possible for low- and moderate-income families. At the end of CFY11 there were 98,643 children enrolled in childcare subsidized

by the Administration for Children's Services/Agency for Child Development. In addition, there were 18,423 children enrolled in Head Start at the end of CFY 2011.

Reduced crime cuts costs for businesses and makes areas throughout the City attractive to business owners, workers and customers. New York City remained the safest big city in America according to the FBI's Uniform Crime Report for the first half of 2010.

Other efforts to improve business opportunities for large and small enterprises, promote workforce expansion, and advance employment and job training in the City include work performed by the Department of Small Business Services (SBS). According to SBS, 549 newly certified businesses participated in the Minority/Women Owned Business (M/WBE) program bringing the total to 3,244. The total number of certified businesses is now double the number of M/WBE businesses in CFY 2008.

Education, particularly in the curricula of science and mathematics is especially important to enable young New Yorkers to position themselves for the secondary academic or technical education necessary to acquire the job skills required for future employment opportunities within the city.

The Department of Education assesses the performance of students in grades 3 to 8 in two primary areas: Mathematics and English Language Arts (ELA).

For the 2009-2010 School Year the State of New York instituted a tougher grading system which resulted in a significant drop in overall ratings across the entire State and in New York City. However, despite the drop in overall ratings, New York City students for the 2010-2011 School Year generally earned ELA and math scores that were consistent with last year's results and, in some cases, were an improvement over last year's.

For 2011, the percent of New York City students in grades 3 through 8 considered meeting or exceeding standards in mathematics (levels 3 and 4) increased 3.3% from the percent of students meeting or exceeding standards in 2010 under the new test scoring system.

For 2011, the percent of New York City students in grades 3 through 8 considered meeting or exceeding standards in mathematics (levels 3 and 4) increased 3.3% from the percent of students meeting or exceeding standards in 2010 under the new test scoring system (57.3%). However, the percentage of students within New York State (not including New York City) achieving proficiency also increased under the new grading system to 68.9% percent. As a result, the share of New York City students in grades 3 through 8 who performed at or exceeded the State standards in Mathematics in 2011 was 11.6 percentage points lower than the students tested in grades 3 through 8 across the rest of the State. Fourth grade City students who performed at standard in the 2011 mathematics exam increased to 62.3 percent from 58.4 percent in 2010. New York City Grade 8 achievement in the state math exam increased by 6.2% from the 2010 school year—from 46.3 percent to 52.5 percent.

The share of New York City students in grades 3 to 8 who met or exceeded standards in ELA in 2011 increased slightly from 42.4 to 43.9 percent under the new standards. The percentage of students in grades 3 to 8 across the State (excluding New York City) who met or exceeded ELA standards decreased slightly to 59.5 percent in 2011. However, this was approximately 16 percentage points higher than the percentage New York City students in grades 3 to 8 who met or exceeded standards. The percentage of New York City 4th graders meeting or exceeding ELA standards increased from 45.6 percent in 2010, to 51 percent in 2011. The share of City 8th grade students who met or exceeded the new standards in ELA in 2011 dropped to 35 percent from the 2011 level of 37.5 percent.

City general education students graduated within four years of entry into high school in FY2010, an approximately two and a half percentage point increase from the FY2009 level. The City's graduation rate for 2010 was 11.7 percentage points higher than the other four major cities in New York State (Buffalo, Rochester, Syracuse, and Yonkers). This represents an improvement from 2005 when the City's rate was less than a

percentage point below the “other big 4’s” graduation rate. In addition, the five-year and six-year graduation rates for New York City high school students also increased. The five-year graduation rate increased slightly to 67.8 percent, and the six-year graduation rate increased 3.6 percentage points to 69.2 percent. This indicates more New York City students are remaining in school to complete their high school education.

F. Institutional Structure

The following is a description of the institutional entities which are involved in administering the City's housing, homeless assistance, supportive housing services and community development activities. The entities are categorized as: 1) Public Institutions; 2) Non-profits; and 3) Private Industry.

This section describes the city agencies involved in planning, implementing and evaluating the City's Housing Policy. Each agency reports to one of four Deputy Mayors: Health and Human Services (including HRA, DHS, DFTA, DOHMH, and ACS), Economic Development (including NYCHA, HPD, and DCP), Education and Community Development (including DYCD) and Legal Affairs (including CCHR, MOPD, and MOCDV). The Office of Management and Budget (OMB) and the Law Department report directly to the Mayor.

In addition, this section discusses the City's productive relationship with not-for-profit organizations and the private sector to accomplish many of the City's Housing policy goals and objectives.

Supportive housing-related agencies are discussed further in the City's Continuum of Care found in Volume 1, Part I., Section C., Continuum of Care of Supportive Housing Activities for the Homeless and Other Special Needs Populations.

1. Public Institutions

This Public Institutions section describes the organizational structure for each New York City agency which performs Consolidated Plan-related activities and its relationships with other public, non-profit and private organizations which assist in the delivery of services throughout the City.

Within the City of New York there are two agencies whose primary mission is the production, rehabilitation, operation and preservation of affordable housing: the New York City Housing Authority (NYCHA) and the Department of Housing Preservation and Development (HPD). The Department of Homeless Services (DHS) coordinates social and physical services for homeless families and individuals, and the Human Resources Administration (HRA) provides a range of public benefits and social services. These are often delivered in conjunction with government sponsored housing efforts. Through its HIV/AIDS Services Administration (HASA), HRA provides emergency and supported housing placement assistance and services for families, single adults and children with symptomatic HIV illness or AIDS. The City's Department of Health and Mental Hygiene: along with the State's Offices of Mental Health (OMH), the Office for People With Developmental Disabilities (OPWDD) (formerly the Office of Mental Retardation/Developmental Disabilities (OMRDD)), and Office of Alcoholism and Substance Abuse Services (OASAS); plans, contracts for and monitors services for these disability areas and provides planning support to OASAS in the field of substance abuse services. Several other offices address the concerns of targeted groups of citizens by providing housing information and supportive housing services assistance, such as the Department of the Aging (DFTA), the Mayor's Office for People with Disabilities (MOPD), the Commission on Human Rights (CHR) and the Mayor's Office to Combat Domestic Violence (MOCDV).

The Department of City Planning (DCP) proposes land use policies and plans to encourage affordable housing development throughout the city. The DCP also coordinates the production of this document.

The City also operates two oversight agencies. The Office of Management and Budget (OMB) ensures that all City agencies use their resources effectively and the Law Department ensures that the City meets its legal obligations vis-a-vis federal and state requirements.

Policy making representatives from the agencies were designated to participate on the Consolidated Plan Committee. To create the Plan, each agency representative drafted that part of the plan that directly relates to their agency. DCP produces those aspects of the plan that are not agency specific. Ongoing coordination for

preparing the Consolidated Plan and the responsibility of coordination among the agencies is the responsibility of the Department of City Planning. DCP schedules meetings to facilitate planning, analysis, and decision making concerning the federal Consolidated Plan regulations.

Each of the various agencies operates through an annual program budget which is part of the City's overall spending plan. Each agency's budget is revised and approved by the City's Office of Management and Budget, the Deputy Mayors and the Mayor. The overall budget is then referred to the City Council for approval. Once the budget is approved by the City Council it becomes effective.

Ongoing coordination of budget priority and needs among the agencies is carried out at the Commissioner level through regularly scheduled cabinet meetings. The meetings facilitate combined thinking and joint decision making on housing planning issues.

New York City Housing Authority

Please refer to Part II. Section C., New York City Housing Authority, for a description of the Authority's institutional structure.

Department of Housing Preservation and Development

Office of the Commissioner

Commissioner: Mathew M. Wambua

The Office of the Commissioner oversees the administration of HPD. The Commissioner, except as otherwise provided by law, plans, initiates, conducts, supervises, coordinates, reviews and evaluates City programs relating to urban renewal, publicly-aided housing, neighborhood conservation, the enforcement of all laws relating to the rehabilitation or maintenance of housing, and the management of property acquired by the City, for or devoted to housing or urban renewal purposes. The Commissioner is also the *ex-officio* chairman of the Housing Development Corporation.

- The agency's Chief of Staff, Special Counsel, and most of the Deputy Commissioners report directly to the Commissioner.
- The Supervising Inspector General also has a joint reporting relationship to the Commissioner of the Department of Housing Preservation and Development and the Commissioner of the Department of Investigation

Office of First Deputy Commissioner

First Deputy Commissioner: **Douglas Apple**

The Office of the First Deputy Commissioner brings together the functions that help to preserve the privately-owned housing stock. It also focuses on the functions that maintain and dispose of the City-owned housing stock. The First Deputy Commissioner also has oversight for several groups on which HPD's operating functions depend.

- Division of Architecture, Construction and Engineering (DACE) - DACE provides services to all the major divisions within HPD. DACE has technical responsibilities for all contract documents (i.e., work scopes, drawings, specifications, cost estimates, filing and sign off with the Department of Buildings). DACE reviews public bids, negotiates contract amounts and makes recommendations for contract awards. For projects designed by private architects, DACE reviews the contract documents to ensure conformance to HPD standards and to all zoning and building codes. DACE monitors ongoing construction work to ensure conformity to contract documents, construction techniques and codes. DACE also reviews and approves payment requisitions and change orders. The Labor Standards Unit monitors Agency projects for compliance with labor and equal opportunity provisions of HPD contracts, including Federal (Davis-Bacon Act) and City and State (Labor Law Section of 220, Section 230) prevailing wage requirements. LSU also receives, reviews and coordinates the pre-award processing of

Equal Opportunity (EO) packages for Agency contracts and issues Certificates of Compliance in accordance with applicable funding source mandates.

- Division of Tenant Resources (DTR) - assists eligible families that reside in properties that have been recently renovated with HPD loans, but where the newly restructured rent causes a financial hardship. DTR also offers Housing Choice Voucher assistance to families who previously benefited from the agency's development programs but who maintain a significant rent burden that places them in a precarious housing situation. In all these instances, Housing Choice Vouchers are a critical resource in preventing the displacement and potential homelessness of low-income households from revitalized neighborhoods. The voucher program also partners with other government agencies and divisions within DTR to assist special needs populations, including homeless clients from shelters operated by HPD, the Department of Homeless Services (DHS) and the Human Resource Administration (HRA). Pursuant to special contracts offered by HUD, DTR also issues enhanced vouchers to families affected by a housing conversion action. These actions occur when a private property owner opts out of a project-based contract by prepaying an existing federal mortgage, and converts the property to market rate housing. Enhanced vouchers permit a special payment standard which exceeds the normally applicable payment standards, so long as the family remains in the development. Accordingly, these special contracts are funded at higher levels than standard vouchers. The use of enhanced vouchers by DTR has become a critical tool in preserving affordable housing opportunities for many of the City's Mitchell Lama residents. Finally, DTR has developed and coordinated programs designed to enhance the economic self-sufficiency of tenants in City-owned and City-assisted housing. DTR's [Family Self-Sufficiency \(FSS\)](#) program assists families receiving HPD Section 8 to become economically independent by providing access to training, employment and long-term savings opportunities.

Office of Enforcement and Neighborhood Services

The Deputy Commissioner for the Office of Enforcement and Neighborhood Services reports to the First Deputy Commissioner. The Office of Enforcement and Neighborhood Services works closely with other HPD divisions and outside community partners to identify buildings with violation problems, assess and develop appropriate strategies to address those properties, and work closely with responsible owners to develop a plan to improve conditions and return buildings to firm financial footing and physical health. HPD uses enforcement tools within the Division of Code Enforcement, Housing Litigation Division, Emergency Repair Program or the Division of Special Enforcement to ensure compliance with legal and regulatory obligations.

- [Division of Neighborhood Preservation](#)- Residential property owners can visit the offices by appointment or as walk-ins to obtain information on [Public Outreach and Education](#), low-interest loans, and correcting housing code violations.
- [Housing Litigation Division](#)- Brings cases in Housing Court to enforce compliance with the housing quality standards contained in the New York State Multiple Dwelling Law and the New York City Housing Maintenance Code.
- [Division of Code Enforcement](#) - Housing Inspectors respond to complaints filed with 311 (City's Citizen Service Center) regarding lack of essential services such as heat and water and housing maintenance problems such as leaks, vermin and broken plaster.
- [Division of Maintenance](#) (Emergency Repair Program (ERP))-Performs emergency repairs in privately-owned buildings in response to immediately hazardous violations (including lead-based paint violation and violations regarding a lack of basic services such as heat) issued by Housing Code Inspectors if the landlord fails to perform the repair.
- Division of Special Enforcement: Performs specialized enforcement activities through programs such as [The Alternative Enforcement Program](#), Proactive Enforcement Bureau, and Special Enforcement Unit.

Administration

The Deputy Commissioner for Administration reports to the First Deputy Commissioner. The Office of Administration consists of three divisions providing services to the entire Agency.

- Division of Resources Management and Labor Relations- This division provides for the coordination and administration of human resources policies (including hiring and compensation); training for agency

personnel; disciplinary actions; the management and maintenance of office space; and the providing of supplies, fleet services, printing and mail services for the Agency.

- Division of Management Review and Internal Compliance- This division is the central auditing office of the agency. This division is responsible for internal agency oversight and for conducting management reviews of agency operational and administrative program activities. Oversight responsibilities include reviewing recently issued Federal, State and City regulations to ensure compliance and to ensure audit recommendations are followed, where appropriate.
- Division of Equal Opportunity (EEO)- This division investigates and resolves discrimination complaints filed by employees and job applicants involving unfair treatment because of race, color, religion, sex, disability, age, national origin, sexual orientation, alienage or citizenship status, prior record of arrest or conviction, marital status, or sexual harassment.

Technology and Strategic Development (TSD)

The Assistant Commissioner for Technology and Strategic Development (TSD) reports to the First Deputy Commissioner.

- Technology and Strategic Development (TSD)- TSD is responsible for managing HPD's Technology Infrastructure and supporting HPD's approximately 1600 clients and 2000 network devices at 18 sites throughout the five boroughs. TSD works to assure that HPD's mission critical business functions are supported by the appropriate level of technology, and provides professional services and business solutions.

Chief of Staff

Chief of Staff and Deputy Commissioner for Communications & Federal Affairs: **Alexandra M. Sewell**

The Chief of Staff plays a major role in implementing Mayor Bloomberg's New Housing Marketplace Plan and furthering HPD's housing preservation work. The Chief of Staff leads the coordination of our inter-agency relationships.

Communications, Resource Development, Housing Policy Research and Strategic Planning report to the Chief of Staff within the Commissioner's Office.

- Division of Communications - The Division of Communications handles all communications between the agency and the media. Communications is responsible for public information and develops and maintains the agency's Web pages, which have received over 17 million visits since their launch in 1998 (www.nyc.gov/hpd), and intranet site. Its call center supports the Mayor's Customer Service Center at 311, and it ensures that 311's knowledge base is comprehensive. It issues publications such as the Guide to HPD's Programs and Services, [Useful Information for Tenants and Owners about Housing Rules and Regulations](#), as well as most internal communications. The Division does speechwriting for senior staff. Additionally, the Division of Communications plans 60 events per year celebrating agency accomplishments such as groundbreakings, ribbon cuttings, milestones, and policy speeches. The Division maintains the agency's photo archive and is home to an award-winning photographer who has exhibited in the Museum of the City of New York and the Municipal Arts Society. Communications is home to the [HPD Alumni Association](#). HPD has won awards for both external and internal communications. Contact the Division of Communications at 212-863-6300.
- Resource Development-The Director of Resource Development identifies and obtains new resources for HPD's housing and community development programs. The director is responsible for developing new and improved linkages to the considerable philanthropic and academic communities interest in housing activities in New York City. The Director also supervises the [HPD Housing and Community Development Fellowship Program](#). Contact the Director of Resource Development at 212-863-8002.
- The Strategic Planning Group: The Division of Strategic Planning facilitates the agency-wide strategic planning process with the Commissioner and his senior management team, including the identification of strategic priorities and change initiatives, the creation, management and execution of work plans for targeted change projects, and the monitoring of key performance measures against established targets. The Division consists of three teams: an internal consulting group that assesses existing operations and

policies to identify opportunities for enhancement, a research group that designs and executes broader studies of current housing policy issues as well as targeted outcome evaluations of HPD programs, and a reporting and performance measurement group that manages and tracks agency strategic priorities and performance measures. The Division strives to increase accountability, encourage analytic and strategic thinking, and promote the use of data collection systems and performance management processes, to enable HPD to be best equipped to meet the City's housing challenges.

- Division of Housing Policy Research- The Division of Housing Policy Research is responsible for providing data and analysis that may be required by the agency related to the City's housing stock and the City's role in the implementation of the State and City Rent Control and Rent Stabilization Laws. This function primarily involves working with the U.S. Census Bureau to produce a special report on the City's housing stock - the [Housing Vacancy Survey](#) Report. This report, which is produced every three years, is required to determine the City's rental vacancy rate which must be reported to the City Council and the Mayor. In turn this data becomes the determining factor in establishing whether a "housing emergency" exists, which would require the extension of the Rent Control and Rent Stabilization Laws by the City Council.

Office of Development

Deputy Commissioner: **RuthAnne Visnauskas**

The Office of Development leads the implementation of the City's Ten Year Housing Plan to create or preserve 165,000 units by 2013 in close collaboration with other parts of HPD, other city and state agencies, and the New York City Housing Development Corporation. The Office includes the divisions of New Construction, (including Planning, Housing Production, and New Construction Finance), Special Needs Housing, Preservation Finance, and Housing Incentives.

The Office of Development is responsible for building a pipeline for affordable housing development by identifying privately-owned sites and assemblages for housing development, collaborating with other land holding agencies, and financing a variety of new construction and rehabilitation programs. The Office of Development is comprised of the following Divisions:

- New Construction - This Division is composed of three areas: Planning, New Construction Finance, and Housing Production.
- Planning - The Division of Planning is responsible for identifying sites for affordable housing development as well as creating and coordinating the pipeline of public sites. Planning is responsible for interagency partnerships and represents the agency during neighborhood rezoning efforts. The Division also includes environmental review, remediation oversight and the Marketing Unit.
- New Construction Finance - This Division is responsible for operating programs which provide financing to newly construct multi-family housing, such as the Mixed Income Rental Program, New Construction Participation Loan Program, New York City Housing Trust Fund and the New York City Acquisition Fund. The unit often coordinates project financing with the New York City Housing Development Corporation.
- Housing Production - This division is responsible for managing the production of housing on public and partner-agency sites, including the Cornerstone Program. It also manages homeownership programs that create or renovate one- to four-family homes for purchase by owner-occupants, such as the New Foundations program, and operates a down payment assistance program.
- Division of Preservation Finance - This Division operates programs which provide financing to rehabilitate and preserve multi-family housing such as the Article 8A Loan Program, the Preservation Participation Loan Program, and the Third Party Transfer program. The division also includes the Primary Prevention Program which offers grants to owners for lead abatement.
- Division of Housing Incentives -This Division is responsible for operating the Agency's local property tax incentive programs and the Inclusionary Housing program. It also allocates the city's portion of federal Low Income Housing Tax Credits and is responsible for related compliance and preservation initiatives.

- Division of Special Needs Housing - Special Needs Housing is responsible for the Supportive Housing Loan Program, a key vehicle to providing quality permanent housing with on-site services for homeless adults with special needs. The Division is also responsible for implementation of the NY-NY III agreement, along with the department's involvement in housing for the low-income elderly and other populations with special needs.

Office of Intergovernmental Affairs

Deputy Commissioner: **Joseph Rosenberg**

Through analysis, research, and the proposal of new housing legislative changes, the Office of Intergovernmental Affairs provides the resources from which the agency's program initiatives are developed. The Office of Intergovernmental Affairs is made up of the following divisions and unit:

- Division of Intergovernmental Affairs-The Division of Intergovernmental Relations is responsible for formulating and securing necessary legislative changes in both the New York City Council and the New York State Legislature in order to complete critical components of the agency's mission. It acts as the agency's direct liaison to elected representatives and other governmental officials. The division directs the agency's land use process through the City Council and represents the agency at State and City Council hearings.
- Division of Policy and Program Analysis-The Division of Policy and Program Analysis is the agency's liaison with the U.S. Department of Housing and Urban Development (HUD) and evaluates the agency's programs and policies to insure compliance with Federal statutes and regulations. In addition, the division coordinates a variety of the agency's central data collection and distribution functions and serves as a resource to the Commissioner and to the housing community of New York by analyzing new housing initiatives around the country and researching specific housing concerns.
- Community Services Unit - The Community Services Unit is responsible for the negotiation and resolution of community conflicts, representation of the Commissioner at community meetings and liaison with the Mayor's Community Assistance Unit and other City agencies. The unit serves as a primary communications and administrative link between HPD and all the neighborhoods and communities of the City.

Office of Budget, Fiscal and Performance Analysis

Deputy Commissioner: **Molly Park**

The Deputy Commissioner for Budget, Fiscal Affairs, and Engineering Audit reports to the First Deputy Commissioner.

The Division of Budget, Fiscal Affairs, and Engineering Audit provides a central place in the agency for support and consultation on financial issues. The Budget Division, as the agency's primary liaison with the Mayor's Office of Management and Budget (OMB), develops and negotiates with OMB the agency's Expense, Revenue and Capital budgets. The Fiscal Operations Division administers the agency's Accounts Payable and Accounts Receivable functions. The Engineering Audit Division (EAD) performs a City Charter mandated independent audit function on construction related payments.

Department of Homeless Services

Established in 1993, the Department of Homeless Services (DHS) is responsible for preventing homelessness wherever possible and providing short term emergency shelter and re-housing support to homeless families and individuals in the City of New York. This includes overseeing the operation and maintenance of the City's shelters; designing, implementing and evaluating programs that assist families and individuals who are homeless or at risk of homelessness; developing programs to improve the access to existing housing for homeless families and individuals; and fostering the involvement of non-profit and for-profit community organizations in the provision of shelter and services for homeless families and individuals.

The Division of Adult Services and the Division of Family Services are the two key departments responsible for operating the emergency shelter system and providing support services to homeless families and individuals.

Respectively, they provide shelter to New York City's homeless families and single adults, by overseeing a system of City and non-profit operated emergency housing facilities.

- The Deputy Commissioner for Adult Services oversees the services provided to single, homeless adults, including Intake and Assessment, Street Outreach and Drop-ins, directly-run shelters, contracted providers and SROs.
- The Deputy Commissioner of Family Services oversees the services provided to homeless families both by directly-run shelters as well as by contract providers which include Intake and Reception, and Transitional Housing.
- The Deputy Commissioner for Prevention, Policy and Planning oversees all prevention and aftercare efforts, including both directly provided and contracted services, and administration of program development, grants, research and evaluation.
- The Deputy Commissioner for Facilities, Maintenance and Development oversees the maintenance and repair of existing facilities, as well as the planning and development of new facilities and technical and construction services.
- The Deputy Commissioner for Security Services and Emergency Operations oversees the DHS Peace Officers, all Security issues, contracts, and Emergency operations for DHS.
- The Deputy Commissioner for Fiscal and Procurement Operations oversees the Offices of Finance, Budget, Audit and the Agency Chief Contracting Officer (ACCO).
- The Deputy Commissioner for Administration oversees the Office of Human Resources and Administration.
- The Agency General Counsel (Deputy Commissioner) oversees the entire DHS Legal Division.
- The Associate Commissioner for the DHS Office of Information and Technology oversees the maintenance and operations of the IT services.
- The Deputy Commissioner of Communications and External Affairs is the agency liaison with all aspects of the media as well as the coordinator of agency public events and official announcements. This Deputy Commissioner is also responsible for presenting the DHS message to the public as well as keeping all DHS staff informed regarding all agency news and also oversees the unit responsible for relationships between DHS and the City Council; all public officials and legislators; all Community Boards and related groups throughout the City.

Human Resources Administration

The New York City Human Resources Administration / Department of Social Services (HRA/DSS) provides temporary help to individuals and families with social service and economic needs to assist them in reaching self-sufficiency. HRA serves more than three million New Yorkers through essential programs and services that include: temporary cash assistance, public health insurance including Medicaid, food stamps, eviction prevention, energy assistance, long term and home care for seniors and the disabled, adult protective services, domestic violence services, HIV/AIDS support services and child support enforcement. Federal, state, and local law and regulations control eligibility and most of the participation requirements.

HRA contains the following major service components: the Family Independence Administration (FIA); Medical Insurance and Community Services Administration (MICSA); the Office of Domestic Violence and

Emergency Intervention Services (ODVEIS); the Office of Child Support Enforcement (OCSE); Customized Assistance Services (CAS) and the Office of Citywide Health Insurance Access (OCHIA).

Major administrative divisions include Legal Affairs, Operations and Administration, Audit Services and Organizational Analysis, and Staff Resources.

The Family Independence Administration through its Job Centers provides temporary financial assistance, Food Stamps and Medicaid to income eligible individuals. FIA also coordinates the agency's welfare reform efforts by referring eligible individuals to work activities and by tracking participation in those work activities. To allow for participation by individuals with children, FIA refers individuals to child care programs and pays for child care services for individuals with children under 13, and children 13 to 18 with special needs, who are working or are participating in work activities. Through its Non cash Assistance Food Stamp offices, FIA provides food stamp services to able bodied individuals who receive food stamps but do not receive cash assistance. These services are provided in offices throughout the city.

The Medical Insurance and Community Services Administration (MICSA) helps to link New Yorkers to public health insurance programs, while serving the most vulnerable through the medically-related social service programs. MICSA administers Adult Protective Services (APS), the HIV/AIDS Services Administration (HASA), the Home Care Services Program (HCSP), and the Medical Assistance Program (MAP).

- APS is a State mandated program and services are available to persons 18 years of age or older without regard to income who are mentally and/or physically impaired, have no one available to responsibly assist them and, due to their impairments, are unable to manage their own resources, or protect themselves from abuse, neglect and exploitation. APS clients typically lack the ability to meet their essential needs for food, shelter, clothing or health care. An APS caseworker will develop a plan that may include such services as a referral for psychiatric and/or medical exams and ongoing care; assistance in obtaining Medicaid and home care; assistance in obtaining cash assistance and food stamps benefits, SSI, or disability; identification of alternative living arrangements; financial management of federal benefits; referrals to the NYPD and District Attorney to address abuse; and heavy-duty cleaning services.
- HASA provides access to essential benefits and social services to individuals and families living with AIDS or advanced HIV illness. HASA is committed to service provision that is individualized, efficient, effective, and of high quality. HASA services include specialized intake and needs assessment; direct linkages to cash assistance, Medicaid, food stamps, the Home Care program, and homemaking; ongoing intensive case management; emergency and permanent housing services and placements; voluntary vocational counseling/rehabilitation, job training, and placement; assistance with clients' applications for federal Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI); and referrals to community-based resources for additional services.
- HCSP offers a range of Medicaid-funded, non-institutional long-term care programs that enable the frail, the aged and the disabled to remain in the safety of their homes rather than institutions. HCSP verifies eligibility and assesses the medical need for home care, and determines the appropriate level of care for each client.
- MAP makes eligibility determinations for public health insurance programs that pay for medical services for low income New Yorkers who qualify. MAP directly administers these benefits for persons who do not receive Cash Assistance or Supplemental Security Income. MAP determines eligibility for Medicaid, Family Health Plus, Nursing Homes, Medicare Savings Program (also known as Medicare Buy-In), the Family Planning Benefit Program, Prenatal Care Assistance, Medicaid Buy-In Program for Working People with Disabilities, and other waiver programs. There are currently over 2.9 million clients receiving Medicaid benefits in New York City.

ODVEIS comprises two components. The Office of Domestic Violence (ODV), which provides emergency shelter and social services to victims of domestic violence, and the Office of Emergency Intervention Services (OEIS). OEIS includes the Crisis and Disaster Services unit that responds to citywide disasters. It is responsible for the coordination and provision of agency services to victims of emergencies such as hurricanes, snowstorms, heat alerts, public health issues and tragedies such as 9/11. Also under OEIS is the Office of Food Programs and Policy Coordination and four programs that provide energy related services to low income households: the Heatline, the Utility Assistance Program and the federally funded Home Energy Assistance Program (HEAP), and the Department of Environmental Protection Assistance Program which assist New Yorkers who have water bill arrears.

OCSE assures that non custodial parents (those who do not reside with their children) share in the responsibility of financially supporting them. They locate non custodial parents who are missing and assist in establishing paternity if that is an issue. OCSE secures family court orders for child support, collects the support as it becomes due (mainly through Income Executions against the non custodial parents employer), and when not paid regularly, enforces through a variety of automated processes. Custodial parents applying for Cash Assistance are automatically referred to OCSE by FIA. The first \$100 (\$200 for 2 or more children) collected each month is forwarded to the family. The remainder is retained to offset cash assistance received by the family. When the family leaves the Cash Assistance program the child support that is collected is distributed to them and serves as a major benefit in the transition from Cash Assistance. Custodial parents not in receipt of public assistance may voluntarily apply for OCSE services. In Fiscal Year 2011 OCSE collected over \$718 million on behalf of families who utilized their services.

HRA's CAS is an integrated and coordinated service system that enables HRA clients who have untreated or unresolved clinical issues to reach their highest possible level of functioning. CAS oversees clinical programs that focus on helping clients/families maximize their level of functioning.

OCHIA is charged with expanding access to health insurance for all New Yorkers. OCHIA works to make information about free or low-cost health insurance options readily available, particularly for the recently unemployed, and to ensure that low-income New Yorkers have access to public health insurance enrollment assistance. OCHIA administers HealthStat, a citywide initiative mobilizing City agencies, managed care plans, and a variety of community, faith-based and other organizations to identify and enroll eligible New York City residents in public health insurance programs. In 2010, approximately 69,000 enrollments in public health insurance were facilitated through HealthStat.

To ensure that more New Yorkers understand and connect to health insurance options that best suit their needs, HRA launched NYC Health Insurance Link (NYC HILink) in September 2009. This important new web tool, developed by OCHIA in partnership with HRA's MIS division, allows freelancers, small business owners and residents to find and compare private health insurance plans by price and benefit in one convenient location. NYC HILink connects residents to ACCESS NYC, where they can screen themselves for public health insurance and educates New Yorkers about health insurance basics. The site also offers alerts about important health insurance news and helps New Yorkers understand the impact of federal health care reform on their coverage decisions and options both now and in the future. Since its inception, the site has helped over 70,000 New Yorkers learn about their health insurance options. Finally, OCHIA engages in policy analysis and research initiatives that complement and support its outreach and enrollment efforts.

Department of Health and Mental Hygiene

The Department of Health and Mental Hygiene protects and promotes the health and mental well-being of all New York City residents and promotes the realization of the full potential of those who live with disabling conditions. On July 1, 2002 mental hygiene services were integrated into the former Department of Health, reflecting the revision of Chapter 22 of the New York City Charter.

The Department is governed by a Commissioner who also chairs the Board of Health. The Division of Mental Hygiene is governed by an Executive Deputy Commissioner and, under Article 41 of the New York State

Mental Hygiene Law, continues to administer local mental hygiene services related to mental health, developmental disabilities, and chemical dependency. Other programmatic divisions within the Department are administered by Deputy Commissioners and include Disease Control, Environmental Health, Epidemiology, Health Care Access and Improvement and Health Promotion and Disease Prevention. To streamline and strengthen coordination between prevention and care of persons living with HIV/AIDS, the Office of Citywide AIDS Policy Coordination was established in the Department, effective July 1, 2003.

The Department enhances housing support and other services for citizens with special needs by working closely with the Mayor's Office, Housing Preservation and Development, the Department of Homeless Services, the Human Resources Administration and other City agencies, with State agencies and with community-based organizations and several advisory bodies.

The mission of the Division of Mental Hygiene is to oversee and coordinate an integrated community-based mental hygiene service system. It is responsible under the City Charter and the State Mental Hygiene Law for planning, contracting, monitoring and evaluation of all mental hygiene services. Services are provided by contracted non-profit organizations, municipal as well as private hospitals, the City Correction system, the Department of Education, the Human Resources Administration, and the Department of Homeless Services. The Division develops standards of care to ensure that services are comprehensive, high quality, cost effective, and culturally and linguistically responsive across all local hospital, community and criminal justice mental hygiene systems. Supportive housing services required to maintain mental hygiene clients in the community are planned and funded at both the State and City level. The Department of Housing Preservation and Development supervises most of the capital financing and production of new housing units funded by the City. The Department of Homeless Services, via inter-agency transfer of State funds and through a Memorandum of Understanding, administers development of housing for mental hygiene clients. The Community Services Board which is composed of 15 members appointed by the Mayor acts in an advisory capacity to the Division, as does the Federation of Mental Health, Mental Retardation and Alcoholism Services.

For a description of the Bureau of HIV/AIDS Prevention & Control (BHAPC) please refer to Volume 1, Part I, Section D2. Supportive Housing Continuum of Care for Special Needs Populations, b. Persons with HIV/AIDS.

Department for the Aging

The Department for the Aging (DFTA) is the New York City government agency responsible for a wide range of services for older New Yorkers, and is also the largest of 629 Federally-designated Area Agencies on Aging (AAA) in the nation. These AAAs operate within a network comprising 56 State Offices on Aging (among them U.S. territories). DFTA has more than 30 years of experience in conducting research and advocacy related to aging issues and providing a wide array of programs and services both directly and through more than 700 contracts with community-based organizations throughout New York City.

The overall mission of the agency is to work for the empowerment, independence, dignity and quality-of-life of New York City's diverse older adults and for the support of their families through advocacy, education and the coordination and delivery of services. To this end, the Department plans, coordinates and supports services and benefits to help older New Yorkers meet their diverse physical, social, and economic needs. DFTA coordinates and implements programs for the aging, advocates on their behalf, conducts research and policy analysis, and administers Federal, State, and City funds for contract services with non-profit and for-profit providers.

DFTA is under the leadership of a Commissioner appointed by the Mayor and supervised by a Deputy Mayor. The agency's executive staff also includes a Deputy Commissioner, six Assistant Commissioners and a General Counsel who oversee the offices and bureaus responsible for administering DFTA's programs, services and operations.

External Affairs oversees public affairs, governmental relations, legislative affairs, and community outreach.

Emergency Preparedness oversees the Department's efforts to prepare seniors and DFTA's community partners in the event of a crisis or other phenomenon that may affect the health of older New Yorkers and/or the ability of DFTA and its partners to deliver services to older New Yorkers.

The Bureau of Community Services administers contracts with more than 300 local agencies to support senior centers, congregate meals programs, health promotion, transportation, case assistance, home sharing, minor home repair and other services for the elderly in neighborhoods across the City. This bureau also oversees the Naturally Occurring Retirement Community (NORC) Supportive Service Programs, the Home Energy Assistance Program (HEAP) and the Weatherization, Referral and Packaging Program (WRAP), the Health Insurance Information and Counseling Program (HIICAP), and the Health Promotions programs. As well, this bureau manages senior center facility issues and collaborates with the New York City Housing Authority (NYCHA) in the administration of senior centers located in NYCHA developments.

The Bureau of Long Term Care and Active Aging administers programs that allow older New Yorkers to enhance community life. Likewise, the bureau directs services to help older New Yorkers remain in their homes and communities as long as possible through the provision of long-term care resources.. Operating within this bureau are the Senior Community Service Employment Program, the Work Experience Program (which trains Public Assistance recipients to work as home care aides for frail elderly), the Foster Grandparents Program, Intergenerational Programs, the Grandparent Resource Center, the Alzheimer's and Caregiver Resource Center, Long Term Care Services (which include case management, home delivered meals, home care services and caregiver programs), Nutrition Counseling (in-home nutritional counseling to frail, homebound elderly), the Elderly Crime Victims Resource Center, and the Assigned Counsel Project (which matches social service supports to court-referred seniors facing eviction).

Planning oversees the Department's research, planning, program development, management analysis, policy and grant funded program efforts. The research and planning offices are the City's primary source of demographic and service data on elderly New Yorkers.

Fiscal Operations carries out all budget and fiscal affairs functions for the Department.

In addition to funding from the City of New York (which accounts for over 50% of its budget), DFTA also receives funds through the U.S. Administration on Aging, New York State Office for the Aging, Corporation for National and Community Service, the National Council on Aging, the U.S. Dept. of Agriculture, and a variety of foundation grants.

Mayor's Office for People with Disabilities

The New York City Mayor's Office for People with Disabilities (MOPD) was established in 1973. MOPD is responsible for formulating City policies concerning people with disabilities and for coordinating and overseeing City compliance with related laws. MOPD also disseminates information and promotes programs to ensure that the rights and interests of people with disabilities are protected and supported.

MOPD is under the leadership of a Commissioner appointed by the Mayor. The agency's executive staff also includes two Deputy Commissioners, one of whom is General Counsel and the other is the Chief Administrative Architect.

MOPD conducts a variety of activities, including:

Access: New York City's Human Rights Law is progressive, with wider coverage than the Americans with Disabilities Act (ADA). The accessibility portions of the City's new Building Code are comparable to and a forerunner of the accessibility standards in the ADA. MOPD examines waiver requests under the Building Code accessibility provisions and provides advice and training on accessibility matters.

Compliance: MOPD provides guidance to New York City agencies concerning the rights of individuals with disabilities and helps educate agencies to understand their responsibilities toward people with disabilities.

ADA Task Force/Inter-Agency Disability Committee: MOPD is the primary policy agency in this City-wide Task Force, which has responsibilities for formulating the City's approaches regarding compliance with the Americans with Disabilities Act (ADA), and for helping City agencies comply with the ADA.

Policy Unit: This unit is responsible for developing and coordinating City policy and programs to ensure the fullest possible participation in employment, services, and City-sponsored activities.

Housing Services: Provides basic fair housing information and referrals to people with disabilities and to housing providers. (See Volume 1, Part I., Action Plan, Program Descriptions for two housing service programs, Housing, Information and Education, and Project Open House.)

Training Sessions: MOPD holds training sessions for personnel from City agencies concerning compliance with the ADA and Section 504 of the Rehabilitation Act, as well as with local human rights laws that prohibit discrimination on the basis of disability.

MOPD Resource Center: MOPD maintains a website that provides a wide array of resources, including its Disability Community Resource Network, a new online search tool for New Yorkers who want to find organizations that support people with disabilities; information regarding the Disabled Rent Increase Exemption, which provides a rent freeze to qualified disabled tenants; and information about city housing programs affecting the disabled community provided by other city agencies.

Affordable Housing Resource Center: MOPD is also a partner of the Affordable Housing Resource Center, a multi-agency partnership where the user will find information on all aspects of City housing, including renting an apartment, buying a home, and apartment maintenance issues.

The Commission on Human Rights

The Commission on Human Rights is the agency that enforces the New York City Human Rights Law. Fifteen Commissioners, representative of New York City's diverse communities are appointed by the mayor and serve without compensation. The CCHR Chair, who also holds the title of Commissioner, manages the day-to-day operations of the agency. In addition, the agency is managed by the Deputy Commissioner/General Counsel, the Deputy Commissioner for Public Affairs, the Assistant Commissioner for Human Relations, the Executive Director of Law Enforcement, the Executive Director for Community Relations, and the Director of Communications.

The Commission is mandated to "foster mutual understanding and respect among all racial, religious, and ethnic groups" and to "encourage equality of treatment for, and prevent discrimination against any group or its members." The City's Human Rights Law prohibits discrimination in employment, housing, and public accommodations on the basis of race, color, creed, age, national origin, alienage or citizenship status, gender (including gender identity and sexual harassment), sexual orientation, disability, marital status, and partnership status. In addition, the Law affords protection against discrimination in employment based on *arrest or conviction record* and status as a victim of domestic violence, stalking, and sex offenses. In housing, the Law affords additional protections based lawful occupation, family status (whether children are, may be, or would be residing with a person), and any lawful source of income. In addition, the City's law prohibits retaliation and bias-related harassment.

The Commission on Human Rights has two programmatic bureaus.

Law Enforcement: This bureau investigates complaints from the public to determine whether probable cause exists to believe discrimination took place. The Bureau advances prosecution of cases when probable cause is found. If cases are not settled after the probable cause determination, they proceed to trial by the Law Enforcement Bureau. If cases are not settled during trial preparation by conference judges at the Office of Administrative Trials and Hearings (OATH), they are heard by administrative law judges from OATH. After

trial, the administrative law judge issues a Report and Recommendation and then a panel of three Commissioners reviews the report and recommendation and issues the Commission's Final Decision and Order. The Final Decision and Order either affirms, rejects, or modifies the recommendation from OATH. The Final Decision and Order is appealable to the New York State Supreme Court. The Law Enforcement Bureau also initiates complaints on its own and engages in testing to detect systemic discrimination. The Law Enforcement Bureau offers mediation in certain cases where both parties agree. If mediation is unsuccessful the cases where probable cause has been found proceed to trial.

Community Relations: This bureau consists of the Neighborhood Human Rights Program (NHRP). Located in all five boroughs, the NHRP's Community Service Centers conduct community and school-based education on conflict resolution, sexual harassment, cultural diversity, the Human Rights Law, peer mediation, and intergroup relations. In addition, the Centers address situations of community unrest by assisting groups with leadership development, mediation, and conflict resolution. Working with immigration advocacy groups, the Neighborhood Human Rights Program alerts immigrants to the protections provided them under the Human Rights Law and relevant federal laws. With the assistance of grants from the US Department of Justice Office of Special Counsel for Immigrant Related Unfair Employment Practices, the Commission has developed a curriculum for English-for-Speakers-of-Other-Languages, at beginning, intermediate, and advanced levels, explaining immigrants' employment rights. Another program, Project Equal Access, educates senior citizens, health professionals, people with disabilities, and others to city, state, and federal laws regarding accessibility in housing, employment and public accommodations. The program staff also offers advocacy, investigation and resolution of cases where individuals request assistance in getting an owner to make a housing or public accommodation facility accessible. The Community Service Centers offer education on fair housing laws and prevention of discriminatory and predatory lending practices. A HUD-Certified Housing Counseling Agency, the Commission provides mortgage counseling for individuals facing foreclosure to help deter discrimination in lending and to detect predatory lending practices.

In recent years the NHRP has also concentrated on providing workshops for Workforce Investment Programs and correctional facilities, parole and probation orientations, and organizations serving people who were formerly incarcerated. With the Law Enforcement Bureau, the Community Service Centers conduct systemic investigations of discrimination in housing and public accommodations. The Research Division provides information to direct and inform these program activities.

In addition to school- and community-based forums, the Commission sponsors periodic citywide public education events. Information from the citywide events is on the Commission website—<http://hwww.nyc.gov/cchr>. For example, "Fighting for Justice" features three short videos that were part of an event celebrating individuals influential in New York City's formative role in the Civil Rights Movement. The Commission's educational and research materials are described on the website and many of them can be downloaded.

Department of City Planning

The Department of City Planning (DCP) is governed by a Director, who also serves as the Chairperson for the City Planning Commission. The Chair is responsible for the overall planning, direction and coordination of policy, while advising and assisting the Mayor on physical and public improvements related to the City's development. The Planning Commission is composed of 13 members (including the chair, seven are appointed by the Mayor; one by each of the five Borough Presidents, and one by the Public Advocate). The Commission's responsibilities include reviewing and approving amendments to the Zoning Resolution, and the City Map, as well as requests for special permits. The Commission also reviews all urban renewal and housing plans and projects, sales and leases of city-owned property, franchises, revocable consents, landfills and site selection. These actions are subject to review and approval by the City Council in accordance with Charter requirements. The Department provides technical support to the Commission (and the Mayor) on matters related to planning and policy. City Planning was designated by the Mayor to be the lead agency in the Consolidated Plan application process. The Department coordinates the production of the Consolidated Plan, which includes information from more than 12 agencies concerning the use of HUD funding and priorities and objectives to

meet the needs of low and moderate income persons in relationship to housing, homelessness, supportive housing services, and community development.

Under the Director of City Planning is the Executive Director, who is responsible for providing the framework for all planning activities, implementing of the agency's work program, and managing day-to-day processes of the Department. Working with the Executive Director are two Deputy Executive Directors: Strategic Planning; and Land Use and Environmental Review; and a Director Operations. The Executive Director also oversees the five Borough Planning Offices. The Strategic Planning Deputy Executive Director oversees the Department's functional planning divisions (Zoning and Urban Design; Planning Coordination; Housing, Economic and Infrastructure Planning; and Transportation) and coordinates land use planning policy based on the identification of key strategic planning issues. The Land Use and Environmental Review Deputy Executive Director is responsible for the Land Use, Environmental Assessment and Review, Technical Review and Information Technology divisions. The Director of Studies Implementation is responsible for the implementation and management of an on-call environmental consultant contract to analyze large scale land use actions pursuant to the City Environmental Quality Review (CEQR) process. The Director of Operations is responsible for fiscal and administrative services relative to the day to day operations of the Department.

The Housing, Economic and Infrastructure Planning Division (HEIP) develops citywide plans and policies for housing, and conducts economic analyses and publishes information on the City's economy. In addition, the Division also analyzes infrastructure needs in the context of economic, demographic and social change. HEIP is responsible for the production and publication of the City of New York's Consolidated Plan and other reports mandated by the City Charter such as the Annual Report of Social Indicators.

To address the physical needs of communities, the Department of City Planning provides technical assistance on how to implement land use and zoning plans.

Department of Youth and Community Development

The Department of Youth and Community Development is the lead New York City agency for facilitating and administering youth and community development programs. DYCD supports youth and community development in New York City by funding a broad network of experienced community-based organizations throughout the City. Programs include Beacon Community Centers; corporate internships for youth; literacy programs; the Out-of-School Time Initiative; runaway and homeless youth outreach and services; the Summer Youth Employment Program; and, youth workforce development.

Community Development Division

Community Services Block Grant Program

The Department of Youth and Community Development is the designated Community Action Agency for New York City and as such is the recipient of federal Community Services Block Grant (CSBG) funds. New York City's CSBG program provides a broad range of services that combat poverty, offer emergency services to low-income people, and empower individuals to achieve self-sufficiency. These services revitalize low-income communities designated as Neighborhood Development Areas (NDAs). Funded programs include educational support, employment, and leadership activities for youth; literacy instruction; immigrant support; housing assistance; senior services; and support services for families.

Literacy Programs

DYCD funds community-based organizations to provide literacy and language instruction to individuals 16 and older. Services for adults include Adult Basic Education (ABE), General Educational Development (GED), English for Speakers of Other Languages (ESOL), and Basic Education in the Native Language (BENL) classes. Many of the funded agencies also offer counseling, computer training, career education, and employment assistance.

Immigrant Services

DYCD contracts with community-based organizations throughout New York City to provide services and support to immigrants and their communities. These programs serve newcomers who migrate and settle in New York City by assisting them with access to government benefits; legal assistance, including assistance with matters related to citizenship and immigration status; education and employment; health care; and social services.

Fatherhood Program

DYCD's Fatherhood Initiative helps fathers reconnect with their children and develop essential parenting skills. DYCD offers fatherhood programming in three distinct categories: Young Fathers (16-24 years old), Older Fathers (over the age of 24), and Ex-offenders. Programs offer employment assistance as well as support services including individual and family counseling, mediation and conflict resolution training, assistance arranging child visitation, peer counseling and father-to-father mentoring, GED or ESOL or referrals, and college preparation.

Youth Services Division

The Youth Services Division supports a variety of youth activities, including academic support, GED and ESOL classes, structured recreation and athletics, cultural enrichment, counseling, adolescent health care, substance abuse prevention, and runaway and homeless programs through a combination of City, State, and Federal funding.

Out-of-School Time Initiative

The DYCD Out-of-School Time (OST) Initiative started in July 2005. It is the largest municipally funded after-school system in the nation, offering a balanced mix of academic support, sports and recreational activities, the arts, and cultural experiences. OST programs, run by community-based organizations, provide free, safe programs in every neighborhood in New York City. Programs are open after school, during holidays, and in the summer and provide separate programs for elementary, middle school, and high school students. In 2009 two additional programs were added: the High School Transition Program now assists students entering grade 9 with the transition from middle school and the Transition to Adulthood Program targets low-income students in grades 11 and 12 to help them acquire the skills and behaviors they need for success in the adult world. In FY11, \$97.9 million was budgeted for 485 programs and an enrollment of just over 57,000 participants.

Beacon Community Centers

City tax-levy and CDBG funds provide funding to 80 Beacon Community Centers located in public schools in low- and moderate-income areas of the City. Beacon centers operate in the afternoons and evenings, on weekends, during school holidays and vacation periods, and during the summer. They provide a range of activities for young people, including literacy activities, tutoring, college prep, sports, and recreation. In 2007 DYCD launched the Beacon Middle School Initiative in all 80 Beacons to offer activities to enhance the intellectual, physical, emotional, and social growth of young adolescents. Beacon Centers also provide services for families and adults, including GED and ESOL classes, parenting skills workshops, and tenant education and advocacy.

Cornerstone Initiative

The Cornerstone initiative, which was launched on January 1, 2010, provides year-round programming for young people and adults at 25 NYCHA Community Centers. Cornerstone youth programs are designed to help participants acquire the skills and attitudes they need to graduate from high school, succeed in their chosen career, and give back to the community. Typical youth activities include tutoring, homework help, project-based learning opportunities, high school and college prep, math clubs, photography, chess, basketball, and martial arts. Cornerstone adult programs are designed to enhance skills and promote social interaction, community engagement, and physical activity. Typical adult activities include GED and ESOL classes, and instruction on parenting skills, family relations, tenant education and advocacy. Cornerstone programs also offer intergenerational programming. The Cornerstone initiative was shaped by input from young people, NYCHA

residents, Resident Association leaders, elected officials, and principals at schools that serve youth who live in the participating developments.

Youth Employment Programs

Youth employment services include year-round In-School Youth (ISY) and Out-of-School Youth (OSY) Programs, the Summer Youth Employment Program (SYEP), and the Neighborhood Development Area (NDA) High-School-Aged Youth Program. Each of these programs incorporates youth development principles which prepare young people to meet the challenges of adolescence and adulthood through a coordinated, progressive series of activities and experiences that help them to develop socially, morally, emotionally, physically, and cognitively. The ISY Program provides occupational skills, employment services, and educational opportunities to low-income high school juniors and seniors. The OSY Program provides educational and employment services to youth aged 16-21 who are not enrolled in school and need assistance with basic skills and GED attainment, employment skills, and placement in jobs, advanced training, or secondary education. During July and August, SYEP offers up to seven weeks of summer employment to young people between the ages of 14 and 21. The NDA High-School-Aged Youth Program serves both in-school and out-of-school youth who are not working through age 21. Programs assist participants to attain high school or GED diplomas, develop personal and workplace skills, and gain exposure to career and higher education options.

NYC Ladders for Leaders

NYC Ladders for Leaders is a joint initiative of DYCD and the Commission on Women's Issues. It merges two successful youth internship pilot projects: CAPITAL (Corporate Allies Program of Internships, Training, and Leadership) and the NYC GirlsREACH and BoysREACH programs. Participants receive pre-employment training before starting a seven-week summer internship at partnering companies, which also provide the private donations that underwrite the program. Qualified participants are eligible for partial competitive college scholarships, free college preparatory workshops, and SAT course. The internship experience is complemented by gender-specific workshops focusing on work readiness, college orientation, health, leadership development, and other issues.

2. Non-profits

The City could not successfully implement or fulfill its housing goals and programs without the assistance and support of the many local and city-wide non-profit organizations engaged in housing development. Non-profit organizations play a critical role in the City's housing development initiatives in several ways: - they perform advocacy work on behalf of community residents, which serves to prevent tenant displacement and owner abandonment; - they are involved in the community and knowledgeable about the neighborhood, assisting City agencies in designing and implementing programs that respond to a community's needs; - they often provide the development expertise and technical assistance needed to bring projects to fruition, and also conduct the monitoring and/or certifications necessary at a project's completion; and - they provide the social/community service components required with many housing programs. Non-profit organizations have a long, positive history of cooperation with City housing agencies and it is the City's intention to continue this highly cooperative relationship. In recognition of the expertise and commitment shown by these organizations, the City seeks to expand opportunities for non-profit organizations to engage in housing development and management activities. Currently, the City and not-for-profit organizations are working together in several HPD programs. The Neighborhood Redevelopment Program, Neighborhood Entrepreneurs Program, Supportive Housing Loan Program, Mutual Housing Program, Special Initiatives Program, the Neighborhood Ownership Works Program and the Mutual Housing Association of New York are just some of the programs in which not-for-profit organizations are actively involved as project developers, owners and managers. The City also uses non-profit groups to provide consulting, technical assistance and monitoring services under several HPD programs: Neighborhood Preservation Consultants Program, Tenant Interim Lease Program, and Neighborhood Entrepreneurs Program. Nonprofits also operate the bulk of the emergency housing system for families, as well as assisting the City in providing services to relocated families. Lastly, HPD works with non-profit organizations which serves as conduits to the private sector (see Private Industry section below).

3. Private Industry

The City of New York works with private industry in a number of ways in order to produce and improve low-income housing. First, private firms serve as general contractors or subcontractors on City assisted rehabilitation and new construction sites. Second, private institutions frequently provide rehabilitation/construction financing for assisted housing projects and/or "end loans" to prospective buyers of affordable homes. Third, many of the City assisted substantial rehabilitation or new construction projects are undertaken by private developers who own the property, secure the financing, manage the construction, and market the units (either as rental property or as homeownership units, depending on the individual program). Fourth, private owners may use City assistance in order to renovate their buildings. Fifth, private firms often manage the properties that are developed with City assistance. In addition to the more conventional public/private partnerships, the City has also developed a number of innovative ways to redirect private resources toward low-income housing ventures. The City currently targets special incentives including real estate tax abatements and exemptions as well as increased zoning rights to private developers who agree to construct or improve low-income rental housing. In addition, HPD works with several nonprofit organizations that serve as a conduit to the private sector: Nehemiah; New York City Partnership; Local Initiatives Support Corporation; Low-Income Investment Fund; National Cooperative Bank; Community Capital Bank; Neighborhood Housing Services; and the Enterprise Foundation.

G. Governmental Coordination and Consultation

This section describes the coordination of housing, homeless assistance, supportive housing services and community development within the City of New York, among public and assisted housing providers, private and governmental health, mental health, and service agencies on the three levels of government (local, state, federal).

For the required description of the consultation and coordination among municipalities receiving HOPWA formula grant funds within the New York, New York Eligible Metropolitan Statistical Area (EMSA) please refer to Part I, Section D2., Supportive Housing Continuum of Care for Special Needs Populations, b. Persons with HIV/AIDS.

The programs, funding and other actions described in the Consolidated Plan are administered by twelve City agencies which compose the Consolidated Plan committee chaired by the Department of City Planning. Each agency is responsible for a particular aspect of the creation and maintenance of affordable housing, the implementation of supportive housing programs and the coordination of community development programs.

The Committee members work closely with the Mayor's Office of Intergovernmental Relations and the Washington Office. Together the agencies and the Intergovernmental Office work to inform and negotiate New York City issues relating to the City's housing policy and program activities with the Governor's office and the State legislature as well as the U.S. Congress and HUD.

Below and in the sections titled, Citizen Participation Plan and Institutional Structure are descriptions of the City's community interactive process with public and private agencies, and health and social service agencies. The City's coordinated lead-based paint abatement programs have been previously discussed in the section titled: "Elimination and Treatment of Lead-Based Paint Hazards."

Activities in New York City Housing Authority housing projects and programs which encourage residents to become more involved in management and to participate in homeownership are described elsewhere in this document in the section entitled; "New York City Housing Authority".

The following describes the interaction the Committee Agencies have with the not-for-profit and other governmental entities in carrying out services. Additional information describing coordination has been included in the Institutional Structure section and is not repeated here, please refer to that chapter for more information.

Department of Housing Preservation and Development

HPD's mission is to promote quality affordable housing by producing, preserving and upgrading the City's housing stock. To achieve this goal, HPD finances and administers a variety of housing programs utilizing Federal, State and City funds, and is a catalyst for private investment in the economic development of our communities with the greatest need.

The City has a long history of working with private non-profit and for-profit developers along with local financial institutions to create decent, affordable housing for New York City residents. HPD maximizes neighborhood ownership and management of City-assisted residential buildings by soliciting local participation, particularly from the City's pool of Community Housing Development Organizations (CHDOs), in its disposition and development of affordable housing through loans and other financial assistance; and enforcing compliance with housing quality standards.

HPD also performs a neighborhood coordination function, responsible for the negotiation and resolution of community conflicts, participation in community meetings and interacting with the Mayor's Office's Community Assistance Unit and other City Agencies. Planning and Intergovernmental Affairs staff serve as a primary communication and administrative link between HPD and all the neighborhoods and communities in the City;

make presentations to local officials on new initiatives; respond to requests for information; and expedite complaints.

The Department of Homeless Services (DHS) works in close partnership with HPD to develop permanent housing for homeless people. HPD also accepts DHS referrals of individuals and families for placement into existing HPD buildings.

As a HUD-designated Public Housing Authority (PHA), HPD works with the New York City Housing Authority (NYCHA), also a HUD-designated PHA, to address common issues and pursue mutual goals.

To address the issue of lead-paint hazard control, HPD works closely with the Department of Health to conduct inspections/emergency repairs, and monitor the health of children who may have come in contact with lead-based paint.

HPD works with the New York City Department of Finance in the development and administration of various tax incentive programs designed to promote new construction and rehabilitation of residential property.

HPD and the New York City Department of Buildings work closely to coordinate demolition and site clearance issues affecting HPD development projects and to promote development of new affordable housing.

HPD and the New York City Fire Department coordinate their operations to provide emergency relocation (either temporary or permanent) when homes are destroyed or require extensive repair.

In order to assure the quality of City-owned residential buildings is maintained, HPD employs its Narcotics Control Unit to investigate and take action against drug users and drug sellers who live in or loiter near HPD properties. This kind of operation requires intensive coordination with the New York Police Department and with the District Attorney's Office.

HPD coordinates with the New York City Office of Management and Budget to identify the City's housing needs on a Community Board level. There are 59 Community Boards in the City of New York and HPD works with each of them to develop housing plans that meet the needs of each community.

Department of Homeless Services

The Department of Homeless Services (DHS) works closely with many City, State and Federal agencies. The City agencies that DHS collaborates with include: the Human Resources Administration (HRA), the Department of Housing Preservation and Development (HPD), the New York City Housing Authority (NYCHA), the Department of Health and Mental Hygiene (DOHMH), the Administration for Children's Services (ACS), the Department of Education (DOE), the Department of Correction (DOC), the New York City Police Department (NYPD), and the Department of Youth and Community Development (DYCD), the Mayor's Office to Combat Domestic Violence (MOCDV), the Mayor's Office of Veterans' Affairs (MOVA), NYS Office of Temporary and Disability Assistance (OTDA), Office of Mental Health (OMH), and the NYS Office of Alcoholism and Substance Abuse Services (OASAS).

DHS also works closely with the non-profit provider community and other governmental agencies through the New York City Coalition on the Continuum of Care (NYC CCoC). There are almost 100 non-profit grantees that coordinate the renewals of their HUD Continuum of Care grants through DHS. In addition, DHS sits as co-chair of the NYC CCoC Steering Committee and is one of the eight government voting members on this committee. Through this partnership and coordination with these non-profit agencies, DHS has supported individual programs in their HUD NOFA application and grant management processes. The goal of these efforts is to provide the widest possible range of services to homeless people, secure maximum available state and federal funds and minimize waste and duplication among service providers.

HRA works with DHS to assist clients to remain in the community and avoid shelter entry, if possible. HRA staff provides diversion services at the family and single adult intake centers. The two agencies also work closely to help clients access temporary cash assistance and other mainstream resources as well employment services to help them exit shelter and transition to independent living.

In response to the American Recovery and Reinvestment Act (ARRA) of 2009, and specifically the Homelessness Prevention and Rapid Re-housing Program (HPRP), the City of New York has followed a comprehensive planning process to ensure the highest degree of interagency collaboration and most effective and efficient use of the full range of stimulus funds directed to the City. Through this planning process, the Office of the Mayor has convened interagency planning meetings, and facilitated opportunities for joint planning of key initiatives. This collaborative approach helped facilitate creative thinking and led to the development of programs that will benefit populations served by other City agencies. For example, in the area of anti-eviction legal services, DHS transferred HPRP funding to the Department of Health and Mental Hygiene and the Department for the Aging, agencies that administer these programs for individuals living with HIV/AIDS, older adults, and those with mental health needs.

DHS partners with the Veteran's Administration to combat homelessness among veterans. The VA is an active, voting member of the Continuum of Care. In December 2006, NYC and the federal Department of Veterans Affairs developed the Operation Home Task Force to end veteran homelessness in New York City. In 2008, a DHS-VA jointly operated Multi-Service Center where homeless veterans can access federal benefits and housing assistance was opened. DHS has two Veteran specific facilities serving homeless veterans, and in 2009 DHS opened a 40 bed Safe Haven designated to street homeless Veterans. The City's community-based prevention providers have expertise in serving veterans and are targeting this population to prevent veteran homelessness.

DHS also partners with the New York State Office of Temporary and Disability Assistance (OTDA) in serving the City's homeless population. In 2007, OTDA was awarded technical assistance from the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to implement the SSI/SSDI Outreach, Access, and Recovery ("SOAR") initiative in the State. New York City was the pilot community for the New York State SOAR initiative. As a condition of initial and ongoing eligibility for assistance in New York, individuals must comply with the requirement to apply for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits where appropriate. The primary objective of SOAR is to ensure that these requirements are met by helping eligible homeless individuals, who may lack the skills needed to complete and follow-through with the SSI or SSDI application in the first instance, gain access to SSI/SSDI upon first application. Programs targeted for pilot year of initiative were Mental Health programs in shelters, Street to Home programs, Drop-in Centers, and Safe Havens. The collaboration among DHS, OTDA Division of Disability Determinations (DDD), and Social Security Administration (SSA) has resulted in trainings for nearly 300 staff with direct client contact.

DHS collaborates with DOHMH, daily, in a myriad of ways. Examples include the following: In an effort to reduce mortality and morbidity in a substance-abusing population within the shelter system, DHS, in collaboration with DOHMH, successfully piloted Harm Reduction protocols (OD Response and Syringe Access, Provision, and Disposal) in 5 single adult shelters, and are currently expanding to additional adult services sites, including Drop-In Centers, and an adult family facilities. Furthermore, to date, over 700 program staff and DHS Peace Officers were trained on how to administer Naloxone, a drug that reverses the effects of an opiate overdose.

DHS also collaborates with the Administration for Children's Services (ACS) by conducting computer data matches of clients who utilize both services. ACS staff are also on-site at DHS' family intake center, Path. DHS and ACS work together to increase interagency coordination and communication to fully address the needs of homeless families with child welfare involvement.

DHS is a member of the Inter-agency Coordinating Council on Youth hosted by the Department of Youth and Community Development. The goal of the Council is to ensure that there is a collaboration and coordination of service delivery to the youth population in NYC.

Since January 2004, DHS has been matching information with the Department of Correction's (DOC) monthly discharges to the DHS single adult data base system in order to monitor who enters the homeless shelter system. The discharge planning workgroups have been using matched data to look at frequent users, short-term stayers and the sentences served by these clients.

In FY10, DHS and DOC also developed an intervention on Rikers Island to address the high levels of DHS shelter admissions from discharge to as well as high recidivism rates to the city's jails. The DOC makes referrals to DHS's homelessness prevention service provider on site, who then assesses and engages the client with mediation services, long term housing assistance, and linkages to post-discharge community services.

In FY11 DHS and the New York City Department of Probation began exploring ways to integrate homelessness prevention with probation services and is planning for a co-location pilot in one prevention center to begin in FY12.

As part of its mission, DHS works to prevent homelessness. Currently, DHS provides legal representation, to eligible tenants facing housing court proceedings. In 2008, in an effort to help prevent homelessness, DHS initiated a collaboration with the Office of Court Administration (OCA), the administrative body for the New York City Housing Courts. DHS and HRA meet regularly with housing court staff and judges to secure services for former shelter clients at risk of eviction.

DHS has also worked with the New York City Police Department (NYPD) and established a protocol for identifying shelter clients who have outstanding arrest warrants where shelter staff can work together with clients to assist and support them in addressing and when possible vacating minor offense warrants in order to eliminate any impediments to permanent housing.

DHS partners with DOHMH to provide Outreach and Housing Placement Services in the City. A key component of the outreach programs is addressing encampment sites. City Agencies such as the Parks Department, Sanitation, Buildings, Transportation, and the NYPD's Homeless Outreach Unit (HOU) partner with DHS on encampments. The goal of this work is to place clients into transitional housing and to clean and secure the areas where they were formerly staying. In addition to the agencies listed above DHS also collaborates with the MTA closely on their MTA Connections Outreach Program.

DHS has worked with the Department of Education (DOE) to increase interagency collaboration to address the educational needs of homeless children. DHS seeks to place families in shelter locations that best accommodate the school needs of their children. DOE provides staff on site at some shelters to operate after school homework and study groups. DHS is also participating in a Task Force initiated by City Hall in June 2010 to address school attendance across the City and is working closely with DOE to share data on the attendance of children residing in shelter. In 2010, DOE was elected an At-Large Voting member of the NYC Continuum of Care.

DHS works closely with the Department of Education and the Department of Health and Mental Hygiene - Office of School Health to increase DHS families' awareness regarding Asthma. In FY10 the Office of School Health organized four special Asthma Awareness events and an Asthma Awareness Poster contest for school-aged children, living in DHS shelters, in order to help increase asthma awareness among children and their parents.

DHS has worked closely with the Mayor's Office to Combat Domestic Violence, Family Justice Centers, the New York State Office to Prevent Domestic Violence and the Human Resources Administration in a collaborative effort to identify and help victims of domestic violence who enter DHS shelters. Staff are trained in how to recognize domestic violence, how to talk to domestic violence victims, and where to refer domestic

violence victims for services. Additionally, DHS participates on the Fatality Review Committee from the MOCDV.

Department of Health and Mental Hygiene

The Department of Health and Mental Hygiene benefits from the input of the New York City Board of Health of which the Commissioner is Chair, as well as the Board of Directors of the Health and Hospitals Corporation, Public Health Solutions, the Greater New York Hospital Association, and the SSEF Foundation. Advisory Boards include the Community Services Board, the Federation of Mental Health, Mental Retardation and Alcoholism Services, the Local Early Intervention Coordinating Council, the HIV Planning Group, the Ryan White Planning Council and others.

For a discussion on the Department's Office of Citywide AIDS Policy Coordination and consultation of HOPWA-related activities, please refer to Part I, Section D.2., Supportive Housing Continuum of Care for Special Needs Populations, b. Persons with HIV/AIDS.

To meet its responsibility under the City Charter and the State Mental Hygiene Law for planning, contracting, monitoring and evaluating local mental hygiene services, the Department administers over 1,200 mental hygiene programs through a network of not-for-profit community-based organizations and City agencies. The Division of Mental Hygiene plans the development of its services by working closely with the State Office of Mental Health, the City's Community Boards, its fifteen borough planning councils, as well as consumers and advocates via public hearings and focus groups. In planning services for mentally ill homeless individuals, the Division also collaborates with the Mayor's Office, the Departments of Homeless Services, Housing Preservation and Development, the Human Resources Administration, the Department for the Aging, the Department of Correction and the Health and Hospitals Corporation, as well as the New York City Housing Authority. The Division also conducts conferences, annual ceremonies and other events to solicit consumer, advocate and public input.

Human Resources Administration

The Administrator/Commissioner of the Human Resources Administration is, ex officio, a member of the Boards of the Health and Hospitals Corporation, the Health Systems Agency, and each of the eight economic development zones. The agency participates in the consultative process required to develop an area-wide strategy for the Housing Opportunities for People with AIDS Program, and also works collaboratively with the Department of Homeless Services.

The AIDS programs funded by HOPWA NY NY and other funding streams include Facility Development and Facility Operations, Case Management, Housing Placement and Housing Services. The services HRA provides through HASA are closely coordinated with services provided by other agencies. HRA works closely with DOHMH's Bureau of HIV/AIDS Services which is responsible for planning and coordinating public policy and programs regarding AIDS in New York City. HRA's Office of Domestic Violence also works closely with other agencies as well as the Mayor's Commission to Combat Family Violence.

HRA and the Department of Homeless Services (DHS) have formed an impressive collaboration through the implementation of the NoVA (No Violence Again) Program. HRA's NoVA staff are located at the DHS shelter intake location(s). DHS staff refer clients who are presenting with issues related to domestic violence to HRA's NoVA staff. The clients are assessed and if eligible, they are referred to domestic violence shelters or to DHS shelters with NoVA caseworkers who provide domestic violence support services. This collaboration helps to ensure the clients' safety and helps connect them to domestic violence services.

Department for the Aging

The overall mission of the agency is to work for the empowerment, independence, dignity and quality-of-life of New York City's diverse older adults and for the support of their families through advocacy, education and the coordination and delivery of services. As the largest federal Area Agency on Aging in the country, DFTA produces a Four Year Plan, updated through an Annual Plan Summary, which outlines needs and plans in all

areas of services to the elderly, including community development and housing. The Plan is widely distributed and available on the DFTA website. Public hearings are held annually in each borough on the Plan, which provides an opportunity for comment from the community.

DFTA also meets with community boards and participates in regular meetings with a Senior Advisory Council and Interagency Councils on Aging to further identify and address needs. These councils comprise a variety of community-based organizations and representatives.

In addition, the Department's Office of External Affairs regularly seeks input, feedback, and ideas from local communities. There is an intergovernmental representative for each borough who meets regularly with local organizations and programs and sits on relevant community-based committees.

DFTA collaborates with other government agencies, service providers, the private sector, and elderly consumers to plan and advocate for housing resources that will meet the changing financial and physical needs and environmental preferences of the City's diverse and growing older population.

More than 75 of DFTA's 256 senior center sites are located in New York City Housing Authority facilities located throughout the five boroughs. DFTA also funds eight NORC (Naturally Occurring Retirement Communities) sites in NYCHA developments. DFTA and NYCHA collaborate on outreach campaigns to notify seniors when there are public housing vacancies for senior-only units in their area.

The Assigned Counsel Project, a pilot project that assists seniors who are in court and have received eviction notices, receives referrals from the Senior/Disabled Help Desk at Brooklyn Housing Court, Queens Housing Court, and NY Civil Court in Manhattan. Seniors are provided free legal assistance and social services.

The Senior Housing Initiatives Unit works with other governmental and non-profit agencies to augment services that enable seniors to continue living safely at home and to provide current information on low-income senior housing in NYC.

Mayor's Office for People with Disabilities

The Mayor's Office for People with Disabilities (MOPD) was established in 1973, and is responsible for formulating City policies concerning people with disabilities, and for coordinating and overseeing City compliance with related laws. MOPD also disseminates information and promotes programs to ensure that the rights and interests of people with disabilities are protected and supported. The Office works with various levels of government, non-profit service providers, advocacy groups and individuals in the formulation of City policies, and in some cases, assists in implementing them, e.g., MOPD's involvement with HPD in developing a separate lottery for apartments set aside for people with disabilities as required by Section 504 of the Federal Rehabilitation Act.

As noted in the section covering Institutional Structure, MOPD is a member of the City-wide ADA Task Force/Inter-Agency Disability Committee (IADC), which has the responsibility for formulating the City's approach regarding compliance with the Americans with Disabilities Act (ADA) and for helping City agencies to comply with the ADA. The IADC consists of representatives from each City agency. It addresses, among other things, the City's programs, benefits and services, including construction of housing such as the Department of Homeless Services' shelters and the Human Services Administration's domestic violence shelters. The IADC is also concerned with the provision of services for people with disabilities in these programs and housing related programs provided by HPD.

MOPD provides basic fair housing information and referrals to people with disabilities and to housing providers. (See Volume 1, Part I., Action Plan, Program Descriptions for two housing service programs, Housing, Information and Education, and Project Open House.) MOPD also holds training sessions for personnel from City agencies concerning compliance with the ADA and Section 504 of the Rehabilitation Act, as well as with local human rights laws that prohibit discrimination on the basis of disability.

Further, MOPD maintains a website that provides a wide array of resources, including its Disability Community Resource Network, a new online search tool for New Yorkers who want to find organizations that support people with disabilities; information regarding the Disabled Rent Increase Exemption, which provides a rent freeze to qualified disabled tenants; and information about city housing programs affecting the disabled community provided by other city agencies.

MOPD is also a partner of the Affordable Housing Resource Center, a multi-agency partnership where the user will find information on all aspects of City housing, including renting an apartment, buying a home, and apartment maintenance issues.

Department of Youth and Community Development

The Department of Youth and Community Development provides services to runaway and homeless youth through a network of non-profit community-based organizations. These organizations are chosen to receive funding through a competitive Request for Proposals (RFP) process. The New York City Council has enhanced the RHY contractor awards by adding additional funding to this program area. This portfolio of contracts is funded by a combination of City tax levy funds and State funds provided through the NYS Office of Children and Family Services (OCFS) and includes Emergency Shelter Grants through the United States Department of Housing and Urban Development.

The Department of Youth and Community Development is the designated Community Action Agency for New York City and as such is the recipient of federal Community Services Block Grant (CSBG) funds. New York City's CSBG program provides a broad range of services that combat poverty, offer emergency services to low-income people, and empower individuals to achieve self-sufficiency. These services revitalize low-income communities, designated as Neighborhood Development Areas (NDAs). Funded programs include economic development, youth and adult employment, literacy instruction, domestic violence intervention, immigrant support, fatherhood, housing assistance, senior services, health care, academic support and youth leadership activities.

Administration for Children's Services

The Administration for Children's Services works closely with partners in all levels of government to assist and support birth parents, foster parents and young people in obtaining housing. Our goal is to help families remain safely together, reunify families after children have come into foster care, and support youth transitioning out of the foster care system.

On a City level, ACS works with the Department of Homeless Services, the Department of Youth and Community Development, the Department of Education, the Department of Health and Mental Hygiene, the New York City Housing Authority, the Housing Preservation Department, and the Human Resource Administration to address issues and exchange information in an effort to improve outcomes for young people living in foster care and aging out of the system.

In August 2002, ACS worked with NYCHA to create the Family Unification Priority (FUP) Code Program which gives a priority admission code for NYCHA's Section 8 housing vouchers to qualified ACS families whose only impediment to reunification was housing. Through this program, ACS was able to help obtain a voucher for qualified families served by ACS, which would help keep families together when appropriate and safe, and reduce the amount of time some children may have spent in foster care. In addition, the Administration created, a priority admission code program to help secure Section 8 vouchers for young adults leaving foster care who have a goal of Independent Living. ACS, in cooperation with the New York City Housing Authority, has also established a priority access admission code to NYCHA Public Housing units for our families and youth aging out of care. This program offers our families a reliable option to obtain stable, affordable housing so that they can be reunified with their children in care or in the case of young adults leaving foster care, an opportunity to achieve a goal of independent living. ACS and NYCHA share information so that ACS staff can track the progress of applications for housing to ensure families and youth have submitted appropriate and

complete applications. In December of 2009 the NYCHA Section 8 program was put on hold, effectively closing an avenue of support for families reunifying with children who are about to leave foster care, and those youth who are transitioning from foster care to independent living in the communities of New York City.

ACS also collaborates with the Department of Homeless services (DHS) in identifying available housing for our families. Between the two agencies is a continual exchange of information to identify families who come in contact with both systems and to work together to determine the best services to be put in place to support such families entering and leaving shelter. ACS staff are located at PATH so that they can help DHS identify the families known to child welfare, and ensure services are maintained and that children remain safe.

ACS is a full partner in the NY/NY III initiative, a partnership between New York State and New York City to provide supportive housing for youth aging out of care who need help in maintaining an apartment. ACS is the placement entity for the youth beds. NY/NY III is supportive housing for special distinct populations. These populations include but are not limited to; chronically homeless single adults with disabilities, families in which the head of households has been diagnosed with disabilities and youth transitioning out of Foster Care. Supportive housing is affordable housing with a social services component. This housing will be either (1) 'congregate' or (2) 'scattered site', in which individual apartments are rented from existing market housing throughout the city. In 2008, 200 units (100 congregate and 100 "scattered" sites) have been dedicated to NYC young people to ensure that they have adequate housing and support upon leaving our care.

New York City Empowerment Zone

The New York Empowerment Zone (NYEZ) is an economic development initiative that uses public funds and tax incentives to encourage private investment and job creation in Upper Manhattan and the Bronx. The NYEZ's goal is to provide its residents with the necessary tools to revitalize their communities and build new roads to economic self-sufficiency.

Congress enacted the Empowerment Zone Program as part of the Omnibus Budget Reconciliation Act of 1993 to stimulate economic growth in distressed areas. The New York Empowerment Zone began operations in January 1996. New York City has committed \$100 million to the New York Empowerment Zone, as have the State and Federal governments, for an aggregate of \$300 million.

The Zone is governed by The New York Empowerment Zone Corporation, which is maintained by the City and State. The NYEZ Corporation Board of Directors consists of designees of the City, State, 16th Congressional District, 15th Congressional District, the Upper Manhattan Empowerment Zone Development Corporation, and the Bronx Overall Economic Development Corporation.

The fundamental mission of the Corporation is to assist the two local development corporations: The Upper Manhattan Empowerment Zone Development Corporation (UMEZ), representing the Upper Manhattan portion of the Zone, consisting of West, Central and East Harlem, Washington Heights and Inwood, and the Bronx Overall Economic Development Corporation (BOEDC), representing the Bronx portion of the Zone consisting of High Bridge, Mott Haven, Port Morris and Hunts Point. The Corporation facilitates the cooperation and engagement of State and City government entities in order to achieve strategic plan goals with regard to budgeting and payment of committed funds. Since the Zone was designated, the NYEZ Corporation has approved and committed over \$220 million in loans and grants for implementation of initiatives and projects.

Local Development Corporation Responsibilities

The Upper Manhattan Empowerment Zone Development Corporation (UMEZ) and the Bronx Overall Economic Development Corporation (BOEDC) are the two designated Local Development Corporations that develop and administer initiatives in the Zone. Their mission is to expand the range and scope of economic activity, enhance capital opportunity for local businesses and institutions and improve the quality of life for residents, workers and visitors. Their duties include: 1) developing initiatives; 2) evaluating and modifying their

Strategic Plans; 3) providing opportunities for involvement of the community; 4) selecting service providers and vendors for Zone programs and projects consistent with procurement rules; and 5) monitoring performance.

Businesses of all sizes in the Zone benefit from its available resources. In addition to attracting large, national retail companies to Harlem and the South Bronx, EZ investments in small businesses increase their access to capital and provide technical assistance, in order to create jobs for local residents and address neighborhood retail needs. The EZ has also targeted the stabilization and growth of cultural institutions in Harlem and the Bronx as part of an overall strategy to re-energize these areas as unique cultural and shopping destinations.

UMEZ and BOEDC have created more than 9,000 jobs in the Empowerment Zone as of December 31, 2010.

UMEZ Activities in the Empowerment Zone

UMEZ is guided by a four-pronged strategy: 1) strengthening arts and cultural organizations to drive tourism, 2) making large-scale business investments in major real estate projects, 3) providing access to capital and technical assistance (TA) to small business, and 4) funding workforce development programs.

The UMEZ authorized funds to support the following programs:

- National Jazz Museum – Authorization of a \$600,000 grant for capacity-building project and support the organization’s staffing and overall development.
- East Harlem Business Capital Corporation – Authorization of a \$507,500 grant to provide free based services for TA, draft business plans and perform business workshops for small businesses in East Harlem.
- Audubon Partnership for Economic Development – Authorization of a \$453,900 grant to provide free based services for TA, draft business plans and perform business workshops for small businesses in Washington Heights and Inwood.
- Harlem Business Alliance – Authorization of a \$451,400 grant to provide free based services for TA, draft business plans and perform business workshops for small businesses in Central Harlem.
- New York Women’s Chamber of Commerce – Authorization of a \$451,200 grant to provide free based services for TA, draft business plans and perform business workshops for small businesses in East Harlem.
- Northern Manhattan Arts Alliance – Authorization of a \$250,000 grant to support progress towards long term sustainability.
- BRISC Administrative Budget – Authorization of a \$423,350 administrative budget for fiscal year 2012.
- UMEZ Marketing – Authorization of \$120,000 to supports its marketing, communications and promotions efforts in support of economic revitalization in Upper Manhattan.
- UMEZ Administrative Budget – Authorization of a \$3,289,207 administrative budget for fiscal year 2012

BOEDC Activities in the Empowerment Zone

BOEDC continued its focus on supporting not-for-profits in the Bronx Empowerment Zone.

- Society for Equitable Excellence – Authorization of a \$40,000 grant to perform feasibility study for the construction of a planetarium and science center.

- Bronx Children's Museum – Authorization of a \$500,000 grant to develop the master plan and other for soft cost related to the construction of the Museum.
- BOEDC Administrative Budget – Authorization of a \$675,000 administrative budget for fiscal year 2012.

HPD Activities within the Empowerment Zone

In addition to the thousands of units of housing HPD has already assisted in the New York City Empowerment Zone, HPD currently has approximately 18 housing projects in various stages of development located within the Zone. They encompass a broad range of HPD's new construction efforts, including the Cornerstone Program, the Low Income Rental Program, the Mixed Income Rental Program, the Multifamily Homeownership Program, the NYCHA Collaborative, the Supportive Housing Program, the Section 202 Supportive Housing Program for the Elderly, and Habitat for Humanity. The 18 projects will result in approximately 1,231 units of housing. In the last ten years, HPD has initiated a total of 375 projects within the Zone, resulting in approximately 27,873 units of housing.

Coordination with Empowerment Zone

City of New York

There is a partnership between the City of New York and the two local development corporations responsible for the development and investment in the Empowerment Zone. A representative of the Mayor's Office has served as part of the New York Empowerment Zone coordination team since its original designation. This representative, currently the Deputy Mayor for Economic Development, oversees full-time staff assigned to the Empowerment Zone from the Office of the Mayor.

UMEZ and BOEDC work closely with City agencies, including the Economic Development Corporation, Department of Small Business Services, Department of Housing Preservation and Development, and the State's Empire State Development Corporation, in the areas of site location/acquisition, business and real estate development, and workforce development.

Please call the Mayor's Office New York City Empowerment Zone at (212) 788-8422 for more information.

Private Sector

The NYEZ uses its public investment pool of \$300 million to encourage private investment in Upper Manhattan and the South Bronx. As of June 30, 2009, the NYEZ has leveraged more than \$850 million in private investment.

EZ Tracts

The Upper Manhattan portion of the New York Empowerment Zone includes Central, East and West Harlem, Inwood and Washington Heights. The South Bronx portion includes Hunts Point, Port Morris, Mott Haven and the Yankee Stadium/Highbridge area.

Coordination with the Consolidated Plan

The NYEZ is fully consistent with the Consolidated Plan. In fact, many of the goals identified in the Empowerment Zone program for Upper Manhattan and the South Bronx are identical to the Plan's basic goals.

H. HOME HUD Requirements

Described in this section is the federally required information related to the City's use of HOME Investment Partnership entitlement funds: 1) HOME Resale Provisions; 2) Forms of Investment; 3) Affirmative Marketing/Minority and Women Business Enterprises, including Affirmative Marketing Strategies, Minority/Women Business Enterprises, Equal Opportunity and Fair Housing, and, Employment and Training.

1. HOME Resale Provisions

The City plans to continue to use HOME funds to support the development of affordable homes for first time low-income home purchasers. The City has established a number of different HOME ownership models involving a variety of subsidy forms including down payment assistance and direct mortgage loans (to cover contributions of cash and/or real property). For a full description of the various subsidy mechanisms the City may employ please refer to the next section of the Action Plan entitled "Other Forms of Investment". As required, this section outlines the City's policies and procedures regarding the resale restrictions to be used in conjunction with these efforts.

The City currently operates a number of homeownership programs, including the Nehemiah and Partnership Programs, which are designed to produce affordable homes for low- and moderate-income homebuyers. In addition, the City administers a variety of programs, designed to sell multifamily apartments as low-income cooperative units. In each case, the City has already established a subsidy recapture mechanism designed to allow the initial homeowner an opportunity to earn a fair return on his or her investment at resale, while simultaneously affording the City an opportunity to recoup a portion of the public funds provided to the assisted home.

In all of these instances the City's resale/recapture system could be classified as some form of the "diminishing subsidy" model or the "shared equity" approach that were "preapproved" by HUD. In some cases the City will employ a combination of these models. But while the recapture provisions share the same basic structure, it is important to note that each of the programs the City operates utilizes a slightly different subsidy recapture provision. These differences are necessitated by the different structures of the various programs. For example, in the single family homeownership programs, the purchasers are required to invest a significant amount of personal equity as a down payment, while in many of the low income cooperative programs the units are sold at a nominal price and owner equity is almost nonexistent. Similarly, in some cases the programs are targeted to very low income families and the amount of City subsidy may be extremely large, while in other cases the program is designed to serve families at the top of the low income bracket and the amount of the public subsidy is necessarily less.

As a result, the City has selected a range of different resale/recapture models for use in conjunction with HOME funds.

In the majority of HPD's homebuyer assistance programs funded with HOME, the deed or other conveyancing documents and the subsidy lien on the property will include a covenant limiting the resale of the property to families at or below 80% of the then applicable area median income, who will occupy the property as their principle residence. In addition, the resale price of the units will be restricted for the first 20 years (15 years in the case of rehabilitation units) to an amount that is "affordable to a family earning at or below 75% of the median income".

In order to determine the exact amount of funds to be recaptured, each HOME homeownership program the City operates will use or have used one, or a combination of the five basic models, described below:

Model 1

The public subsidy (including the HOME funds) will be issued in the form of a zero interest-evaporating loan. This loan will diminish on a straight-line basis over its term. (The majority of these loans will be either 20 years

or 15 years depending on the length of the HOME compliance period). The outstanding amount of the public subsidy will be due only on sale and then only from profits. The debt will be payable at a rate of 50 cents for each dollar of profit. For example, if an owner originally bought a home for \$70,000 and sold it for \$90,000, the \$20,000 would be declared profit. Fifty percent of that would go to repay the City (assuming the outstanding balance is that high) and the remaining 50% would go to the owner. In a stable market, this method should ensure that the owner recaptures his or her entire equity and enjoys an additional return on that equity in the form of profit from sale.

Model 2

The public subsidy (including the HOME funds) will be made in the form of a zero interest forgivable loan. The amount of this loan will remain constant throughout the compliance period. Once the compliance period ends this loan may be forgiven by the City. Again during the compliance period, the debt will only be due on sale and then only if there is a profit between the price the original owner purchased (including his/her equity contribution) and the price he or she sold the project. While this system may appear to be more restrictive than Model 1 which allows the owner free and clear access to 50% of the profits, it will only be used in situations where there is a relatively certain prospect for sales profits in excess of the amount of the City's lien.

Model 3

The public subsidy would be made in the form of an evaporating loan. This loan will be completely dissolved after three years. During the three-year period the balance would be due only at resale and then only to the extent that the resale price exceeded the original price. The outstanding balance would be payable at a rate of 50 cents for each dollar of profit (see model #1). After the three-year "holding period" the owner would be allowed to enjoy all the profits through sale free and clear. However, the City will continue to hold the lien on the property in the full amount of the initial subsidy and the assistance shall be characterized as a conditional grant throughout the 20-year compliance period. This lien would only come into play if the owner were found to have violated any of the HOME rules. This model provides the least restrictions on the owner and would only be used in situations where the opportunity for profit was already tightly capped by the existence of the restrictions on resale price.

Model 4

The public subsidy will be made in the form of a zero interest forgivable loan. The outstanding principal of this loan will be payable only on sale and then only to the extent that the owner enjoys a profit on the sale. In addition to the basic HOME requirement that the unit be sold to a family earning less than 80% of the median, at a price which is affordable to a family at or below 75% of area median income, in this model the owner will only be allowed to recapture his or her equity and the value of any improvements he or she made to the property and potentially an allowance for any increase in the cost of living. Additional funds earned through the sale will be due to the City. In the case of a cooperative unit, the City may agree to assign their interest or a portion of this interest to the cooperative itself. Since this model affords the owner little opportunity to realize a substantial financial gain through ownership it will be used only in those circumstances where the purchaser is only investing a nominal amount of equity and is not required to secure a mortgage to buy his or her home.

Model 5

The public subsidy will be made in the form of a zero interest loan that may be forgiven after the period of HOME compliance. The outstanding principal of this loan will be due only on sale and then only to the extent that the owner enjoys a profit on the sale. This loan will be payable at a rate of 40 cents on each dollar of sales profit. In the case of a low income cooperative, the City may agree to assign their interest or a portion of the interest to the cooperative itself and may also choose to require the owner to provide up to 75% of his or her remaining profit to the cooperative. This method should allow the owner to enjoy a reasonable gain from sale while preventing a windfall profit through resale.

Each of the above models involves substantial forgiveness of HOME funded homeownership loans (as well as direct City funded contributions) with the specific intent of limiting the homeowner's financial indebtedness and insuring that he or she will be able to earn a fair return on his or her investment. In all cases, the City's resale

system will ensure that the statutory limitation on resale price will not unduly limit the owner from recouping his or her initial equity investment and receiving all or a portion of any additional sales proceeds. However, in light of the many real estate markets and sub-markets currently operating in New York City and in recognition of the varied equity requirements the City intends to impose on purchasers, it is not feasible, nor advisable, to set one specific number (or index) as a fair return on equity. Instead fair rate of return will be defined as an appropriate percentage of resale profits as outlined in the specific models presented above.

Additionally the City like the Federal government cannot provide an iron clad guarantee that the overall real estate market will improve or that each individual owner's property will appreciate in value. All the City can do is ensure that the specific resale restrictions imposed by the program do not unduly hamper the owner's ability to enjoy what profits the property does generate. Like all homeowners, each individual purchaser must assume some risk that his or her property may not increase in value. However, this event is very unlikely in light of the below market price for which the owner originally purchased the property, and the extremely tight market which exists in New York City for property at affordable rates.

An additional model, proposed and approved in FFY'94, established an alternative resale system for potential use in the City's HOME program. Under this model, owners would not be required to commit to sell their property to other eligible purchasers. In return however, the HOME-assisted owner would be required to repay the full HOME investment from net sales proceeds. For these purposes, the net sale proceeds would be defined as sales price minus loan repayment and closing costs. Thus in those instances where the sales price is not sufficient to provide the owner with the capital necessary to retire his mortgage and cover his transaction cost, no repayment of the HOME subsidy would be required.

In instances where the proceeds are not sufficient to provide for a full recapture of the HOME subsidy, and allow the owner to recoup his or her equity (down payment plus principal payments, and any documented capital improvement investment) the City will forgive all or a portion of the HOME subsidy. The HOME subsidy will be forgiven on a pro-rated scale based on the number of years in occupancy. In no event will the city forgive the entire HOME subsidy before a period of at least three years has elapsed.

In addition, the HOME subsidy is to be forgiven in order to allow the owner to recover his or her investment. In no event shall the HOME subsidy be forgiven in order to allow a homeowner to receive more than the amount of his or her equity and the value of any capital improvements. In those instances where net sales proceeds are sufficient to repay the entire HOME subsidy and allow the owner to recoup his or her full investment, the owner may be allowed to retain any excess.

Finally as required in the HOME regulations, any HOME investment that is recaptured by the City is required to be reinvested to assist other first time home-buyers.

2. Forms of Investment

The City uses many, if not most, of the approved subsidy forms cited in the regulations and listed below:

- Interest bearing loans or advances;
- Non-interest bearing loans or advances;
- Deferred payment loans;
- Grants;
- Interest subsidies;
- Equity investments;
- Tenant-Based Rental Assistance; and
- Downpayment Assistance.

The newly authorized loan guarantee mechanism will be explored, but will not likely be used during 2012. At present, we are not requesting authorization to use a form other than one of the basic forms preapproved by

HUD. However, the City would like to reserve the right to request permission to utilize another subsidy mode at some point in the future.

In certain circumstances the City will also consider using HOME funds to refinance existing debt in connection with the rehabilitation of multifamily housing. Eligible projects may be located anywhere in the City. Under no circumstances will HOME funds be used to refinance multifamily loans made or insured by any Federal program, including CDBG. In addition, the guidelines established by HPD require that 1) the multifamily housing undergoing rehabilitation and refinancing is and will continue to provide affordable housing to low-income families, 2) rehabilitation must be the primary eligible activity for which at least 60 percent of the HOME funds are used, 3) eligible projects must require a minimum level of rehabilitation of \$10,000 per unit, 4) a maximum of 40 percent of HOME funds may be used for the refinancing of existing debt, 5) the use of HOME funds must be conditioned upon a low income affordability period of a minimum of 15 years, and 6) HPD must review the management practices of the property owner to insure that disinvestment has not occurred, that the long term needs of the project can be met and that the feasibility of serving the targeted population over at least a 15 year affordability period can be demonstrated.

In most cases, the specific form of the City's subsidy will be easily identifiable as one of the eight broad types listed above. For instance, we are currently utilizing forgivable advances and low interest loans. However, in rare instances the specific type of subsidy we are using may not be readily apparent to some observers. For example, in the case of a City-sponsored program to rehabilitate the occupied low income In Rem housing the City currently owns and manages, the HOME funds would be used to pay contractors for services and equipment necessary to renovate the building. Although the City expects to undertake such projects in limited cases, HPD believes the City's subsidy can easily be classified as either a grant to the building or an equity investment on the part of the City as long as we continue to own the units the City improves.

3. Affirmative Marketing/MBE-WBE Outreach

Affirmative Marketing Strategies

Section 92.351 of the HOME regulations requires that participating jurisdictions adopt affirmative marketing procedures for HOME-assisted housing containing five or more housing units. HPD has adopted appropriate affirmative marketing procedures and requirements for providing information regarding the availability of such units in HOME-assisted projects.

The Office of Development, the Office of Housing Operations, the Office of Planning & Intergovernmental Affairs and the Office of Community Partnerships provide information to attract eligible persons from all racial, ethnic and gender groups in the City of New York to available housing.

It should be noted that HPD does not directly rent units in privately owned housing but ensures that funding recipients, i.e. owners, sponsors, developers, etc. participating in HPD programs adhere to the affirmative marketing strategy in compliance with HUD HOME regulations. HPD instructs recipients of HOME funds of methods of informing and soliciting applications from persons in the housing market area who are not likely to apply for the housing without special outreach. Such methods include advertising in various newspapers or contacting community organizations. HPD's marketing plans have been reviewed and approved by HUD.

An affirmative marketing plan describing the efforts to be undertaken to affirmatively market HOME assisted vacant units must be submitted for review and evaluation in order to receive clearance from HPD's Office of Community Partnerships to proceed with a project. In addition, HPD requires recipients to submit documented information (tenant applications, copies of advertisements and outreach materials, and any documented responses to outreach efforts) demonstrating the recipient's efforts to affirmatively market HOME-assisted vacant units. Where it is determined that the agreed upon plan was not followed, HPD will consider on a case-by-case basis, whether the agency should continue to do business with that recipient. Where it is determined that the agreed upon plan was inadequate, HPD will assist the recipient in improving the affirmative marketing plan.

When City-owned housing is upgraded and disposed of using HOME funds, the Agency will ensure that all new owners and managers adopt affirmative marketing procedures.

In general, HPD will create and adopt methods for informing the public, owners and potential tenants about Federal fair housing laws and New York City's affirmative marketing policy. HPD will also provide training in fair housing laws for property managers and staff involved in tenant selection. Press releases, solicitations, application packages and informational brochures will include the Equal Housing Opportunity logotype and slogan. The Fair Housing Unit of HPD's Office of Community Partnerships will augment these efforts through the continuing management of locally based fair housing counseling offices located throughout the city. The Fair Housing Unit will also investigate complaints of discrimination in the marketing and rental of HOME assisted units.

Minority/Women Business Enterprise

In accordance with Section 281 of the HOME Investment Partnerships Act and Section 92.350 of the HOME regulations, HPD has established an outreach program to ensure the inclusion and participation, to the maximum extent possible, of minority and women business enterprises (M/WBEs) in contracts funded in whole or in part through the HOME program. The outreach consists of a good faith, comprehensive and continuing endeavor supported by a key ranking staff person with oversight responsibilities and access to the Commissioner. The outreach program is comprised of the following initiatives:

- 1) Development of a systematic method for identifying and maintaining an inventory of certified M/WBEs, their capabilities, services, supplies, and or products;
- 2) Utilization of direct mailings and the local media, electronic and print to market and promote contract opportunities.
- 3) Development of informational and documentary materials on contract opportunities for M/WBEs;
- 4) Sponsoring and attending business opportunity related meetings, conferences and seminars targeting M/WBEs; and
- 5) Maintenance of centralized records with statistical data on the utilization and participation of M/WBEs as contractors and subcontractors in all HOME assisted contracting activities.

Equal Opportunity and Fair Housing

In accordance with Section 92.350 of the HOME regulations, "no person in the United States shall on the grounds of race, color, national origin, religion or sex be excluded from participation in, be denied the benefits of, or be subjected to any discrimination under any program or activity funded in whole or in part by HOME funds". In addition, HOME funds will be made available in accordance with the following federal statutes and regulations:

- Fair Housing Act;
- Executive Order 11063 (Equal Opportunity in Housing);
- Title VI of the Civil Rights Act of 1964 (Nondiscrimination in Federal Programs);
- Age Discrimination Act of 1975;
- Section 504 Rehabilitation Act of 1973;
- Executive Order 11246 (Equal Employment Opportunity);
- Section 3 of the Housing and Urban Development Act of 1968; and
- Executive Orders 11625, 12432, and 12138 (Minority/Women's Business Enterprise).

Employment and Training

Opportunities for training and employment arising from the HOME program will be provided in accordance with Section 3 of the Housing and Urban Development Act of 1968, as amended. The City will "demonstrate compliance with the 'greatest extent feasible' requirement" of Section 3 by meeting the goals set forth for providing training, employment, and contracting opportunities to Section 3 residents and Section 3 business concerns.

I. HOPWA Eligible Metropolitan Statistical Area (EMSA) Grantee Requirements

The County of Putnam (P-OTR-404)

Funding: \$66,511

The County of Putnam will provide continued funding for tenant-based rental assistance to people who are HIV-positive or have AIDS. These programs will be administered through the Putnam County Department of Social Services in Carmel, New York. The project's goal is to enable people with HIV/AIDS to secure and maintain housing appropriate to their needs. This goal will be achieved through the combination of:

- Outreach to appropriate clients who utilize supportive services throughout the County;
- Identification of appropriate clients through referrals from the Department of Mental Health, the Department of Health Services, the Department of Social Services, Volunteers of America, and ARCS.

In order for the funds to have immediate impact, it will be necessary to have a quick turnaround of one month between application and assistance. Additionally, it is reported that security deposits and realtor fees are a major block to housing for persons with AIDS and will be identified as an appropriate eligible expense. The majority of the funding will go directly to rental assistance and short term rent. Part of the administrative funding will be for the development of housing information, and for the identification of housing resources.

The approximate costs of the activities are as follows:

Tenant-based Rental Assistance	\$64,485
Project Sponsor Administrative Expenses	\$2,026

The services will be provided throughout Putnam County. The project sponsor will be the Putnam County Department of Social Services.

The main referral sources to the program will be the Putnam County Department of Social Services, the AIDS Related Community Services (ARCS) of Putnam, and Putnam Family and Community Services, Inc. ARCS performs extensive outreach with high-risk populations and publicity regarding their services is comprehensive. Additionally, ARCS maintains regular contact with AIDS self-help support groups and facilitates other support groups for family members. Volunteers of America and ARCS will continue to be the primary referral sources for clients residing in Putnam County.

The HUD Performance Objective and Outcome for all of the services is Affordability for the purpose of providing Decent Housing.

The County of Rockland

Funding: \$409,458

The County of Rockland will utilize \$265,000 to finance a tenant-based assistance program with the client/household portion of the rent payment, plus the Department of Social Services shelter allowance for qualifying households.

The County will continue to operate a tenant based assistance program with legal and counseling services, modeled after the Section 8 Housing Voucher Choice program with two modifications. First, households will be eligible up to the low-income level (80% of medium) as opposed to 50% as in Section 8. Past experience shows that approximately 80% of the assisted households still fall in the very low-income grouping. Second, the County will allow a greater number of bedrooms than in the Section 8 program if medically appropriate.

The County of Rockland will also utilize funds for a second HIV/AIDS housing complex with a tenant based rental assistance program, bringing the total count of assisted persons and their families to 34.

Determination of eligibility, screening and assistance in finding suitable apartments is done through the coordinated efforts of the Department of Health. The Office of Community Development handles enrollments, recertifications, and day-to-day client services.

Tenant Based Rental Assistance (Rockland County Office of Community Development)	\$265,000
Counseling Services (Rockland County Health Department)	\$35,000
Legal Services (Legal Aid Society of Rockland)	\$35,000
Client Services (Rockland County Office of Community Development)	\$74,458

All of the services are for the clients enrolled in the TBRA program.

The HUD Performance Objective and Outcome for all of the services, including the TBRA program, is Affordability for the purpose of providing Decent Housing.

The County of Westchester (P-OTR-406)

Funding: \$2,019,229

The County of Westchester is administering the HOPWA funds for the Cities within Westchester County. In Grant Year 2012, the Cities of Mount Vernon and Yonkers and the County of Westchester plan to utilize HOPWA funds for rental assistance and supportive services. The 2012 Amended Consolidated Plan incorporates the program and funding descriptions for the County of Westchester and cities of Mount Vernon and Yonkers. The County of Westchester will allocate funds to:

Westchester County Programs	\$1,244,408
Westchester County Administrative Expenses	\$60,575
City of Yonkers	\$357,000
City of Mount Vernon	\$357,246

Westchester County Programs

In Grant Year 2012, Westchester County will use \$875,408 of HOPWA funds to continue operating its Rental Assistance Program with Case Management Services. The County will use HOPWA funds based on the needs for permanent housing for persons living with HIV/AIDS and their families. Approximately 85 households will receive rental subsidies assistance under the Tenant-Based Rental Assistance Program. These programs will be administered by Grace Church Community Center, Inc. (GCCC). Based on the HOPWA waiting list from GCCC, there is an unmet need for permanent supportive housing for individuals with HIV/AIDS. HOPWA funds will be used to provide at least 85 households with case management services for each client. Due to the poor physical health of program participants, they are less likely to work and, thus, more likely to rely upon social security income and other forms of public assistance, including HOPWA, to pay their housing costs.

The Grant Year 2012 allocation will be used to support this program for an additional 12 months by providing:

Tenant-Based Rental Assistance Program (TBRA)	\$875,408
Supportive Services (case management services, per diem clinician, HQS inspector and other supportive services)	\$369,000
Total	\$1,244,408

These services will address the following *HUD Performance Objectives and Outcomes*:

TBRA: Affordability for the purpose of providing Decent Housing.

Supportive Services: Availability/Accessibility for the purpose of providing Decent Housing.

The County will contract with an experienced not-for-profit housing provider to administer the HOPWA Tenant-Based Rental Assistance Program. It is anticipated that this organization will accept pre-applications for its waiting list from the Ryan White Emergency Assistance Program, service providers from the HIV Care Network of the Lower Hudson Valley, not-for-profit organizations, the Department of Social Services, and through word of mouth. The administering agency will continue to identify alternative, affordable, quality housing options and to provide counseling and referrals to supportive services. Case plans will be developed for each participating PLWH/A and any immediate family members to identify needed essential services. The Rental Assistance Program will continue to use existing linkages to service providers and case management programs to provide the required supportive services.

The Rental Assistance Program helps eligible individuals and families who: 1) face imminent eviction from their residences; 2) are required to move for health-related reasons; or 3) are homeless and unable to locate permanent housing. Rental assistance is made available to persons who are eligible for public assistance and other entitlements. Clients are served on a first come, first served basis under program priorities of: 1) persons with AIDS (PWAs); 2) persons with an AIDS-related condition; and 3) persons diagnosed as HIV/Symptomatic. Eligible persons are entitled to receive this assistance for a period of up to one year. Extensions may be granted based upon need and continued HOPWA funding. The program is available to Westchester County residents or persons whose last permanent address was in the County.

The greatest unmet need among the HIV infected and affected populations is for better housing and rental assistance. In accordance with New York State Department of Health, the total number of persons living with HIV and/or AIDS in Westchester County as of December 2009 was 3,886 excluding prisoners. The HOPWA Rental Assistance Program directly addresses this need.

Housing opportunities for PLWH/A, both permanent and transitional, are extremely limited in Westchester County. Shelter accommodations provide temporary housing to those choosing to identify their HIV-positive status to the Department of Social Services. In Westchester County, emergency housing resources for PLWH/A consist solely of the Valhalla Residence with 19 beds operated by Volunteers of America. St. John's Riverside Hospital (formerly Yonkers General Hospital) operates an AIDS Outreach Designated Center enabling them to reserve 12 inpatient beds for individuals with HIV/AIDS. The permanent housing targeted for this population is limited at this time and the demand for suitable housing grows as the number of AIDS cases grows. The Rental Assistance Program developed with HOPWA funds provides needed financial resources and supportive services targeted to low-income persons with HIV/AIDS. In addition, Ryan White Title I funds have been appropriated to establish a shallow rent and utility assistance program County-wide, which is administered by Grace Church Community Center and served approximately 160 individuals (unduplicated count) as of the end of the reporting period.

The Westchester County Department of Planning also provides funds for eviction prevention through the Emergency Shelter Grant (ESG) programs and the County recently awarded local funds to fund an eviction prevention program. Those funds flow through several neighborhood housing organizations that provide counseling, referrals, and arrears subsidies to households that are in danger of becoming homeless. These awards are used to provide assistance to eligible applicants throughout the Urban County Consortium communities. County funds will be used throughout the County of Westchester. In the past years, several clients assisted through this program have become eligible for Section 8 subsidies and have graduated from the HOPWA-funded program.

The City of Yonkers

The City of Yonkers proposes to use \$357,000 in Grant Year 2012 to fund services provided by Greyston Health Services and The Sharing Community to persons with HIV/AIDS. The following description lists the activities and budgets for each of these two organizations in Grant Year 2012.

1. Greyston Health Services – \$178,500

Greyston Health Services operates two programs for persons living with HIV/AIDS: Issan House, a permanent HIV/AIDS facility-based housing offers 35 single room occupancy units to single adults, and the Maitri Center, a state licensed adult day health care program. In Grant Year 2012, Greyston will use \$112,970 to continue to employ staff that will directly impact the ability of approximately 45 people living with HIV and AIDS and their families to retain housing. The primary source of clients comes from the enrolled population at the Maitri Day Program. The other main source of clients will be those who are on the waiting list for housing at Issan House, Greyston's on-site housing facility.

Greyston will also use \$65,530 of HOPWA funds toward the cost of preparing and providing food to approximately 17 persons living with HIV and/or AIDS who will reside at Issan House over a 12-month period. Issan House has been able to obtain County, Federal and State funds to cover basic operations and, for some residents, enhanced services. In order for Issan House to provide nutritional, balanced meals seven days a week that meet the requirements of PLWHAs, HOPWA funding is needed.

The HUD Performance Objective and Outcome for all of the Greyston Health Services' activities is Availability/Accessibility for the purpose of providing Decent Housing.

2. The Sharing Community – \$178,500

The Sharing Community will use \$46,368 for case management services to assist 14 eligible households to secure rental assistance through the HOPWA's Tenant-Based Rental Assistance Program. Sharing Community Staff will work closely with case managers to identify those clients that need housing assistance. It is expected that the case managers will provide clients with training on how to work with landlords, brokers, public agencies and other resources to locate and secure quality affordable housing. In addition, these case managers will help clients to develop realistic personal budgets, to determine how much they can afford for housing, to explore alternatives such as shared housing, and to access all available housing subsidies. The counselor will refer clients with landlord/tenant difficulties to CLUSTER's Housing Resource Center or to Westchester Legal Services. Case management services will be supported with other funding source.

The HUD Performance Objective and Outcome is Availability/Accessibility for the purpose of providing Decent Housing.

The Sharing Community will use \$132,132 to provide a tenant-based rental subsidies program to approximately 14 households for a period of one-year. By combining HOPWA funds with existing public assistance housing allowances, enhanced shelter allowances available to certain clients with HIV/AIDS, and rent subsidies available to selected homeless families receiving TANF who join Westchester Legal Services' Love v. Perales litigation, the Sharing Community will be able to provide housing subsidies for a much larger group of clients and thus enhance the program's cost-effectiveness. Each unit will be inspected to ensure that it meets HUD's Housing Quality Standards.

The HUD Performance Objective and Outcome is Affordability for the purpose of providing Decent Housing.

The City of Mount Vernon

The City of Mount Vernon is requesting \$357,246 to continue the operation of the Mount Vernon HOPWA Program.

Mount Vernon has the highest rate of HIV infection and the second highest number of persons living with HIV/AIDS of any municipality in the Hudson Valley Region. According to New York State Department of Health Bureau of HIV/AIDS Epidemiology as of February 2006, Mount Vernon accounts for 811 confirmed cumulative cases of HIV/AIDS. Requested funding will be used to provide the following services:

1. Case management and coordination of referrals to existing housing and supportive services for persons with HIV/AIDS.

Mount Vernon will use \$187,246 to continue to provide case management services and coordination of referrals. HOPWA funded case managers will provide intensive and comprehensive case management to more than 55 households (individuals and families) in Mount Vernon. Services will include, but not be limited to, assistance in accessing housing entitlements, budgeting, primary health care, advocacy, nutritional support, legal services, substance use and mental health programs, dental care, buddy/respice services, vocational training, emergency financial assistance and permanency planning. The case managers, along with the Director, also serve as HIV resources and provide technical assistance to the Department of Social Services, Mount Vernon Hospital, Mount Vernon Neighborhood Health Center, Planned Parenthood, the Council of Community Services and other community based agencies including the local homeless shelters (WestHELP, WESTHAB and Naomi House).

The HUD Performance Objective and Outcome is Availability/Accessibility for the purpose of providing Decent Housing.

2. Nutritional Services

The City of Mount Vernon will use \$80,000 to continue facilitating food distribution and deliveries to approximately 45 households. HOPWA will ensure that the nutritional needs of each program participant are met through menu planning by a part-time certified nutritionist and inspection of meal packages by the part-time nutrition coordinator. Program participants will receive pantry bags via pick-up or delivery twice a month.

The HUD Performance Objective and Outcome is Availability/Accessibility for the purpose of providing Decent Housing.

3. Financial assistance through rental subsidies for persons living with HIV/AIDS and their families.

The City of Mount Vernon will use \$90,000 to administer a Tenant-Based Rental Assistance Scattered-Site Housing Program. The program will serve approximately 15 individuals and their families of which at least six (6) HOPWA eligible households will be residents of the City of New Rochelle. The City also receives funding through a Continuum of Care for the Homeless Grant that will be used for additional housing subsidies.

The HUD Performance Objective and Outcome is Affordability for the purpose of providing Decent Housing.

**SUMMARY TABLE OF FUNDING SOURCES and PROPOSED ACCOMPLISHMENTS
NEW YORK, NEW YORK EMSA**

Project Code	Program Name	Amount	Amount Jurisdiction Expects to be Received in Federal Fiscal Year '12 (A)	Proposed Accomplishment (B)
	HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS - EMSA		\$2,495,198	*****
P-OTR-0404	RENTAL ASSISTANCE/COUNTY OF PUTNAM	\$66,511		Tenant-Based Rental Assistance (TBRA) 12 People Individuals and Families
P-OTR-0405	RENTAL ASSISTANCE/COUNTY OF ROCKLAND	\$409,458		Tenant-Based Rental Assistance (TBRA) 34 People Individuals and Families Support Services-Counseling, & Legal Serves 34 People Individuals and Families
P-OTR-0406	COUNTY OF WESTCHESTER County of WESTCHESTER	\$2,019,229		Tenant-Based Rental Assistance (TBRA) 85 Households (Individuals & Families) Support Services - Case Management 85 Households (Individuals & Families)
	City of Yonkers			Tenant-Based Rental Assistance (TBRA) 14 People Individuals and Families Support Services - Case Management 59 Households (Individuals & Families) Support Services - Nutriton Services (Meals for HIV congregate facility) 17 Individuals
	City of Mount Vernon			Support Services - Case Management 55 Individuals Tenant-Based Rental Assistance (TBRA) 15 Households (Individuals & Families) Support Services - Nutriton Services 45 Individuals

J. Certificate of Consistency Chart

The Cranston-Gonzalez National Affordable Housing Act enacted in 1990 requires that any application for federal housing, homeless assistance, supportive housing services, or community development programs must have a certificate of consistency with the Consolidated Plan, and in some cases as specified in the regulations a certificate of consistency with local plans and zoning. A certificate of consistency is denied if an applicant proposes activities that are not consistent with the Consolidated Plan.

In order to streamline this process, the following chart identifies: 1) the lead agency responsible for providing the certificate of consistency letter to an applicant; and 2) the Agency contact persons along with their telephone numbers, and FAX numbers.

If your organization intends to apply for funds, you must contact the appropriate agency at least two (2) weeks prior to the HUD deadline for applications. Your request for a certificate should be in writing on the applicant organization's letterhead and signed by the executive director of the organization. The letter should include: a brief history of the organization applying for funds; the name of the funding source; the amount of funds requested; what you intend to do with the funds; if appropriate, the number of people to be served; and if appropriate, the neighborhoods to be served.

CITY OF NEW YORK 'S CRANSTON-GONZALEZ HOUSING ACT CONSOLIDATED PLAN CERTIFICATE OF CONSISTENCY PROCESS
WITH THE CONSOLIDATED PLAN

HOUSING PROGRAMS	LEAD AGENCIES	CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER
HOPWA	DOHMH	John Rojas	347-396-7428	347-396-7559
HUD CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS Supportive Housing Program (SHP), Shelter Plus Care (S+C) and Section 8 Moderate Rehabilitation Single Room Occupancy (SRO)	DHS	Eileen Lynch	212-361-7957	212-232-0559
SECTION 202 SUPPORTIVE HOUSING AND ASSISTED LIVING CENTERS	DFTA	Karen Taylor	212-442-0917	212-442-1206
SECTION 811 SUPPORTIVE HOUSING	MOPD	Jason Mischel	212-788-2830	212-341-9843
FAIR HOUSING INITIATIVE PROGRAM	DCP	Charles Sorrentino	212-720-3337	212-720-3495
HOUSING COUNSELING PROGRAMS	DCP	Charles Sorrentino	212-720-3337	212-720-3495
UNIVERSITY AND COLLEGE PROGRAMS	DCP	Charles Sorrentino	212-720-3337	212-720-3495
YOUTHBUILD (U.S. Dept. of Labor Grant)	DCP	Charles Sorrentino	212-720-3337	212-720-3495
HOPE VI PUBLIC HOUSING REVITALIZATION	DCP	Charles Sorrentino	212-720-3337	212-720-3495
SECTION 213(A) REVIEW	DCP	Charles Sorrentino	212-720-3337	212-720-3495

K. Certifications

In accordance with the applicable statutes and the regulations governing the consolidated plan regulations, the jurisdiction certifies that:

Affirmatively Further Fair Housing -- The jurisdiction will affirmatively further fair housing, which means it has completed an analysis of impediments to fair housing choice within the jurisdiction, is taking appropriate actions to overcome the effects of any impediments identified through that analysis, and maintains records reflecting that analysis and actions in this regard.

Anti-displacement and Relocation Plan -- It will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended, and implementing regulations at 49 CFR 24; and it has in effect and is following a residential anti-displacement and relocation assistance plan required under section 104(d) of the Housing and Community Development Act of 1974, as amended, in connection with any activity assisted with funding under the CDBG or HOME programs.

Drug Free Workplace -- It will or will continue to provide a drug-free workplace by:

1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
2. Establishing an ongoing drug-free awareness program to inform employees about -
 - (a) The dangers of drug abuse in the workplace;
 - (b) The grantee's policy of maintaining a drug-free workplace;
 - (c) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (d) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph 1;
4. Notifying the employee in the statement required by paragraph 1 that, as a condition of employment under the grant, the employee will -
 - (a) Abide by the terms of the statement; and
 - (b) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 4(b) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 4(b), with respect to any employee who is so convicted –

- (a) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (b) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1, 2, 3, 4, 5 and 6.

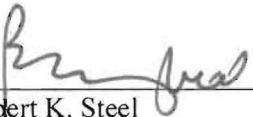
Anti-Lobbying -- To the best of the jurisdiction's knowledge and belief:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of it, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
3. It will require that the language of paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

Authority of Jurisdiction -- The consolidated plan is authorized under State and local law (as applicable) and the jurisdiction possesses the legal authority to carry out the programs for which it is seeking funding, in accordance with applicable HUD regulations.

Consistency with plan -- The housing activities to be undertaken with CDBG, HOME, ESG, and HOPWA funds are consistent with the strategic plan.

Section 3 -- It will comply with section 3 of the Housing and Urban Development Act of 1968, and implementing regulations at 24 CFR Part 135.



Robert K. Steel
Deputy Mayor, City of New York

11-1-11
Date

Specific CDBG Certifications

The Entitlement Community certifies that:

Citizen Participation -- It is in full compliance and following a detailed citizen participation plan that satisfies the requirements of 24 CFR 91.105.

Community Development Plan -- Its consolidated housing and community development plan identifies community development and housing needs and specifies both short-term and long-term community development objectives that provide decent housing, expand economic opportunities primarily for persons of low and moderate income. (See CFR 24 570.2 and CFR 24 part 570).

Following a Plan -- It is following a current consolidated plan (or Comprehensive Housing Affordability Strategy) that has been approved by HUD.

Use of Funds -- It has complied with the following criteria:

1. Maximum Feasible Priority. With respect to activities expected to be assisted with CDBG funds, it certifies that it has developed its Action Plan so as to give maximum feasible priority to activities which benefit low and moderate income families or aid in the prevention or elimination of slums or blight. The Action Plan may also include activities which the grantee certifies are designed to meet other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community, and other financial resources are not available;
2. Overall Benefit. The aggregate use of CDBG funds including Section 108 guaranteed loans during program year(s) 2011, 2012, and 2013, shall principally benefit persons of low and moderate income in a manner that ensures that at least 70 percent of the amount is expended for activities that benefit such persons during the designated period;
3. Special Assessments. It will not attempt to recover any capital costs of public improvements assisted with CDBG funds including Section 108 loan guaranteed funds by assessing any amount against properties owned and occupied by persons of low and moderate income, including any fee charged or assessment made as a condition of obtaining access to such public improvements.

However, if CDBG funds are used to pay the proportion of a fee or assessment that relates to the capital costs of public improvements (assisted in part with CDBG funds) financed from other revenue sources, an assessment or charge may be made against the property with respect to the public improvements financed by a source other than CDBG funds.

The jurisdiction will not attempt to recover any capital costs of public improvements assisted with CDBG funds, including Section 108, unless CDBG funds are used to pay the proportion of fee assessment attributable to the capital costs of public improvements financed from other revenue sources. In this case, an assessment or charge may be made against the property with respect to the public improvements financed by a source other than CDBG funds. Also, in the case of properties owned and occupied by moderate-income (not low-income) families, an assessment or charge may be made against the property for public improvements financed by a source other than CDBG funds if the jurisdiction certifies that it lacks CDBG funds to cover the assessment.

Excessive Force -- It has adopted and is enforcing:

1. A policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any individuals engaged in non-violent civil rights demonstrations; and

2. A policy of enforcing applicable State and local laws against physically barring entrance to or exit from a facility or location which is the subject of such non-violent civil rights demonstrations within its jurisdiction;

Compliance With Anti-discrimination laws -- The grant will be conducted and administered in conformity with title VI of the Civil Rights Act of 1964 (42 USC 2000d), the Fair Housing Act (42 USC 3601-3619), and implementing regulations.

Lead-Based Paint -- Its notification, inspection, testing and abatement procedures concerning lead-based paint will comply with 24 CFR Part 35.

Compliance with Laws -- It will comply with applicable laws.



Robert K. Steel
Deputy Mayor, City of New York

11-1-11

Date

Specific HOME Certifications

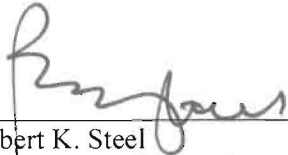
The HOME participating jurisdiction certifies that:

Tenant Based Rental Assistance -- If the participating jurisdiction intends to provide tenant-based rental assistance:

The use of HOME funds for tenant-based rental assistance is an essential element of the participating jurisdiction's consolidated plan for expanding the supply, affordability, and availability of decent, safe, sanitary, and affordable housing.

Eligible Activities and Costs -- it is using and will use HOME funds for eligible activities and costs, as described in 24 CFR § 92.205 through 92.209 and that it is not using and will not use HOME funds for prohibited activities, as described in § 92.214.

Appropriate Financial Assistance -- before committing any funds to a project, it will evaluate the project in accordance with the guidelines that it adopts for this purpose and will not invest any more HOME funds in combination with other Federal assistance than is necessary to provide affordable housing;



Robert K. Steel
Deputy Mayor, City of New York

11-1-11

Date

ESG Certifications

The Emergency Shelter Grantee certifies that:

Major rehabilitation/conversion -- It will maintain any building for which assistance is used under the ESG program as a shelter for homeless individuals and families for at least 10 years. If the jurisdiction plans to use funds for rehabilitation (other than major rehabilitation or conversion), the applicant will maintain any building for which assistance is used under the ESG program as a shelter for homeless individuals and families for at least 3 years.

Essential Services and Operating Costs -- Where assistance involves essential services or maintenance, operation, insurance, utilities and furnishings, it will provide services or shelter to homeless individuals and families for the period during which the ESG assistance is provided, without regard to a particular site or structure as long as the same general population is served.

Renovation -- Any renovation carried out with ESG assistance shall be sufficient to ensure that the building involved is safe and sanitary.

Supportive Services -- It will assist homeless individuals in obtaining appropriate supportive services, including permanent housing, medical and mental health treatment, counseling, supervision, and other services essential for achieving independent living, and other Federal State, local, and private assistance.

Matching Funds -- It will obtain matching amounts required under 24 CFR 576.51.

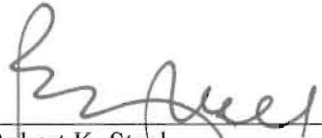
Confidentiality -- It will develop and implement procedures to ensure the confidentiality of records pertaining to any individual provided family violence prevention or treatment services under any project assisted under the ESG program, including protection against the release of the address or location of any family violence shelter project except with the written authorization of the person responsible for the operation of that shelter.

Homeless Persons Involvement -- To the maximum extent practicable, it will involve, through employment, volunteer services, or otherwise, homeless individuals and families in constructing, renovating, maintaining, operating facilities, and providing services assisted through this program.

Consolidated Plan -- It is following a current HUD-approved Consolidated Plan or CHAS.

Discharge Policy ---- It has established a policy for the discharge of persons from publicly funded institutions or systems of care (such as health care facilities, foster care or other youth facilities, or correction programs and institutions) in order to prevent such discharge from immediately resulting in homelessness for such persons.

HMIS -- It will comply with HUD's standards for participation in a local Homeless Management Information System and the collection and reporting of client-level information.


Robert K. Steel
Deputy Mayor, City of New York

11-1-11
Date

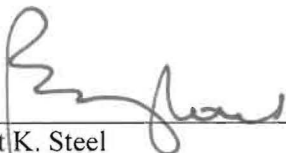
HOPWA Certifications

The HOPWA grantee certifies that:

Activities -- Activities funded under the program will meet urgent needs that are not being met by available public and private sources.

Building -- Any building or structure assisted under that program shall be operated for the purpose specified in the plan:

1. For at least 10 years in the case of assistance involving new construction, substantial rehabilitation or acquisition of a facility.
2. For at least 3 years in the case of assistance involving non-substantial rehabilitation or repair of a building or structure.



Robert K. Steel
Deputy Mayor, City of New York

11-1-11

Date

APPENDIX TO CERTIFICATIONS

INSTRUCTIONS CONCERNING LOBBYING AND DRUG-FREE WORKPLACE REQUIREMENTS:

A. Lobbying Certification

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

B. Drug-Free Workplace Certification

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification.
2. The certification is a material representation of fact upon which reliance was placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, HUD, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. Workplace under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
4. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio stations).
5. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph three).
6. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

All locations have been filed with the Department of Housing and Urban Development and can be obtained from the HUD Area Office, at 26 Federal Plaza.

The certification with regard to the drug-free workplace is required by 24 CFR part 24, subpart F.

7. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

"Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C.812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

"Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

"Criminal drug statute" means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

"Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All "direct charge" employees; (ii) all "indirect charge" employees unless their impact or involvement is insignificant to the performance of the grant; and (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are not on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

L. Monitoring Standards and Procedures

Pursuant to 24 CFR Part 91.230, the City of New York monitors on an ongoing basis its entitlement program subcontractors, subrecipients, and project sponsors to ensure compliance with the statutory provisions of the National Affordable Housing Act. The fiscal and programmatic procedures of federally-funded programs already are audited or monitored by several entities: the City agencies which administer the federally-funded programs; an independent auditor, pursuant to the federally-mandated "Single Audit"; and, the City Comptroller's Office through its Charter mandate to investigate all matters relating to the City's finances. Therefore, it is not the intent of this plan to duplicate but to augment the City's monitoring procedures currently in place for its Consolidated Plan-related programs.

Each of the respective formula entitlement grants have separate and distinct regulations and statutory requirements. Therefore, the monitoring processes used by New York City's respective grant administering departments vary based on the type of entitlement grant. However, in general, the respective departments monitor their subcontractors, subrecipients, and/or project sponsors for timeliness of expenditure; the meeting of predetermined accomplishments/milestones; and, the compliance with the applicable federal requirements.

A brief description for the grant-specific monitoring procedures follows:

COMMUNITY DEVELOPMENT BLOCK GRANT

The Community Development Task Force (CD Unit) of New York City's Office of Management and Budget (OMB) is responsible for the administration of New York City's annual CD award. The CD Unit is comprised of the Fiscal Unit and the Program Unit. Their responsibilities are highlighted throughout this narrative. The following sections detail the processes and procedures employed by the City of New York to ensure that all federal regulations applicable to CD funds are followed.

Eligibility Determinations

In order to qualify for CD-funding, a prospective program must meet two criteria. Firstly, the activity must fall into one of 22 eligibility categories listed in the CD regulations, sections §507.201-205. Secondly, the program must meet one of three national objectives: benefit to low- and moderate-income persons, aid in the prevention or elimination of slums or blight, or meet an urgent need. The CD Unit's Program Unit is tasked with ensuring that all programs are eligible (and remain eligible) and in compliance in accordance with the criteria set forth above.

Awarding and Monitoring of Contracts and Grants by City Agencies

Agencies that award contracts primarily do so through a competitive Request for Proposals (RFP) process that must comply with the City of New York's Procurement Policy Board (PPB) rules and regulations. A copy of the PPB rules and regulations can be found by visiting the City's website at <http://www.nyc.gov/html/mocs/ppb/html/rules/rules.shtml>. These rules are in place to safeguard the integrity of the procurement system and protect against corruption, waste, fraud, and abuse. Agencies awarding contracts review contractors' track records, skills, and staffing levels to determine the contractor's capacity to carry out the stated objectives of the contract. Agencies perform background checks on contractors and vendors using several sources of data such as LexisNexis and Vendex which provide information on past contractor performance. Some programs are required to award contracts to the lowest bidder while others are allowed to award the contract to the entity they feel is most qualified, not necessarily the lowest bidder. Entities that are awarded contracts that are not competitively bid are known as subrecipients. An example of a CD-funded subrecipient is the New York City Housing Authority.

Some agencies which award grants do so through a competitive application process. Others do so on a first-come, first-served basis provided the applicant meets eligibility criteria.

All CD-funded contracts and grants must include a document entitled “Appendix B”, which states all applicable federal laws.

Minority- and Women-Owned Business Enterprises and Section 3 Compliance

HUD mandates that all localities make a reasonable effort to procure goods and services through Minority- and Women-Owned Business Enterprises (MWBE). The City also has requirements regarding the participation of MWBEs in the contracting process. In cases where an agency helps facilitate a provider or an individual in selecting a contractor, most ensure that MWBEs are in the pool of prospective bidders. Each CD-funded program is required to itemize contracts of \$25,000 or more and document the race/ethnicity of the owner(s) of the business being awarded the contract. The agencies report this information on HUD Form 2516 to the CD Program Unit on a quarterly basis. The Program Unit staff reviews the forms and then forwards them to the Community Planning and Development Office at the local HUD headquarters.

HUD Form 2516 also allows for identifying which contractors qualify as Section 3 concerns. A Section 3 contractor is one who provides economic opportunities to low- and moderate-income residents of the metropolitan area. Section 3 contracts related to housing and public construction projects which have a CD-funded allocation of \$100,000 or greater are applicable. The CD Program Unit collects Section 3 data (how many low- and moderate-income persons were hired and their job classifications) on a calendar year basis and forwards the information to HUD as part of the City’s Consolidated Plan Annual Performance Report (APR).

Costs and Expenditures

Allowable costs are governed by the rules and regulations found in Federal OMB Circulars A-87 and A-122. Methods for determining the most reasonable costs vary from program to program. Salaries for CD-funded City employees are often set by the civil service system. All staff paid with CD funds must first undergo an eligibility review from the CD Unit to determine whether their job responsibilities are CD-eligible.

City agencies generally require contractors to submit bills on a monthly or a milestone basis, depending on the nature of the contract. Payments are generally made no later than 30 days after the receipt of the invoice (see exception for rehabilitation activities described in the preceding section). The CD Fiscal Unit monitors expenditures on a daily basis through the City’s Financial Management System (FMS). All programs must comply with the policies found within Federal OMB Circulars and HUD Administrative Requirements regarding audits, cost principals, and grant administration requirements.

Agency Monitoring

Agencies are responsible for monitoring their CD-funded programs. Monitoring includes both fiscal and programmatic oversight. Many agencies have created specific tracking systems for overseeing their beneficiaries. For those agencies that are involved in rehabilitation activities, monitoring includes on-site evaluation to determine the initial scope of work and periodic inspections on the progress. At the end of construction, agencies will complete a final inspection. Final payment is withheld until any outstanding work is completed to the agency’s satisfaction. Federally-funded rehabilitation of residential properties must be in compliance with HUD’s Housing Quality Standards.

OMB CD Fiscal Unit Monitoring

The CD Fiscal Unit is responsible for budgeting CD funds, drawing CD funds from the Federal Treasury, and monitoring expenditures. The staff monitors each CD-funded agency very closely utilizing a number of different tools at their disposal. First and foremost, each analyst maintains a good working relationship with their agency contacts and OMB Task Force contacts through meetings, phone calls and e-mails. Budgets are fluid and it is important that each analyst can call or e-mail a contact with questions, concerns etc. Changes to CD-funded agencies’ budgets cannot happen without OMB approval so the analysts are constantly viewing and reviewing the budgets and needs of the agencies for which they are responsible.

The main software tool that is used to monitor CD-funded agencies is the City’s Financial Management System (FMS). Through the utilization of FMS Control Categories, Budget Codes, and Object Codes, each CD-funded

program is distinct and unique in FMS. Control Categories and Budget Codes are four digit numbers assigned by each individual agency. Object codes are three digit numbers that are standard citywide. This aids in monitoring an agency's budget. By looking at the object code that funds are budgeted in, the Fiscal Unit can determine what the funds are being used for (ex. object code 109 is for fuel expenses, 600 is for contracts etc.). Due to this budgeting structure, an analyst can research a program in FMS and easily see the fiscal status, such as how much is budgeted, pre-encumbered, obligated to contracts, and liquidated. CRYSTAL is a software program that can extract summary information from FMS for each CD-funded program. CRYSTAL reports are run almost daily to keep track of the progress of each CD-funded program.

The CD Fiscal Unit also produces a number of reports that aid in monitoring the CD-funded agencies. The Unit produces among other things, a monthly report by city fiscal year (CFY), an inception-to-date status report (generally five times a year), budget cycle reports, surplus/needs exercises, CFY "close-out" reports, and the Annual Performance Report (APR). The very nature of preparing these reports requires a constant review of agencies' budgets.

Program Income

The CD Fiscal Unit is also responsible for monitoring CD Program Income, which is the primary supplemental revenue to the CD Entitlement. Program income can be generated from the receipt of fees and fines, repayment for work done by the City and through the sale of City-owned land that lies within a federal urban renewal area. The CD Fiscal Unit does general oversight and monitoring of all CD Program Income. This is accomplished through the utilization of FMS and verbal/e-mail communication with contacts. The CD Program Income Revenue Source codes are unique in FMS and therefore can be easily monitored. CRYSTAL reports can also be produced isolating the fiscal data for these revenue source codes.

Environmental Reviews

Environmental Review procedures for all federal programs were established by the National Environmental Policy Act of 1969 (NEPA). The HUD environmental regulations which followed can be found at 24 CFR Part 58: Environmental Review Procedures for Entities Assuming HUD Environmental Responsibilities. The CD Program Unit is responsible for ensuring that environmental reviews are completed for each CD-funded project and that there is written documentation of environmental compliance on file at OMB. The CD Program tends not to fund new construction so when rehabilitation is funded, the primary environmental issues are historic and floodplain reviews.

Certifications

At the beginning of each city fiscal year (July 1), the Program Unit sends out certification packets to Assistant Commissioners or Directors of CD-funded programs. Each certification packet includes the specific regulatory citations applicable to that program's CD-funded activities, a list of the general ineligible activities, and (if applicable) a copy of the most recent Section 8 Income Limits, which are used to determine low- and moderate-income beneficiaries. The certification process was created to ensure that administrators of CD-funded programs are knowledgeable about the CD regulations. Certifications must be signed by either the Assistant Commissioner or Director that oversees the CD-funded program. The CD Unit periodically conducts trainings on the CD regulations for agencies when there has been significant personnel turnover or there are compliance issues.

Monitoring of Program Performance

In July of each year, CD Program Unit staff request calendar year accomplishment projections from CD-funded programs. The proposed accomplishments are based on a HUD Performance Measurement Indicator that is identified for each program (excluding Planning and Administration programs). The City selects the indicator that most closely reflects the primary activities funded by the program. Along with providing their upcoming calendar year projections, programs are asked to revise their previous year's projections. Initial projections are published in the City's Consolidated Plan; revised values are posted in the City's Amended Consolidated Plan. At the end of the calendar year actual accomplishments are reported in the APR. The receipt of the revised projections and actual accomplishments gives the CD Program Unit the opportunity to evaluate the progress of

programs and consult with a program if it is not on track to meet its projections. The Program Unit also reviews the program expenditure reports produced by the Fiscal Unit to identify those programs that are not spending as they should. The Program Unit staff then determines the cause of the delays which could be related to the bidding or registration of a contract, the historic review process, contractor non-performance, the hiring of City staff that will assist in administering a program, etc. The Program Unit staff will intervene and assist whenever possible.

Equipment Purchases

Rules guiding the purchase of equipment can be found in OMB Circulars A-87 (15) and A-122 (15), §570.207 of the CD regulations, and §84.34 and §85.2 of the HUD Administrative Requirements. Generally, equipment purchases are not allowed unless the activity falls within the following categories: Special Economic Development Activities, Special Activities by Community-Based Development Organizations, or Public Services. The OMB Circulars define “equipment” as a tangible property having a useful life of more than one year and an acquisition cost of at least \$5,000. Items below this amount are considered “supplies”. However, the OMB CD Unit employs a policy in which all purchases exceeding \$150 per unit must be tracked on a Property Register Form. The form must also include all electronic devices regardless of cost.

The Property Register is a cumulative list. Equipment that appeared on a previous year’s list must also appear on the current year’s list unless the item was identified as disposed during the period covering the last Property Register. Agency staff must conduct a physical inventory of all CD-funded equipment and reconcile the results with the Property Register.

The CD Program Unit is responsible for collecting all Property Registers and for ensuring that all charges are eligible. Program Unit staff performs one or two on-site audits of a CD-funded program’s property each year to ensure that the items are located where the Property Register indicates they are and to guarantee that all property purchased with CD funds is labeled as such.

Other Monitoring Actions

CD Programs may also be monitored or audited by the Department of Housing and Urban Development, the New York City Comptroller and by independent auditors under the federal Single Audit and the A-133 audit requirements.

HOME INVESTMENT PARTNERSHIP (HOME) PROGRAM

Affirmative Marketing—HOME-funded Rental and Homeownership Housing

The New York City Department of Housing Preservation and Development (HPD) reserves the right to conduct periodic inspections and spot-checks of the Developer’s tenanting process. HPD conducts site visits to assure records are properly collected and reserved.

Where there is suspicion of fraud HPD conducts an investigation

Monitoring Procedures for Affordable Housing Units – HPD

Affordable housing developments assisted with HOME Program funds are monitored in two phases: during construction and afterwards, when the property is occupied by low income residents. Before any funds can be released, loan agreements and related documents must be signed by the Borrower and approved by the City.

Besides repayment terms, the promissory note, and loan agreement, the City contract may include additional terms agreed to by the borrower, including requirements related to habitability standards, owner residency, tenant eligibility, and/or rent affordability guidelines.

Low-income tenancy and affordable rents are effectuated through a covenant, which is signed by the owner, recorded against the property title, so it ‘runs with the land’. Covenants have provisions that require annual tenant re-certification and periodic physical inspections when required by the grant. These additional provisions

are no less important than the repayment terms, and a material breach thereof may result in acceleration of the loan and/or foreclosure action against the collateral property.

The development cycle begins with the HPD commitment of HOME funds, and ultimately culminates into a finished housing development. HPD utilizes certain milestones as indicators to determine if the project is on track.

The construction phase is monitored by the HPD HOME-funded program staff. They perform inspections at each milestone of the process; their approval is required before funds can be released.

After construction, HPD's Tax Credit and HOME Compliance Unit takes over the monitoring responsibility as it checks for the required occupancy ratios, and also determines if clients meet income requirements. Compliance monitoring is accomplished through the regular monitoring of a borrower-provided management plan. Owners must provide HPD with reports on the current tenants and the rent schedule. These are reviewed for compliance by HPD staff.

When HUD issues revised income or maximum rent levels, all property owners are notified of the changes by the Occupancy Monitoring section.

Monitoring Community Housing Development Organizations (CHDOs)

- To ensure that organizations continue to meet all of the CHDO requirements, CHDOs are evaluated and re-certified by HPD every year or, at a minimum, are requalified as a CHDO each time it receives additional set-aside or operating funds.
- The minimum CHDO set-aside of 15% is calculated annually by HPD, and allocated to CHDO-sponsored housing development projects.
- CHDO oversight by HPD includes an evaluation of compliance with the HOME maximum purchase price/after-rehab value limits, the FHA 203(b) limits, for owner-occupied and homebuyer properties.

Other HOME Program Monitoring Activities

- HPD reviews the status of the HOME grant to ensure that the 24-month deadline to commit and 5-year deadline to expend funds are complied with.
- HPD monitors and reports back on the HOME match requirements to ensure that the 12.5% match requirement is met. An annual report is sent to HUD along with the Consolidated Annual Performance and Evaluation Report (CAPER).
- HPD also ensures compliance with the minimum HOME subsidy amount of \$1,000 per rental unit as well as the maximum 221(d)(3) per-unit limit subsidy amounts.
- HPD ensures that HOME-assisted rental units are inspected at the required frequency of inspections, as stated in the HOME regulations, and ensures compliance with Housing Quality Standards.

Section 3 of the Housing and Urban Act of 1968

The City of New York, to the greatest extent feasible, is committed to directing job training and employment opportunities to low- and very low-income New Yorkers, and its programs have increased opportunities for these groups. The Department of Housing Preservation and Development (HPD) has undertaken various affirmative efforts to realize the benefits of Section 3 for local residents and local businesses:

- HPD includes information on Sec. 3 requirements in the equal opportunity packages provided to HPD developers, contractors and their sub-contractors.
- HPD reviews these requirements at weekly Pre-Award conferences with developers, contractors and sub-contractors.
- HPD includes the Section 3 clause in its HUD-funded contracts, alerting each entity of the program and its obligations. The clause also requires its placement in every subcontract subject to Section 3 regulations.

- HPD has implemented a quarterly review process for the efficient monitoring of Section 3 activity.
- HPD has created and posted a new HUD Section 3 webpage at the HPD website. The webpage contains an explanation of the regulations, reporting forms, a Section 3 Business Concern application, a directory of Business Concerns and a listing of employment/training referral sources. The webpage provides firms working with the agency easy access the information they need to comply.
- HPD has developed relationships, memorialized by Memorandums of Understanding, with local construction employment and training agencies (including YouthBuild programs) that offer formal training, job readiness and pre-screening programs. Our Section 3 webpage lists referral sources for firms seeking qualified candidates for any construction trade or management related job opportunities that may arise.
- HPD has a Memorandum of Understanding with the NYC Department of Small Business Services (DSBS) under which firms that certify with HPD as Section 3 Business Concerns will obtain business counseling and networking opportunities sponsored by DSBS by enrolling in their Emerging Business Enterprise Program. This partnership expands business opportunities and technical assistance for local firms. To date we have referred 6 firms.

HPD collects data to be used to report annual accomplishments regarding employment and other economic opportunities provided to low- and moderate-income persons under Section 3 of the Housing and Urban Development Act of 1968.

Recipients or contractors subject to Section 3 requirements must maintain appropriate documentation to establish that HUD financial assistance for housing and community development programs were directed toward low- and moderate-income persons. HPD ensures that all back-up documentation be appropriately filed and maintained by the agency for five (5) years.

Compliance Monitoring of Occupancy During the HOME Program Affordability Period

During the affordability period, all HOME projects are subject to Compliance Monitoring. The purpose of monitoring is to ensure adherence to the income and rent affordability requirements of the HOME program. Specifically, all newly vacated HOME units must be rented to tenants with qualifying incomes, the owner/managing agent must comply with the annual income certification requirements for all tenants in home assisted units and the owner/managing agent must comply with the HOME program's various rent restrictions. In addition, all HOME units are subject to an annual inspection to ensure compliance with federal Housing Quality Standards (HQS).

Each year, the owner must submit to HPD's Compliance Unit the following information:

- A certified rent roll showing: (a) names and rents for tenants in all units, (b) tenant incomes and household sizes for tenants in HOME assisted units, and (c) dates of income certification for tenants in home assisted units,
- An initial income certification for each new tenant who has moved in during the prior calendar year and,
- A certification by the owner that the project is in compliance with all requirements of the HOME Written Agreement (form to be provided by HPD).

These documents will be reviewed by HPD for compliance. Concurrently, the results of the HQS inspections will be reviewed to determine if there are any uncorrected violations. A written report will be prepared which describes any findings and issues, along with details of any required follow-up. Projects with any pending findings or issues will remain in the active workload until all outstanding problems are resolved.

In addition to home Monitoring described above, which applies to all projects annually, HOME projects will also be subject to a more intensive review on a less frequent basis. Such reviews may either be conducted at the owner's office or at HPD's office. In general the review will involve an in-depth review of income certification

documents, as well as other procedures used by the owner to ensure compliance with the HOME Written Agreement.

Certificate of Consistency with this Consolidated Plan

Developers' proposed projects must be consistent with New York City's Strategic Plan goals. Examples of such projects generally meet this goal when they include one or more of the following activities:

- Newly constructed housing targeting low- and moderate-income households.
- Rehabilitation of the existing housing stock in a manner that is sensitive to the need for accessibility by persons with disabilities.
- Supportive housing.

EMERGENCY SOLUTIONS GRANT (ESG)

The NYC Department of Homeless Services (DHS) receives Emergency Solutions Grant Program (ESG) grant money to increase the number and quality of emergency shelters and transitional housing facilities for homeless individuals and families, to operate these facilities and provide essential social services, to help prevent homelessness, and to rapidly re-house those who have entered shelter .

The Budget and Finance Units of DHS is responsible for the fiscal administration of the ESG grant. These units allocate the ESG funding and ensure that payments and claims are made in accordance with the approved uses of the grant for eligible activities, in consultation with DHS Program staff.

As part of ESG monitoring plan, DHS produced a checklist of eligible activities and definitions and outlined the procedures for program compliance, pursuant to 24 CFR 576.3, 24 CFR 85.32, 42 U.S.C. 11371, 42 U.S.C. 11374 (a). The purpose of the ESG monitoring plan is to determine if the ESG-funded programs have administered and implemented ESG-funded activities in accordance with applicable Federal requirements.

Program monitoring activities include review of conformance to grant agreement, record keeping and documentation, periodic progress reports, and monitoring site visits. As the result of monitoring review, DHS may conclude a program is in compliance with applicable regulations or may make a finding or concern. A finding is defined as a program element that does not comply with a Federal statute or regulation, whereas a concern is either a potential finding or a program weakness that should be improved to avoid future problems.

If any findings or concerns are identified after a program monitoring review, DHS works with the program staff in implementing corrective actions and making improvements, and produces a schedule for any needed technical assistance and training.

In order to monitor and report on the second allocation of ESG funds, DHS intends to hire two staff people. One of the staff will be in the Budget Unit and the other staff person will be in the Prevention Unit.

DHS will utilize its experience from its successful implementation of HPRP to evaluate the new ESG activities. DHS shared this framework with the Continuum of Care Steering Committee and will review periodically with the CoC Data Management Committee. DHS will utilize its HMIS to monitor performance through the following indicators:

- Number of individuals/households served by prevention and rapid re-housing activities
- Exit destinations (temporary and permanent) of individuals/households served
- % of clients served who avoid shelter entry
- Length of time served by ESG program

ESG funds will be used in DHS's existing homelessness prevention and rapid re-housing contracts that are currently funded by HPRP. This requires some internal processing with our Budget department but does not

affect the contracts or contracting process. Some of the funds will be used directly by DHS for its staff who perform prevention and rapid re-housing activities.

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA)

To ensure compliance with federal, state, and local regulations and guidelines, the New York City Department of Health and Mental Hygiene (DOHMH) conducts routine monitoring activities of its HOPWA-funded sub-grantees and projects sponsors. Monitoring activities are conducted on-site and remotely on an annual basis. Monitoring activities include, but are not limited to, the following areas:

- Eligibility
 - HIV status
 - Income
- Assessments/Reassessments
 - Client and household
- Housing Plans
- Organizational Policies and Procedures
 - Confidentiality
 - Termination of Participant Assistance
 - Conflict of Interest
 - Faith-based Organizations and Religious Activities
 - Fair Housing and Equal Opportunity
 - Documentation/Record Retention
 - Annual Reporting and Measurement of Outcomes
 - Performance and Outcomes
- Eligible Services
 - Tenant-Based Rental Assistance
 - Short-Term Rent, Mortgage, and Utility Assistance
 - Short-Term Housing Assistance
 - Facility/Project-Based Housing
 - Support Services
 - Housing Information
 - Permanent Housing Placement
 - Resource Identification
 - New Construction/Rehabilitation
- Leases/Tenancy Agreements
- Fair Market Rents
- Resident Rent Calculation
- Prohibition Against Fees
- Housing Quality Standards
- Environmental Review
- Audits Management
- Financial Management
 - Internal Controls
 - Financial System and Fund Tracking
 - Salaries and Wages
 - Cost and Allocation Principles
 - Record-keeping and Documentation
- Procurement Management and Methods
- Property/Equipment Management

Based on findings identified during monitoring activities, DOHMH may require sub-grantees and project sponsors to develop corrective action plans that outline activities that will be taken to resolve issue(s) identified and timeline for resolution. DOHMH monitors these plans closely to ensure timely resolution.