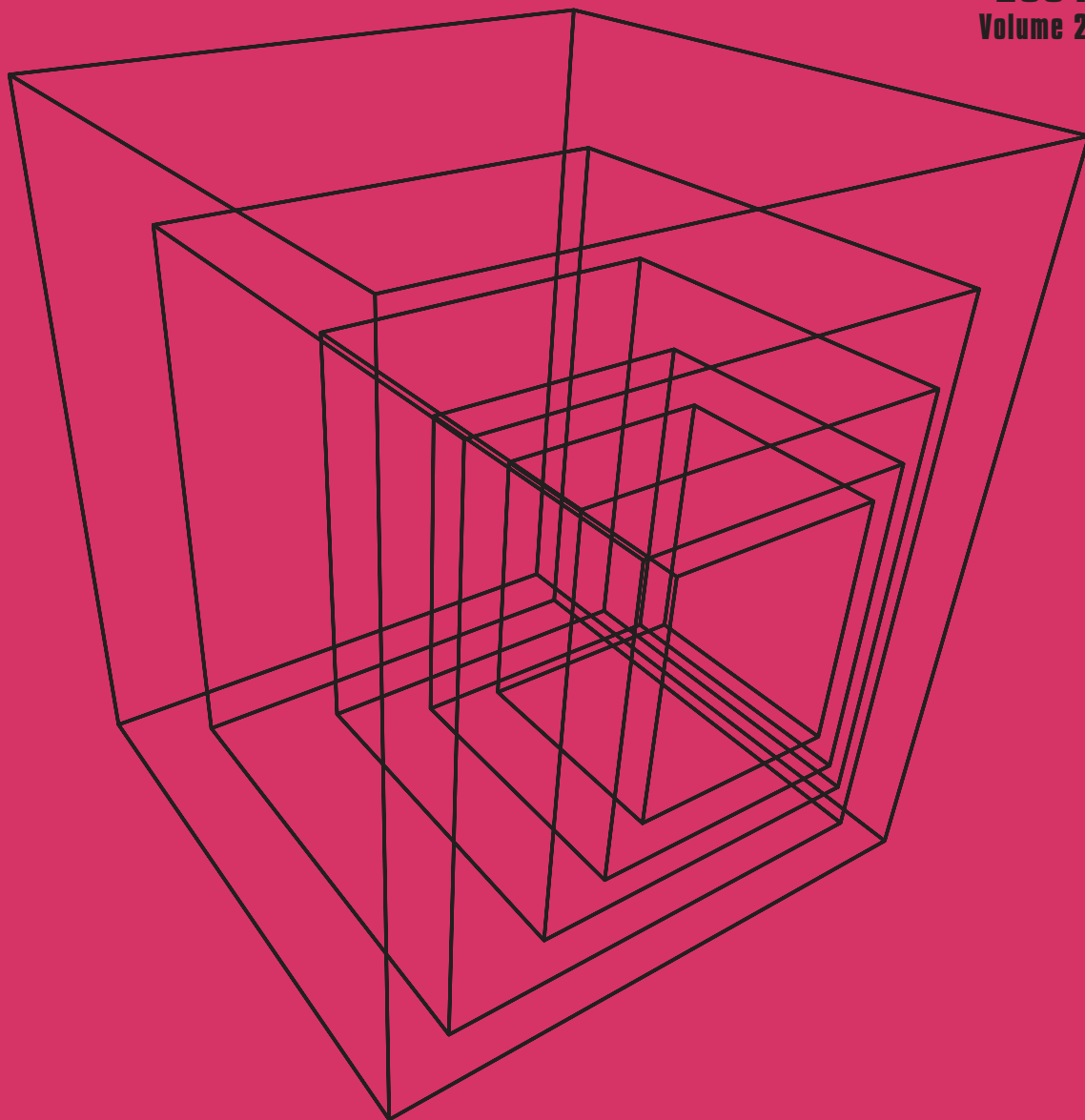
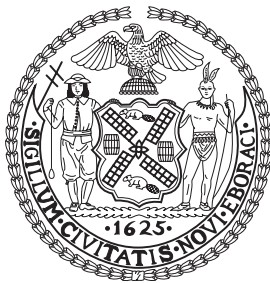

Consolidated Plan

2004
Volume 2



Consolidated Plan

Volume 2



Michael R. Bloomberg
Mayor, City of New York

Amanda M. Burden AICP
Director, Department of City Planning

Department of City Planning
22 Reade Street, New York, N.Y. 10007-1216

nyc.gov/planning

DCP # 03-07

2004 CONSOLIDATED PLAN

August 30, 2004

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Credits

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

This Supportive Housing Continuum of Care addresses supportive housing services provided by the City of New York for homeless families and individuals, as well as non-homeless special needs populations, including the elderly, persons with disabilities (mental, physical, and/or developmental), persons with chemical addictions, individuals and families which include persons with HIV/AIDS, and victims of domestic violence. This Continuum of Care also serves the populations at risk of becoming homeless, including the precariously housed, such as those facing eviction, very low-income households experiencing rent burden, individuals facing deinstitutionalization, and relocated families.

The Continuum of Care seeks to prevent low-income individuals and families, both with and without children, from becoming homeless, and to help homeless persons make the transition to permanent housing and independent living. The Homeless Continuum of Care consists of outreach, prevention and diversion services, assessment programs, and transitional and permanent housing programs. Supportive services are also provided along the continuum, including medical, mental health, and substance abuse programs, educational services, and vocational training. To ensure that individuals can move successfully through this continuum of care, these services are flexible and client-based. Clients are expected to be cooperative participants in programs designed to prepare them to become independent.

The foundation of this Continuum of Care is the recognition that homelessness is not an isolated problem, and housing is not the sole solution. Indeed, homeless families with children present different issues, and face different challenges than homeless single adults. Necessary services also vary widely within the homeless population; while some individuals are able to attain self-sufficiency with very little help, others require a more extensive array of services to overcome their personal obstacles. As a result, emergency shelter and transitional housing facilities for homeless single adults offer a range of services, including: employment training, educational counseling and services, mental health rehabilitation, specialized services for veterans, substance abuse treatment, intensive counseling, and case management. Family facilities provide many of the same services, as well as programs aimed at benefiting children.

Emergency Shelter Grant (ESG) funds, along with other federal, state, and city funds, help to support the various programs that comprise the Continuum of Care. Programs for the homeless funded with ESG dollars include homelessness prevention services, outreach efforts, reception centers, interim housing, adult assessment centers, transitional housing, and employment, mental health, and substance abuse programs.

The second half of this section, Supportive Housing Continuum of Care for Non-Homeless Special Needs Populations, describes the services provided for non-homeless mentally-ill, developmentally disabled, and chemically dependent individuals, persons with HIV/AIDS, victims of domestic violence, the elderly and frail elderly, and persons with physical disabilities. Programs for New York City Housing Authority (NYCHA) residents with special needs are discussed in detail in Part II, Section C: New York City Housing Authority, subsection: Resident Initiatives. This subsection describes NYCHA programs aimed at the homeless, the elderly, the disabled, and those persons who are chemically dependent, among others. Additionally, NYCHA contributes

to the City's Supportive Housing Continuum of Care, as can be seen in the Homeless and the Domestic Violence subsections that follow.

1. Supportive Housing Continuum of Care for the Homeless

In the late 1970's and 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. The system, originally designed as a safety net of last resort, had become a routine means of attempting to aid the needy, and the strain was evident. Indeed, of the average of 84 families that entered the system per day, nearly one-half could not be referred to temporary housing within 24 hours. It became commonplace for individuals and families to remain in the system for years, and yet because it was designed for emergency purposes, the system 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 their independence. In response to this growing problem, the New York City Commission on the Homeless was formed and, in 1992, it published the results of its findings in "The Way Home".

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 went with homelessness. Indeed, 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 their independence, and 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. On May 1, 1994, Mayor Rudolph Giuliani laid out his 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 contains 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.

Since that time, DHS has been helping tens of thousands of homeless New Yorkers by establishing a full continuum of care in partnership with non-profit providers. In its continuing effort to improve the quality of its services, DHS solicits input from the members of the Continuum of Care, and utilizes some of these recommendations in the development of its action plan to address homelessness. Most individual programs in the Continuum of Care have been now contracted out by DHS to non-profit providers. In order to improve the efficacy of these programs, in fiscal 1998, DHS began offering incentive payments to these contracted providers for achieving or exceeding performance targets consistent with the mission of the agency, mainly, permanent housing and employment placements, and low recidivism. The impact has been greatest in the adult system, where contracting with non-profit providers has gone hand in hand with converting general beds, offering only basic services, to program beds, offering more specialized and intensive services.

DHS has two main operational areas responsible for carrying out the continuum of care: (1) The Division of Family Services, which serves homeless families and (2) The Division of Adult Services, which serves single adults. In FY2003, the number of sheltered families rose, increasing from 6,985 families each night in 2002, to 8,963 families in 2003. Additionally, the city's shelters housed an average of 7,957 single adults per night, up from 7,187 in 2002. The FY2003 adopted DHS budget was \$494 million, and \$549 million for 2002.

a. Homeless Families

The Division of Family Services oversees the emergency family shelter system in New York City. Families include adult(s) with their children, couples without children who are legally married or have a domestic partnership, and pregnant women. Single parent households constitute 59.1 % of the families in DHS' shelter system. Approximately 28.7 % of family heads of household are Black, 14.3% are Hispanic, 0.9% are White, 0.1% are Asian, Pacific Islander, Native American, or Alaskan and 55.8% are of unknown race or ethnicity. The average age of the family head of household during FY2003 was 30 years old. For fiscal 2003, the Division of Family Services provided shelter to 19,535 families in 166 facilities, including: 6,328 families in 57 Tier II residences; 1,824 families in 21 residences for adult families with no children; and 11,383 families in 80 conditional placement facilities. These families included 59,797 individual family members, comprised of 27,200 adults and 32,597 children.

Homelessness Prevention

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 Diversion Program provides diversion services to 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.

One HPD homeless prevention program is the Community Pride Program which provides many services to homeless single adults and families. These include social services for individuals living in Community Board 10, tenant organizing in City-owned buildings on West 119th Street, and neighborhood revitalization, and preservation activities. Social service activities include drug treatment referrals, crisis intervention, independent living skills training, health care, GED literacy programs, job training, and free advocacy in housing courts. The goal of tenant organizing and neighborhood revitalization activities is to encourage the residents of these areas to work cooperatively towards the transformation of their building and neighborhood.

The Mobile Crisis Program is another HPD program. It provides emergency crisis and case management services to formerly homeless tenants in HPD developed housing in Brooklyn and the Bronx. These services help to stabilize tenants in their housing, and to link tenants to appropriate community services, within three to six months after they occupy their new residence. Since its inception, the program has assisted over 400 families with a wide variety of social service needs, including providing medical and mental health referrals, counseling services, and independent and parent skills training.

The Tenant and Family Support Program works with tenants of 147 City-owned buildings in Community Board 9, in Manhattan, to stabilize buildings and nurture potential tenant leadership. This program offers housing rehabilitation, legal services, and social service support, including help establishing relationships with local police departments, sanitation services, banks, community institutions and leaders.

Emergency Assistance Unit and Overnight Facilities

The Emergency Assistance Unit (EAU) is the 24-hour family intake facility where each family's need for temporary housing is evaluated by the Eligibility Investigation Unit (EIU). Families are found eligible for temporary housing if they have no other housing options available to them. Families are provided with emergency shelter while their eligibility is being determined. In FY2003, there was an average of 203 families staying in 7 overnight facilities per night. Families have their eligibility determined within 10 days of their arrival at the EAU. In FY2003, there was an average of 4,110 families residing in 80 conditional placement facilities each day.

Transitional Residences

Families are moved to transitional residences if found eligible for temporary housing. In FY2003, 8,781 families were found eligible to receive temporary housing. Transitional family residences come in a variety of models, most of which offer apartments 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 staff to develop a mutually agreed upon independent living plan. A family must cooperate with service providers and meet the terms of this plan before they can be referred to permanent housing. In FY 2003, the average length of stay for families in temporary housing was 303 days.

Supportive Services

Employment - A number of homeless families requires services related to employment readiness and job training. The inability of the family heads of homeless households to find and maintain jobs is an impediment to independent living, and thus all families have access to employment readiness and /or job training programs via either on-site programs, or referrals to off-site programs. Several of the on-site job training programs are primarily funded with HUD Supportive Housing dollars. To increase the efficacy of these job training programs, beginning in FY1999, employment rates were one of the performance targets to which incentive payments were linked.

During Fiscal 2003, the Department continued to reconfigure the facility formerly known as the Catherine Street Shelter to house a maximum of 87 homeless families engaged in LIFE (Learning Independence & Family Empowerment). LIFE is an intensive independent living and employment skills development program, where families' strengths and weaknesses are assessed, and they are engaged in appropriate services needed to help their successful transition from welfare to work. Families participating in the LIFE program, which began in June 1999, attend job skill workshops, which include classes on interview techniques and resume writing. DHS' staff at LIFE then assesses the job skills of the families in an individualized setting, and makes referrals to various employment programs in the neighborhood.

Education Services - DHS's transitional family residences provide assistance in the area of educational planning, primarily through individual counseling. Education programs at the shelters help adults access GED programs, fill out enrollment forms, set educational goals, and utilize community educational and vocational training resources, for themselves and their children.

Mental Health Rehabilitation - Mental illness is a serious obstacle to independent living. It is estimated that some adults in family facilities are afflicted by mental illness. This estimate, which is based on the number of clients reporting prior psychiatric hospitalization, does not include those family members who have been treated at clinics, or those who have never sought treatment. While some of the shelters offer mental health services off-site, all of the facilities have the ability to refer clients to mental health services when they are needed.

Substance Abuse Services - Transitional facilities in the family system provide substance abuse prevention, education and referral services, often including weekly or monthly drug prevention workshops. Any family in temporary housing who demonstrates a need for substance abuse treatment is offered individual counseling and referrals to off-site substance abuse programs. Additionally, there are four transitional facilities in the family system that provide substance abuse treatment, one of which is supported by ESG funds.

Other Services - A wide range of counseling and case management services are provided throughout the transitional residences to help families make use of available resources. Homeless families in the DHS system receive various forms of assistance and training involving the acquisition of independent living skills, including housing skills and childcare training. Housing skills training is offered at the transitional family residences. Families are taught how to

look for an apartment, as well as how to understand leases, subletting and other housing related issues that come up when living independently.

Childcare training is also offered at most residences. Classes offered include infant care, nutrition, preventive health care, child abuse prevention, and general parenting skills.

Permanent Housing

The transition to permanent housing completes the continuum of care for families. All homeless families are assisted in finding and relocating to permanent housing through a variety of mainstream housing programs. New York City's largest re-housing program, the Emergency Assistance Re-housing Program (EARP) uses Section 8 subsidies, as well as bonuses to landlords, to assist homeless families in relocating to private apartments. EARP is administered by DHS in conjunction with NYCHA. Homeless families are also placed in conventional public housing administered by NYCHA, and in low-income housing units developed with HOME funds. Among HPD's housing production programs that may provide units for homeless families in 2003 are LISC/Enterprise, and in conjunction with the State, the 85/85 City/State agreement to develop housing for homeless and at-risk low-income families. During Fiscal Year 2003, DHS relocated 5,289 families to permanent housing, including 2,157 families through the Emergency Assistance Re-housing Program (EARP), 309 families to HPD-owned housing, 1,818 to public housing operated by NYCHA and 1,005 to other subsidized housing programs. An additional 549 HRA/DV clients were placed through our shelters. Three hundred and eighty-one were placed via EARP/Section 8 and the other 168 in NYCHA.

Supportive follow-up services are provided by non-profit organizations with funding from the State's Homelessness Interventions Program (HIP) and the Supplemental Homelessness Intervention Program (SHIP). The organizations receiving HIP and SHIP funding are required by the State to spend the funds on services to either prevent homelessness or to provide aftercare services to formerly homeless families from the DHS system. Aftercare services are aimed at preventing the families from re-entering the shelter system once they are placed into permanent housing. The system also makes extensive use of other community-based services.

b. Homeless Individuals

The Division of Adult Services oversees the Agency's system of transitional housing facilities for single adults. As of FY2003, 57 facilities are in use, seven of which are administered directly by the Department of Homeless Services and 50 of which are operated by non-profit organizations under contract with DHS. In FY2003, an average of 7,957 single adults (6,073 men and 1,884 women) resided in the shelter system each night, and a total of 27,867 individuals (21,688 men and 6,179 women) were provided temporary housing during the year. Fifty-six percent of these individuals were Black, 25% Hispanic, 11% White, 1% Asian or Pacific Islander, less than 0.2 % is Native American or Alaskan, and 6 % were identified as other or unknown. The average age of a single adult in the system is 41 years old.

Adult Services is organized into three main functional areas: outreach, intake, and assessment; transitional services; and housing and program planning. In FY2003, a total of 8,314 beds were available, 65.4 % of which were program beds associated with triage and referral/assessment, employment training, mental health rehabilitation, specialized services for veterans, substance abuse treatment, or programs for the elderly.

Outreach, Intake, and Assessment - The first step in the continuum of care, outreach, targets individuals who appear to be living on the street, around transportation facilities, in parks, and in other spaces not designated or intended to be used for human accommodation. Since these homeless individuals are often resistant to participating in service programs, the key objective of each of these outreach services is engagement to move them out of inappropriate spaces where they are at risk, into appropriate entry points in the continuum of care, where they can obtain

supportive services and acquire the specific skills they need for self-sufficiency. DHS funds borough-based outreach teams around the clock. During the first quarter of Fiscal 2002, DHS expanded contracted outreach to provide additional coverage by greatly increasing capacity between midnight and 8 AM, adding additional psychiatric and clinical social work staff, and offering more staff training. These stipulations call for outreach providers to be evaluated based on the number of their contacts who complete detoxification programs, accept services and move indoors, and leave public spaces.

Transitional Services - DHS is responsible for the management of facilities that provide social and therapeutic services for residents, as well as the referral of clients among shelters and programs.

Housing and Program Planning - Adult Services is responsible for the referral of residents to appropriate longer term housing both through central office staff and mobile teams of placement and housing specialists. It is also responsible for developing and helping to fund supportive SROs and other transitional and permanent housing options for clients exiting the transitional system. Federal ESG funds are used to fund the Program and Housing Placement (PHP) Unit in the Office of Housing and Program Planning. This unit works closely with shelter staff to identify, engage, and place as many shelter residents as possible into programs and housing. PHP also works directly with housing providers to identify appropriate candidates for placement into housing from the transitional system, schedule interviews, expedite enrollment in day treatment programs, and help clients secure benefits. Program Planning functions include research and planning for future projects and overseeing contracts for specialized services throughout the system, such as employment and youth services.

Outreach and Engagement

Homeless individuals sleep in public places in New York City each night. A network of drop-in centers, outreach programs, reception centers, faith-based voluntary shelters, soup kitchens and pantries, and other emergency services attempt to serve and engage members of this generally service-resistant population, with the goal of moving them into transitional programs, housing, and long term rehabilitation settings. Once a homeless person is engaged, case management and linkages to programs, benefits, and other supportive services are used to ensure that an individual is able to follow his or her service plan and gain the highest possible level of independence.

The New York City Police Department's Homeless Outreach Unit (NYPD/HOU) conducts outreach in public spaces including the subway system. The Department of Health and Mental Hygiene (DHMH) contracts with 13 Outreach teams to engage the mentally ill homeless. These teams work with some 21,000 clients annually. Many outreach programs target specific populations, including individuals who are mentally ill or HIV positive. Counting informal outreach programs operated by local community groups and houses of worship, there are approximately 40 outreach programs throughout the City.

During City Fiscal 2003, the City's outreach efforts, which are partially funded by ESG dollars, resulted in 107,951 contacts made, 6,658 referrals for services and 7,648 placements in temporary housing, compared to 100,219 contacts made, 12,388 referrals for services and 6,872 placements in temporary housing during Fiscal 2002.

Many outreach programs coordinate their services with the nine drop-in centers under contract with DHS, and the one HUD funded center. These drop-in centers operate 24 hours a day and have the capacity to serve 1,246 individuals per day. Drop-in centers provide homeless individuals with meals, counseling, medical and social services, showers, laundry facilities, some clothing, recreation space, referrals for employment, assistance in applying for benefits, and other social services. Four of the drop-in centers provide short term housing through the Interim Housing Program. Funded with Federal ESG dollars, the Interim Housing Program is a model designed to both engage homeless individuals and facilitate their transition into long-term housing. The interim housing program units include shared apartments, and single or double rooms in SRO's and YMCAs. They offer drop-in center clients a

temporary respite, a place to practice activities of daily living, and a setting to prepare for community living. They provide hard-to-reach clients with greater privacy and stability. The programs attempt to engage clients who are ambivalent about services and enhance their interest in seeking housing or offer an opportunity to practice independent living skills.

In addition, the Partnership for the Homeless coordinates a network of overnight accommodations in churches and synagogues around the City, which is partially funded by ESG dollars. The Network includes over 100 churches and synagogues, and provides an average of 350 beds each night during peak season (November through March). Services include overnight sleeping areas, some meals or snacks, and sometimes access to laundry facilities. These sites serve between 6-15 individuals and are staffed primarily by volunteers.

Please refer to the Supportive Housing Continuum of Care for Non-Homeless Special Needs Populations, Mentally Ill, the Chemically Dependent and Mentally Retarded and Developmentally Disabled for the description of housing programs divided by type of mental disability.

Intake & Triage Services

The Department of Homeless Services' assessment centers provide housing and services for all homeless individuals entering the shelter services system. The first phase is intake, comprised of a basic information gathering process and placement into an assessment bed. DHS operates one intake facility for men and three intake facilities for women. The second phase of the process is assessment. During this phase, clients are provided with assistance in obtaining entitlements and evaluated, via participation in the completion of an Applicant Intake Document, History and Physical and Brief Psychiatric Assessment, in order to refer them to specific programs in the shelter system or other appropriate placements outside of the DHS system. During assessment, clients work closely with a caseworker toward a goal of diversion out of the system or placement into a program bed in a general shelter. The assessment process generally requires no more than 21 days.

Transitional Residences

From assessment, homeless single adults are referred to one of the 48 transitional residences. Seventy- nine percent of the beds in the single adult system are associated with program services, including assessment, employment training, mental health rehabilitation, specialized services for veterans, 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 workers, Employment specialists, Housing Benefits counselors, on-site medical staff and Vocational counselors work closely with clients to help them become independent. An individualized approach aims to provide clients with the skills needed to achieve the highest level of self-sufficiency. Federal ESG funds are used to support social service programs at ten of these transitional shelters.

DHS/Correctional Review Unit

As part of NYC's efforts to serve Brad H. Class members, DHS has developed a shelter referral placement process to serve mentally ill homeless individuals released from New York City Department of Correction facilities, including Rikers Island.

Clinical staff at city jails identify Brad H. Class members through medical and mental health evaluations. Discharge planners prepare discharge plans, gather all relevant clinical material, and make referrals to Class members known to be homeless to DHS.

The goal of the Correctional Review Unit is to review the discharge material sent from the correctional facilities and, working with staff in program shelters and DHS Intake, expedite the placement of Brad H. Class members into appropriate setting within the shelter system.

Supportive Services

Anti-Illegal Eviction Legal Services and SRO Legal Services - DHS is currently administering 16 contracts totaling \$2.5 million to provide legal services to low and moderate income people to help them maintain their housing. The legal assistance will prevent illegal evictions through advising and representing tenants and tenant organizations about their rights and responsibilities. Two contracts are targeted to assisting tenants in SROs (Single Room Occupancy buildings).

Employment - Beginning in FY1999, DHS included full-time employment (at least 35 hours a week) as a performance incentive linked in the contracts of nonprofit service providers. The agency's general and program facilities are eligible for the performance incentive on a per placement basis, which must be verified by the site requesting the credit. Pay stubs and/or a letter from the employer written on the company letterhead constitute verification. General bed facilities are required to submit one month of proof of employment to receive their bonus payment, and program sites must submit verification for two months of employment.

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 can achieve only limited success without a strong basic skills component that can help compensate for an unfortunate educational background.

Mental Health Rehabilitation - In 2000, 14% of entrants to the adult system self reported having a mental illness. A 1992 study by the State Office of Mental Health, entitled "Estimates of Homeless Adults with Serious Mental Illness", estimates that one third of all homeless single adults have serious mental illness. The study bases its estimate on research using standardized instruments to assess the psychiatric status of homeless persons on the streets and in shelters.

There are a number of existing programs for shelter residents who are identified as being mentally ill. Many of the 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 two adult transitional residences in the DHS system. All mental health programs are funded to include psychiatric clinicians working on-site, including psychiatrists or psychiatric nurse practitioners. The New York State Office of Mental Health (OMH) provides evaluation, referral, and mental health services in the single adult shelter system, and provides psychiatric evaluations and additional referral services while DHMH Mobile Crisis Teams assist in evaluation and emergency transport of clients for 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 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 DHMH 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. Two of these programs (located in Manhattan) generate Medicaid dollars while two others (located in the Bronx and Brooklyn) receive HUD funding.

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 program provides support services and group activities structured to enhance daily living skills. 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 two reception centers that are operated by non-profit providers that serve the chronically mentally ill. The centers provide low-demand mental health programs, similar to the federal "Safe Havens" model for seriously mentally ill clients. These centers have 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 homeless individuals who could benefit from the center, both of the centers coordinate with outreach teams specializing in mental health.

Specialized Services for Veterans - Homeless veterans receive specialized services at two transitional residences. Services include treatment and readiness programs, referrals for substance abuse services, medical and mental health services, as well as assistance in obtaining veterans benefits.

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. In FY 2003, over 20% of single adults in the shelter system were in beds allocated for substance abuse programs.

A number of different program models are available in the shelter service 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 (SWPs), Re-Entry programs, and Alcoholic Anonymous (AA) and Narcotics Anonymous (NA) meetings. As of the end of FY 2003, DHS has a total of 1,755 program beds specifically for clients with substance abuse issues.

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 with Clean and Sober dorms. 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. TCs 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 paying a graduated 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.

Re-entry programs are targeted to clients who have graduated from treatment and do not require long-term treatment programs to reintegrate into the Community. Re-entry includes assistance with job search, application and independent living skills development, and development of community-based contacts for continuing treatment and support.

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 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 - In contracted and directly run shelters, DHS facilitates clients' access to health care by funding, directly or via sub-contract, on-site medical services in the vast majority of shelters. Additionally, on-site psychiatric services are available at all assessment sites, mental health/MICA shelters, some shelters caring for clients suffering from substance abuse disorders, and some pre-program and TLC sites. There are two Comprehensive Care Programs (CCP), serving medically frail adults through increased case management, enriched nutrition, enhanced linkage to medical services, and expedited housing placements; and Barrier Free Living, which provides transitional shelter exclusively to physically disabled individuals who require home care, but do not qualify for skilled nursing facilities.

The office of the Agency Medical Director works jointly with DHMH, to ensure that public health in the family and single adult shelter system is optimized. DHS works closely with DHMH-Divisions of Communicable Diseases and Immunization and Vaccine-Preventable Disease in containing outbreaks of infectious illnesses and promoting immunization as the best preventive measure. DHS also works daily with the DHMH-Bureau of TB Control. DHS and the DHMH-BTBC work under a formal Memorandum of Understanding (MOU). This MOU includes a DHMH-staffed TB unit for men, two additional shelters capable of implementing Directly Observed Treatment (DOT) for TB/LTB1 patients, and a wide-range of activities including, but not limited to, follow-up on suspect or active TB patients lost to follow-up, contact investigations, training, and professional consultation.

Additionally, the DHS' Program Referral Unit, under the DHS Agency Medical Director, its contracted Medical Review Team and representative hospital staff from the Greater New York Hospital Association, revised and implemented a new policy to facilitate referrals for homeless single adults into the shelter system. This allows for a quicker review and placement process for clients. This will both enable clients to return to their shelters to continue the work towards independent living, and identifying those who are medically inappropriate for shelter placement so that alternative living arrangements can be made.

Permanent Housing

Social service programs throughout the continuum of care are aimed at assisting homeless single adults return to independent living in the community. Therefore, the goal of these programs is to enable homeless individuals to move into permanent housing, 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 Occupancies (SRO) through the City's Emergency Assistance Relocation Program (EARP); permanent placement into supportive SROs with on-site social services operated by not-for-profit

organizations through DHS' Shelter Placement Division and Program and Housing Placement; scattered site housing; transitional congregate housing supportive services; permanent congregate housing with supportive services, (these last three housing alternatives are overseen by DHMH, please refer to the non-special needs section for more information); independent housing (often social service agencies help to facilitate access to private market housing); public housing; and the Rental Assistance Program (RAP) for single adults living in the shelter system.

A critical initiative of the DHS strategic plan for 2003 was 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 pilot programs including PHACT, Moving-On, and Match Up have been developed in coordination with a taskforce of government and nonprofit agencies as part of this strategy.

In FY2003, 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 may be developed 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 SROs' supportive services.

DHS relocated 1,627 single adults into permanent subsidized housing during Fiscal 2003, including 523 in SROs, 15 in HPD and other apartments, and 757 in Licensed Residential Facilities.

In October 1999, the City signed an expanded New York/New York housing program for mentally ill homeless individuals. The program created 1,500 apartments to serve approximately 2,300 mentally ill homeless people over the next five years. It costs \$12,000 annually to house and provide services to an individual in New York/New York Housing, compared to \$20,000 to keep an individual in a shelter each year.

In addition to the City-sponsored programs described in this section, the State of New York funded three service programs in the City of New York to address the needs of the single adult mentally ill homeless population. Listed below are three City programs submitted as part of the New York State FY1998 application for the Federal Center for Mental Health Services' "Projects for Assistance in Transition from Homelessness" (PATH) Formula Grant program. These funds significantly assist DHS's efforts to provide a comprehensive array of housing and support services to homeless persons with serious mental illnesses.

The Bowery Resident Committee (BRC) Reception Center (\$350,000) assists clients with obtaining entitlement referrals into mental health day treatment and referrals into permanent housing. The Reception Center diagnoses, stabilizes, and provides skill training to help clients achieve a base-line level of functioning and better utilize available resources.

The Center for Urban Community Services' (CUCS) Residential Placement Management System (RPMS) (\$148,000) was established as a centralized office to provide training on how to locate and apply for housing placements, and keep a database of all of the different housing options available. RPMS trains staff on how to apply for different types of permanent housing alternatives, so that they can help homeless individuals become aware of, and take advantage of, all available housing options.

Lastly, the Project Hospitality Drop-in Center (\$140,000), located on Staten Island, provides clients with outreach, mental health screening, diagnostic, and treatment services, case management and referral for primary health services, HIV prevention, and housing services.

c. Runaway and Homeless Youth

Description of Population

New York City's youth in crisis population consists of both homeless and runaway youth between the ages of 12 - 23 years. According to the New York State Office of Children and Families, a homeless youth is a person under age 21, who does not have a permanent residence, and seeks some type of temporary long term living arrangement; while, a runaway youth is a person under age 18, who runs away from his or her family's home and seeks temporary shelter. Ethnically, they represent all race and cultural groups, and come from all class categories. There is no vast distinction between the gender, in that, both males and females seek assistance from the City's shelters. The City's Department of Youth and Community Development (DYCD) is the primary agency responsible for contracting services for runaway youth homeless shelters for persons under age 21. DHS provides services for homeless young adults over the age of 18. The City has a number of programs that provide the following described services including temporary shelter and permanent stable housing to runaway and homeless youth.

Type of and the provider of Supportive Housing Services

The federal, state and city governments have implemented shelter facilities, transitional housing and various types of social support service programs to assist runaway and homeless youth. These programs are administered by non-profit organizations, governmental agencies, neighborhood groups and religious organizations.

DYCD continues to maintain its comprehensive service delivery system for runaway and homeless youth in New York City. This system allows for an innovative, integrated and coordinated approach to services to address the multiple needs of these youngsters, placing youngsters in a safe environment, provide crisis intervention and foster family reunification where appropriate. DYCD contracts with various Community Based Organization (CBOs) to operate runaway and homeless services programs for youth under 21. Funding to operate these programs are provided in partnership with the New York State Office of Children and Family Services (OCFS) and the Department of Homeless Services (DHS). OCFS provides 60% funding towards a portion of the total allocated dollars and DYCD provides 40% towards that specific dollar amount. DHS provides \$68,217 through Emergency Shelter Grant funding.

The DYCD continuum of care system begins with the non-residential programs, which are designed to meet the immediate crisis needs of runaway and homeless youth under 21 years old and serve as major entry points into DYCD funded residential runaway/homeless youth programs. DYCD funds two types of non-residential programs: a Street Outreach and Referral Services Program and a Drop-In Center.

The Street Outreach and Referral Program (SORP) is a primary referral system for the residential programs. The SORP uses outreach strategies and methods to identify, engage, refer and transport at-risk and runaway homeless youth in effort to prevent or transition them from living on the street into a safe environment and/or independent living. DYCD provides financial support to several existing street outreach providers including Safe Horizon and Hetrick-Martin Institute who also target runaway/homeless youth. DYCD provides funding to the following three (3) contractors to provide RHY Street Outreach and Referral services targeting runaways, homeless and at-risk youth who may benefit from these services:

The Community Enhancement Organization (CEO): CEO operates mobile street outreach and referral services in the boroughs of Brooklyn and Staten Island. CEO receives \$250,000 to serve approximately 1,000 youth.

Greenwich Youth Council (GYC): GYC operates mobile street outreach and referral services in the borough of Manhattan and the Bronx. GYC receives \$293,400 to serve approximately 2,000 youth.

La Asociacion Benefica Cultural Father Billini. This organization operates mobile street outreach and referral services in the borough of Queens, and receives \$187,500 to serve approximately 1,000 youth.

The Drop-In Center provides an array of comprehensive programming and support services including assessment, case management, crisis intervention, counseling and information and referrals to runaways, homeless youth and the community. The center accepts referrals received from government agencies, community boards, community residents and social services providers and providers within the DYCD continuum of care system. The Drop-In Center coordinates with the RHY Street Outreach and Referral Programs and the RHY residential programs. Youth who come to the Drop-In Center receive core services which may include food and food provision, individual group and crisis counseling, educational service advocacy and referral, housing assistance and placement, health care assistance and referral, transportation and recreational activities on-site. The Center also maintains an on-site telephone outreach hotline that is available 24 hours per day, 7 days per week. The hotline responds to calls for assistance, and provides information and referrals. The organization providing Drop-In Center services is:

PROMESA, Inc. Promesa operates a citywide program, which is situated in the Bronx. The organization receives \$950,789 annually to serve approximately 2,850 at risk youth and runaway and homeless youth under 21 years old.

Another type of program within the RHY continuum of care system is the residential program which provides an immediate safe haven to runaway and homeless young people. Upon entry into the program youth are assigned a case manager/counselor. Under the direction of the program director and input from key program supervisory personnel, the case manager/counselor is responsible for assisting youth to develop a service plan and for the planning and coordinating of all services for youth from intake to discharge. Services are inclusive of hot, nutritious meals, hot showers, a bed to sleep in, toiletries and clean clothing, counseling, and referrals to a variety of free, on and off-site services. There are two types of residential Programs: Crisis Shelters and Transitional Living Programs.

The Crisis Shelter programs provide a safe haven for up to 30 days. Youth are admitted on an open intake basis 24 hours a day, 7 days per week, 52 weeks per year. Within the 30-day period, the program focuses on assessment, engagement, supportive services, literacy/remediation, skills testing and individual/group/family counseling. The primary outcome of the congregate care and interim family home programs is to reunify youth with their family or place them in other appropriate setting. DYCD funds two crisis shelter programs:

Under 21/Covenant House, Inc. This organization manages four (4) programs: the crisis center older unit housing 68 male/female beds; a crisis center minors unit housing 68 male/female beds; and a mother/child minors unit and older unit with a program capacity to house 75 females with children. Under 21/Covenant House, Inc. is funded by DYCD to operate a 30-bed crisis minors unit and a 30-bed older males unit. The organization receives \$640,208 to serve approximately 1,816 youth in the 30-bed crisis minors unit and 30-bed older males unit.

Seamen's Society for Children and Families, Inc. This organization operates a city wide Interim Family Home Program in Staten Island for runaway and homeless under 21 years old. The program provides crisis shelter for youth, by sponsoring 8 – 10 OCFS-certified homes. The Seamen's Society for Children & Families is responsible for providing the established goals of the program by providing crisis intervention services and arranging for placement in the homes. The organization receives \$65,271, annually, to operate its program.

The Transitional Independent Living programs prepare youth for independent living and transitional housing or placement in permanent housing, in addition to providing emergency shelter, case management/counseling, and other

supportive services. Services center on education, vocational skills, employment life skills, individual/group counseling and referrals to transition independent living programs. All of the programs serve youth 16 – 20 years old, citywide. Transitional Program providers include the following:

St. Christopher-Ottilie operates three (3) programs situated in Brooklyn: 1. A 20-bed group residential facility for males; 2. A 24-bed facility for females and their infants; and, 3. A recently opened 16-bed specialized TIL facility for young women and their infants. The organization receives \$668,053 to operate the male program and \$808,975 and \$520,921, respectively to operate the female/babies program. It is anticipated that they will serve approximately 126 youth annually.

Korean Youth Center operates a 15-bed co-ed facility situated in Queens. The organization receives \$412,970, to serve approximately 45 youth, annually.

PROMESA operates a 13-bed facility for homeless male youth, which is situated in the Bronx. The organization receives \$501,800 to serve approximately 60 males annually.

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

Since children who age out of the foster care system are at a high risk for homelessness, the City of New York is working to provide programs to assist such youth in obtaining suitable and permanent housing. The Administration for Children's Services (ACS) provides a range of supports and services to families and young people who are aging out of foster care. The ACS Office of Housing Policy and Development (HPAD), the ACS Division of the Budget and the ACS Office of Youth Development are responsible for administering various housing supports and services to our clients. ACS's Office of Housing Policy and Development is also collaborating on the development of a number of innovative supportive housing program for youth aging out of foster care, youth with severe persistent mental illnesses, and families preparing for reunification. 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, ACS, in cooperation with the New York City Housing Authority (NYCHA), developed the Family Reunification Priority Code Program. The program enables ACS to access Section 8 housing vouchers for qualified families whose only impediment to reunification is housing, and for families with children who are receiving preventive services and are at risk of coming into foster care because of unmet housing needs. Through this program ACS can essentially access an unlimited number of Section 8 vouchers for qualified families in need of housing to expedite permanency or prevent placement. Through the Family Unification Priority Code Program, ACS will be able to obtain a voucher for any qualified family served by ACS, which will help keep families together when appropriate and safe, and reduce the amount of time some children may spend in foster care.

Prior to the creation of the Family Reunification Priority Code Program, ACS was only able to access fewer than 900 Section 8 vouchers for families between 1991 and 2001, an amount that did not meet the needs of families that ACS served. Through this new program, ACS anticipates submitting an estimated 1,500 applications to NYCHA over a 12-month period. Since the program's inception in October 2002, 820 new referrals were received by ACS/HPAD, and 559 Section 8 applications were submitted to NYCHA. Of those application submitted to NYCHA, 239 were reunification cases (encompassing 629 children), and 320 were preventive families (encompassing 872 children).

2. Resources for Youth Aging out of Foster Care

Section 8 Vouchers and Public Housing for Youth in the ACS Independent Living (IL) Program

In cooperation with NYCHA, ACS has developed a program to secure Section 8 vouchers and public housing units for young adults leaving foster care who have a goal of Independent Living ('03'). To qualify, the client must meet the income eligibility criteria (earning less than \$22,000 gross/year for a household of 1 person), as well as other Section 8 requirements, and must meet one of the following certain criteria:

- The client must be at least 18 years of age and in care with a goal of "03" with an anticipated trial discharge date within the next 12 months; or
- The client must have been discharged from ACS care with a goal of "03" within the last two years *and* has not yet reached his or her 24th birthday.

An important feature of this resource is that ACS does not have a finite number of vouchers, which will eventually be exhausted. Rather, ACS has access to as many vouchers are needed for all current and former qualified ACS clients with a goal of Independent Living. Since the program's inception in May 2001, 2,158 Section 8 and 1,198 Public Housing applications were submitted to NYCHA on behalf of 2,135 Independent Living clients.

ACS Basic Life Skills Program for Youth Aging Out of Foster Care

The ACS Office of Youth Development administers the agency's Basic Life Skills Program (BLS) which promotes a strength-based philosophy through supportive programming. The concept of youth development suggests that youth contribute positively to their community and the BLS integrates this approach into their work with youth. The BLS prepares youth for self-sufficiency by providing training information, resources, and referrals to assist them in being as successful as possible in their lives. Young people are invited to actively participate in their Service Plan Reviews which take place every six months.

In addition, ACS provides basic life skills training to young people and foster care agency staff, offers technical assistance and monitoring of agencies, and pursues shared resource development with outside organizations. Lastly, upon discharge from foster care, a \$750 discharge grant is available to each youth. Although these funds are not strictly designated for housing related expenses, they can be utilized to pay for costs associated with locating suitable housing, such as broker's fees or extermination fees. These skills and supports place young people in a better position to find, and maintain, suitable housing.

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

The Administration for Children's Services 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. ACS is collaborating with the NYC Department of Housing Preservation and Development and Common Ground Community 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 will work over a 18-month period towards goals of permanent housing and stable employment with career skills by the time of graduation. Residents will participate in employment, educational mentoring and life-skills training programs. The 40-unit program is based on a similar European model and will be the first of its type in the United States. With this innovative program, ACS will help young people develop the tools and skills necessary to avoid homelessness as adults.

In addition, HPAD, 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.

- Twenty-five former ACS IL clients are currently residing in a newly constructed permanent supportive housing program in East Harlem by utilizing their Section 8 vouchers accessed through the IL Priority Code program.
- Six units of permanent supportive housing for IL clients have been made available at the Muhlnberg Residence in Brooklyn.
- Ten units of permanent supportive housing in the Dorothy Day Apartments, a newly completed 70 unit permanent supportive housing program will become available in February 2003. Five units will be held for former IL clients with mental health needs. Five units will be held for families needing housing to preventive placement, or expedite reunifications. The prospective tenants will access Section 8 through ACS's Priority Code programs.
- ACS is currently working with private not-for-profit housing developers on additional supportive housing programs for clients preparing to leave care with a goal of Independent Living, and clients who have already left care with a goal of Independent Living, as well as families needing housing to prevent placement or expedite reunifications. One project, which is slated to open up in November 2004, will provide 51 units of supportive housing for former IL clients with Section 8 vouchers. Another program, slated to open in June 2004, will provide 20 units of permanent supportive housing for former IL clients and 31 units of permanent supportive housing for families needing housing to prevent placement or expedite reunifications.

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 independent living. Families are eligible when their only barrier to reunification is lack of adequate housing or when they are receiving ACS preventive services and are in need extra support to maintain their existing housing. Once deemed eligible, up to \$300 is available per month per family for up to three years to assist with paying rent. 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 young people aging out of foster care and families who are at-risk of becoming homeless. One-time grants of up to \$1,800 are available to assist with expenses associated with obtaining a new apartment, such as moving expenses, broker's fees, new locks or extermination. The subsidy can also cover up to \$1,800 in rental arrears. There is, however, a total lifetime maximum of \$10,800 for each youth or family who participates in the ACS Housing Subsidy program. This program currently maintains a caseload of approximately 800 young people and families.

Housing Locator Services

Locating a landlord willing to rent to Section 8 or ACS Housing Subsidy clients can be very challenging. The ACS Office of Housing Policy and Development (HPAD) has developed two resources to address this issue: Realtor Database; and Electronic Apartment Postings.

Realtor Database: HPAD has developed a database of over 140 realtors throughout the Bronx, Brooklyn, Manhattan and Queens. This "Realtor Directory" consists of realtors that have expressed a willingness to

work with ACS clients that receive Section 8 vouchers, Housing Subsidies, SSI and other types of rental assistance. Included in the Realtor Directory is the name of the realtor, contact information, what type of housing assistance is accepted, and broker's fees. It is organized in an easy to use Excel spreadsheet, which can be sorted by Borough and/or zip code, to help focus the housing search in a particular neighborhood.

Electronic Apartment Postings: Periodically, HPAD receives phone calls from landlords and realtors seeking qualified Section 8 tenants for apartments that are available for immediate lease-up. In addition, HPAD has developed relationships with a number of supportive housing developers that hold units specifically for ACS clients that receive Section 8 vouchers. For example, most recently, ACS was granted access to 25 newly constructed studio units for IL clients with Section 8 vouchers. HPAD posts the units on the ACS Intranet in the ACS/HPAD folder.

d. Populations at Risk of Becoming Homeless

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. All borough Housing Courts including Harlem and Red Hook Community Justice Centers, have HRA's Housing Court Liaison Unit (HCLU) staff who interview people to assess and determine if an eviction can be prevented or forestalled. Based on the Housing Court Liaison's assessment of the situation, the case can be recommended for payment or referred to the appropriate Job Center where an HRA Diversion Team will further evaluate the rent arrears situation.

Housing Court Liaisons also evaluate cases to determine if a tenant is eligible for inclusion in the class covered by the Jiggett's Lawsuit. Those eligible for assistance may receive an increased allowance.

Very low incomes 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. Of the approximately 873,000 very low income renter households (incomes less than 50 percent of area median family income), about 525,000 have a severe rent burden (over 50 percent of household income) and may be at risk of becoming homeless. Among renter households with extremely low income (30 percent or less of area MFI), at least 73.5% or about 381,000 households, have a rent burden greater than 50 percent of income. If overcrowding is considered to compound the risk of homelessness, approximately 63,000 (50 percent or less of MFI) very low income renter households are overcrowded and paying more than 50 percent of household income for rent. These households, or some members of these households, may become homeless. Another approximately 23,000 renter households with incomes between 51 and 80 percent of area MFI also have a severe rent burden 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, as well as those reporting no cash rent.

About 197,000 low income renter households (income at or below 80 percent of the area median family income) live in housing characterized by serious physical defects. Serious physical defects can be defined as having three or more building defects, 4 or more maintenance deficiencies, or with an incomplete kitchen or bath. Of these, about 106,000 households are very low-income renters (at or below 50 percent of MFI). When conditions become dangerous and landlords fail to make repairs, these families and individuals may leave their homes and enter the shelter system.

HRA's Housing and Homeless Services Region manages five programs that assist HRA's public assistance applicants (PA) and recipients with financial housing problems. The newly formed region has established extensive linkages with other city housing agencies, such as the New York City Housing Authority (NYCHA), the Department of Housing Preservation and Development (HPD) and the Department of Homeless Services (DHS).

The five programs include the Housing Court Liaison Unit (HCLU), the Homelessness Diversion Unit (HDU), the Rental Assistance Unit (RAU), Employment Incentive Housing Program (EIHP), and Landlord Ombudsman Services Unit (LOSU). These homeless prevention efforts provide early and aggressive negotiations with landlords to reduce rent arrears expenditures for New York City and New York State. In addition, these Programs enable HRA to achieve one of its continuing goals of assessing families at risk of homelessness by helping them maintain permanent housing, thereby preventing their entry into the DHS homeless shelter system.

HCLU staff is out-stationed at the City Housing Courts located in all five boroughs. These staff interview individuals and families and make assessments of their housing problems to determine if evictions can be forestalled or prevented. Based on the Housing Court liaison's assessment of a housing situation, recommendations for payment are made or referrals are made to the appropriate Job Center HDU. In CFY 2003, HCLU staff reviewed 24,408 cases; of that number 5,105 were referred to HDU staff for assistance. By contrast, in CFY 2002, HCLU staff reviewed 20,819 cases; of that number 4,787 were referred to HDU staff for assistance.

Homelessness Diversion Units are located at 29 Job Centers and at the Department of Homeless Services' (DHS) Emergency Assistance Unit (EAU). HDU staff interview all families identified as at risk of homelessness. Of the 42,762 families referred to HDUs during CFY 2003 (through 05/31/03), approximately 24,196 had their housing problems resolved. During CFY03, HDUs maintained permanent housing or found alternate living arrangement for 13,863 of these 24,196 (57.2%) families. This compares with 12,721 of 22,026 (57.8%) families whose cases were resolved in CFY 2002.

For those 13,138 families who were at imminent risk of homelessness during CFY03 (through 5/31/03), HDUs maintained permanent housing or found alternate living arrangements for 12,942 (98.5%) of these families. For CFY02, comparable statistics were 11,085 of 11,346 (97.7%) families who were at imminent risk of homelessness.

HDU staff also assist HRA clients who are homeless or at risk of homelessness by intervening and advocating on their behalf. They locate new apartments or temporary housing, and negotiate rent arrears payments to landlords. Once a positive decision is reached on a housing-related case, HDU staff issues the appropriate grants and delivers the checks to the landlord or Housing Court.

HDU staff works closely with NYCHA to avert evictions for PA recipients with rent arrears. During CFY 02, HDU averted 204 evictions. During CFY 03, HDU averted 264 Housing Authority evictions.

In CFY 2001 HRA initiated the Rent Arrears Alert (RAA) Program. HDU staff coordinates this program, which is now active at 29 Job Centers. The RAA Program is primarily focused on early intervention and works with tenants who receive PA and have rent arrears. RAA staff also enter into negotiations with landlords to help tenants remain housed. The program has been very successful in their negotiations with landlords and during CFY 02, RAA

reduced past due rent arrears by \$2,276,000. Through May CFY 03, RAA has negotiated \$2,757,000 in arrears savings.

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 family or individual to be at risk or homelessness. RAU staff make case-by-case determinations as to whether a public assistance applicant or recipient may receive an emergency grant to resolve a housing emergency if the person(s) facing eviction can substantially document the claim. Once the arrears situation is assessed, a plan of action is developed and services are coordinated with the Job Center and HDU staff. RAU staff works closely with the HCLU and HDU staff to prevent evictions.

Employment Incentive Housing Program (EIHP) provides a time-limited rent supplement for engageable homeless families on public assistance residing in the shelter system. The program’s central premise is that a stable housing environment is essential to job stability and the movement of a family from welfare to self-sufficiency. Accordingly, EIHP works first to provide families (typically families relatively new to the shelter system) who are employed or who have an employment potential with expedited relocation into permanent housing. Then, with the support of HRA job training, employment planning and appropriate after-care services, these families are expected to move along the path to self-sufficiency.

Since it began operations in March 2001, EIHP has had great success in finding apartments for homeless families. As of July 12, 2003, EIHP has found apartments for 846 families. 588 of these families have relocated from the DHS shelter system and 258 from the HRA Domestic Violence shelter system. All 588 families from the DHS system and 38 of the Domestic Violence families have been placed using EIHP landlord incentive bonuses and rent supplements. 220 HRA Domestic Violence families have been placed with HPD Section 8 vouchers.

The fifth prevention program of the Housing and Homeless Services Region is the Landlord Ombudsman Services Unit (LOSU). One of their many program efforts relates to expediting rent checks, security deposits, brokers’ fees and moving allowances on a city-wide basis for HPD Section 8 voucher holders. Since beginning their efforts last Fall, LOSU has expedited checks for 1,629 cases, enabling those families to move quickly into Section 8 housing.

Overcrowded families

Overcrowded families represent a pool of precariously housed people who could potentially seek shelter at any time. According to the 1996 Housing and Vacancy Survey (HVS) the incidence of overcrowding was slightly higher for low-income renters (at or below 80 percent of the area MFI) than for all renters (11.9 percent vs. 10.3 percent). Among renter households with large families (5 or more members), the rate of crowding was particularly high at 62.6 percent. According to HRA, in March 1998, 75.2 percent of public assistance households in private housing were paying rent at or above the shelter allowance ceiling. The HVS found that 16.1 percent of renter households receiving public assistance are overcrowded.

The rate of crowding among owner-occupied units was just one-third the rate of crowding in renter-occupied units (3.4 percent vs. 10.3 percent). Among non-elderly owner-occupied households the rate of crowding was 4.6 percent.

Diversion workers who are located in each of HRA's Job Centers help prevent clients from entering the homeless shelter system. If a client is facing one of the above described situations, such as not having heat, living in an apartment where repairs are needed to make the apartment habitable, or being asked to leave an overcrowded apartment, a Diversion worker intervenes on behalf of the client to resolve the housing emergency, thereby averting homelessness.

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. Public hospitals and prisons, 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, may be inappropriate for a congregate shelter setting, where it may be difficult to monitor medication regimens, or where they are at risk of infection.

Relocated Families

The State's Homeless Rehousing Assistance Program (HRAP) helps to find aftercare services for families relocated from the shelter system into permanent housing. 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. Operated by not-for-profit service providers, these programs provide services such as intensive case management and supportive services. The City encourages all shelter providers who relocate families to assist the families with their transition into their new communities.

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

a. Mentally Ill, Mentally Retarded 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 either is unwilling or unable to return home, supportive residences providing various levels of care are contacted by discharge planners 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), Office of Mental Retardation and Developmental Disabilities (OMRDD), the Office of Alcoholism and Substance Abuse Services (OASAS). Many of the supported 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 is a discussion of the types of housing-related services the New York City Department of Health and Mental Hygiene (DOHMH) funds for non-homeless persons.

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

The State of New York continues to reduce the number of beds in psychiatric institutions and convert to a network of community-based programs to support seriously mentally-ill adults and seriously emotionally disturbed children. This transition has been facilitated by the passage of the Community Mental Health Reinvestment Act in 1993. This act ties funding and development of community-based mental health services to the reduction of beds in State Psychiatric Hospitals and local prevalence rates of mental illness. Reinvestment monies are targeted to services that include crisis and emergency services; outpatient services; vocational, educational and recreational programs; and supported housing.

Housing specifically targeted for individuals with mental illness is funded and developed by both the State Office of Mental Health (SOMH) and the DOHMH. The DOHMH development is accomplished with the assistance of the New York City Department of Housing Preservation and Development (HPD). There are four principal categories of housing: Congregate Treatment Residences; Apartment Treatment Programs; Congregate Support Residences; and Supported Housing Programs.

Congregate Treatment Residences

Congregate Treatment Residences are transitional (less than two years) residences for the mentally ill that are developed and funded by SOMH. They are also licensed by SOMH. 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 program. 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, 2003 there are 2,297 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 SOMH. 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, 2003 there are 1,812 Apartment Treatment units in New York City.

Congregate Support Residences

Congregate Support Residences are extended stay residences that are developed, funded and licensed by SOMH. They are also known as *Community Residences with Single Room Occupancy Apartments (CR/SRO)*. They have a set of core services such as health care, meals, and case management that are offered on a low demand basis. 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, 2003 there are over 821 congregated support units in operation in New York City.

Supported Housing Programs

Supported Housing Programs provide permanent housing to individuals and families. They are developed by both SOMH and DOHMH. The programs are not licensed. However, they do operate based on an established set of principles that have been established 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 March 31, 2003 there are 6,211 units of supported housing in New York City.

Two 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 1,500 additional housing units for homeless mentally ill adults. The capital portion of the Agreement provides for 1,000 units that are in early stages of development through twenty-six contracted programs. The City's 500-unit share is being

developed by HPD. To date 126 are operational and the balance are expected to be completed by 2005. The remaining 500 units have already been completed, 190 by the State and 310 by the City. The State will provide \$11,000 per unit to subsidize the social service and building operation costs and the City will provide an additional \$1,000 subsidy per unit.

High Service Need Housing

An \$80 million City/State match for a congregate housing development program was initiated in Fiscal 2001 to provide 800 new congregate housing units over the next 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. The City also has 400 units of housing in the early stages of development for single adults.

2. Housing for Mentally Retarded and Developmentally Disabled Individuals

The State Office of Mental Retardation and Developmental Disabilities (OMRDD) 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 OMRDD 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 OMRDD to provide care to the residents. In January 2003, there were 239 Supportive units, funded with \$4.5 million, and 539 Family Care units, funded with \$8.1 million, available in the City.

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. In January 2003, there were 290 Supervised units, funded with \$9.5 million, and 3,724 IRAs, funded with \$325.1 million, available in the City.

24-Hour On-Site Assistance and Training Programs with Intensive Medical and/or Behavioral Supports Programs

24-Hour On-Site Assistance and Training Programs with Intensive Medical and/or Behavioral Supports Programs are provided in *Intermediate Care Facilities for Developmental Disabilities (ICF/DD)*. ICF/DDs provide room and board, 24-hour intensive support with medical and/or behavioral services, and training in daily living skills. The setting may constitute a single site, a dispersed site or a distinct part of a facility. In January 2003, there were 2,992 ICF units, funded with \$337.3 million, available in the City.

In summary, as of January 2003 there were 7,785 individuals living in Community Housing units in New York City at a total cost of \$684.7 million. The demand for supported housing has long outweighed the supply across the State and in the City. In August 1998 the State announced a five-year plan to eliminate waiting lists for residential placements through a new initiative, *Creating Alternatives in Residential Environments and Services (NYS CARES)*. The plan called for the creation of 4,900 new beds Statewide, with 3,000 allocated to the City. An advisory group has aided State Office of Mental Retardation and Developmental Disabilities (OMRDD) to streamline the property approval and acquisition process and to adjust funding levels to be competitive in the City's real estate

market. By late 2002, 1,104 beds had been developed and another 1,056 units were in the development stage. An additional 137 beds had been developed to serve persons covered by legal mandate. As of November 2002, 2,175 individuals were registered on official OMRDD waiting lists for residential placement in the City. Of this number, 1,636 were identified as needing placement within three years and 539 in four or more years.

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: intensive residential services; community residential services; and supportive living 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.

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.

The following service descriptions reflect programmatic and regulatory changes to the service system that began in 1990 when two State Divisions providing alcoholism and substance abuse services were consolidated to form OASAS. Applying survey data to 2000 US Census population estimates, OASAS estimates Alcoholism and Substance Abuse Treatment Need Prevalence for New York City at 775,519, or 9.7% of the population. Of that number, only 135,036 New York City residents (or 17%) were admitted to treatment in 2001; more than 75% were male. 12,086 residents were admitted to residential services, of which 11,074 were served within New York City. In total 12,678 individuals (not residents) received residential services in the City. Males comprised nearly 80% of the population; 65% were 25 to 45 years of age.

Intensive Residential Services

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 are 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 dependence programs which provide addiction counseling Services which may be provided directly or by referral 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.

Please refer to Part II, Other Actions, Section C, New York City Housing Authority, Continuum of Care for Public Housing Residents with Special Needs, for a description of the Authority's Drug Outreach and Referral Program.

b. Persons with HIV/AIDS

More than 11.3 million people live in the New York EMSA – 71% of them in the five boroughs of New York City (Bronx, Brooklyn, Manhattan, Queens and Staten Island), and the remainder in the Lower Hudson Valley region of Putnam, Rockland and Westchester counties and the northern New Jersey counties of Bergen, Hudson and Passaic. The NYC portion of the EMSA is densely populated, whereas the Lower Hudson Valley and northern New Jersey regions include both urban and suburban areas. Poverty is particularly high in many areas of the EMSA, with 21.2% of NYC families and 15.5% of Hudson County residents living below the poverty line. In addition, the cost of living in NYC is among the nation's highest.

New York has the nation's largest and most complex HIV/AIDS epidemic. With just 3% of the nation's population, New York City accounts for 16% of all people living with AIDS. For recently diagnosed AIDS cases, NYC has the highest rate among major metropolitan areas - more than four times the national average. More than 100,000 people in the EMSA are living with diagnosed HIV or AIDS - 95% of them in NYC – with more than 12,400 people testing HIV-positive in 2001-2002. Between 1995-1998, annual AIDS deaths in NYC fell by 66%, but the annual number of deaths declined only 11% between 1998-2002.

New York City faces tremendous challenges with assisting people living with HIV and AIDS in every service arena. As of June 30, 2003, there were 138,826 cumulative AIDS cases documented by the Department of Health and Mental Hygiene, with 84,807 City residents diagnosed as persons currently living with HIV or AIDS. In the first half of 2003 (January – June) alone, 2,563 new AIDS cases were reported and in calendar year 2002 4,059 new AIDS cases were diagnosed.

As the number of HIV and AIDS cases continues to grow, the population affected by the disease continues to change. Early in the epidemic, most known cases involved gay white men. However, transmission of and infection by the virus among injection drug users soared to a peak in 1992, during which 52% of all men and 58% of all women reported diagnosed with AIDS in New York City were infected through injection drug use. This trend may have started to change. HIV case data for 2002 reports that 9.8% of HIV diagnoses for Jan-Dec 2002 have

injection drug use as their risk category, and 24.3% were from men who have sex with men. However it should be noted that 16.2% of HIV cases reported heterosexual sex as their transmission risk and fully 48.8% of cases are unknown and under investigation.

Communities of color have been disproportionately affected by the epidemic. By December 2002, African-Americans and Latinos together represented 75.8% of all persons estimated to be living with HIV/AIDS. In New York City, the proportion of whites among newly diagnosed AIDS cases decreased, from 54% in 1981 to 15.0% in December 2002. Blacks currently comprise the largest proportion of people diagnosed with AIDS, accounting for 53.9% of new AIDS cases in 2002. The proportion of Hispanics among AIDS cases has also risen and now stands at 28.9%. The proportions of Asian/Pacific Islanders and Native Americans/Alaskan Natives among AIDS cases has been stable throughout the epidemic at less than 1% each.

Adolescents and young adults are also affected in increasing numbers by HIV and AIDS. Evidence is beginning to suggest a resurgence of infection among young men who have sex with men due to a return to unsafe sexual activity. Among men of color, there is an increase in infection rates, which may be due in part to a link between injection drug use and unprotected sexual contact between men who have sex with men. In January 2001, the New York City Department of Health released a report which suggests that 4.5 to 6.3 % of the City's young men who have sex with men in the City are becoming newly infected each year, compared with less than 1% nationally and 3.7% in San Francisco. The most striking finding is that 33% of young African-American men sampled who reported having sex with men were found to be HIV+. Furthermore, a nationwide study released in July 2002 by the U.S. Centers for Disease Control reports high rates of infection continuing among young men who have sex with men, and that many gay and bisexual men, especially African-Americans, are unaware that they are infected. According to the study, more than three-fourths of young men who have sex with men and are infected with HIV were unaware of their status, including 91% of African Americans.

New York City has two city jails, one in the Bronx and one in Manhattan, and a detention facility on Rikers Island, with upwards of 120,000 persons incarcerated per year. Moreover, the city has an average daily inmate population of approximately 14,490 – more than the entire prison systems in any of 35 states. In 1997, surveys conducted by the Department of Health concluded that 19.4 % of female and 9.9 % of male detainees were HIV infected upon entry into the correctional system. One prominent challenge to the HIV/AIDS service system has been to find ways to initiate and sustain services for paroled or released individuals. These individuals may have received HAART (highly active antiretroviral therapy) or other treatment while incarcerated, but many are not sufficiently engaged in discharge planning to continue their commitment to treatment and services once released.

The concentration of HIV/AIDS in the New York EMSA among people who are either homeless or unstably housed significantly increases the cost and complexity of NYC's HIV/AIDS care system. Without safe, reliable and adequate shelter, patients face often-insurmountable barriers to treatment adherence and are also exposed to conditions that threaten their health and well-being.

While NYC's population increased by 9% in the last decade, the City lost more rental units than it built in the 1990s. The overall vacancy rate in the city is 3%, substantially below the 5% threshold when housing crises are typically declared. Among the lowest-rent units, fewer than 1.5% are vacant. Housing in NYC is not only scarce; it is also expensive. According to a 2003 survey by *Forbes* magazine, NYC ranks third in the cost of housing among 150 metropolitan areas. While the average real income for New Yorkers declined by 16% from the late 1970s to the late 1990s, the real median rent increased by 22% between 1987 and 1999 (after adjusting for inflation). Today, more than one in four renters in NYC pay more than half their income in rent. Meanwhile, traditional housing safety net programs have been slashed, as reflected in the 40% reduction during the 1990s in new Section 8 vouchers. The

average daily census in New York homeless shelters rose to 38,321 during the first six months of 2003 - and 80% increase over 1998 and four-fold increase since 1982.

In City Fiscal Year 2003, the Department of Homeless Services (DHS) served 10,758 single adults and 7,087 families accessing DHS shelter services for the first time. In City Fiscal Year 2003, street outreach teams placed 7,648 single adults into temporary housing. DHS also contracts with not-for profit providers to house over 7,000 individuals with mental health and substance abuse needs in supportive SROs. 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. Various studies have estimated seropositivity in the homeless population at 15 to 20 percent. If these seropositivity rates hold for New York City, there would be as many as 5,000 – 6,700 homeless and formerly homeless single adults with HIV/AIDS.

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 New York City EMSA HOPWA grant, has designated the NYC Department of Health and Mental Hygiene's Bureau of HIV/AIDS, Office of AIDS Policy Coordination (OAPC) as the grantee, giving them responsibility for planning and coordination of the HOPWA grant. HOPWA-funded programs are implemented by the New York City Human Resources Administration's HIV/AIDS Services Administration (HASA), the New York City Department of Housing Preservation and Development (HPD), the New York City Department of Health and Mental Hygiene, Division of Mental Hygiene (DOHMH), and the HOPWA Master Contractor (the Postgraduate Center for Mental Health).

As the designated grantee for the HOPWA formula grant, DOHMH, Bureau of HIV/AIDS Office of AIDS Policy Coordination (OAPC) 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 and Bergen, Hudson and Passaic counties in northern New Jersey. OAPC works with these six 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, New Rochelle, and Yonkers.

OAPC convenes regular meetings with HOPWA-funded City agencies to ensure effective collaborative planning and execution of the HOPWA grant. OAPC also receives from City agencies utilizing HOPWA funds detailed reports 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 OAPC 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 through DOHMH, and (4) delivery of housing and related supportive services through the HOPWA Master Contractor, the Postgraduate Center for Mental Health (PCMH).

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 and 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 efficient linkages with substance abuse services, mental health counseling, 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 Title I of the Ryan White CARE Act 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 (HPD, HASA and DOHMH) provide or subsidize units under the following housing models:

- Rental enhancement (cash subsidies through Public Assistance);
- Emergency placement in commercial SROs;
- Supported SROs (include on-site supportive services);
- Scatter site supportive housing;
- Transitional congregate housing with supportive services;
- Permanent congregate housing with supportive services;
- Independent (private sector, non-supportive); and
- Public housing.

HASA provides a substantial portfolio of independent and supportive housing for its clients. In June 2004, HASA's total caseload was 31,097, of which three-quarters were in receipt of some type of housing service. The types of housing encompass emergency housing placement, transitional supportive congregate housing, permanent supportive congregate housing, scatter site supportive housing and placement services and rental assistance.

As of June 2004, HASA provides Rental Assistance to 20,843 individuals and families living in independent housing in apartments; 510 units across 11 facilities of contracted transitional supportive housing; 1,135 units across 29 facilities of permanent supportive congregate housing; and 2,252 units of scatter site supportive housing operated by 33 community-based organizations. All current and future agency contracts are performance based with clear output and outcome measures.

HASA is developing additional housing in all of the above programs for fiscal year 2004. The agency is processing contracts with seven congregate facilities with a total of 390 new units currently in operation. HASA has also worked with an additional 18 scatter site supportive housing and placement services providers during fiscal year 2003 and negotiated for an additional 650 placements annually.

HPD's 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 PLWAs. 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 1,575 units for individuals and families with HIV/AIDS through July 2004, with another 87 units in the construction phase and another 331 units under review that will begin design. In addition, several providers have leveraged other funding to develop or renovate facilities or have been able to bring housing-ready units into the City's portfolio. For HOPWA Year 13, the City has allocated \$5,000,000 in HOPWA funds to assist in the development of permanent housing for PWAs. This allocation is part of a 5-year plan to develop approximately 248 new units of AIDS housing.

DOHMH is developing permanent housing units geared specifically for adult New Yorkers with dual and triple diagnoses of HIV/AIDS, chronic mental illness and/or alcohol and/or substance abuse. DOHMH has two contracts with non-profit organizations to provide a total of 46 scatter site units for dually or triply diagnosed adults. In addition, DOHMH has a vendor that is providing 30 scattered site units for women with serious and persistent mental illness who are living with HIV/AIDS (including both single women and women with children). Between the three programs, 76 persons with HIV/AIDS are being housed. DOHMH has also created two new programs with 22 units each for a total of 44 additional units to serve a combination of single adults and families with children, where at least one member is a PWA with a serious and persistent mental illness.

Community-based organizations also provide housing and services through programs administered by the HOPWA Master Contractor. The services funded through the HOPWA Master Contract supplement and enhance the programs built and operated directly by the City agencies—HASA, DOHMH and HPD—and include programs for persons living with HIV/AIDS that provide housing placement assistance, food and nutrition programs (soup kitchens, food pantries, outreach feeding programs and nutritional education and counseling), harm reduction outreach, independent living skills training, vocational training services, administration of a sustainable living fund that provides emergency and short term rental assistance, technical assistance for fiscal infrastructure support to CBOs providing HIV/AIDS housing and housing related services, and technical assistance for outcome based evaluation to Master Contracted programs. The Master Contract portfolio includes thirteen supportive housing programs to serve the following special needs populations: HIV+ and at-risk homeless adolescents, including LGBT youth (emergency housing); HIV-infected women with children; HIV-infected women with mental illness; HIV-infected seniors aged 55 or older; difficult to serve persons with AIDS; emergency/transitional housing for parolees/releasees with AIDS/ symptomatic HIV disease and transitional and permanent housing for dually diagnosed individuals and families in need of harm reduction services. Three of the programs for dually diagnosed individuals and families, one of the adolescent programs, and one of the programs for parolees/releasees, were implemented in 2003. The Master Contract is also an important vehicle to support specialized research into emerging program needs, special populations, quality assurance, best practices and technical assistance.

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

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. 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 payments; and housing related benefits such as rental assistance, rent arrears payments, home furnishings, moving costs, or security deposits. Case managers refer clients to Medicaid, home care, homemaker services, Food Stamps, federal disability benefits and community based mental health and substance abuse programs. In HOPWA Year 13, HASA anticipates serving a caseload of close to 33,000 cases including over 5,800 family cases.

Rental Assistance

Individuals who are HIV-positive with symptoms or signs of clinical disease but 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. In City Fiscal Year 2003, HASA provided 14,321 approvals of requests for new apartment placements, ongoing rent, rent increases, home furnishings and sundries, client rent arrears, and moving and storage fee expenses.

Emergency Placement in Commercial SRO's

Approximately 10% of the newly admitted HASA clients in any given month are determined to be homeless and eligible for 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, necessitates utilizing single room occupancy hotels on an emergency basis. To accelerate placement out of commercial SROs and into more adequate environments, the City has developed, with the use of HOPWA funds, a Transportation Unit within HASA to escort clients, especially those living in emergency and supported SRO hotels, to interviews and apartment showings for 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 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 matching City Tax Levy and State funding. Program services are enhanced with additional Ryan White CARE Act Title I funds that fund additional staff positions in the areas of mental health and substance abuse.

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 an HIV population 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.

Targeted Housing Programs

The Postgraduate Center for Mental Health, the HOPWA Master Contractor for the City, has collaborated with the Office of AIDS Policy Coordination to contract with not-for-profit community-based organizations to create targeted housing programs to serve a number of special need populations living with HIV/AIDS. These include permanent housing programs for women with mental illness, women with children, non-HASA-eligible immigrants, seniors (aged 55 and over) with AIDS, low-threshold emergency housing programs for street-youth/adolescents (including LGBT youth) who are HIV+ or at risk due to prior histories of prostitution or substance abuse, emergency/transitional housing for parolees/releases with AIDS/ symptomatic HIV disease, and transitional and permanent housing for dually diagnosed individuals and families in need of harm reduction services.

Housing Placement Assistance / Independent Living Skills Training

Funding is available to community-based organizations, through HOPWA and Title I of the Ryan White CARE Act, to provide assistance to persons living with AIDS and symptomatic HIV infection. Services include locating and securing apartments, obtaining rental assistance entitlements, and providing training in the skills for daily living as needed and appropriate to prevent homelessness once housed. Because of greater efficiency and continuity of services, the HOPWA Master Contractor has merged all of the Housing Placement Assistance programs with Independent Living Skills Training programs. There is now a joint HPA/ILS program operating in each of the City's five boroughs.

Harm Reduction

Overseen by the HOPWA Master Contractor, community based organizations reach out to residents of commercial SROs in efforts to engage marginalized persons in life skills training, and in referrals to medical, substance abuse, case management, reconnection to medically appropriate housing, and other services to assist such clients in achieving readiness for independent living.

Sustainable Living Fund

This program, overseen by the HOPWA Master Contractor, has proven to be a source of rental funding for individuals and families living with HIV/AIDS who have difficulties in accessing permanent housing. The Sustainable Living Fund provides emergency and short-term rental assistance to a limited number of qualifying individuals and families, and assists such clients in securing and maintaining housing while efforts to secure a stable source of rental assistance can proceed.

The HOPWA Advisory Committee (HAC)

The Housing Work Group of the Ryan White HIV Health and Human Services Planning Council has a dual role in the HIV services planning process. Its members also hold appointments as members of the HOPWA Advisory

Committee (HAC), the identified vehicle for citizen participation in the HOPWA planning process. The HAC makes its formal recommendations to OAPC, which incorporates this input - along with citizen testimony received during two annual symposia and public hearings sponsored annually by the Department of City Planning - as appropriate in the development of the Consolidated Plan. The Housing Work Group/HOPWA Advisory Committee meets monthly throughout the year to monitor Ryan White and HOPWA programs and develop a work-plan for its strategic planning process. During the HOPWA strategic planning cycle, the HAC meets more frequently to formulate advice and recommendations for the allocation and administration of HOPWA formula grant funds.

The HAC's deliberations are informed by the participation of consumers and service providers, as well as current research, including formal data presentations from the Community Health Advisory Information Network (C.H.A.I.N.) (Initiated in 1994, C.H.A.I.N. is the only longitudinal study of people living with AIDS in the United States.). Other published data sources include, but are not limited to, epidemiological profiles, assessment of the service needs of affected populations, resource inventories, provider profiles, assessments of gaps in services, a description of the existing continuum of care, client utilization and program monitoring data, reports on ongoing longitudinal studies, reports and surveys of client satisfaction, and reports on community forums.

The following HAC recommendations have been implemented by OAPC:

- Conducting an HIV/AIDS housing needs assessment. A non-profit organization, the Hudson Planning Group, has been contracted by OAPC to conduct this assessment. It is anticipated the project will be completed by the Fall of 2004;
- Development of a rental and other emergency assistance program. Under the direction of the HAC, OAPC developed a model emergency rental assistance program, the Sustainable Living Fund;
- Implementation of HOPWA guidelines that permit surviving family members to remain in funded housing for one year;
- Making explicit and clarifying the planning, coordinating and monitoring role of OAPC in relation to the City agencies involved in the provision of AIDS services;
- Development of a model program to provide technical and infrastructure assistance to AIDS housing providers; and
- Exploring the capacity to make resources available to help PLWAs who are ineligible for other types of assistance.

The following HAC recommendations are under development:

- Development of model programming that attaches rental and other types of Title I and HOPWA support to individuals living with HIV/AIDS rather than programs or residential units; and
- Conducting outcome-based evaluation for HOPWA funded programs.

The following is the official statement of the HAC on the City's HOPWA spending plan: "Throughout the planning process and over the past several years, the HAC has consistently expressed strong support for using HOPWA funds primarily for the development of AIDS housing. The HAC believes that the City should be using HOPWA dollars to develop new units of AIDS housing and to support housing related services, rather than using over \$24 million in HOPWA funds for case management services at HASA. The \$24 million that is currently being used to support case management at HASA would be better used to provide funding to HPD and the Master Contractor to develop and support new units of AIDS housing. In addition, in light of the new HOPWA regulations being drafted by HUD, which would severely restrict the ability to use HOPWA funds to pay for supportive services, the HAC urges the City to anticipate the upcoming changes in the regulations and discontinue using HOPWA to pay for case management at HASA."

c. Victims of Domestic Violence

1. Housing Needs

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

A major source of data is the City's Domestic Violence Hotline, established in 1994. In CY2002, the Hotline received 151,276 calls, including 11,082 unduplicated requests for shelter. The daily average of unduplicated shelter requests was 30. According to the data, the majority of victim callers were female (83 percent), and 16 percent were male (data was missing for 1 percent of cases). Fifty percent of victims were between ages 22 and 34; nineteen percent of victims were between ages 35 and 44; sixteen percent were between ages 19 and 21; and five percent were between ages 13 and 18. Victims' calls came from all five City boroughs: 28% were from Brooklyn, 21% were from the Bronx, 21% from Manhattan, 16 % from Queens and 3 % from Staten Island. The data also indicates that 39 percent of callers to the hotline were African-American/Caribbean, 31 percent were Latina/o, 11 percent were White, 3 percent were Asian/Pacific Islander, 2 percent were Arab/Middle Eastern and 1% were Native American.

While income data was not collected for the Data Summary, employment status was surveyed. While 26 percent of callers were working, the majority was not: 29% unemployed, 15% on Public Assistance, 4% on SSI and 2% on SSD.

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) requires the filing of Domestic Incident Reports (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 phone and walk-in complaints to the local precincts. During City Fiscal Year 2003, there were 249,622 DIRs prepared. This data is maintained by precincts and helps to identify patterns of domestic incidents. During the same period, the NYPD made 25,475 family-related arrests, of which 4,249 arrests were for violations of Orders of Protection.

Another critical point of entry for victims of abuse is the health care system. The New York City Department of Health and Mental Hygiene (DOHMH) participated in an 11-city national study of domestic violence led by Johns Hopkins University to identify risk factors for female homicide ("femicide") within abusive relationships. The study, which was published in the July 2003 edition of the American Journal of Public Health, reviewed all homicides of females aged 18 years and older between 1994 and 2000, selected those women who were killed by an intimate partner, and assessed the factors that were likely to have increased their risk for intimate partner homicide. As part of the data collection, homicide victims' family members and close friends were interviewed. The preliminary results of the study indicate that women whose partners had engaged in abusive behaviors such as forced sex, death threats, stalking and controlling behavior were more likely to be victims of intimate partner homicide; women whose partner-perpetrators owned or had access to a gun were also at increased risk of femicide. In addition, in the year before their death, almost half of all intimate partner femicide victims went to a medical care provider for some reason, and over one- third visited an Emergency Department.

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

Citywide Coordination of Services

In November 2001, New York City residents voted to amend the City Charter and establish a permanent government office that would deal comprehensively with the issue of domestic violence. The Mayor's Office to Combat Domestic Violence (OCDV) replaced the temporary Commission to Combat Family Violence, and as one of his first initiatives, Mayor Michael R. Bloomberg appointed a Commissioner to head the new office. New York City is now one of only two large cities in the country, along with Chicago, that has a separate office dedicated solely to combating domestic violence.

OCDV formulates policies and programs relating to all aspects of services and protocols for victims of domestic violence, as well as policies and programs that hold batterers accountable. It also monitors the citywide delivery of domestic violence services by developing methods to improve the coordination of programs and initiatives for victims and providing a system of accountability that ensures that City agencies respond appropriately to family violence. Lastly, OCDV implements public education campaigns to heighten awareness of family violence and its devastating effects on society.

City Agency Task Force to Combat Domestic Violence

As a first step in formalizing coordinated service delivery, OCDV established a City Agency Task Force to Combat Domestic Violence. The Task Force is made up of 18 City agencies that provide domestic violence services, including: the New York City Police Department (NYPD); the Human Resources Administration (HRA); the New York City Housing Authority (NYCHA); the Department of Health and Mental Hygiene (DOHMH); the Health and Hospitals Corporation (HHC); the Administration for Children's Services (ACS); the Department of Education (DOE); the Department of Probation (DOP); the Department of Correction (DOC); the Department for the Aging (DFTA) and the Office for People with Disabilities (MOPD). The Task Force held its first meeting at City Hall on March 5, 2002 with the Mayor and agency heads. Some of its goals have been to coordinate information and data, provide seamless delivery of services, develop a system of intensive intervention to prevent incidents of domestic violence and expand public access to services. Regular monthly meetings of the entire Task Force began in September 2002.

Domestic Violence Response Teams (DVRT)

In May 2002, the Mayor announced the creation of the Domestic Violence Response Teams (DVRT), an innovative pilot program to combat domestic violence in the Soundview Section of the Bronx and East Flatbush area of Brooklyn. These neighborhoods were selected because of the high number of Domestic Violence Incident Reports (DIRs) written by police in those two areas over the previous year. DVRT is a promising model of effective inter-agency collaboration on a few high-risk domestic violence cases to enhance services to those families, and provide information as to how to improve services for victims citywide. A Project Director and two Case Coordinators from OCDV operate the program. Since its official launch in November, 2002, the program now boasts 12 participating City and State agencies: the New York City Police Department; the Human Resources Administration; the Administration for Children's Services; the New York City Housing Authority; the Department of Probation; the Department of Correction; the New York State Division of Parole; the Office of the District Attorney of Kings County; the Office of the District Attorney of Bronx County; the Department for the Aging; the Department of

Homeless Services; and New York City Health and Hospitals Corporation. Several community-based organizations (CBOs) are also part of the project.

High-risk domestic violence victims are selected at a meeting among the precinct's domestic violence police officers, advocates, and OCDV. A meeting then takes place between the victim, the advocate and the OCDV Case Coordinator to determine if the victim is interested in participating, and obtain his or her consent to share information. Each month, the DVRT Agency Team, made up of representatives from City and State agencies and CBOs, meets to create customized service plans for each new case. The advocate meets with the victim to review the service plan, while the OCDV Case Coordinator works with the Agency Team members to ensure that the plan is followed. Cases are managed by OCDV for an average of six months.

DVRT began taking cases in November, 2002. Since that time, over 61 families have benefited from the program. Despite the high-risk nature of the cases, only two participants have experienced repeat violence since their entry into the program, and both of those incidents resulted in arrest and prosecution. The DVRT Program also initiated a series of inter-agency presentations for the Agency Team, at which each agency learns about the services offered by other agencies. These regular meetings and training sessions have encouraged inter-agency solutions of problems, created a stronger working relationships between CBOs and City agencies, and provided for enhanced services for the participants. In 2003, OCDV is working on a proposal for an expansion of DVRT to other communities in the City.

OCDV also brings together public and private agencies in order to apply for competitive funding. The City's entire domestic violence program is funded through a combination of federal, state, city, and private dollars. A description of OCDV's programs initiatives in the areas of Homelessness Prevention, Housing and Supportive Housing Programs and Future Projects is outlined below.

1. Homelessness Prevention

In addition to the Citywide coordination of services, OCDV oversees the City's wide range of programs and initiatives that prevent new cases of domestic violence and address the ongoing needs of victims. An important goal is providing safety and services that allow victims and their families to continue living in place, which as a result, reduces the potential number of individuals and families entering the shelter system to escape domestic violence.

Public Education

Public education is a critical component of OCDV'S strategy to reduce domestic violence and potential 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 that can help them remain safe at home. In conjunction with its other efforts, the City has implemented numerous Citywide public education campaigns since 1995 to heighten awareness and reduce violent behavior. Posters from these campaigns are visually compelling and provide the City's 24-hour Domestic Violence Hotline number for victims or their relatives who are prompted by the campaign to access services.

In November 2002, Mayor Bloomberg launched the City's eighth citywide domestic violence public education campaign, which challenged everyday assumptions about batterers and their victims. It showed men from traditional, successful backgrounds as criminals behind bars for committing criminal acts of domestic violence. Making its debut on subways and buses throughout the city, the two-month campaign reached over 67 million viewers. As a result of the campaign, calls to the NYC Domestic Violence Hotline increased by 36% in the second week.

In February, OCDV converted the public education campaign to 28,000 posters in nine different languages (English, Spanish, French, French Creole, Urdu, Arabic, Russian, Chinese and Korean) in order to extend the campaign's reach to local New York City communities. As of July, 2003, OCDV distributed more than 22,000 posters throughout the City at job centers, schools, hospital, police precincts, shelters, public housing developments and other community venues.

In addition to citywide public education campaigns, City employees and agencies receive information about domestic violence each year during Domestic Violence Awareness Month. In October, the Mayor sends a letter to all City employees (over 338,400 individuals) with important information about domestic violence. The letter shares information about important domestic violence programs and initiatives launched by the Mayor during the year. The letter raises awareness about the annual Walk/Run to End Domestic Violence, of which OCDV is a lead agency on the planning committee. City employees are encouraged to participate in this event and others held throughout the city during Domestic Violence Awareness Month. Also included with the Mayor's letter is a resource newsletter from the NYC Employee Assistance Program. The newsletter provides useful information about ways City employees can combat domestic violence, while offering supportive services to those experiencing abuse.

Each October, City's payroll administration includes a pay period message about domestic violence on all paychecks for city employees. The paycheck message advertises the NYC Domestic Violence Hotline number or the website for the Walk/Run to End Domestic Violence. The Walk/Run to End Domestic Violence is a united community effort to end the epidemic of domestic violence by raising awareness, educating the community and advocating on behalf of victims. The event includes a 5K walk/run through lower Manhattan and a health and wellness fair held in Battery Park. Survivors and their children, advocates, City employees and their friends and family are invited to participate in the day's activities. The Wellness Fair provides arts and crafts, musical entertainment, fitness and nutritional advice, make-up demonstrations, financial workshops, self-defense workshops, dance workshops, domestic violence support services and resource information. In 2003, the New York City CBS news affiliate will serve as media sponsor. They will air special reports on domestic violence throughout the month of October and provide coverage of the Walk/Run during their daytime and evening broadcasts. One week before the Walk/Run, the Mayor's Office sends a reminder email to all City employees about the event.

OCDV Domestic Violence Conference

On October 22, 2003 OCDV will host its first annual domestic violence conference. The conference will bring two nationally recognized experts to New York City to speak on the current state of research in the area of domestic violence. Individual workshops will address the myriad issues facing victims of domestic violence, and the ways in which New York City is addressing them. The anticipated attendance for the conference is 400.

Starting in the fall of 2002, OCDV has collated information regarding all of the domestic violence-related activities being hosted in the City in October in honor of domestic violence awareness month. These activities are organized into a useful resource calendar which is widely distributed, and made available through the OCDV office.

NYC Health and Hospitals Corporation (HHC) Domestic Violence Month Events

During the month of October, HHC Social Work departments, with their Domestic Violence Coordinators, in the 11 public hospital and six diagnostic facilities will each hold a one-day Community Outreach event where educational resources are distributed, questions/inquiries are encouraged and referrals are made, if necessary. These events are usually well attended by the community.

New York City Housing Authority (NYCHA) Conference

On October 29, 2002, NYCHA held its sixth annual Domestic Violence Awareness Conference for NYCHA, Safe Horizon and NYPD staff to increase sensitivity on the issues surrounding domestic violence and provide information and greater interaction between the agencies. The conference topic was "Holding the Batterer Accountable," and up to 300-350 participants were expected. In addition to the main conference, half-day mini-conferences were held in each borough for NYCHA tenants. Due to budget cutbacks, NYCHA regrets that the Authority will not hold a Domestic Violence Conference in 2003.

Training

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

Administration for Children's Services (ACS) Domestic Violence Screening and Assessment Tools and Training

In the past two years, the Administration for Children Services has enhanced the domestic violence screening and assessment tools for child protective staff, developed and implemented updated domestic violence training programs for new and experienced staff (both child protective staff and attorneys), and continued to provide ongoing training and technical assistance to community-based preventive service programs throughout the city. 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 the criminal justice system. The implementation of new domestic violence screening and assessment tools and related ongoing trainings has improved the ability of child protective specialists and preventive program staff to assess and respond to child safety issues while providing victims of domestic violence with necessary safety planning assistance and referrals to appropriate community resources. In keeping with these efforts, ACS issued a Domestic Violence Strategic Plan in May 2003 that outlines recent accomplishments and major activities planned for the coming years.

Community/Law Enforcement Collaboration Project

On November 1, 2001, the New York City Criminal Justice Coordinator's office received the announcement of a U.S. Department of Justice \$199,000 one-year grant award for "Grants to Encourage Arrest Policies and Enforcement of Orders of Protection: Community/Law Enforcement Collaboration Project." The original project period for the grant was November 1, 2001 to October 20, 2002. It was extended, without additional funding, to October 31, 2003. The project is a collaboration between the Criminal Justice Coordinator's Office (CJC), the Mayor's Office to Combat Domestic Violence and 10 community-based organizations (CBOs) in diverse communities. Twenty-eight focus groups and 10 community forums for police, advocates and victims were held in late 2002/early 2003 to improve the current training curriculum and develop brochures for DV victims that list services available to them.

The project will result in enhanced training for Police Officers and a public education campaign around the issue of mandatory arrest policies and enforcement of orders of protection in diverse communities. The goals of the project are to increase awareness and reports of domestic violence, encourage prevention and increase the numbers of domestic violence victims served by the CBOs and the Criminal Justice System, thereby increasing the safety of at-risk women.

Elder Abuse Project

The New York City Criminal Justice Coordinator's Office in coordination with OCDV was awarded a \$299,779 two-year grant award for "Training to Stop Abuse and Sexual Assault of Older Individuals or Individuals with Disabilities" from the Department of Justice. The project started on October 1, 2002 as a collaboration between the Criminal Justice Coordinator's Office, the Mayor's Office to Combat Domestic Violence, the Department for the Aging and two community-based organizations.

The project will develop a training curriculum for police, judges, and prosecutors in the identification, investigation and prosecution of elder abuse crimes. The project is designed to afford those personnel who receive training a thorough understanding of the signs, symptoms and approaches necessary to identify and address physical and mental elder abuse, as well as financial exploitation. Via culturally sensitive training, these individuals will be better prepared to facilitate positive interaction with victims who may otherwise be unwilling or unable to respond to important questions and may impede an investigation and/or prosecution.

Intervention and Outreach

A number of domestic violence programs and initiatives operated by City agencies and overseen by OCDV are designed to intervene in the lives of victims before they become homeless and involve outreach to victims and their families. These programs fall within four areas: the Domestic Violence Hotline; Criminal Justice Services, including police, correction and probation; Social Services, including health and human services; and Alternatives to Shelter.

Domestic Violence Hotline

The array of domestic violence services offered in the City can be accessed through the City's domestic violence hotline. Created in 1994, this dedicated, 24-hour seven days a week, toll-free domestic violence hotline is the first of its kind in the nation. The Hotline number is 1-800-621-HOPE (or 1-800-621-4673, TTY: 1-800-810-7444). The hotline was created in response to the needs of the City's domestic violence victims seeking immediate assistance, who were once forced to navigate through a variety of fragmented, uncoordinated systems in order to obtain services. The hotline's personnel speak Spanish, Mandarin, Cantonese, French, Creole, Fujianese, Italian, German, Russian, Turkish, and also use the TeleInterpreters language line, which interprets over 140 languages. In fiscal year 2002, the hotline answered 151,276 calls, averaging over 12,000 calls each month.

Criminal Justice Services

Fear for personal safety is a major reason that victims leave their homes, and OCDV has made the effective delivery of criminal justice services a critical element of its strategy to reduce domestic violence. Criminal justice personnel respond to calls for help, make arrests, provide referrals and follow-up visits to victims and are responsible for incarcerating and monitoring batterers.

New York City Police Department (NYPD) Domestic Violence Unit

The NYPD has a Domestic Violence Unit, which coordinates the Department's overall domestic violence strategy, including the training of its officers. There are over 400 Domestic Violence Prevention Officers and Domestic Violence Investigators in the City's 76 police precincts and 9 Housing Police Service Areas. In fiscal year 2003, the Domestic Violence Unit continued to train Domestic Violence Officers and Investigators, Training Sergeants, newly promoted Sergeants, Lieutenants and Captains, newly-assigned recruits to the Housing Bureau and members of the public and private organizations.

New York City Police Department Domestic Violence Precincts

The Department has 32 model domestic violence precincts throughout the City to improve domestic violence-related investigations, increase apprehensions, and enhance support services for victims. These precincts integrate the work of domestic violence, crime prevention, community policing, and youth officers to promote seamless service delivery and increased safety of victims. The Special Operations Lieutenant and a Captain at the Patrol Borough Command provide oversight.

New York City Police Department Intervention Programs

The Department has many initiatives aimed at prevention, intervention, and outreach, including a High Propensity Offender Tracking List, which targets offenders with a demonstrated tendency toward domestic violence, and the Domestic Violence Contact Program, where Community Police Officers visit residences where domestic violence incidents have been reported.

Domestic Violence Police Programs

Two City programs unite a counselor from a domestic violence organization with police officers, who together provide social services and law enforcement intervention to families reporting domestic violence to the police. Clients are identified through police reports and the teams offer help through letters, calls and follow-up investigations in the home.

- The NYPD Domestic Violence Police Program (DVPP) takes place in 14 precincts. The program is funded by City tax levy money through the Criminal Justice Coordinator's Office, the Office on Violence Against Women (OVAW) (43rd Precinct) and the New York City Housing Authority (101st Precinct). Safe Horizon provides counselors in thirteen precincts and the Jewish Board of Family and Children's Services provides the counselor in one precinct.
- New York City Housing Authority's (NYCHA) Domestic Violence Intervention and Education Program (DVIEP) is a HUD-funded Drug Elimination Program that combines experienced domestic violence counselors from Safe Horizon with uniformed police officers who jointly contact and counsel NYCHA families when there has been a police report of domestic violence. Safe Horizon contracts with NYCHA to provide this program in all nine Police Service Areas, Staten Island, and the Rockaways and includes training for NYCHA staff as well as other services. The contract was extended July 1, 2000 for two years, with funding guaranteed for one year, and contingent upon availability for the second year. NYCHA has decided to retain all direct services through NYCHA Operating Funds for FY04. The scope of services includes: formulating a domestic violence intervention strategy; assessing and improving domestic violence intervention services; joint counseling, crisis intervention, education, and referrals for victims involved in domestic disputes; and domestic violence intervention and prevention training for NYPD Housing Bureau Police and NYCHA Management, Social Services, Community Operations, and Leased Housing staff. The program is funded on a fiscal year basis: \$1,271,636 for FY02 and \$807,362 for FY03.

For January through June 2003, the DVIEP program handled a total of 14,446 cases (5,940 of these were new cases), facilitated 1,741 domestic violence arrests, and conducted 95 police sensitivity trainings, 125 community education presentations and 20 borough-wide staff trainings.

Department of Correction Victim Information and Notification Everyday (VINE) System

DOC, in coordination with the Office of the Criminal Justice Coordinator, has implemented a technological initiative known as the VINE (Victim Information and Notification Everyday) System. VINE assists crime victims in determining the custody status of inmates within the DOC. Crime victims wishing to access the

system may do so by calling **1-888-VINE4NY** from any touch-tone phone. The caller must provide VINE with the inmate's New York State ID (NYSID) number or the inmate's name. Victims of assault have the option of registering in this program to be notified when their alleged abuser is released. In FY03, 47,806 calls were placed to notify 3,073 registrants of changes in jurisdictional custody and release status of inmates within our custody.

Department of Probation Domestic Violence Program

The NYC Department of Probation has undergone a dramatic shift in the way it conducts business. The Department's new model allows officers to better manage difficult, high risk, offenders while providing an array of resources. Part of the change to the supervision model has been the decentralization of the Domestic Violence Program. Assignment of Domestic Violence cases has been split between two specialized units: the Intensive Supervision Program and the Special Offender Unit.

Officers assigned to the Intensive Supervision Program (ISP) monitor felony domestic violence cases and officers assigned to the new Special Offender Unit (SOU) supervise the misdemeanor domestic violence cases. ISP caseloads consist of 25 offenders or less. Officers in SOU supervise a maximum of 50 cases. This caseload ratio allows the officers to monitor a probationer's activities closely and provide assistance through referrals to a variety of resources. Both programs provide for multiple in-person contacts with the probationer each month. In addition to office contacts, visits to the probationer's home, place of employment, school or training program and/or treatment provider are also conducted on a monthly basis.

Probationer compliance with Court ordered special conditions, such as participation in domestic violence and anger management programs is also closely monitored. Treatment providers detail probationer participation through monthly written reports and/or telephone and in person interviews.

Probation Officers maintain contact with the victim(s) to ensure that they are receiving the required services, such as 911 direct cell phone services (P.H.O.N.E.S. Program), counseling services and health programs.

Social Services

The City provides a number of health and human services that meet the immediate needs of victims and help them avoid homelessness. OCDV is committed to having these services delivered in a coordinated manner, so victims avoid accessing multiple City agencies and receiving overlapping information and other types of assistance.

Administration for Children's Services Office of Housing Policy and Development

The goal of the ACS Office of Housing Policy and Development (HPAD) is to maximize the availability and effective utilization of housing resources for children and families served by ACS. To this end, HPAD administers ACS-related Section 8 programs, develops transitional and permanent supportive housing for current and former ACS clients, provides training and technical assistance on accessing rent subsidy programs and developing supportive housing, and works with private landlords and realtors to increase the availability of appropriate housing units for ACS families and Independent Living youth. In conjunction with the New York City Housing Authority, ACS has "priority code" access to Section 8 vouchers for qualified ACS families when a lack of adequate housing is a primary factor contributing to risk of imminent placement or is delaying the reunification of children who are currently in foster care.

Administration for Children's Services Clinical Consultation Program

In 2002, ACS launched the Clinical Consultation Program, which placed 12 domestic violence coordinators in ACS child protective field offices throughout the city. These consultants work as part of a multidisciplinary team that also includes mental health and substance abuse specialists and a team coordinator. 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 with assessing for the presence of domestic violence and planning 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. Between the October 1, 2002 and June 30, 2003, domestic violence experts conducted 1,835 consultations and offered 142 office-based training sessions.

NYC Health and Hospitals Corporation (HHC) Domestic Violence Coordinators

The NYC Health and Hospitals Corporation (HHC) is continually challenged with the provision of 24-hour, seven-day-a-week Domestic Violence (DV) services. These services address not only the medical, but also the social and cultural needs, including coordination of services with external agencies to ensure continuum of care and safety of domestic violence victims.

HHC's facilities (eleven (11) hospitals and six (6) diagnostic and treatment centers) continue to provide DV services through their DV coordinators and trained providers who are the expert educators and facilitators for patients, staff and community. They work closely with the Child Protection and Rape/Sexual Assault coordinators to provide staff training during orientation and annually, thereafter; and monitor compliance with DV policies and procedures. They consult, provide direct service, refer and counsel victims and collaborate with community-based organizations (e.g., Criminal Justice, NYC Internet Order of Protection, Cell Phone Program, SAFE Horizon, NY Women's Agenda, NY Walks to End Domestic Violence, Domestic Coalition for Crime Victims, Woodhull's participation in Channel 13 WNET Women's Health Telethon, Family Project in Brooklyn, and Asian Women's Center). They also partner with the NYPD Domestic Violence Prevention Officers (DVPOs) at their local police precincts to ensure all victims are identified and protected.

NYC Health and Hospitals Corporation (HHC) Domestic Violence Surveillance System

The DV Surveillance System program, developed collaboratively with DOHMH, consists of a corporate-wide standardized tracking form that provides victims' information. This information is used to identify opportunities to improve and enhance the DV programs. The surveillance program requires Emergency Department and Ambulatory Clinic staff to screen females ages 16 and older for DV. In CY2002, HHC facilities provided services to approximately 2,379 DV victims, a slight decrease from 2,518 in CY 2001.

NYC Health and Hospitals Corporation (HHC) Clinician Guide for Identifying, Treating and Preventing Family Violence

HHC continues to utilize the "Clinician Guide for Identifying, Treating and Preventing Family Violence" which serves as a practical reference for preventing, identifying, treating and managing family violence in the community. It also provides information on the latest developments in treatment, prevention, research and expert advice on family violence issues.

Department of Health and Mental Hygiene (DOHMH) Domestic Violence Coordination and Training Program (DVCAT)

DOHMH is in contract with the Jewish Board of Family and Children Services to provide domestic violence services in the Bronx through its Domestic Violence Coordination and Training Program. DVCAT is a multi-component program that has been in operation since the summer of 1998. The primary purpose of the program is to strengthen the mental health system's response to domestic violence as well as increase community awareness of domestic violence. The DVCAT program provides:

- Training on domestic violence issues and best practice interventions to Bronx-based mental hygiene professional, health care and social service providers, and criminal justice and legal professionals. The curriculum is comprised of six major components including, the scope of the problem, outreach, screening and identification, and documentation and referrals. Each year approximately 1,000 individuals are trained throughout the Bronx. In addition, the DVCAT program underwrites and supports an annual domestic violence conference in the Bronx. Palm cards with domestic violence referral information in English and Spanish has been printed and distributed to thousands of individuals in the Bronx.
- Support and maintenance of the Bronx Domestic Violence Action Network (DVAN). The Network includes representatives from the mental hygiene, health and social service communities that serve Bronx residents. The monthly meetings provide an opportunity for partnerships to be formed and to share knowledge, skills and resources to address such issues as the NY State Anti-Stalking Law, welfare reform and its impact on domestic violence victims, and immigration issues. Approximately 180 individuals receive the DVAN meeting minutes and notices of events and new programs. Similarly, approximately 200 Bronx-based community professionals receive the Bronx Domestic Violence Resource List, which is compiled and updated annually by the program.
- A Battered Women's Support Group, launched in the fall of 2000, offers weekly groups facilitated by a staff member.

Domestic Violence Health Education Project

On August 30, 2002 the New York City Department of Health and Mental Hygiene received announcement of a \$149,990 one year continuation grant award for "Specialized Outreach Projects for Services to Underserved and Diverse Population/Domestic Violence Health Education Project" from the U.S. Department of Health and Human Services. The one-year continuation will focus on health providers and domestic violence victims and survivors in the Bronx. The project is a collaboration among the New York City Department of Health and Mental Hygiene (DOHMH), the Mayor's Office to Combat Domestic Violence (OCDV), community-based organizations (CBOs) and healthcare professionals who provide prenatal care.

The goal of the project is to improve the manner in which healthcare providers address domestic violence in under-served and diverse communities and encourage victims to disclose domestic violence to healthcare providers. The primary deliverables are separate forums for victims and healthcare providers, the development of public education materials to be disseminated through prenatal healthcare providers and forums to educate the community about domestic violence and the resources available. In September 2002, three focus groups were held for healthcare providers and 10 focus groups were held for current victims and survivors of domestic violence in Brooklyn. The information obtained was used to develop training materials and screening tools for health providers and community outreach materials in five languages.

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

On May 14, 2003, Mayor Bloomberg announced a comprehensive plan to improve the services provided to victims of domestic violence at all 11 City hospitals, the first point of entry for many victims seeking help. The project is a collaboration between the Mayor's Office to Combat Domestic Violence, the Health and Hospitals Corporation and Safe Horizon. The computer equipment and cameras were provided by a donation from Dr. Joy to the World Foundation.

The components of this program include a new training curriculum, high-quality digital cameras to photograph injuries being stored on a centralized database, software simplifying preparation of documents for Family Court Orders of Protection, a public awareness campaign in a variety of languages and linkages between hospital staff, community-based organizations and law enforcement.

Human Resources Administration (HRA) Domestic Violence Liaison Unit

As a result of the Federal Work Opportunity and Responsibility Act, HRA created a Domestic Violence Liaison Unit in calendar year 1998. As part of this program all individuals who apply for public assistance or visit their welfare or job centers for face-to-face interviews are asked to complete domestic violence screening forms. Individuals who screen positive for domestic violence are then referred to Domestic Violence Liaisons (DVL) who are located at all of the centers.

If a client chooses to meet with a DVL, the liaison conducts an assessment to determine if the domestic violence victim is eligible for a temporary waiver which exempts them from certain public assistance requirements such as employment activities, child support enforcement and referrals to drug or alcohol treatment programs. Waivers are granted if the liaison determines that compliance with the above requirements may result in further risk of harm to the client and/or the children. The liaison also provides referrals to domestic violence service providers in the community including those that specialize in counseling, advocacy and legal assistance. In CFY03, all applicants for public assistance were screened for domestic violence. Approximately 5,900 applicants were referred to DVL, and 3,400 applicants were granted waivers.

Human Resources Administration (HRA) ADVENT (Anti-Domestic Violence Eligibility Needs Team) Program

HRA developed a special services unit called ADVENT to assist domestic violence victims in accessing domestic violence services while adhering to the requirements of Welfare Reform. The staff works with clients in the creation and implementation of their self-sufficiency plan that includes services that address their domestic violence issues. The plan may include counseling, working on a GED, attending ESL (English as a Second Language) classes, job or skills training, a WEP (Work Experience Program) assignment or unsubsidized work, and helps coordinate work and work related activities. At the end of CFY03, the ADVENT caseload was 632 clients.

Adopt-A-School Program

This program is one of the only domestic violence prevention programs in New York City, and is critical to ending relationship abuse among young people. Since 1999, HRA's innovative Adopt-A-School Program has helped teens in 20 public high schools develop healthier relationships. The program delivers an array of relationship abuse services through four components: prevention, intervention, staff development and training, and community outreach. Through a comprehensive curriculum, students learn to recognize and change destructive patterns of behavior before they are transferred to adult relationships. Adopt-A-School fosters a school climate with zero tolerance for abusive behavior in all of its forms, thereby promoting a safe and productive learning environment for students and staff.

Alternatives to Shelter

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 the victims' homes. Program participants are provided with security devices and cellular telephones for use both inside and outside their homes that result in a rapid law enforcement response when activated. These devices give victims the ability to contact the police should their abusers attempt to violate their orders of protection.

ATS is administered in collaboration with the New York City Police Department (NYPD), and various not-for-profit organizations and private businesses. Each participant receives full-time case management, and NYPD gives ATS alarms a priority status and provides special training to officers in program precincts. In CFY03, the program expanded to 35 precincts in New York City.

P.H.O.N.E.S. (People Helping Others Needing Emergency Services) Program

On October 8, 2002, The Mayor's Office to Combat Domestic Violence announced a citywide wireless phone recycling drive, in partnership with Verizon Wireless, to benefit victims of domestic violence and help dispose of old wireless phones in an environmentally-safe way. To urge New Yorkers to donate their old wireless phones and underscore the importance of the drive, Mayor Michael R. Bloomberg, New York Jets linebacker Sam Cowart, and members of the Spanish merengue band Oro Solido taped public service announcements that aired on New York radio stations throughout October 2002. Old, unused wireless phones may be dropped off at any of 18 Verizon Wireless Communications Stores in the City's five boroughs year-round.

Donated phones are refurbished or sold through Verizon Wireless's HopeLine Recycling Program and new phones are reprogrammed to dial 9-1-1 and the NYC Domestic Violence Hotline for use in case of emergency. The phones are then donated to OCDV for distribution to families at risk. Several other corporations, including Bear Stearns, held phone drives in 2002 to collect phones for the program. OCDV partners with City agencies to distribute the phones to victims of abuse. To date more than 300 phones have been allocated to domestic violence coordinators in City hospitals, child advocates with the Administration for Children's Services and local community-based organizations.

The first campaign to collect and distribute emergency cellular phones to domestic violence victims began in April 2000. Among the largest citywide cellular telephone recycling drive in the country, over 22,000 cell phones were collected from more than 300 sites throughout the City.

2. 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 thirty-six 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 CFY2003, the shelter capacity increased from 1,780 emergency shelter beds to 1,832.

HRA also administers four Tier II shelters, which provide 155 units of transitional housing to domestic violence victims.

To facilitate quick access to bed availability in the City's residential domestic violence programs, HRA established the Shelter Occupancy System (SOS) in May 1998. This system allows each of the City's residential domestic violence programs to enter their own client data into a centralized computer system thereby making all domestic violence shelter bed vacancies immediately available to the City's Domestic Violence Hotline staff. Immediate access to this database facilitates emergency placement of domestic violence victims and their families into safe and secure housing. It also streamlines the billing process and provides consistent data for planning purposes. In CFY03, 2,475 families entered the emergency shelter system.

HRA-funded non-residential domestic violence programs maintain hotlines; as well as provide crisis intervention, counseling, and referrals for supportive services. The programs are operated by not-for-profit organizations that also provide advocacy and community outreach in all five boroughs. HRA's non-residential domestic violence programs have increased the resources available to victims of domestic violence, including those for whom language and cultural barriers pose difficulty in accessing assistance. Before October 2003, HRA will award contracts to increase the current number of clients and expand the availability of non-residential services featuring a separate legal services component.

HRA addresses the needs of domestic violence victims seeking emergency housing from the Department of Homeless Services. HRA's Project NOVA (No Violence Again) social workers provide eligibility screening, crisis counseling and referral services to victims of domestic violence at both the Emergency Assistance Unit operated by the Department of Homeless Services (DHS) and in transitional housing facilities overseen by DHS. Emergency Shelter Grant funds are used by HRA to support a portion of Project NOVA. During CFY03, approximately 6,700 cases were referred to NOVA for assessment to determine eligibility for domestic violence services. Of these referrals, approximately 900 were determined to be eligible for service based on an assessment of the client's safety.

In CFY02 HRA allocated approximately \$50 million for the Office of Domestic Violence Services, which is a unit of the Office of Domestic Violence and Emergency Intervention Services. This money comes from three funding sources: approximately 24 percent is City Tax Levy, 24 percent comes from the State of New York and 53 percent are from Federal funds. The Federal funds come from the U.S. Department of Health and Human Services (HHS). This money is used to operate shelter facilities, and provide counseling, case management and other non-residential services to victims of domestic violence and their families. During CFY03, 3,000 families were served through the emergency shelter system.

Permanent Housing

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

This program enables residents who are domestic violence victims, intimidated witnesses, intimidated victims, or child sexual victims, to confidentially relocate to a development in another borough if necessary for their safety. NYCHA is modifying the policy concerning Borough Choice for residents and applicants. The new system will allow for intra-borough relocations according to zip codes. In changing this policy, the Authority will be reprogramming its automated tenant selection system and educating staff, applicants and residents about these changes. It is targeted for implementation by late fall/early winter 2003.

Each staff person in the unit utilizes every available means of outreach to assist the resident applying for an emergency transfer to obtain the necessary documentation. These efforts include, but are not limited to:

communication with development staff, DA offices, NYPD, domestic violence shelters, and other social service agencies, as well as locating translators for non-English speaking residents.

From January through June 2003, the program received a total of 838 emergency transfer requests, and approved 305.

New York City Housing Authority (NYCHA) Witness Relocation Program

This program serves as a liaison between NYCHA's application office and the District Attorney's Offices. Referrals are made by the DA's office, advocating for intimidated witnesses who, as a result of their cooperation in the prosecution of a case, are intimidated or threatened, and are in need of expedient housing relocation. Referrals received are for both new Public Housing or Section 8 applicants. This unit evaluates the cases, maintains contact with the referral source, and when approved, forwards the case to the Department of Housing Applications for expedited processing.

From January through June 2003, the program received a total of 203 new applications.

Both programs are funded with a total of \$872,550 in Operating funds.

Support Services

New York Housing Authority (NYCHA) HARTS (Housing Assistance for Relocation and Transitional Services) Program

HARTS (Housing Assistance for Relocation and Transitional Services) was implemented October 1, 2002 to assist families moving into public housing from the shelter, and individuals relocating into NYCHA housing with domestic violence or intimidated witness priority. Services are also made available to families relocating as intimidated victims and witnesses through NYCHA's already existing Emergency Transfer Program. The HARTS program model is Intensive Case Management, with cases expected to stay open an average of 6-9 months. Families are assessed for level of independent living skill function, and individual service plans are developed for each family. Workshops on topics such as budgeting, apartment maintenance, parenting skills, and conflict resolution are provided as well. The total budget of \$4.2 million dollar is still being worked out with the City and State and is expected to be a TANF draw down. The program was funded through DHS funds from October 1, 2002 through June 30, 2003. In Calendar Year 2002 (CY2002), HARTS received 125 referrals and made a total of 125 initial home visits. In CY2003 (January 1, 2003 to June 30, 2003), the program received 455 referrals, and made a total of 455 home visits and 50 shelter visits.

New York City Housing Authority Domestic Violence Aftercare Program

The Domestic Violence Aftercare Program reaches out to domestic violence victims who are in the process of relocating to escape from violence. The concept for the Aftercare Program came from the recognition that the period while waiting for a transfer and immediately after a transfer is a critical time for victims. Moving to an unfamiliar community and establishing a new life may lead to feelings of loneliness and isolation, which could lead to reconciliation with the batterer. The program's goals are to provide necessary assistance so that victims do not return to the familiarity of their abusers or otherwise continue in maladaptive patterns. The program also seeks to keep the woman and her children safe while awaiting the transfer. Encouragement is provided at the time an apartment offer is made to facilitate acceptance of the offer; supportive counseling is given to maintain stability at the new location to prevent the need for another transfer and assist the survivor in leading a violence-free life toward the goal of becoming self-sufficient.

The Aftercare Program workers visit the clients in their homes. A complete assessment of the family's needs is conducted and an action plan is developed with the woman to help her identify her goals, such as safety concerns or job training and placement. Attention is given to the mental health needs of the women and children who have lived through the trauma of domestic violence. Along with emotional support, workers provide information, referrals, and advocacy. Staff is also able to provide some material assistance in emergency situations, such as food, baby supplies, and tokens. The Aftercare Program is a valuable source of support for victims of domestic violence, allowing these women the opportunity to maximize the benefit of relocation.

The program began in 1996 as a pilot program with a Federal Family Violence Prevention Fund grant, and was continued in 1997 by the New York City Housing Authority using Public Housing Drug Elimination Program (PHDEP) funding. The annual budget for the program is \$323,266 in PHDEP funds.

From January through June 2003, the program opened a total of 59 new cases, and conducted 239 face-to-face contacts with clients.

New York Housing Authority (NYCHA) Furniture Distribution Program

The Furniture Distribution Program secures donations of furniture, linens, clothing, and assorted household items from hotels, motels, and other sources throughout the metropolitan area primarily to assist relocated homeless families. The program provides a much-needed service, since many families and/or individuals entering public housing from the homeless shelter system come with only the bare essentials. Other primary beneficiaries of this program are residents who have lost their belongings due to fires and other disasters, and victims of domestic violence who have been transferred within NYCHA. This program is also available to any resident assessed by social services to be in need.

The program is currently funded with \$149,805 in Operating Funds. From January to June 2003, the Furniture Distribution Program assisted 106 families.

3. Future Projects

Supervised Visitation Grant

The Criminal Justice Coordinator's Office was recently awarded a Supervised Visitation Grant by the Department of Justice. This grant will fund a joint project among OCDV, Safe Horizon, ACS, The New York City Family Court, and New York Asian Women's Center to create a supervised visitation program in the borough of Queens for families with custody cases in which there are allegations of domestic violence – there is currently no such program available in Queens. The award is for \$350,000 over two years, to begin in November, 2003.

NYC Health and Hospitals Corporation (HHC)

HHC's Domestic Violence Programs continue to seek opportunities for improvement and enhancement to ensure quality of care and services. To date, Woodhull continues to offer a 24-hour "Help Line" program, Bellevue received a grant from the Phillip Morris Doors of Hope for a DV Patient Safety Program, Harlem Hospital received several grants from the United Hospital Fund to enhance their DV program and Elmhurst holds monthly legal services clinic assisting family violence victims and averages 40 families per month.

Domestic violence screening in the Emergency Department has been extended to include all inpatient departments in acute care facilities and all patients seen in the ambulatory care clinics in acute care hospitals and diagnostic and treatment centers.

d. Elderly, Including Frail Elderly

Population Characteristics

The elderly population of New York City, which accounts for approximately 40% of the elderly in New York State, is a diverse segment of the City's population. Nationwide, there has been a well documented, dramatic increase in the number of elderly in the older age groups since 1980, and this trend will build in momentum well into this century.

According to available data from the 2000 U. S. Census, the population in New York City aged 60+ decreased slightly by 2% during the last decade. However, there was a significant increase in the oldest New Yorkers, those aged 85 and over, increasing by 18.7%, which has a profound impact on service demand and utilization, as well as need for specialized housing.

In addition to the increases in the older age groups, since 1980 there have been compelling developments in the growth of minority elderly, the increasing percentage of women in the higher age groups, the number of elderly living alone, and the increase in functional dependency of this overall group as they get older.

Minorities

The racial/ethnic profile of the elderly population in New York City has undergone dramatic changes. According to the 2000 Census, minority persons age 60 and older comprised approximately 47% of the total senior population in New York City in 2000, up from 24% in 1980. In the age group 75 years and older, the number of minority elders increased by 60%, and, among this group, the increase in Hispanic and Asian elders was especially striking at 93% and 120% respectively.

This growth is significant due to the fact that minority elderly are statistically more likely to have lower incomes and more intensive need for supportive services than their non-minority counterparts. Based on the 2000 census, minority households represent a majority of the City's Very Low Income elderly one- and two-person households. With the large waves of minorities who moved to the City in the 1960's reaching their 60's, and the continued influx of immigrants from Asian, Hispanic, and East European countries, the percentage of minority elderly in the population is expected to increase for decades to come.

Women

The ratio of women to men among older New Yorkers is also striking and has significant implications. Based on the 2000 Census, sixty percent of older New Yorkers are women and, as the age of the population increases, so does the ratio of women to men. Sixty-six percent of seniors aged 75 and over are women, as are 72 percent of seniors aged 85 and over. Women comprise over 80% of the frail elderly population and nearly 77% of the elderly living alone. These trends are attributed to a variety of factors, including women's longer life expectancy, increasing the likelihood of their becoming frail. Elderly women also have consistently lower incomes than male counterparts, and are more likely to live alone without the financial assistance of a partner. Longevity, frailty, and depleted resources often combine to create a dependence on formal support services.

Living Alone

One in three elderly persons is living alone, and more than 50 percent of all elderly-headed households are single households. Based on the 1999 Housing Vacancy survey data, the elderly living alone in New York City have a median income of less than \$11,000, far below the federal limits for extremely low income (\$22,000). Those elderly who live alone also tend to be more frail, with a greater dependency on services than those who live with others.

Frail Elderly

The City's frail elderly (defined as persons who reported a disability, mobility impairment, or self care limitation in the 2000 Census) account for over 42% of the population 65 years of age and older. This percentage is increasing, and points to a growing need for support services in the community. Bringing support services into the existing home of a frail elderly individual may forestall the necessity to seek alternative housing, such as an adult home or assisted living situation, or a nursing home, which can be inappropriate for the individual and costly for the health care system. Consequently, the home as primary location for service delivery highlights the need for programs which adapt the living environment to the special needs of the individual, and home repair services to assist in the maintenance and upkeep of the home when the individual is unable to do so. Programs that provide funding for these services are good investments in housing for the elderly, often offering a more satisfactory and appropriate option for the individual, while easing an over-burdened subsidized housing stock.

However, there are frail elderly who, even with supportive services, are not able to maintain independent living in their existing home. For these individuals, alternative, long-term, supportive housing arrangements are needed. A continuum of housing options and financial, social and health-related services must be made available in order to address the diverse and complex needs of the frail elderly. As the overall population of elderly ages, the need for more supportive services will continue to rise. Both economic assistance and supportive housing options can prevent the need for more medical and service-intensive residential placements, as the individual's need for help in maintaining health and independence increases.

Income

Housing for many older New Yorkers is a critical and complex problem. With most living on fixed incomes, the elderly face the hardships of finding affordable rents, or maintaining a house and coping with rising expenses. In addition, as the population grows older, there is often increasing frailty which requires a continuum of supportive services in conjunction with housing.

With the exception of single parent families, elderly households are paying more for their housing than the rest of the population. Loss of income due to retirement, death of a spouse, or increased medical costs can put many seniors at financial risk. According to the 1999 HVS, the median income for single elderly households (one householder 62 years or older, including owners and renters) was \$10,896, compared to \$33,000 for the overall population, based on that survey. Elderly renters have lower household incomes than owners, and income levels decrease with age.

The number of elderly New Yorkers living below the poverty level increased between 1980 and 1990, the greatest increases occurring among those segments of the population already most likely to be poor: women, minorities, individuals aged 75 or more, and elderly living alone. According to NYC's 1999 Housing and Vacancy Survey (HVS), 32.1% of single elderly households had annual incomes below poverty level, which is 1.7 times the rate for the population as a whole (18.7%).

In addition to those elderly living below the poverty level, there are a large number living in "near poverty". This group is vulnerable because their 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 income gap also leaves many elderly at a severe disadvantage for market rate housing or assisted/supportive living. As a result, a large portion 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 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 their older residents.

Poverty, the need for supportive services, and the continuing increase in the size of New York's elderly population will all play a major role in determining the adequacy of existing housing, and how to meet future housing needs. The increases in frail elderly, aged elderly, minority elderly, female elderly, and elderly living alone, precisely the groups most likely to be poorer, point to a need for more affordable housing, and supportive services in existing housing that will allow the elderly to "age in place."

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 this population 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.

The Senior Citizen Rent Increase Exemption Program (SCRIE) provides elderly tenants with exemptions from future rent increases and provides landlords with a tax abatement which can be used to reduce property taxes. Last fiscal year, property tax abatement to landlords provided through this program totaled approximately \$67,000,000.

The Senior Citizen Homeowner Exemption Program (Formerly the Sr. Citizen Real Property Tax Exemption Program), administered by the Department of Finance, provides exemptions of 5% to 50% on New York City real property tax to low and moderate income homeowners 65 years of age or older. The City foregoes over \$25,000,000 in property taxes through SCHE each year.

The Senior Citizens Homeowner Assistance Program 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) 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.

The New York City NORC Initiative, administered by the Department for the Aging, funds coordinated housing-based supportive service programs for low and moderate-income elderly residents 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 as a partnership between social service and healthcare providers, housing owners and managers, and elderly residents.

This program involves owners and managers of multi-family housing, as well as NORC residents themselves, in the process of creating an aging-friendly environment. The NORC with supportive services has many of the benefits of senior housing, yet allows the individual to remain within the familiarity, security, and intergenerational atmosphere of his or her home and immediate community. Through this recent initiative, the Department is funding service programs in 28 NORCs.

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; and many other needed services that assist elderly New Yorkers in living as independently as possible. The Department directly provides assistance and intervention in cases of elder abuse; resource centers for grandparents raising grandchildren and for the families of elderly suffering from Alzheimer’s Disease or other forms of dementia; guidance through the process of finding an appropriate nursing facility when warranted; senior employment programs; and assistance with health insurance issues and applications for benefits and entitlements.

Independent Living

There are over 35,000 units in apartment buildings throughout the five boroughs that have been developed exclusively for the elderly who are relatively independent, but may be in need of affordable housing or some light services. Units in this category may be with or without supportive services, and include housing built using funds from a variety of Federal, State, and City programs, as well as some private funding. Waiting lists in this category can be years long. Included in this category are:

	<u># Buildings</u>	<u># Units</u>
Section 202 Supportive Housing for the Elderly	168	15,990
NYC Housing Authority*	682	10,100
Mitchell Lama (built for elderly)	25	6,140
Single Room Occupancy (for elderly)	20	1,673
Section 8 Construction	14	2,684
Other funding	23	2,474

** Includes buildings and units in senior-only developments and senior-only buildings (and units) in mixed developments.*

The only Federal program exclusively for the development of housing for the elderly is Section 202 Supportive Housing for the Elderly. This federally funded program provides interest free capital advances to eligible non-profit sponsors to finance the development, either new construction or substantial rehabilitation, of rental housing with support services and rental subsidies for very low income persons age 62 or over. A small portion of the cost for support services is provided by the Section 202 program, but the major funding for any services offered is provided by the operator. Services offered in some Section 202 sites may include social service coordination, recreation and social activities, transportation services, and other services deemed necessary for maintaining independent living. The Section 202 program accounts for over half of new housing developed annually for seniors in New York City.

However, as residents of Section 202 and other independent living developments grow older, their needs for services often increase. To bridge the gap between independent and assisted living, there are programs that provide on-site supportive services and help link residents with community-based resources. HUD has made funds available to

operators of federally-assisted housing to hire service coordinators, who perform a range of functions to link residents with needed services and community resources, thus helping elderly to age in place.

In recent years, HUD has introduced the Assisted Living Conversion Program. This program provides grants to operators of Section 202 buildings and other categories of Federally assisted housing, to convert some or all of their units for assisted living. The funds will cover modifications such as re-configuration of dwelling units, construction of kitchen and dining space, and creation of space for health-related services and supportive activities. The program does not provide funding for assisted living services, so the operator must secure the appropriate services through other means. The operator also must be licensed to operate assisted living. In New York City, there are two Section 202 buildings that have received grants through the Assisted Living Conversion Program, both in Brooklyn, which total \$2,534,660.

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:

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 56 adult homes in New York City, providing 8,858 beds.

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 is also regulated by the Department of Health, but there is no set number of beds, as this program operates in private homes.

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 10 NYC Enriched Housing programs in operation, serving 399 frail individuals.

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 for a capitated 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.

There are twelve approved ALPs in New York City, providing a total of 1030 beds.

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 often 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 1,825,012 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 \$639.00 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 interborough 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 siting is 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. Some 75 dwellings this year are planned to be re-fitted to meet the accessibility needs of residents.

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), 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 apprized of housing related activities initiated and performed by MOPD and HPD. Among the organizations are Eastern Paralyzed Veterans Association, 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 assess 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.

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.

Other Actions continues in Volume 3 with the summary of citizen comments.

The federally-required Anti-Displacement Plan which describes the steps the City's 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. An executive summary encapsulating the Consolidated Plan has been placed on HUD's Internet web page for Community Plans. A New Yorker interested in accessing the summary can find the NYC Consolidated Plan on HUD's web site at:

<http://www.hud.gov/library/bookshelf18/plan/ny/newyorny.html>

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

<http://www.nyc.gov/html/dcp/html/pub/publist.html>

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 Symposium and Public Hearing to hear comments on how the housing, homeless, supportive housing and community development funds should be spent. The April Symposium and Public Hearing are to collect comments on the preliminary budget and the formulation of the Consolidated Plan. 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. 14	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.
By Jan. 16	Draft 10-year Capital Strategy is submitted. (In odd-numbered years.)
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 Late Feb. Community Board Operating Budget is prepared by the Board and submitted to OMB.
- 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 CD 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.

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 2,600 citizens, public officials and organizations. 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 August.

Individuals and/or organizations who wish to be placed on the Consolidated Plan mailing list may contact: Charles 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 of New York City. GIS or mapping software is required to use these 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).

Free download of some of these base map files, along with descriptions and user guides, 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.html>.

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

- ! **DCPLION Single Line Street Base Map** in MapInfo Table format and MapInfo Interchange Format (MIF). This base map contains a single line representation of the City's streets with address ranges, street names and other geographic information. These files can be used with the MapInfo program or a program that can import or open MIF (MapInfo Interchange Format) files.
- ! **Tax Block Base Map** files are available in three formats, MapInfo Table, ESRI/ArcView Shapefile and Adobe Illustrator. The files contain street names, tax block outlines and annotation points with block numbers.
- ! **Administrative and Political Districts** are available in two formats, MapInfo Table and ESRI/ArcView Shapefile. These files contain district outlines and district numbers. Citywide base map files are available for the following districts: Census Blocks, Census Tracts, 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 and Congressional Districts.

The following set of base map files is available through a license agreement with the Department:

- ! **Tax Lot Base Map** The Tax Lot base maps are provided on five CD-ROMS, one for each of New York City's boroughs: Bronx, Brooklyn, Manhattan, Queens and Staten Island. Each CD contains five datasets: street names, tax lot outlines, tax block outlines, community district outlines, and borough boundary outlines. Each dataset is provided both clipped to the shoreline of New York City and in its entirety including submerged areas of the City. Each CD contains all datasets in three GIS vendor formats: ESRI Shapefiles, MapInfo Tables, and MapInfo Interchange Format. The licensing fee is \$250 per borough. For information on licensing this product, 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 2004 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 Part II., 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

Because homeless shelters are part of neighborhoods, DHS places particular emphasis on working with communities to address issues and concerns regarding their programs and facilities. Communication with local leaders and community residents is important for two reasons. First, if community residents understand how shelters have changed for the better over the last decade, and the ongoing improvements that are being implemented, they may be 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 Advisory Committee. Another way that community residents show their concerns is by contacting the shelter's director, the local Community Board or their elected officials. DHS's

Office of Government and Community Relations maintains good working relationships with elected officials and community boards in order to work together to raise the quality of life for shelter residents as well as the residents of the surrounding communities.

Request for Proposals (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 so requested by the Community Board. In addition, proposers are awarded points if they can show letters of support from Community Boards, elected officials, and civic and community-based groups. Finally, nonprofit organizations that assume operation of DHS facilities are required to maintain active Shelter Advisory Committees.

Shelter Advisory Committees

Transitional housing facilities that receive DHS funding are obligated contractually to maintain active Shelter Advisory Committees, which must meet once a month, unless DHS is notified in writing of a different schedule. Composition of an Advisory Committee 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, and shelter residents. With help from the Shelter Advisory Committees, DHS is able to improve services at specific sites, and obtain broad-based feedback that helps improve and refine New York City's Continuum of Care.

Interagency Coordinating Council and Public Hearing

As part of the Interagency Coordinating Council (ICC) process, described in Section G., Government Coordination and Consultation, DHS is required by local law to hold an annual public hearing. This hearing will take place in the fall of 2001.

HUD Notice of Funding Availability (NOFA) Process

The Year 2002 Coalition for the Continuum of Care is a partnership of non-profit, community-based homeless service providers, DHS and other City and State agencies, and other interested entities providing services to homeless people. The Coalition is responsible for the development of the Continuum of Care Plan for Homeless Assistance, submitted to HUD as part of the NOFA application process. Year 2002 Coalition members receive HUD Homeless Assistance funding and/or have contracts with the City to provide homeless services. A Steering Committee for the Year 2002 Coalition meets on a regular basis. Each type of homeless service provider is represented on the Year 2002 Coalition Steering Committee, including those serving substance abusers, families, single adults, and homeless individuals with mental illness.

The Continuum of Care process generates considerable interest and involvement on the part of the public. For the Year 2002 SuperNOFA, five public hearings were held to allow representatives of government, non-profit organizations, advocacy groups, homeless and formerly homeless clients, elected officials and citizens to testify before representatives of DHS as to the priorities for the use of HUD Homeless Assistance Funds provided through the NOFA. Over 40 people testified at the hearings. Over 350 notifications of these hearings was mailed to all former and present grantees under the SuperNOFA, and membership lists of advocacy groups, alliances and foundations. Following these hearings, two technical assistance sessions were held for potential new and renewal applicants to provide them with information about the application and ranking process.

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

For a discussion on the opportunities individuals and not-for-profits a 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 Department of Community Operations and Department of Economic and Business Initiatives work 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 or through a response to a Request for Proposals (RFP) issued by NYCHA or by a funding agency. Program sponsorships may be developed either through direct applications to NYCHA or by responding to an RFP issued by NYCHA. The New York City Housing Authority regularly publicizes RFPs through various publications such as The City Record, the New York Times and other local publications.

If a not-for-profit assists unemployed or under-employed persons to achieve self-sufficiency through job placement programs, they are encouraged to contact NYCHA's Department of Economic and Business Initiatives at 350 Livingston St, 6th Floor, Brooklyn, N.Y. 11017.

Not-for-profits interested in program sponsorships should contact NYCHA's Department of Community Operations at 250 Broadway, 12th Floor, New York, N.Y. 10007.

Department for the Aging

As described more fully in the section on Government Coordination, 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 to update its plans for the City Fiscal Year and to enhance 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, and to present testimony on the Plan and all issues of concern to older New Yorkers. The Plan is widely distributed prior to the hearings (there are over 2,000 copies mailed to community organizations, elected officials, community board offices, and individuals), with an appeal for response from the community.

To obtain information on the date and times of hearings, an individual or organization may contact, in September, the Department's Planning Unit at (212) 442-0977/0960, or DFTA's Internet web site at: <http://www.nyc.gov/aging>.

In addition to the public hearings, DFTA meets formally with community boards, advisory committees, interagency councils on aging, and many other organizations to further receive 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., Eastern Paralyzed Veterans Association, 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 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/html/mopd/home.html>.

Human Resources Administration (HRA)

HRA funds over 250 social service contracts with Community-Based Organizations with an annual value over \$1 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. HRA has also developed more than fifteen joint funding proposals, including Welfare to Work and Workforce Investment Act grants, with Community-Based Organizations as well as city-wide organizations. 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 1(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 (www.nyc.gov/html/hra/home/html).

The Commissioner/Administrator for HRA formed an HRA Citizen Advisory Committee which meets with her every 2 months. Subcommittees prepare recommendations to the Commissioner for improving HRA's services to the community. The membership comprises 33 individuals who are executives in non-profit corporations, includes consumers as well. In addition to the Commissioner and community representatives, four HRA Executive Staff, including the First Deputy and the Legal Counsel, are members. Several HRA programs also have community advisory groups. These include the Citywide Medicaid Advisory Council; Borough Medicaid Advisory Councils; the New York City Interagency Task Force on Domestic Violence; and the Protective Services for Adults Advisory Council. All of these boards provide a valuable connection between the Agency and the communities it serves.

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.

Project Liberty, administered by the Department and the State Office of Mental Health, was established to help New Yorkers in the difficult task of rebuilding their lives after September 11, 2001. It is the largest such program ever funded by the Federal Emergency Management Agency. It coordinates the mental health service systems outreach and counseling in response to public requests. Project Liberty launched the *New York Needs Us Strong* public education campaign, urging people who need help to contact 1-800-LIFENET, a referral and information hotline funded by the Department and administered by the Mental Health Association of New York City. Assistance with emotional or chemical dependence and other problems is readily available to the public in English, Spanish and several Asian languages. Translations into additional languages are arranged as needed.

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 Public Participation Activities of the Department

The Department of Youth and Community Development receives input from the public through various advisory boards: The New York City Youth Board, the Joint Planning Committee and the Community Action Program.

The New York City Youth Board: The New York City Youth Board serves as a forum for representatives of disciplines directly concerned with the welfare of youth. The Board is comprised of representatives of the community and includes persons representing the areas of social services, health care, education, business, industry and labor. The full capacity of the Board is twenty-eight (28) with half appointed by the Mayor and half by the City Council. The Board meets on a quarterly basis.

The Joint Planning Committee: DYCD meets quarterly with a permanent standing committee selected by each of the Borough Presidents and comprised of two to four representatives from each borough. This committee consults and recommends policies, procedures and any proposed changes concerning all elements of the working relationship

of the Community Board and the Department of Youth and Community Development. The Joint Planning Committee participates with DYCD in formulating the County Comprehensive Plan for youth services.

Neighborhood Advisory Boards: Neighborhood Advisory Boards (NABs) are a component of the Community Action Program in New York City (see program description below). Comprised of seven to twelve representatives of the poor, each NAB is located in a Neighborhood Development Area (NDA) which is eligible to receive funds under New York City's Community Services Block Grant Program based on poverty levels. (Currently, there are 44 NDAs in New York City; a reassessment is underway based on 2000 Census Data. The reassessment and a decision on how to proceed will result in a new NDA RFP. The RFP will be release in Fall 2003) NABs were established to ensure community participation in the planning process for service delivery. After community consultation conducted through a public hearing process, NABs determine program area priorities. They also participate in the review and evaluation of proposals and, in partnership with DYCD, recommend those proposals that best meet the needs of their communities. Through the Neighborhood Advisory Boards, DYCD maximizes the participation of community residents in the Community Action Program and promotes greater awareness of its mission.

The Community Action 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. The federal Community Services Block Grant (CSBG) funds the operations of a state-administered Community Services Network of local Community Action Agencies (CAAs) that create, coordinate, and deliver many programs and services to low-income Americans. Local agencies use allocated funds to mobilize additional resources from local business and foundations, as well as other public sources, to combat the central causes of poverty in their communities and to assist low income individuals achieve self sufficiency. As the CAA for New York City, the Department of Youth & Community Development (DYCD) has oversight for the distribution and management of CSBG resources to the 44 Neighborhood Development Areas (NDAs) that qualify for CSBG funding in the City's five boroughs. The DYCD Community Action Program managed approximately 370 contracts in FY 2003. In each NDA, Neighborhood Advisory Boards, comprised of local residents, address community planning for the education, employment, health, housing, immigrant service, senior citizen and youth services needs of the poor in their respective communities.

Notification of the Not-for-Profit Community of the Department's Activities and Opportunities for Funding

Since December 2001, the Department of Youth and Community Development, along with all other City agencies, has utilized a centralized bidders' list maintained by the Mayor's Office of Contracts (MOC). To be included on this list, community-based providers complete an application that is processed by MOC. The centralized bidders list is available to every City agency, eliminating the need for providers to contact agencies individually with regard to the availability of their services. The Department of Youth and Family Development also advertises all funding opportunities in the City Record, as required by the City's Procurement Policy Board Rules. The City Record is available on-line at <http://www.nyc.gov/cityrecord>. Inquiries may be directed to Eduardo Laboy, Intergovernmental Relations at (212) 442-6009.

Commission on Human Rights

The Commission on Human Rights has several formal mechanisms for receiving input from citizens. In addition, since the Commission serves the public directly, citizens have frequent informal opportunities, as well, to give input.

The Commission on Human Rights holds monthly 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.

The Commission periodically holds public hearings on issues relevant to the agency's mission. Public officials, experts on the issues, and members of the public are invited to testify. Past hearings have covered such topics as the effects of changes in federal immigration laws on people in New York City, discrimination in the construction industry, and strategies for promoting intergroup cooperation. The public is notified of the plans and dates for the hearings through mailings and telephone outreach, public service announcements, and advertisements in local papers.

The Commission's borough-based Community Service Centers provide community-centered work, and members of their staffs regularly attend 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 them 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 Commission activities and publications can be found in the Commission's Annual Report which can be obtained through calling (212) 306-7530 or through the Commission website at <http://www.nyc.gov/html/cchr/home.html>.

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 three tax incentive programs; 421(a), 421(b) and J-51 which assist in the production of thousands of units.

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 CFY03 approximately \$181.6 million in City property taxes were exempted for New Multiple Dwellings under the 421(a) program for residential properties.

421(b) Partial Tax Exemption Program

The 421(b) Partial Tax Exemption Program refers to Section 421(b) 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 owner-occupied new and rehabilitated private dwellings consisting of one- and two-family units. Newly constructed one- and two-family homes may be eligible provided they meet all program requirements. Substantially rehabilitated private dwellings where the cost of reconstruction will equal at least 40 percent of the property's assessed valuation before commencement of construction may also receive benefits under this program. Properties which qualify for benefits are exempt from taxation on the increase in assessed valuation resulting from the construction or reconstruction. These benefits apply for up to two years during construction and eight years following completion of the work.

The 421(b) 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.

Owners of two-family homes may rent the second unit. For rental properties, HPD will set maximum rents which may be charged, and the units receiving benefits are fully subject to rent regulations during the period for which they are receiving tax exemption.

In CFY03 approximately \$13.9 million in City property taxes was exempted under the 421(b) Program for private new homes.

J-51 Tax Exemption/Abatement Program

J-51 Tax Exemption/Abatement Program -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 by December 31, 2007. 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 $8\frac{1}{3}$ 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 CFY03, approximately \$78.0 million and \$97.8 million in City property taxes on residential property were exempted and abated under the J-51 program, respectively.

In addition, the federal government provides a Federal Low Income Housing Tax Credit program, which the City, through HPD, provides tax credits to programs such as: Local Initiatives Support Coalition (LISC); Bradhurst; Supportive Housing Programs; City/State Permanent Housing for the Homeless (85/85); Neighborhood Redevelopment Program (NRP); Neighborhood Entrepreneurs (NEP); and the Department of Homeless Services supportive housing 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 occupied private occupied rental units 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 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 \$2,000.

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, 2003 and ending September 30, 2004, are 4.5 percent for one-year leases and 7.5 percent for two-year leases.

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

1. If increased services or space are provided in an apartment, an increase is allowed as a permanent adjustment to the monthly rent.
2. 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.
3. 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 \$2,000 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 \$2,000 or more, the apartment may also be subject to deregulation.

If households occupying either a rent stabilized or rent controlled unit earn \$175,000 or more for two consecutive years and their legal monthly rent is \$2,000 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 in a timely manner.

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 resulting determination by the CPC or the particular nature of the application, a City Council and a mayoral 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) located on City property	ULURP Review Required
Projects which require change in zoning or special permits located on private property	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 2001), 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. The Inclusionary Housing Program provides, in high density areas, a floor area bonus in exchange for development of low income housing.

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.

Many developments are not built to the maximum density allowed. In recent years, publicly-assisted residential structures have generally had to be built below the maximum allowable zoning densities in part because funds were not available to build elevator apartment buildings which have a high per unit cost.

Building Codes and Code Enforcement

Scope of Agency Operations

The Department of Buildings ensures the safe and lawful use of over 900,000 buildings and properties by enforcing the Building Code, Zoning Resolution and other applicable laws. It reviews over 57,000 construction plans annually, issues over 87,000 new and renewed permits, performs over 350,000 inspections, and licenses nine trades with 27 classifications. It facilitates construction by striving to streamline the application process and deliver services with integrity and professionalism.

Customer Service

In September 2002, the Department implemented a Customer Service Representative Pilot in the Brooklyn borough office. Knowledgeable customer service representatives are readily available to homeowners needing assistance. The program was so successful in Brooklyn that it was expanded citywide. Now each borough office has a customer service representative available during business hours.

In December 2002, the Department's Central Call Center was integrated with 311. Trained representatives are now available to take complaints and provide basic information 24 hours a day, 7 days a week.

In February 2003, the Department published its first installment of Building Knowledge – a series of brochures designed to instruct the public on various issues of interest. The first series of brochures included the following topics: Construction Permits, Electrical Permits, Plumbing Work, Storefront Sign Requirements and Frequently Asked Questions.

In August 2003, the Department implemented two new features to the existing Q-Matic program in the Queens borough office. Q-Welcome captures customer information via barcode and magnetic stripe readers and links the data to a ticket number and the type of service/s requested. Q-Welcome interfaces with Q-Next software offering an integrated queuing system. The new system will improve customer service by eliminating the need for staff to re-key in information and for customers to repeat information.

The Department is currently working with its new training specialist to develop a series of Customer Service Training workshops to further prepare Customer Service Representatives in working with the public and enhancing the level of service provided.

Certificate of Occupancy Pilot

Buildings continued to re-engineer the process for obtaining Certificates of Occupancy (C of Os) in Fiscal 2003. This effort began in July 2002 with the initiation of a phased pilot project in the Bronx. The first and second phases of that pilot provided status and process information to the filing representative and owner, and computerized the process via use of the 'C of O Module', which is part of the BIS database. The Agency replaced the third phase with an expanded re-engineering project known as Mica, which is piloting operational changes in the Department's Manhattan and Staten Island borough offices. The goals of Mica are to simplify application procedures from pre-filing through issuance of a C of O, establish standard timeframes for service delivery and offer the public easier access to status and filing information.

As a first step, in Fiscal 2003 Buildings reviewed its current practices to identify areas that can be streamlined, such as plan examination and the plumbing inspection process. The Department also introduced an electronic version of the C of O form. By the second quarter of Fiscal 2004, Manhattan plan examiners reviewing NB and Alt 1 applications will submit their objections and comments, citing specific Building Code and Zoning provisions when applicable, via e-mail to participating applicants. These new procedures replace the handwritten objection form and provide participants with clearer, more complete information in a timelier fashion.

Building Code Update

The published Building Code was last updated in 1993. Updates to the Building Code – current through December 2002 – are now available on the Internet. Publication of the next updated Building Code is expected this November, and will be current as of June 2003.

Code Revisions

1. National Electrical Code

On December 2, 2002 Mayor Bloomberg signed the bill to adopt the 1999 National Electrical Code, a recognized industry standard with local amendments that adapt it to the unique conditions found in NYC. Adoption of the NEC updated NYC's antiquated electrical code for the first time in more than three decades. The effort to revise the City's electrical code began only a year ago with the creation of an Electrical Code Advisory Committee and the Electrical Code Revision and Interpretation Committee comprised of industry leaders and experts from the electrical industry, including labor and real estate, the design community, manufacturers, and City agencies. The new electrical code recognizes the technological advancements that have occurred since the 1960s, including low voltage systems, fiber optics, digital control systems, and solar and fuel cell technologies.

The new code, which will be updated later this year (and on a tri-annual basis thereafter), became effective on January 3, 2003, with a phase-in period for technical standards until July 1, 2003. During that period an applicant for an electrical permit had the option that his/ her job be reviewed under the old or new electrical code. By September 30th the Department will submit to the City Council proposed amendments to the National Electrical Code to be adopted as New York City's electrical technical standards. The City Council must act within ninety (90) days of that submission.

2. New York City Model Code Program

This past June the New York City Department of Buildings held the kickoff meeting of the New York City Model Code Program, which will determine how to implement the International Building Code (IBC) as the governing set of building regulations for the City of New York. The Model Code Program, which features representatives from

the public and private sectors, will essentially continue the work began by the Mayoral Commission on the Adoption of a Model Building Code, which extensively examined the IBC for its ease of adaptability to the City's unique needs. The Commission presented its recommendation to accept the IBC to Mayor Michael R. Bloomberg in May 2003.

The New York City Model Code Program comprises a Managing Committee and thirteen (13) Technical Committees. The Managing Committee is made up of representatives from Buildings, the New York City Fire Department (FDNY), the Department of Design and Construction (DDC), the Department of Housing Preservation and Development (HPD), the Mayor's Office for People with Disabilities (MOPD), the New York Economic Development Corporation (EDC), the New York City Council, and members of the private sector. The first meeting was held on June 28, 2003.

The Technical Committees will focus on key aspects of IBC regulations, including administration and enforcement, construction requirements, fire protection, materials, accessibility and application of the IBC to existing buildings. The Technical Committees will report directly to the Managing Committee with their results and findings.

3. World Trade Center Building Code Task Force

The DOB task force, formed in March 2002, determined whether changes to the design, construction and/or safety standards of buildings should be made as a result of the September 11th disaster. Invited to participate in the effort were the Office of Emergency Management (OEM), the Fire Department of the City of New York (FDNY), the Department of Design and Construction (DDC), the Real Estate Board of New York, the Building Trade Employers Association, the Architects Council of NYC, and the Society of Professional Engineers. The group evaluated information related to the performance of buildings on that day and the safety of the public in and around those structures, and presented recommendations to DOB's Commissioner in February 2003. Their findings include Building Code, Zoning and Fire Prevention Code changes; and will increase safety in high-rise buildings. The Department is drafting a legislative proposal to implement the changes to the Building Code and is working with the City Planning Department and the Fire Department regarding their parts. The drafted legislative proposals are expected to be presented by the end of 2003.

Building Information System (BIS) Enhancements

The Department has added all public access screens to BIS on the Web. Constituents are now able to click on nyc.gov/buildings and pull up BIS to view the status of all property and boiler filings, permits and certificates of occupancy issued, ECB and DOB violations and complaints as well as detailed construction application information. Included is comprehensive information regarding all documents and schedules received by the Agency. Since this expanded web-based BIS has been implemented, the average number of page views on the Department's online application has jumped from approximately 9,000 page views per day to over 250,000 per day.

The Department will continue to work hard at improving delivery of all its services. All of the initiatives mentioned here have one common denominator – simplifying the filing process and making buildings safer. These actions should allow for a reduction in development cost of housing, all without compromising DOB's public safety mandate.

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 utility costs and to supplement fuel for income households. Financial assistance is provided in one of three ways: as a regular grant, which is paid directly to the households 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 hear-related equipment and/or with temporary relocation 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. The Department of Youth and Community Development (DYCD) has similar responsibilities for recipients who are under 60 years of age.

The HEAP season began October 1, 2002 and closed on April 20, 2003. During this season approximately 350,000 benefits were distributed in the amount \$26,000,000 to assist New York City residents in paying for their heating expenses.

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.

In FFY03, approximately \$61,986 in WRAP funds were allocated to assist New York's Weatherization referral activities.

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

Water Conservation Program

The City, through the Department of Environmental Protection (DEP), has programs to encourage the conservation of water, both to reduce the need to supply increasing amounts of clean water and to reduce the need to treat increasing volumes of sewage. The principal conservation strategy is billing water/sewer customers based on metered consumption, instead of flat rate which provided no incentive to avoid wasting water. In-city water consumption has decreased by approximately 200 millions gallons per day since the City began the largest portion of the program to install 650,000 water meters and take other conservation measures. Quarterly billing for metered customers began in parts of the city in 1994. Water consumption since the late 1980's is estimated to be reduced by 15%. The metering program is now 95% complete.

DEP offers free water surveys and free installation of water-saving showerheads and other device for residential customers through the Residential Water Survey Program. The program provides free leak inspections and free installation of low-cost water conservation devices to residential property owners. By 2003, more than 550,000 surveys had been performed on properties ranging from private homes to large apartment buildings. This program was initially offered for residents in one- to three-family houses; it was expanded to all residential properties in 1994. DEP began the nation's largest rebate program in April 1994 to encourage the replacement of old toilets with new water-saving models. The Toilet Rebate Program provided all property owners with a financial incentive to replace old toilets and showerheads. The rebate program gave building owners as much as one hundred percent cost recovery within 30 days. Through its completion in June, 1997, more than 1.3 million toilets had been replaced and applications for more than 40,000 properties. This program resulted in a dramatic reduction in water usage since the new toilets use thirty to forty percent less water which has clear implications for overall housing affordability. Sixty-six percent of the rebates have been issued to properties in Community Planning Boards with per capita incomes under \$15,000 per year. Measured average water savings in a sample of multi-family properties was 29%.

DEP and the New York City Water Board have implemented a number of policies to provide rate relief to multi-family buildings if they make basic conservation advances. The Bill Cap program provides residential property owners who take these conservation actions with an annual per unit cap, or maximum, on their water/sewer bills. The Pre-Transition Flat-rate program provides bill adjustments to apartment buildings metered before the Water Board instituted its standard transition program. The transition program allows apartment buildings owners to remain on flat-rate billing for at least one year after a meter is installed to prepare their building for meter-based billing. The Water Board has approved a proposal for long-term flat rate billing for metered multi-family housing (six or more units) which is coupled with water efficiency requirements. This Multifamily Conservation Program (MCP) has two main objectives: to ensure installation of water meters in all multiple family buildings and to promote greater water conservation in this housing sector. The program provides an incentives to owners to invest in low flow plumbing hardware and ongoing maintenance of plumbing fixtures so as to produce water savings without the need for behavioral modifications by tenants.

The MCP will be implemented over several years with the first applications being accepted in 2001. Owners are offered an option of being billed on a metered basis or on a system of fixed rate charges per dwelling unit in exchange for their investment in low flow plumbing fixtures and cooperation in water conservation efforts. Under the program owners will have until December 31, 2004 to decide which billing method is more economical given the specifics of their respective buildings.

To enter the program the property must be metered, leaks repaired, and low flow toilets, sinks and showerheads be installed in at least 70% of the units. Washing machines in common areas must be either the water conserving type or replaced with water conserving machines within 5-years or when the building's laundry room contract is due for renewal. The building must also be current in it's water/sewer billings.

A 5.5% increase in water/sewer rates for CFY04 went to effect on July 1, 2003. Previously, a six percent increase in water and sewer rates for CFY03 went into effect on July 1, 2002. Previously, a three percent increase on water and sewer rates for CFY02 went into effect on July 1, 2001. Also a one percent increase in water/sewer rates went into effect on July 1, 2000. Greater stability in water rates than the previous decade combined with the rebate and cost-reduction measures noted above will benefit affordable housing unit households, as well as, the general population. Greater stability in water rates, than in the previous decade, combined with the rebate and cost-reduction measures, as noted above, will benefit affordable housing units, as well as, the general population.

DEP is involved in several efforts to increase the collection of revenues owned, which will assist in reducing the need for future rates increases.

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 were accessed by steps, creating 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 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 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.

For the first time, the New York Housing and Vacancy Survey in 1996 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.

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.

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.

In 1999, the HVS again collected accessibility data. It produced statistics, by structural characteristics by structure classification. The survey asked a number of questions regarding accessibility, the building entrance, dwelling unit door, and elevator cab sizes². According to the 1999 HVS, 469,000 units, or 42.4% of all units in multiple dwellings with elevators in the City, were determined to be accessible to people with physical disabilities requiring the use of a wheelchair, when all five accessibility criteria covered in the 1999 HVS are applied at once. This is an increase of 54,000, or 13.0%, over the number of such units in 1996. The primary impediment to having a higher percentage of these units totally accessible was the presence of stairs between the sidewalk and the residential unit. Only 4.3% of the 827,000 units did not have stairs between the sidewalk and the residential unit. This is contrast to the percentage of accessible units which possessed an entrance/lobby door and/or residential door of minimum required width (21.1% and 38.7%, respectively).

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.

2 The five structural characteristics include: 1) street/inner lobby entry at least 32 inches wide (to allow a wheelchair to move in and out); 2) residential unit entrance the same width; 3) elevator door at least 36 inches wide and cab at least 51 inches deep (in buildings with elevators); 4) no stairs between the sidewalk and a passenger elevator (in buildings with an elevator); and 5) no stairs between the sidewalk and the residential unit.

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, and Public Housing Drug Elimination-funded programs; 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 entitlement funds. In addition, NYCHA has applied for, and in the past, received other HUD Competitive Grant funds (e.g., Public Housing Drug Elimination Program (DEP)). 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 three members appointed by the Mayor. The Chair, serving at the Mayor's pleasure and the other two members serving 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 six groups: Operations; Capital Projects and Development; Administration; Finance; Policy, Planning and Management Analysis; and Community Operations, each reporting to the General Manager.

The Executive Group consists of the following Departments: the Law Department, the Office of the Secretary, Public and Community Relations Department, the Office of Inter-Governmental Relations, and the Department of Equal Opportunity.

The Operations Group consists of the following Departments: the Operations Services Department, the Technical Services Department, the Housing Applications Department, the five Borough Management Departments, the Department of Emergency Services, the Department of Housing Applications, the Private Management Department, and the WEP Office. Each of the departments in this group runs a primary service operation, helping to provide the statutory "decent, safe and sanitary shelter" to New York's low- and moderate-income community.

The Capital Projects Group consists of the following Departments: Design and Capital Improvement Department, the Construction Department, the Office for Modernization, the Office of Quality and Cost Control, the Department of Housing Finance and Development, and the Contract Administration Department.

The Administration Group consists of the following Departments: the Office of Facility Planning and Administration, the Human Resources Department, the Staff Development Department, the Department of General Services, the Department of Materials Management, and the Office of Records Management.

The Finance Group consists of the following Departments: the Financial Operations Department, the Accounting Department, the Budget Department, the Energy Department.

The Community Operations Group consists of the five Borough Community Operations Departments, the Citywide

Programs Department, the Senior Services Department, the Social Services Department, the Department of Economic and Business Initiatives, and the Administration Department.

The Policy, Planning and Management Analysis Group consist of the following Departments: the Department of Research and Policy Development, the Audit Department, the Strategic Planning Department, and the Department of Program Assessment and Policy Development.

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, a group of departments coordinate tenant programs, community relations, and initiatives to improve the quality of life of NYCHA's residents. The following is a description of initiatives by department.

1) Department of Community Operations

Senior residents in public housing are among the most most-needy senior population in the City. NYCHA houses a total of 77,672 seniors age 60 and over who are legal residents of public housing; over 26% of the senior residents are 75 to 84 years of age; over 7% are 85 to 94 years of age; and almost 9% are 95 years of age or older. Some of the Authority's initiatives to address the needs of its senior population are listed below.

Saratoga Square Congregate Housing Services Program (CHSP)

The CHSP program is located at the Saratoga Square Senior Housing Development in Brooklyn. This HUD program provides additional funds, which allow NYCHA to provide comprehensive services to the frail, impaired elderly and non-elderly disabled residents at this public housing development. The goal of the program is to help maintain low-income senior residents in independent living and prevent premature institutionalization. The services provided include, but not limited to, two meals per day, seven days a week; case management; housekeeping; personal care; escort services; transportation; shopping; translation; and assistance with bills and correspondence.

During calendar year 2002, 147 geriatric assessments were completed. The wellness program was expanded to include nutritional workshops, health education workshops, including tobacco cessation and West Nile Virus, and music therapy in addition to the exercise classes. Efforts were also made to reinstate the floor captain system for well being purposes, as well as, security issues. In the same vein, a great deal of emphasis and recruitment was placed in expanding volunteerism at the site and in the center. This was done in collaboration with the Resident Council, Management, and the Police Department.

The program provided 21,822 meals, 863 units of case management, 100 hours of housekeeping, 185 hours of personal assistance, 22 units of transportation, and 8,223 other units of service to 80 unduplicated clients, who received more than one unit of service. The Authority received \$1.4 million from HUD for a period of 5 years, with an expenditure deadline of December 31, 2005, for services at Saratoga Square an expansion of the program to include an additional site.

In addition to the HUD and NYCHA funding, the Senior Center receives \$2,500 per year from the State Department for the Aging, as well as, \$2,500 from Councilwoman Tracy Boyland, to provide enhancements to the services and trips for the seniors.

Naturally Occurring Retirement Community (NORC) Program

The Program was developed to address the needs of both the frail and well senior residents who are 60 years of age or older and who do not live in housing that was built specifically for the elderly, but have continued to live in their homes and have age in place.

The services provided include case management, counseling, health care, including medication management and health education, referral services, transportation, and socialization/recreational activities.

The New York City Council allocated \$4 million for this program in 1999, of which \$1.4 million was set aside for continuation of existing programs that were previously funded by the NYS Office of the Aging, and the balance for new sites. In April 2000, the NYC Department for the Aging (DFTA) funded a total of 14 new programs, five of which were at NYCHA sites. In addition to the five new awards, DFTA also provided funding for two existing NORC programs. In total, NYCHA's seven sites received \$1,603,287.

The seven NYCHA NORC sites house 5,142 senior residents age 60 or older; over 30% are 75 to 84; almost 11% are 85-94; and 1% is 95 or older.

NORC funding represents a true public private partnership DFTA, NYCHA, Philanthropy, Health Care providers, community-based Social Service providers, and the community at large, including volunteers.

DFTA annual grants added up to \$ 1,061,646; this amount did not include the DFTA start-up costs, which totaled \$271,469. The total grants from philanthropy add up to approximately \$1,198,400 over three years. NYCHA provides rent-free and utility-free space, the Authority had to provide renovation work at most of the sites, and in some cases they receive janitorial services as well. Additionally, because of budget cuts in City Fiscal Year 2004 NYCHA has agreed to fund the DFTA portion of the program costs for the NYCHA sites. Other in-kind contributions include the following: 1) Non-reimbursable nursing and other health care services, which are critical and which have proven to be life saving in a number of instances. NYCHA senior residents seem to be in worse physical condition than their moderate/middle income counterparts. Many of them have multiple chronic conditions that need to be properly managed and controlled. Yet, the seniors are less likely to access regular health care, and as many as 30% do not have a primary care physician; 2) Community-based organizations and volunteers, who have clocked in excess of a total of 676 hours of service.

Based on DFTA's quarterly reports for CFY02, from July 1, 2001 to June 30, 2002, NYCHA NORC program provided the following services:

- Comprehensive support services to 1,335 residents of these seven developments. This included 10,461 hours of case management and assistance;
- 3,099 hours of health care management and assistance, mostly of services that are not reimbursable by Medicare;
- 2,380 hours of information and referral services, including benefits and entitlements;
- 3840 hours of assistance with activities of daily living and instrumental activities of daily living, including housekeeping, personal care, shopping, chore services;
- 4087 hours of other supportive and volunteer services, including home visits, telephone reassurance;

- It conducted 3,330 group sessions with a total of 35,467 attendees, which included health promotions, education, recreation, group support and group counseling;
- 2600 units of transportation services; and
- 9,194 meals provided through a Tuttle Grant were served as part of the Amsterdam NORC.

Comprehensive Senior Community Wellness Program

NYCHA, in collaboration with the NYC Department of Health and Mental Hygiene (DOHMH), implemented a Comprehensive Senior Community Wellness Program in 2000. Last year the program was expanded to 21 NYCHA-operated senior centers. This program was implemented in three phases. Phase I included yearly on site immunizations for influenza and pneumonia. Last year, 776 senior public housing residents were immunized on site or in their homes. Phase II consisted of exercise classes, nutrition and other health education workshops, such as Stroke Awareness, STD, Prostate, Colon, Ovarian and Breast Cancer, among others. The exercise component, the Senior Self-Efficacy Project (SESEP), was funded by the Robert Wood Johnson Foundation. This grant was funded to study the most effective model for cardiovascular health in minority older adults in public housing. This was done by offering exercise alone, exercise with motivational training, and nutritional education in conjunction with exercise and motivational training, as well as, nutritional education by itself to minority seniors at NYCHA-operated senior centers. Twenty-one senior centers in Manhattan, Brooklyn, the Bronx, and Queens participated in these various modules. Phase III, in collaboration with Visiting Nurse Services, is designed to increase ethnic minority seniors' access to mental health services. Exercise classes were completed at six Brooklyn in 2002 and began in Manhattan and the Bronx last fall. Nutritional classes were completed in three Manhattan and three Bronx sites in 2002, and began in six Brooklyn sites last fall. DOHMH is applying for a grant in order to continue to provide exercise classes at some of the sites. Under a separate initiative, they are also looking to establish a program for diabetes education and prevention.

Phase III of the project is "Reaching Out to Elders in Public Housing in Public Housing". DOHMH and NYCHA are collaborating in the promotion of access for mental health services for seniors in selected public housing developments in underserved communities, specifically Northern Manhattan and Brooklyn. DOHMH received an annual grant award of \$388,154 from the U.S. Department of Health and Human Services Administration Center for Mental Health Services. Initially, this grant was for three years. However, at this time there is only commitment for a two-year period. If funds become available for the third year, three sites in the Bronx will be reinstated in this initiative. The project aims to increase access to needed mental health services to minority older adults by providing culturally competent mental health outreach and treatment services on site and in-home. The project began in November 2002 and is expected to end in March 2005.

This initiative will be administered in conjunction with DOHMH's Comprehensive Senior Wellness Program at six of the NYCHA-operated senior centers (10 developments): Rangel, Manhattanville, and St. Nicholas located in Manhattan; and Bushwick/Hylan, Saratoga Square, and Farragut located in Brooklyn.

The Visiting Nurse Service (VNS) of New York has a contract with DOHMH to implement the program. The project staff, led by a Licensed Nurse Practitioner, screen residents on site for mental illness, particularly depression and anxiety, as well as, alcohol and substance abuse. It is anticipated that the program will increase public housing residents' access to needed mental health services by providing the on site screenings, assessments, and interpersonal psychotherapy (IPT). The short term treatment modality consists of 12 to 14 weeks. If there is a need for more intensive services, the resident will be referred to a qualified provider.

Since the program implementation at Rangel Houses, VNS delivered the following services: 303 direct outreach

efforts to seniors' apartments, which resulted in 98 actual contacts with residents. To date, of the 16 screenings that were completed, 7 had positive results. Of the five baseline assessments that were completed, five had positive results. Of the four psycho-social assessments completed, two are still receiving ITP (As per Report of July 1, 2003).

It is anticipated that the initiative at Rangel will be completed by the end of September and that the team will then move to Manhattanville Houses for the next four months. They will subsequently move on to St. Nicholas Houses to conclude the initiative in Manhattan and then proceed to Brooklyn.

NYCHA Operated Senior Centers

Leisure time activities are provided for the elderly at 37 senior centers. Approximately 1,500 people attend sessions each weekday in arts and crafts, music, painting, drama, trips, etc. Some centers have food programs funded by the State and City and managed by the staff of NYCHA's Department of Community Operations. The program receives grants totaling \$91,125 from State and City representatives.

I Have A Dream

The I Have a Dream (IHAD) Program, a collaboration of the IHAD Foundation, NYCHA, local non-profit organizations and private funding sources, currently operates for residents at three NYCHA sites, Chelsea Elliot Houses, the Ravenswood Houses and two classes at the Melrose Houses. The program has "adopted" a group of second and third graders at each of the developments and provides ongoing educational, social, and cultural enrichments to the same group of "Dreamers" as they progress from elementary school through their high school years and beyond. The program guarantees tuition support for college or vocational training to participants who graduate from high school. Registration and recruitment are now taking place. IHAD is funded by \$235,000 in Operating funds.

Mentoring

This program is a collaboration among NYCHA, the non-profit Mentoring USA, the New York City Police Department, and various other community-based organizations. The Mentoring Program provides special friends for young NYCHA residents in grades 1-6 ("mentees"), by matching them one-on-one with caring adult volunteers ("mentors"). The mentors and mentees meet twice a month for two hours in a supervised environment during the school year. NYCHA has established mentoring programs at eight sites. Plans are underway to increase the number of sites during the upcoming year.

Service Coordinator Program

The Service Coordinator Program was originally designed to serve approximately 4,000 elderly and non-elderly disabled residents at 12 NYCHA developments in two clusters. In December 1998, NYCHA received approval to expand the program to 12 additional NYCHA developments with a potential to serve approximately 8,700 additional elderly and non-elderly disabled residents.

The Service Coordinator Program provides supportive services to elderly (ages 62 and over), and non-elderly disabled residents, in selected sites, assisting them to maintain independent living by: accessing public entitlements, advocating with service providers, providing crisis intervention, monitoring the health and well being of the residents through home visits and telephone check-ups, and organizing a floor captain/buddy system. At selected sites, a live-in staff person is available 24 hours a day, at other sites, a non live-in staff person is available from 9AM-5PM.

This program is funded under the 1995 Service Coordinator Competitive Grant in which NYCHA was awarded \$1,875,000. In 2000, NYCHA received approval for an additional \$923,123 in FY2000 ROSS/Service Coordinator funds. In 2001, NYCHA received approval for an additional \$941,585 in FY2001 ROSS/Service Coordinator funds.

In May 2002, NYCHA, in response to the FY2002 Ross/Service Coordinator NOFA, submitted a proposal in the amount of \$960,417.

From January through June 2003, the program provided a total of 22,856 units of supportive services (Brooklyn Cluster:16,248; Harlem Cluster:4,292; Staten Island Cluster:1,082; and Queens Cluster:1,234) and conducted 4,025 home visits (Brooklyn Cluster: 2,165; Harlem Cluster:936; Staten Island Cluster: 259; and Queens Cluster:665) to program participants - with to an average of 970 tenants served monthly (Brooklyn Cluster: 535; Harlem Cluster: 232; Staten Island Cluster: 69; and Queens Cluster:134).

Senior Resident Advisor Program

In 1979, the New York City Housing Authority initiated the Senior Resident Advisor (SRA) Program as a demonstration project with a grant from the U.S. Department of Health and Human Services. NYCHA has continued to receive CDBG funds for the following twelve SRA sites: Bronx River Addition, Randall Balcom, 228 West Tremont, Palmetto Gardens, Conlon Liffie, Shelton Tower, Baruch Addition, Bethune Gardens, Harborview Terrace, LaGuardia Addition, Meltzer Tower and Gaylord White.

In addition, operating funds provide one part time site. The nine full-time sites funded by operating funds are Boston Road Plaza, Cassidy-Lafayette, Fort Washington, Middletown Plaza, Morrisania Air Rights, Thurgood Marshall Plaza, Union Avenue Consolidated and Sondra Thomas Apartments. In total, the SRA Program is in operation in 22 senior-only sites and serves approximately 5,238 elderly/disabled residents.

The SRA Program provides supportive services to elderly (ages 62 and over), and non-elderly disabled residents, in selected sites, assisting them to maintain independent living by: accessing public entitlements, advocating with service providers, providing crisis intervention, monitoring the health and well being of the residents through home visits and telephone check-ups, and organizing a floor captain/buddy system. The program utilizes either a live-in staff person available 24 hours a day, or at selected sites, a non live-in who is available from 9AM-5PM. This program is funded by \$769,301 in Operating funds, and supplemented by a \$450,000 Community Development Block Grant (CDBG).

From January through June 2003, the program provided 45,076 units of supportive services (Operating: 22,555 and CDBG:22,521), and conducted 6,822 home visits (Operating:3,485 and CDBG: 3,337) to program participants with an average of 1,846 seniors served monthly (Operating: 944 and CDBG:902).

Senior Network Program

The Senior Network Program is staffed by ten DFTA Title V workers. The program title for all Senior Network staff is "Senior Advocate". Senior Advocates assist elderly tenants with a wide variety of problems, including social service referrals, entitlement assistance, crisis intervention, resident monitoring, including telephone reassurance, escort and errand services, and crime victim assistance. The following sites are served: UPACA, Johnson, Taft, Clinton, and Ravenswood.

From January through June 2003, the program provided 150 escort services, and conducted 181 home visits to an average of 135 clients monthly.

Senior Companion Program

The Senior Companion Program is funded by the Corporation for National Service with twenty Senior Companions assigned through the Henry Street Settlement. The Senior Companions provide friendly home visits to a specific number of tenants, most of whom are frail and socially isolated. They also provide escort and light shopping services. The program operates at the following sites: UPACA, Ravenswood, Cassidy/Lafayette, Gaylord White, Harborview

Terrace, Johnson, Taft and Clinton.

From January through June 2003, the program provided 278 escort services, and conducted 1,504 home visits to an average of 50 clients monthly.

Both the Senior Network and Senior Companion Programs are currently Supervisor II (SW), funded with \$72,728 in Operating funds.

Supportive Outreach Services (SOS) Program

SOS is provided throughout the five boroughs Social Service Offices. SOS receives referrals primarily from NYCHA's Management Department. Social Service Staff, under the supervision of MSWs, provide prevention and intervention programs to residents who are experiencing difficulty with aspects of independent living (i.e., prompt rent payments, housekeeping, conflicts with neighbors, etc). The staff conducts needs assessments, makes referrals, design treatment plans, and develops case management strategies. This is funded with \$4,705,055 in operating funds.

From January through June 2003, the program received a total of 2,777 referrals, and conducted 4,578 home visits.

Elderly Assistance Information System for Management

The Elderly Assistance Information System for Management is a component of NYCHA's SOS program. This program enhances management productivity in addressing the special needs of the elderly, particularly the frail elderly aging-in-place by providing a wide range of services. They include assessment of needs and concerns of elderly residents. Under the direction of Supervisory Social Workers, trained para-professionals link elderly residents with community based agencies for benefits and entitlements, home care and a variety of support services. Staff provide case management, short term counseling and training of management staff to promote the optimal well being of elderly residents through buddy assistance and telephone reassurance. This program is funded by \$1,040,272 in operating funds.

From January through June 2003, the program received a total of 546 referrals, and conducted 1,460 home visits.

2) Department of Economic and Business Initiatives

Alternative High Schools (AHS)

The Alternative High School (AHS) Program is a collaborative program between NYCHA and the Board of Education, which provides an opportunity for high school dropouts, ages 17-20, to complete their high school education by pursuing a General Educational Development (GED) High School Equivalency Diploma.

From 1996 to June 2003, 8,054 individuals participated in this program and over 1,033 participants obtained their GED(s). In CFY03, September through June, 724 students were served by the program. As of June 2003, NYCHA operates 18 sites city-wide. This program is currently funded by \$601,536 in Operating Funds.

Family Investment Center (FIC)

The Family Investment Center FIC program was funded through a dedicated five-year HUD grant in the amount of \$950,000 to provide job readiness training, career counseling, and job placement to residents. Beginning in May 2000, the FIC program was funded through NYCHA's operating funds in the amount of \$221,208 in order to honor NYCHA's commitment in the FIC grant application to provide an additional year of program funding. The program continues to operate under a new name, the Employment Resource Center (ERC). This program is currently funded by \$191,690 in Operating Funds.

IN CFY03, the program enrolled 176 new clients and placed 99 in employment.

Family Self-Sufficiency Program (FSS)

The Family Self-Sufficiency Program (FSS) works with new and existing Section 8 families to address career and family issues. An array of social services are provided to each participating family, as well as referrals to vocational and educational training, career counseling and job placement programs. An employability plan is developed in consultation with each participating family and is incorporated into a 3-year Contract of Participation. As the family income rises, the increased portion of the rent is placed in an escrow account that the family can access at the end of the program.

In 2002, 263 individuals enrolled in the Section 8 Program, 7 completed and received escrow checks, 68 obtained employment, and 16 individuals from the Conventional Program received escrow checks. This program is funded by \$143,297 in Operating Funds and \$421,362 in Section 8 monies.

Housing Youth Training Program

The Housing Youth Training Program provides job training for public housing residents between the ages of 18-30 years in building caretaker positions with NYCHA. The final cycle enrolled 38 residents in August and September of 2002, 36 residents successfully completed the program in January 2003, and through June 2003, 8 residents have been hired by NYCHA. This program was funded by \$2,240,905 in Operating funds.

Recruitment Unit

The Recruitment Unit performs outreach and recruitment, intake, orientation and testing of clients for all programs offered by the Department of Economic and Business Initiatives.

In CFY03, the Recruitment Unit mailed 150,224 promotional pieces, and intake and skills tested 1058 residents. This program is funded by \$201,515 in Operating funds.

Assessment Unit

The Assessment Unit performs employability assessments, and based on the need of the client makes appropriate referrals to educational, vocational, training, and job placement programs.

In CFY03, 1002 residents were assessed, and 1114 referrals were made. This program is funded by \$264,636 in Operating funds.

Wildcat Limited Work Experience

The four month training program provides on-the-job clerical work experience at NYCHA offices combined with classroom training at Wildcat Service Corporation to NYCHA residents who are on public assistance. Participants earn minimum wage and can retain food stamps and Medicaid benefits. Wildcat provides job placement assistance to graduates. In 2002, (January through December) 12 residents enrolled and nine gained employment. The program is not currently offered.

Resident Uplift for Economic Development (RUED)

The program is a collaboration between NYCHA and the South Brooklyn Local Development Corporation (SBLDC), which co-applied for the \$1,183,777 grant from HUD and HHS. Of this amount, NYCHA was awarded \$687,665 from HUD. The program was designed to create neighborhood-based initiatives to move families residing in the Red Hook Houses and the adjacent neighborhood from welfare to work over a three-year period.

Services were offered through NYCHA and the Red Hook Economic Development Effort (RHEDE), a coalition

of local community based organizations and corporations including the Fifth Avenue Committee, LEAP, Good Shepherd Services, and the Red Hook East and West Tenant Associations. RUED is a competitive grant.

In addition to providing basic assessment and referral services at two locations, NYCA offered 3 training programs to residents: Commercial Drivers Training (CDL) and Cable Installation Training (CIT) in partnership with LEAP, Inc., and 31 training slots in the Housing Youth Training Program (HYTP) which was funded with NYCHA in kind funds following the RUED grant expiration date.

From 2000 to August 2002, 60 residents enrolled in the CDL program, 50 completed and 27 gained employment; from August 2001 through October 2002, 17 residents enrolled in the CIT program, 15 completed and 7 gained employment; in August and September 2002, 31 residents of the four RUED developments enrolled in the HYTP program, 29 completed in January 2003, and through June 2003, 8 gained employment with NYCHA.

Resident Opportunities and Self-Sufficiency/ Resident Service Delivery Model (ROSS/RSDM)

Wildcat Partnership

In May 2000, the Housing Authority submitted an application to HUD in partnership with the Wildcat Service Corporation and the NYC Human Resource Administration to provide job placement assistance to 400 of the Authority's working poor, especially those individuals impacted by welfare reform. NYCHA was awarded \$1,000,000 to implement the program. The basic goal of the program is to assist underemployed residents to achieve self-sufficiency through the development of marketable skills and the provision of necessary services in order to increase their wages. The program began serving unemployed residents in addition to the working poor.

Through June 2003, 227 residents have received services through the program.

BMCC Partnership

In June 2002, the Authority submitted an application to HUD in partnership with the Borough of Manhattan Community College (BMCC) to provide job training and placement assistance to 180 Authority residents, especially individuals impacted by welfare reform, in the Mental Retardation and Developmental Disability field. The Authority was awarded a \$98,157 grant in November 2002. The grant agreement between the Authority and HUD was executed on December 5, 2002. Recruitment for the program has begun and training is expected to start in July or August 2003.

Non-Profit Assistance Corporation (N-PAC) Partnership

On June 19, 2003, NYHCA submitted a ROSS/RSDM- Family funding application to HUD in the amount of \$1 million. If awarded, NYCHA would partner with the Non-Profit Assistance Corporation (N-PAC) which provide job preparation, vocational, and basic skills training and job placement assistance to approximately 587 residents over three years. NYCHA expects to receive award notification in November 2003.

Computer Technology Training Program

In response to a RFP issued in May 2002, NYCHA selected Computer and Education Consultants (CEC) to provide computer-related training and job placement assistance to 200 residents over a 3-year period at CEC's three training centers in downtown Brooklyn, W. 29th Street in Manhattan, and Williamsburg, Brooklyn. CEC will be providing training in the following six programs tracks: 1) Administrative Skills Upgrade Program; 2) Computerized Bookkeeping Skills Upgrade Program; 3) Customer Service Representative; 4) General Office Skills; 5) Data Entry; 6) Financial Services Program. NYCHA and CEC entered into a performance-based contract not to exceed \$912,059. CEC began enrolling residents in June 2003.

Resident-Owned Business

The Resident-Owned Business Development Program assists Authority residents in starting their own businesses. A resident owned business is defined, as an entity that is at least 51% owned by a resident. Program staff purses this objective by helping residents access entrepreneurial training business counseling, mentoring, financing and marketing opportunities.

The goals of the Program are as follows:

- To promote the economic independence of Authority residents through self-employment;
- To increase the income and standard of living of Authority residents; and
- To generate employment opportunities and lessen unemployment and underemployment.

The number of new businesses started in CFY03 is 18. These businesses hired 17 NYCHA residents for a total of 35 residents employed.

As of June 2003, staff is working with 45 businesses which employ approximately 141 individuals of whom approximately 50% are residents.

This initiative is currently funded by \$285,146 in Operating funds.

Section 3 and Resident Employment Program (REP)

Section 3 is a HUD mandate that employment and other economic opportunities generated by federal assistance to public housing authorities shall, to the greatest extent feasible and with best faith efforts, be directed to public housing residents and other low and very low income persons.

For contracts in excess of \$100,000 for modernization, new construction and building maintenance taking place at public housing developments, its goal is that 30% of all new hires be residents of public housing, or low and very low income persons who participate in the Youth Program, and/ or low or very low income residents of the community.

NYCHA's first priority for hiring under Section 3 is for residents of its developments. Section 3 goals is also apply to contracting with resident-owned businesses.

The Resident Employment Program (REP) is a NYCHA-sponsored program that requires that 15% of the labor cost on a contract be expended on resident hiring.

With few exceptions, REP applies to construction contracts valued in excess of \$500,000 that were bid on or after January 1, 2001.

In CFY03, 358 residents were employed through the Section 3/ REP program.

This initiative is funded by \$867,089 in Operating funds.

HOPE VI Arverne/Edgemere Family Resource Center

For a description of NYCHA's HOPE VI-Program Arverne/Edgemere Family Resource Center, please refer to Volume 1, Part 1, Action Plan: One Year Use of Funds, Section C., Program Descriptions; New York City Housing Authority Funds.

3) Department of Strategic Planning

For a description of NYCHA's HOPE VI-Program at Edgemere and Arverne; HOPE VI-Urban Revitalization

Demonstration Program; and HOPE VI-Planned Activity, please refer to Volume 1, Part 1., Action Plan: One Year Use of Funds, Section C., Program Descriptions; New York City Housing Authority Funds.

HOPE I NYCHA Multi-Family Homeownership Program

Funding for the NYCHA Multi-Family Homeownership Program (MHOP), utilizing HUD HOPE I Planning and Implementation grants for Manhattan and the Bronx, expired on June 30, 2002. HUD had mandated the final closeout of all HOPE I programs nationally. The MHOP program originated with NYCHA's acquisition of 571 formerly vacant units in 31 buildings from NYC's Department of Housing Preservation and Development (HPD) after the buildings were gut-rehabilitated. These buildings are clustered in two Manhattan developments and five Bronx developments. Eligibility for purchase is limited to public housing and other residents of assisted housing, including Section 8, and other low-income families with incomes up to 80% of the Area Median Income (AMI). Overall housing expenditures must not exceed 35% of household adjusted income. The income-based purchase prices make the units affordable for the low-income MHOP families.

MHOP is structured as a two-part program with an initial rental period followed by conversion of the developments into cooperative corporations and purchase of the apartments by the individual resident homebuyers. The initial rental phase serves two purposes. Homeownership training and financial counseling services are provided to applicants by an experienced consultant hired through an RFP process. In addition, applicants who have not accumulated the down payment may make monthly down payment contributions as part of their monthly rent during the initial rental period, prior to cooperative conversion. During this rental phase, NYCHA owns the buildings and is responsible for the operation and maintenance. NYCHA's involvement after conversion of the buildings will be primarily administrative.

The Madison Avenue Housing Development Fund Corporation (HDFC) was formed in 1997. It is the first limited-equity cooperative formed by NYCHA. Although the rental phase of the two-part program was not utilized, all of the shares associated with the 113 units at the Madison Avenue site have been conveyed to resident shareholders. A viable Board of Directors has been elected with a renewed commitment to effective ownership and sufficiency. NYCHA's remaining role is that of Sponsor of the Offering Plan.

The Offering Plans for two additional developments, Prospect Avenue and Jennings Street, were accepted for filing by the New York State Department of Law in January 2002 making it possible to begin the sales process and conversion of these apartments. The NYCHA Board authorized their sale to the respective HDFC's in March. The Prospect Avenue MHOP will consist of 44 shareholder apartments and the Jennings Avenue MHOP will consist of 41 shareholder apartments.

4) HUD Tenant Assistance Programs

Economic Development and Supportive Services Program (EDSS)

The EDSS program was funded in part through a dedicated grant of \$700,000 and began providing services in September 1999 to residents of 42 Upper Manhattan developments. The EDSS program provided training in computer literacy and job training in environmental remediation and clean up and computer repair training. A total of 515 residents participated in the computer literacy program; 177 residents enrolled in the computer repair program; 131 completed training and 52 gained employment; 93 residents enrolled in the environmental remediation and clean-up program, 71 completed and 47 gained employment. The EDSS grant expired on September 30th, 2002.

In 2002, NYHCA contracted with The National Urban Technology Center, Inc. (UTC) to provide an additional cycle of the computer repair training program originally offered through EDSS. 15 residents enrolled in this cycle, 12 completed and 10 gained employment at a cost to NYCHA of \$65,181.

Resident Opportunity and Self Sufficiency Program (ROSS)

The purpose of ROSS is to link services to public and Indian housing residents by providing grants to supportive services, resident empowerment activities and activities to assist residents in becoming economically self sufficient. In 1999 the ROSS program replaced the former Tenant Opportunities Program (TOP). In 1999, no NYCHA Tenant Associations submitted funding applications for the ROSS program. In 2000 the Prospect Plaza Tenants Association submitted an application for ROSS funding and was awarded \$75,000.

Drug Elimination Technical Assistance Program

Under the Drug Elimination Technical Assistance Program (DETAP) HUD provides the paid services of a consultant to resident associations that receive DETAP Grant funds for their drug elimination programs. The consultant is responsible for assessing the extent of the drug problem at a given development and to initiate strategies to counter it.

In 2000, 6 NYCHA Tenant Associations were granted services under this program. The award amounts are up to \$15,000 each.

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 Program

The Family Unification Program provides Section 8 rental vouchers to assist families that, due to their lack of adequate housing, are at-risk for having their children retained in foster care. Once adequate housing is provided, children are returned to their families. The Administration for Children's Services certifies families that meet these needs.

Non-Homeless Chemically Dependent

Drug Outreach, Referral, Prevention and Treatment Program (DOP)

DOP provides outreach and referral services citywide to any resident in need of drug prevention/treatment services throughout each of the Social Service boroughs. Outreach workers identify substance-abusing residents and work with them until they are treatment ready. Referrals are then made to treatment programs. DEP staff are continuously utilizing their community resources and making referrals for residents to drug prevention and various methods of substance abuse treatment services citywide. Staff also work with NYCHA Tenant Associations and Community Centers to provide substance abuse prevention workshops for youth. This program is funded by \$1,016,274 in Public Housing Drug Elimination Program grant funds.

From January through June 2003, the program received a total of 242 referrals, and conducted 643 home visits. Effective September 30, 2003, HUD will no longer award Drug Elimination funds to Public Housing Agencies.

Disabled

Section 504

Under federal law, NYCHA is required to make 5 percent of its units, or approximately 9,100 apartments, accessible to persons with mobility impairments. These units will meet federal standards for wheelchair accessibility in the apartment interiors and have building entrances and elevators that are accessible as set forth in the Voluntary Compliance Agreement. As of July 2003, NYCHA has converted 5,958 standard units to accessible units. In addition to the 5,958 units that are already or will be on fully accessible routes, NYCHA has converted approximately 982 units with limited accessibility that may be desirable to some residents or applicants.

NYCHA also offers every public housing resident with a physical disability the right to request a “reasonable accommodation” which may include a transfer to another apartment that is accessible or non-structural modifications to their apartment (e.g., widened doorways, lowered kitchen sinks and counters, bathroom grab bars, roll-in shower fixtures, lever-type faucets and doors, and lowered or raised toilet seats). Applicants with physical disabilities may also request an accessible unit or reasonable accommodation during the applications process. As of July 2003, NYCHA has provided approximately 6,477 partial modifications and 2,036 transfer requests.

Community facilities are also being modified and upgraded to meet accessibility standards as funding allows. NYCHA also offers reasonable accommodations in policies, procedures and practices that make non-dwelling facilities and programs accessible to persons with mobility impairments.

NYCHA has an on-going program to modify units, construct ramps, reconstruct building entrances and lobby interiors, and rehabilitate elevators on an expedited basis.

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 Department of Community Operations.

Relevant Public Policies

Relief from Wicks Law Mandates

NYCHA needs immediate relief from compliance with the mandates of the New York State “Wicks Law” (Section 151-a of the Public Housing Law), which requires 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. NYCHA’s experience over the years with the Wicks Law has shown that it increases development and rehabilitation costs, and inordinately complicates and extends the solicitation process, as well as the time required to complete needed work, all of which exposes NYCHA and its Wicks Law contractors to greater economic and administrative risks resulting from delay in commencement of work. Alleviation from such burdens, for both NYCHA and contractors, can be achieved either through a State-legislated exemption from the Wicks Law (as now exists for the School Construction Authority under the Public Authorities Law), or through repeal of the Wicks Law, or by raising the threshold from \$50,000 to \$500,000 or higher.

Use of Alternate Development Methods

Under the Public Housing Reform Act of 1998, (QHWRA) HUD has allowed public housing authorities to undertake new development of public housing using a mixed-finance development method. Public Housing Authorities (PHAs) may utilize capital and operating funds to create public housing units. PHAs may also leverage other public and private funds in building and operating new public housing units that may be mixed with non-public housing units occupied by families of higher incomes. This mixed-finance, mixed-income approach will enable NYCHA to move families off of our waiting list as well as create additional affordable housing units for working families living in New York City.

During the past year NYCHA has undertaken the development of new public housing units via the mixed-finance development initiative in connection with its Prospect Plaza HOPE VI revitalization effort in Kings County. As part of this HOPE VI revitalization 138 apartments are being constructed, of which 83 units will be for public housing residents and will be financed with public housing funds, private-activity bond proceeds and low-income tax credit

equity. The remaining 55 units will be non-public housing units and made available to households earning up to sixty percent of the City's area median income (AMI). (A family of four at sixty percent of AMI would earn approximately \$37,680.) In addition, 37 two-family homeowner townhouses, 32 of which will be sold to public housing residents, are also being built at the Prospect Plaza HOPE VI site. The third and final phase includes the rehabilitation of 200 existing units and the new construction of approximately 415 units, which will produce 240 public housing units and 175 units affordable for families earning up to 60% of AMI. When the revitalization of Prospect Plaza is completed at the end of 2005 the existing 386 outdated public housing units will be replaced with approximately 615 newly rehabbed or constructed units, for a net gain of 247 affordable housing units for the City of New York.

Also under development and scheduled to start construction in the fall of 2004 is the creation of a 50 unit "grandparents raising grandchildren" demonstration public housing project to be located in the Bronx. This mixed financed public housing building will be owned and operated by two not-for-profit organizations experienced in managing elderly housing with supportive services. The entire project is being funded with non-public housing monies.

NYCHA's Project Based Section 8 Voucher initiative, created to support the development of new or substantially rehabilitated units to be made available to qualified tenants from the Section 8 waiting list has seven applications, which will result in the availability of over 300 units to Section 8 voucher holders.

The Authority is currently revising this initiative to create an open window submission and to streamline the review and commitment process.

NYCHA Consent Decrees

NYCHA has entered into two federal consent decrees that affect the provision of public housing during the five year period covered by the 1995 Consolidated Plan.

Williamsburg Fair Housing Committee (WFHC) vs. NYCHA

In 1978, NYCHA entered into a consent decree to settle allegations that it had discriminated against Black and Hispanic applicants in assigning new tenants to three developments in Williamsburg, Brooklyn (namely Independence Towers, Taylor-Wythe Houses, and Jonathan Williams Plaza).

In 1989, the plaintiffs Williamsburg Fair Housing Committee (WFHC), moved for an order holding NYCHA in contempt of the decrees. This motion was settled in 1991 by a Stipulation in which NYCHA agreed to allocate up to 190 apartments in three developments for Black and Hispanic applicants who could show that they might have been victims of discrimination (class members). The class members were to be housed ahead of all other applicants certified to these three developments. Fifty-two class members were found to be eligible for housing pursuant to the 1991 Stipulation, and each has been housed.

In February 1998, NYCHA moved for an order dissolving the 1978 consent decree and the 1991 Stipulation. Three months later WFHC cross-moved for an order of contempt. On May 30, 2002, NYCHA, WFHC, and the United Jewish Organizations of Williamsburg, Inc. entered into a settlement agreement which terminated, as to NYCHA, the 1978 consent decree and the 1991 Stipulation, and resolved WFHC's cross-motion without any finding of contempt. The Court approved the settlement on September 25, 2002.

Davis vs. NYCHA

In 1992, as a result of a lawsuit relating to practices in its apartment assignments, NYCHA agreed to settle the case with a consent decree (Davis vs. NYHCA). Under the Davis Consent Decree, NYCHA agreed to set aside 1,991

vacancies in 31 developments to alleged victims of its old policies and practices. As an additional contribution to the settlement, HUD gave NYCHA 200 additional section 8 vouchers. As of July 1, 2001, when this remedial relief ended, 900 claimants had received vacancies in the 31 developments, and 51 claimants had received Section 8 vouchers.

NYCHA also implemented a Tenant Selection and Assignment Plan (TSAP) to prevent unlawful discrimination on the basis of race, color, or national origin, in compliance with its obligation under title VI of the Civil Rights Act of 1964 (Title VI), the Fair Housing Act, and the implementing regulations and requirements of HUD. This TSAP has been approved as nondiscriminatory by HUD, the U.S. Department of Justice, and a Federal Court. NYCHA has further agreed to implement the TSAP to prevent any unlawful discrimination on the basis of sex, religion, disability, and familial status.

In July 1996, HUD approved several amendments to TSAP. Legal Aid (but not DOJ) objected to two of them – the new working family preference, and extension of limited project choice to families needing three and four-bedroom apartments. The District Court approved extension of project choice, and also permitted NYCHA to implement the working family preference, except at 21 projects that were more than 30 percent white. NYCHA appealed with regard to the 21 projects, and ultimately, in January 2002, the Second Circuit Court of Appeals held that the injunction against the working family preference should apply to only 14 projects. The number is now 13, because one of the 14 is no longer more than 30 percent white.

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, 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 particularly sensitive to the potentially detrimental effects of lead exposure upon children as well as the need to remove lead paint hazards from properties where children with "elevated blood lead levels" (EBLs) reside.

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 1999, the City Council and the Mayor of the City of New York enacted Local Law #38 of 1999, recognizing that the best way to prevent poisoning from paint containing lead is to ensure that such paint is kept in good repair, and, if it is peeling or located on a deteriorated subsurface, that it is repaired using safe work practices. Under Local Law #38, in any dwelling unit in a multiple dwelling where a child under the age of six resides, the existence of lead-based paint constituted an immediately hazardous condition when it was peeling or located on a deteriorated subsurface. Such conditions, often found in older, deteriorated housing, are known to be a source of lead poisoning in young children who ingest paint or dust containing lead. In order that HPD may secure the appropriate correction of lead-based paint hazards, Local Law #38 made any such hazard a class-C (immediately hazardous) violation under the Administrative Code. Local Law #38 was intended to encourage owners to take care of their buildings by encouraging safe work practices to correct lead-based paint hazards in dwelling units of multiple dwellings.

However, two legal challenges to Local Law #38, *NYCCELP v. Giuliani* and *NYPIRG et. al. v. Vallone, et. al.* were filed in New York State Supreme Court soon after its enactment. In February 2001, an order was entered in *NYCCELP v. Giuliani, et al.*, finding Local Law #38 to be void. (The *NYPIRG* litigation has since been dismissed as moot.) The order was based upon the court's decision that the City Council did not fully comply with the State Environmental Quality Review Act (SEQRA) in enacting the legislation. The City appealed, and on March 26, 2002, the Appellate Division, First Department, entered a unanimous decision in favor of the City. The court reversed the lower court and decided that the environmental issues had been thoroughly debated and reviewed. The plaintiffs moved for leave to appeal, which was eventually granted by the Court of Appeals. Oral argument was heard on June 3, 2003. On July 1, 2003, the Court of Appeals reversed the Appellate Division decision, holding that the City Council's negative declaration did not adequately comply with the requirements of SEQRA, thus rendering Local Law #38 null and void. The court remitted the matter to Supreme Court, and instructed the parties to continue to work cooperatively to come to a workable solution to a lead poisoning prevention law.

In order to ensure that this most recent court decision does not interrupt the City's implementation and enforcement of a lead poisoning prevention plan, the parties to the litigation have begun discussions to stipulate to an interim program pending consideration by the City Council of alternative lead legislation. It is expected that the interim program will be at least as rigorous in addressing lead hazards as was Local Law #38, if not more so.

The New York City Department of Health and Mental Hygiene (DOHMH) is the City agency responsible for tracking children with EBLs. When DOHMH receives a report of a child with an EBL of 20 micrograms of lead per deciliter of blood or greater, or a child with 2 test results of 15-19 micrograms of lead per deciliter of blood taken at least 3 months apart, 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 Emergency Repair Program (ERP) unit. Upon verification that the property owner has failed to comply, ERP assigns a contractor to abate the condition. Both ERP 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 ERP an exemption from Subpart J (Title X). Nevertheless, ERP 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 23, 2001, HUD granted the request of a waiver for *in rem* housing, based upon HPD's compliance with Local Law #38. The waiver will expire at the time that a building undergoes substantial rehabilitation, or in three 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 #38.

One-Year Plan

The City operates several programs to investigate, treat and eliminate lead-based paint hazards. The City investigates, abates and removes 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 calendar year 2002 approximately 520 children were identified as lead-poisoned based upon the standard of 20 or greater micrograms of lead per deciliter of blood. In 2002, 108 children were identified with EBL using the alternate standard of two test results of 15-19 micrograms of lead per deciliter of blood taken at least three months apart.

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 Emergency Repair Program (ERP) will do the work and place a lien against the property for the cost. In 2002, HPD expanded its efforts to increase its lead abatement requirements contractor base. HPD currently maintains six (6) contracts of one-million dollars each.

In addition, HPD's ERP unit continues to improve its coordination with DOHMH by establishing protocols for joint inspections where necessary, updating both agencies computer systems so they communicate, and hiring staff to act in a case-management capacity in order to facilitate lead abatement work in cases where the landlord or tenant may impede the performance of such work. In 2002, 118 jobs to abate DOHMH violations were completed by ERP in privately owned buildings.

Commencing in March, 1994, the DOHMH put into effect 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 were amended to incorporate changes made by Local Law #38.

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 CFY 2002 alone, the City anticipates that the City will commence moderate-rehabilitation work on 7,528 units of occupied housing.

In addition to the above-mentioned rehabilitation activities performed through HPD's capital budget, in recent years HPD has also sought specially targeted funding for lead hazard reduction. As a result, 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 current grant has a duration of two and a half years, commencing March 1, 2001 and ending August 31, 2003. HUD has granted HPD a fifteen-month non-cost extension to end November, 2004. The total number of units to be completed under this grant is 397 units.

In June 2003, HPD submitted an application to HUD requesting \$500,000 under the Lead Outreach grant program. In addition, in July 2003, HPD submitted an application to HUD under the Lead Hazard Reduction Demonstration grant program, requesting \$4 million in federal funding. For a description of both the Lead Outreach and Lead Hazard Reduction Demonstration Grant Programs, please refer to Volume 1., Part 1., Action Plan, Section C.b., 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, IV and currently under Round VIII of its Lead Hazard Control initiative. 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: Bedford Stuyvesant/Crown Heights, East Flatbush/Flatbush, Williamsburg/Bushwick in Brooklyn; Washington Heights and Inwood in Manhattan; Fordham and Bronx Park East in the Bronx; and West Queens and Jamaica 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 months 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.

PPP plans to treat approximately 160 units each year with City capital funding. The average cost for each unit is between \$7,000 and \$7,500. Under Round VIII of the Federal Lead-Based Paint Hazard Reduction grant, PPP plans to treat an additional 100 units with City capital funds as part of match funding during the three and a half years of the grant's term, ending November 1, 2004. The City-capital-funded units will be part of the grant's matching contribution. The HUD and City capital funds are given to building owners in the form of a forgivable loan; the owner is obligated for three years from the completion of the intervention work to continue to rent to low-income families.

The City has reviewed its programs that are affected by the Title X rules, and has made many changes in order to implement the rules. It has conducted extensive training of both in-house personnel and contractors, and has notified affected parties of the need for training and compliance with the rules. On August 3, 2001, HUD announced that it would grant an automatic extension of the time to comply with the Title X rules until September 10th, and that it would entertain one last request for extensions until January 10, 2002, provided that such requests were submitted prior to September 10th. Although the City expected to be ready to begin implementing the Title X rules in September 2001, the events of September 11th altered that expectation. Upon request of the City, HUD granted a further extension until April 10, 2002, and the City began implementation as of that date. In July 2001, HUD granted the City's request for a temporary waiver from Subpart K of the Title X rules for the City's *in rem* housing, based upon compliance with Local Law #38. HPD will continue to implement lead poisoning prevention activities in its *in rem* buildings that are at least as stringent as the requirements under Local Law #38.

Five-Year Plan

The City has proposed the substantial upgrading of its lead-paint related activities.

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:

- Planning for and implementation of HUD's Title X rules.
- Further expansion of hazard reduction contracts beyond that mentioned above, if necessary, to meet a projected growth in lead hazard reduction work.
- 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.
- Hiring of additional lead abatement workers and clearance technicians to assist in the abatement process.

- Certifying and training of lead staff.
- Expansion of requirement contracts to complete abatements expeditiously.
- Continued improvement in electronic data exchange between HPD and DOHMH in order to enhance both agencies productivity.
- 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.

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 UNITS OCCUPIED BY FAMILIES LESS THAN OR EQUAL TO 50% OF MEDIAN	LBP UNITS OCCUPIED BY FAMILIES LESS THAN OR EQUAL TO 80% OF MEDIAN
After 1960	682,203	0%	-	-	-
1947-1959	473,453	69%	326,683	141,735	190,283
Before 1947	1,712,758	90%	1,490,099	551,042	805,440
Total	2,868,415		1,816,782	692,777	995,723

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 1999 shows that approximately 37% of units built prior to 1947 and 43% of units built between 1947 and 1959 are occupied by families earning less than 50% of area median income. For the same periods, approximately 16% and 15%, respectively, of units are occupied by families 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 families residing in units with lead-based paint.

New York City Housing Authority

The New York City Housing Authority Lead Detection and Abatement Unit (LDAU) identifies lead-based paint (LBP) hazards posed by paint, dust and soil, and implements programs designed to control or mitigate such hazards safely and efficiently. In addition, the LDAU facilitates compliance with Federal, State, and City regulations concerning lead and executes HUD directives regarding LBP. The LDAU provides litigation support services for NYCHA's Legal Department and is the liaison to the New York City Department of Health and Mental Hygiene (DOHMH) for lead issues.

In an effort to prevent lead exposures to the housing population and workforce, the LDAU educates NYCHA's residents and staff on how to live safely with LBP and LBP hazards (e.g., Lead Disclosure Program, lead specific GMs, etc.), 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). The diagram in this section presents the LDAU's strategic framework for lead hazard reduction.

Either a risk assessment or an inspection may accomplish hazard evaluation. A risk assessment is an on-site investigation to determine the existence, nature, severity, and location of LBP hazards. An inspection is a surface-by-surface investigation to determine the presence of LBP.

After LBP hazards have been identified by a risk assessment or by inspection, the LDAU 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 temporally 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

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

Department of Health and Mental Hygiene (DOHMH) Violations & Litigation Support Program

Children with blood lead levels equal to or greater than 20 micrograms per deciliter ($\mu\text{g}/\text{dl}$) are considered lead-poisoned. Additionally, children with persistent levels between 15 $\mu\text{g}/\text{dl}$ and 19 $\mu\text{g}/\text{dl}$ are considered to have an elevated blood lead (EBL) level. If a lead-poisoned child or EBL is identified, the New York City DOHMH will inspect the child's residence for the presence of 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. The LDAU immediately responds to each 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 LBP hazards. Consultant firms under contract provide the risk assessment services and provide reports that explain the results of the investigation and options for reducing LBP hazards.

Risk Assessment Clean-Up Program

After risk assessing a particular Development, a consulting firm may recommend corrective actions, (i.e., options for reducing LBP hazards) for conditions in apartment units, common areas and public spaces. The corrective actions may include, but are not limited to any of the following: cleaning floors, window sills, and window wells; stabilizing paint on select building components; and treatment of bare soil around buildings or playground areas. The LDAU staff makes the corrective actions.

LBP Inspection & Abatement Program

The LDAU conducts LBP testing in dwelling units and public spaces in all pre-1978 Developments, where children under the age of 7 live or are expected to live. The LDAU 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 parties:

- Development Manager or Resident with a child under the age of 7
- Design Department
- Construction Department
- Contract Administration Department
- Leased Housing
- Asset Management
- Community Operations
- 504 Conversion

Child Occupied Facilities Project

The LDAU is attempting to remove LBP from all areas accessible to children in Child Occupied Facilities, (e.g., day care centers, nurseries, etc.), thereby making the Facility “LBP free”. To make a Facility LBP free requires the cooperation of Community Operations and the particular Borough Management Office, and entails the following: testing all accessible surfaces in the Facility; closing the facility for approximately 5 weeks; abating all LBP; repairing any conditions that cause paint to peel, (e.g., water leaks); repairing all surfaces damaged by abatement activities; and painting the entire Facility. LDAU, Borough, Central Shops, and Technical Resource staff performs the majority of work; however, on occasion the LDAU will use contracted services to assist with the abatement and/or painting of the Facility.

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 that test for LBP, such as CAD, Asset Management, Design, and Construction. In addition, The Unit provides support services for Borough Offices, Development Management and residents.

Modernization

The LDAU performs and/or facilitates lead based paint inspection for upcoming Modernization work. If lead coated components are identified the LDAU prepares procedures in accordance with local, federal and NYCHA regulations/guidelines. These procedures are designed to ensure modernization contractors perform work in a safe and clean manner. Following modernization work where lead containing components are impacted, the LDAU performs and/or oversees contractors' third party visual assessment and dust wipe sampling.

NYCHA Five Year Strategy:

Planned activities include the following:

- Continue the ongoing LBP Disclosure and Resident education programs.
- Continue to monitor and repair paint conditions via annual visual inspections, in accordance with Federal, State and local regulations, using NYCHA Standard Procedures.
- Conduct LBP testing at Developments prior to major renovations, implementing “lead-safe” work and/or “lead abatement” work practices, as appropriate, to ensure residents and staff are not exposed to potential lead hazards.
- Perform LBP Reevaluations of all pre-1980 Developments and remediate any identified lead hazards.
- Perform all abatement and lead-dust cleaning activities according to protocols defined in Federal, State and local guidelines, laws and regulations.
- Continue ongoing training of appropriate staff and contractors in lead hazard reduction and dust control protocols, emphasizing containment and work area cleanup.
- Continue LBP Abatement Program in Child-Occupied Facilities, with the goal of making all such facilities “LBP Free”, wherever possible.
- Complete lead-based paint testing (“Random Sampling”) of all accessible painted/coated components at all eligible City, State, and Federal Developments.
- Continue LBP Abatement Program in Child-Occupied Facilities, with the goal of making all such facilities “LBP Free,” wherever possible.

One Year Plan:

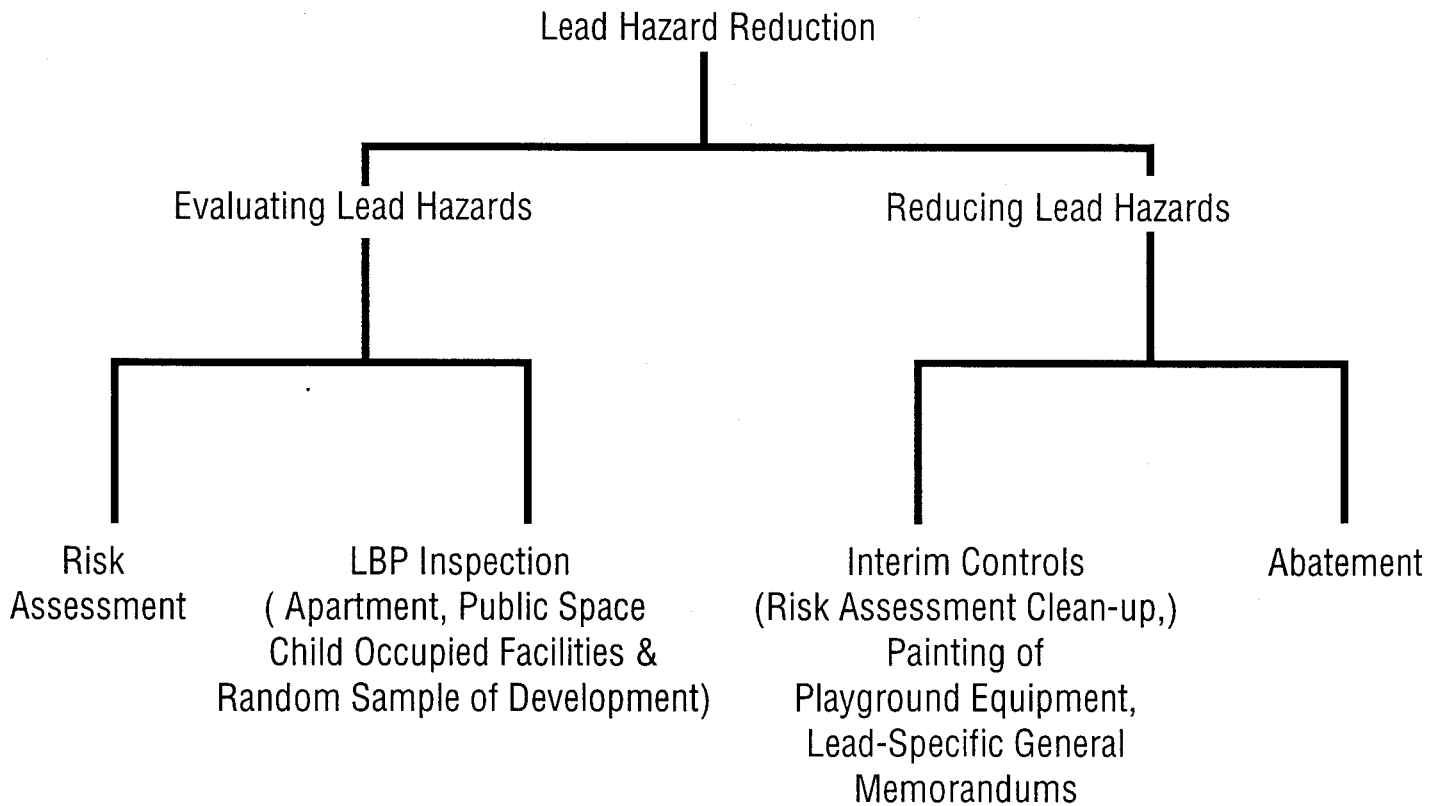
One Year Plan Goals Include:

- Perform surveys, inspections, hazard assessments and abatements in NYCHA properties in accordance with Federal, State and NYC Department of Health regulations.
- Continue to provide “Lead Safe Work Practices” training (in accordance with 24 CFR part 35) for Renovation Contractors that perform work for NYCHA.
- Create and/or revise report templates and checklists used by in-house staff and contractors.
- Perform LBP Risk assessments of 10 NYCHA Developments.

- Continue in-house program to perform visual assessment, final clearance sampling and report generation following abatement/interim controls of lead-based paint/lead hazards as per 24 CFR 35 & 40 CFR 745.
- Perform Development-wide Random Sampling of representative coated surfaces within apartment units, public areas, community spaces and building exteriors at 50 Developments.
- Complete “LBP Free” abatement of 40 Child Occupied Facilities (e.g., Community & Daycare Centers) in 2002.
- Perform LBP Reevaluations of approximately 50 conventional NYCHA Developments where lead hazards have previously been identified and interim control procedures implemented.
- Continue ongoing program to provide training and obtain EPA certification/re-certification for employees working in the disciplines of Lead Abatement Worker, Supervisor and Inspector/Risk Assessor.

**NEW YORK CITY HOUSING AUTHORITY
LEAD DETECTION & ABATEMENT UNIT**

Strategic Framework for Lead Hazard Reduction



Department of Homeless Services

DHS oversees and manages several initiatives to investigate, treat and eliminate lead-based paint hazards in the homeless shelters that are run 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 discovered, remedial steps are taken to eliminate the risk of exposure. DHS will continue its effort to create comprehensive lead-based paint profiles of each city-owned DHS operated or contracted site, with family shelter 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 renovations 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.

Because of the presence of children, all family facilities are given priority for risk assessment and remediation. However, greater attention is paid to family shelters with women, because of the risks associated with the exposure of pregnant women to lead and to locations where children below six years are encountered. As the City reverts to Local Law #1 of 1982 (NYC Administrative Code 27-2013(h)), DHS is sending five (5) persons to Dust Wipe Sampling Certificate Class, administered by the New York City Department of Health Lead Poisoning Prevention Program. During apartment inspections, in addition to checking for peeling paint, the inspectors will also dust wipe samples where peeling paint and/or painted friction surfaces are identified. The wipe samples will then be tested in-house at DHS. In cases where in non-city owned buildings the samples test positive, the landlords will be notified and advised to take remedial action as per Local Law #1 of 1982. In the case of City owned buildings, remedial services are contracted by the Agency. Adult shelters risk assessment and remediation is done on an as-needed basis, stemming from operations and maintenance inspections or based on pre-planned construction and maintenance projects. With the recent acquisitions of an X-Ray Fluorescent lead analyzer, DHS has expanded its capabilities to perform on-site inspections, determine the severity of lead hazards and develop options to eliminate those hazards.

E. Anti-Poverty Strategy

This section describes the accomplishments of the City's goals, programs, and policies for reducing the number of poverty level households. However, in the absence of a national anti-poverty strategy, it is difficult for the City to adequately judge its progress in this area of concern.

The number of public assistance (PA) recipients was 421,546 as of June 2003. This is a 1.3 percent decrease from the 430,419 recipients at the end of City Fiscal Year (CFY) 2002, and a 62.4 percent decrease from the 1,119,448 recipients at the end of CFY 1995. Factors such as the local and national economy over the next year will affect whether this downward trend continues.

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 include Child Health Plus, serving children with family incomes up to 250 percent of the Federal Poverty Level (FPL); Medicaid for low-income children and families; and Family Health Plus, a program serving childless adults with incomes up to 100 percent of the FPL and adults in households with children with household incomes up to 150 percent of the FPL. In CFY 2003, HRA's Medical Assistance Programs has implemented programs to simplify and improve access to public health insurance and to facilitate retention of benefits. Initiatives include establishing model offices to create a consumer-oriented environment to assist the consumer in enrolling and retaining health insurance coverage, and implementing Mail Renewal which eliminates the need for an in-person interview for all Medicaid renewals.

Due to their size many small businesses are unable to reach the economies of scale necessary to provide affordable health insurance to their employees or are constrained by cost to providing only one type of health plan. To assist these businesses remain competitive in recruiting employees and controlling benefit costs, Health*STAT in partnership with the New York Business Group on Health, oversee HealthPass. HealthPass allows small businesses to provide employees a choice of multiple health insurance carriers and standardized benefit options. Employees may choose their own health plan based on price, provider network, and quality. As of January 2002, enrollment in HealthPass was over 580 small businesses, with approximately 5,600 employees insured. More than half of the businesses enrolled in HealthPass did not offer health insurance to their employees previously.

The number of persons certified eligible for Medicaid at the end of CFY 2003 increased by 9.4% to 2,219,172 from the 2,028,133 persons who were certified eligible at the end of CFY 2002. The MA-only caseload increased by 16.6 percent from 1,166,889 at the end of CFY 2002 to 1,360,087 at the end of CFY 2003. MAP (Medical Assistance Program) expects the non-PA MA caseload to continue to increase because of expansion through Child Health Plus and Family Health Plus.

By the end of June 2003, 1,153,720 individuals were enrolled in managed care plans. This number represents a 73 percent increase from the enrollment of 666,725 in June 2002 due in part to the implementation of the final Phases IV and V of mandatory Medicaid Managed Care. Also in CFY 2003, MAP continued to monitor the enrollment broker contract to ensure compliance with mandatory Medicaid managed care enrollment requirements.

New York City recognizes affordable quality child care as an essential element in making employment possible for low- and moderate-income families. As a result of New York City's current difficult budget, the City has reallocated the savings from in the Community Development Block Grant (CDBG) in rem program to daycare services for low/moderate-income families. This reallocation of CDBG funds has allowed the Administration for Children's Services/Agency for Child Development to maintain the level of subsidized childcare at its existing levels. Subsidized childcare has remained high with 78,690 children enrolled at the end of CFY02. From 1998 to 2002,

nearly all of the budgeted childcare slots were filled at no less than 98 percent capacity.

The reduction in crime over the past several years has fostered a major improvement in the business environment. Reduced crime cuts costs for businesses and makes areas throughout the City attractive to business owners, workers and customers.

In 2003, nearly two years since the terrorist attack on the World Trade Center, New York City's economy still has not fully rebounded. From June 2002 to June 2003, employment decreased by 2.5%, approximately 87,000 jobs. During the same period, private employment decreased by 1.7%, approximately 50,000 jobs. With the exception of construction industry, which increased by 4.7%, the other major industries within New York City (media, business services, and retail) mirror the City's struggling economy with decreases in employment.

In 2003, the unemployment rate increased to 8.1% from 7.9% in 2002, 2% above the region's unemployment rate. In CFY03, the loss of more than 24,000 skilled professional jobs (FIRE and business services) continues to place additional pressure on low-and moderate-income persons, who lack the necessary skills, as the available labor pool increased.

In a collaborative effort between the City and the State, the Job Creation and Retention Program was established to boost employment and to keep businesses in Lower Manhattan. This program was able to retain more than 34,000 jobs, through the commitment of 40 companies to remain in Lower Manhattan. Pledging to remain for a minimum of seven years, these companies represent the commitment needed to stabilize the employment rate in NYC. As a way of ensuring that these companies remain, and more corporate commitments are obtained, the Mayor and the Governor have set forth capital projects aimed at improving Lower Manhattan's commercial base through the rebuilding and upgrading of the area's rail, ferry and street systems. In addition to improving the accessibility, these projects will improve the quality of life for residents and workers in and around Lower Manhattan.

As part of the continuous effort to rebuild and revitalize Lower Manhattan, the City and the State's Empire Development Corporation have created a three-point plan directly targeted at promoting tourism and business growth. The three point plan includes a "I love New York" campaign that will market Lower Manhattan to a domestic and foreign audience; a new discount card to promote the use of businesses and entertainment in Lower Manhattan; and expansion of small business attraction and retention efforts.

New York City's public elementary and secondary schools continued to make improvements for a growing student population. In 2003, students in grades 3,5,6, and 7 took New York City standardized tests in reading and mathematics, and grades 4 and 8 took New York State tests in English language arts (ELA) and mathematics. The state reported its ELA and mathematics test results as criterion-based scale scores that indicated mastery of skills in reference to four proficiency levels. The New York State ELA and mathematics assessments reported students in terms of four proficiency levels starting from level 1, which indicates minimal achievement of standards to level 4, which indicates superior performance for all standards of the grade level. On the 2003 State ELA assessments, more than half of grade 4 and one-third of grade 8, New York City public school students, scored at levels 3 or 4. In comparison to grade 4 and grade 8 students in other large cities within New York State, New York City has a higher percent of students scoring at a proficiency level of 3 or 4. In 2003, the number of students meeting or exceeding the required standards on the state mathematics assessments increased by 2.2%.

The Board of Education's decision to end automatic advancement, and to implement mandatory summer school have resulted in an increase in New York City's students level of performance. In addition to the move to end social promotion, Chancellor Klein plans to implement a comprehensive strategy which will focus on providing students with instructional help throughout the school year in order to mitigate the possibility the student may have to repeat

the grade or attend summer school. Those students attending summer school will be offered students additional opportunities to demonstrate their readiness to move on to the next grade through teacher assessment and the City standardized assessment given at the end of summer.

The percentage of students remaining in high school beyond four years continued to increase, indicating more students are remaining in school to complete their high school education. These factors, combined with increased high school science and mathematics curricula standards/competency requirements will assist young New Yorkers in positioning themselves for the secondary academic or technical education necessary to acquire the job skills required for the employment opportunities currently developing in the City.

The suburbs continue to have low unemployment in comparison to New York City, with unemployment rates on average 4% less. In addition, with job reductions due to the relocation of companies from the City to the suburbs, the number of city residents commuting to suburbs seeking employment has increased. Some unemployed city residents may now have to travel outside of the City to seek employment.

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: Operations (including HRA, DHS, DFTA, DEP, and DOHMH), Economic Development and Rebuilding (including HPD and DCP), Public Policy (including NYCHA and 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. All housing-related agencies are part of the Mayor's Task Force on Housing Policy and meet on a regular basis to discuss overlapping issues. 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 2, Part I., Section D., 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 HRA's HIV and AIDS Administration, HRA provides emergency and supported housing assistance and services for families, single adults and children with HIV-related illness or AIDS. The City's Department of Health and Mental Hygiene: along with the State's Offices of Mental Health (OMH), 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. Water conservation and environmental cleanup efforts are administered by the Department of Environmental Protection.

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

HPD is divided into four functional areas: The Office of Development; the Office of Housing Operations; the Office of Planning and Intergovernmental Affairs; and the Office of Community Partnerships.

The Office of Development is comprised of the following Divisions:

- Division of Special Needs Housing - Special Needs Housing is responsible for the Supportive Housing Loan Program, a key vehicle to provide quality permanent housing with on-site services for homeless adults with special needs. The Division is responsible for the department's involvement in housing for the low-income elderly and determining how the department can best meet the future needs of other populations with special needs.
- Division of Homeownership - The Division is responsible for managing the department's homeownership programs that create or renovate one-four family homes for purchase by owner-occupants. New home construction programs include the Partnership New Home and New Foundations programs. Existing homes are renovated through the HomeWorks and StoreWorks programs. The Division of Homeownership coordinates the efforts of city, state, and federal agencies to create large-scale homeownership and retail opportunities in neighborhoods like Arverne in the Rockaways.
- Division of Housing Finance - This Division is responsible for operating the department's tax incentive programs as well as those programs that provide financing to newly construct or rehabilitate multi-family housing. New construction programs include the ANCHOR and Cornerstone programs. Rehabilitation programs include the Participation Loan Program (PLP), the Third Party Transfer Program (TPT), the Small Homes Loan Program, the Article 8A Loan Program and the Primary Prevention Program (PPP).

Office of Housing Operations

The primary function of the Office of Housing Operations is to focus its resources on the maintenance of tenant-

occupied residential properties, both privately owned and City-owned *in rem* buildings, and to address emergency repairs where necessary. The Office is comprised of these Divisions:

- Division of Alternative Management Programs - The Division of Alternative Management Program (DAMP) administers the programs in Building Blocks!, the City's comprehensive neighborhood redevelopment initiative designed to spur neighborhood growth by returning City-owned *in rem* buildings to responsible private owners. The programs that comprise the Building Blocks! disposition programs include: the Neighborhood Entrepreneurs Program (NEP), the Neighborhood Redevelopment Program (NRP), the Tenant Interim Lease Apartment Purchase Program (TIL), the Tenant Interim Lease II Apartment Purchase, the Tenant Ownership Program, the Asset Sales Building Purchase Program, and the Neighborhood Homes Program. In addition, DAMP includes program staff for the Article 7A Program. Housing Court judges appoint administrators through the 7A Program to operate privately owned buildings that have been effectively abandoned by their owners, resulting in conditions that are dangerous to the tenants' lives, health and safety. The administrators act under Court Order to collect rents and use this money as well as HPD loans (and occasionally small grants) to provide essential services to the tenants and make necessary repairs.
- Property Services - Within Property Services, the Division of Property Management (DPM) manages City-owned (*in rem*) residential and commercial properties, as well as urban renewal properties, until they can be returned to responsible private ownership. These properties are managed from two area site offices located in Manhattan and Brooklyn, with each area office staffed with managers and repair crews. The Division of Anti-Abandonment (DAA) conducts site assessments of thousands of buildings each year through four borough offices to: determine whether they are at-risk, develop individual treatment plans for the buildings, and coordinate the implementation of the treatment plans. DAA's activities are to: encourage owners to pay their taxes, enter into voluntary repair agreements with owners, refer owners to education and support programs including anti-abandonment training, provide assistance with rehabilitation loan financing, refer buildings for targeted code enforcement when necessary, and review distressed properties for exclusion from DOF tax lien sales. The Owner Services Program works with owners on an individual basis to diagnose and treat their buildings through management and financial counseling. DAA also coordinates several stages of the third party transfer process to convey distressed tax delinquent buildings to new responsible owners using an *in rem* foreclosure mechanism. Finally, DAA oversees the work of Neighborhood Preservation Consultants who extend DAA's reach into communities throughout New York City by providing a variety of housing services. Property Services also runs a free Housing Education Program with courses on managing and maintaining one's property. The division is also responsible for Narcotics Control and Safe at Home. In addition, Property Services operates the Emergency Housing Services Bureau (EHSB), which provides emergency relocation services to tenants displaced as a result of fires or vacate orders issued by the Department of Buildings, Fire Department, or HPD.
- Enforcement Services - The Division of Code Enforcement enforces compliance with the City's Housing Maintenance Code and the New York State Multiple Dwelling Law. Tenants may call the City's Citizen Service Center at 311, 24 hours a day, 7 days a week (311 can be accessed outside of New York City by dialing 212-NEW-YORK) to register complaints concerning possible housing violations in their apartment, including lack of essential services (heat, hot/cold water, electricity). In response to these complaints, the Division can send out inspectors to inspect emergency conditions and issue violations to the landlord if violations are found, directing the landlord to perform the repair within a time frame specified by law. Code Inspectors are now available to

perform emergency inspections 24hours a day, 7 days a week. The Division of Maintenance performs emergency repairs in privately-owned buildings in response to emergency violations (including lead paint) issued by Code Inspectors if the landlord fails to perform the repair. The Division also coordinates major repairs and contracts for improvements in City-owned buildings.

- Division of Tenant Resources - The Division of Tenant Resources develops and coordinates programs designed to enhance the economic self-sufficiency of tenants of City-owned and City-assisted housing. These include the Family Self-Sufficiency (FSS), HomeBASE and Family Unification programs. FSS assists families receiving Section 8 subsidies to become economically independent by providing access to training, employment and long-term savings opportunities. HomeBASE provides comprehensive housing and employment assistance to families who are living in City-owned housing and need to move from welfare to work while the Family Unification Program provides housing assistance to families reunifying with children from foster care. In addition, the Division provides permanent housing assistance to house those who have been displaced by fires or vacate orders issued by the Department of Buildings, Fire Department or HPD Code Enforcement. The Division of Rent Subsidies provides low-income families housing made affordable through the use of Federal Section 8 certificates and vouchers that subsidize monthly rental payments.
- Housing Supervision - The Division of Housing Supervision is responsible for the regulation of 141 Mitchell-Lama rental and co-op housing companies with approximately 60,000 apartments. 55 of these companies are non-refinanced and HPD is the regulatory agency. The other 86 developments were refinanced in the late 1970's with the City as the second mortgagee, with HDC or secondary purchasers holding FHA-insured first mortgages.

The Division also has jurisdiction over approximately 60 Municipal Loan projects and manages one former Mitchell-Lama development that was foreclosed and is City-owned. Housing Supervision is also responsible for administering the Senior Citizens Rent Increase Exemption program for 4,500 households in City and State Mitchell-Lamas and other regulated developments.

- 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.

Office of Planning & Intergovernmental Affairs

Through planning, analysis, research, and the proposal of new housing legislative changes, the Office of Planning

& Intergovernmental Affairs provides the resources from which the agency's program initiatives are developed. While providing perspective within the political housing arena, this office is responsible for the planning of agency programs. In addition, this office develops strategies for addressing issues that affect the City's housing markets.

The Office of Planning & Intergovernmental Affairs is made up of four (4) divisions:

- Division of Program Planning - The Division of Program Planning is responsible for determining the appropriate program or treatment for all of the agency's City-owned property. The division determines appropriate intervention for private property through various programs, including Urban Renewal. The division's staff also serve as HPD's liaisons to the local community and attend local community board meetings.
- 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 Planning Support Services - The Division of Planning Support Services encompasses a number of functions that support and facilitate the functions of the Division of Program Planning, including Creative Services and Geographic Information Systems (GIS) units, and Acquisition, Redemption, and Environmental Review and Remediation units.
- Division of Neighborhood Resources - The Division of Neighborhood Resources is comprised of two units. 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. The Marketing Unit monitors the marketing and rent-up of City-owned and private property which has been awarded an agency subsidy. The unit monitors the advertising of available units as well as the telephone hotline listing of available units. The unit also supervises the lotteries conducted to select tenants for projects receiving agency subsidy.

Office of Community Partnerships

The HPD Office of Community Partnerships engages communities in an ongoing dialogue that informs and reassures the public, facilitates the delivery of HPD services, and creates new relationships that integrate and leverage public and private resources. The Office is divided into two units:

- The Community Outreach Advocacy Unit designs and implements community building activities that foster understanding of agency programs and encourage collaborations between communities and the agency. The unit conducts seminars on topics such as Homebuying, Site Selection and Contractor Training. The unit also provides counseling to help community groups and individuals understand agency programs.
- The Community Advocate offers counseling, information referral and complaint resolution services to the public and community groups. The Community Advocate helps to improve public

understanding of HPD activities and promotes access to HPD programs. For more information, call (212) 863-6634.

- The Fair Housing Unit (FHU) develops and implements agency-wide policies and programs to enforce City, State and Federal Fair Housing Laws. The FHU provides educational, mediation and counseling services. It is responsible for investigating complaints and facilitates the resolution of housing discrimination. Anyone with a Fair Housing complaint should call (212) 863-5420.

Department of Homeless Services

Established in 1993, the Department of Homeless Services (DHS) is responsible for all transitional housing and services provided 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; developing programs to improve the access of homeless families and individuals to existing housing; and fostering the involvement of non-profit and for-profit community organizations in the provision of shelter and services for homeless families and individuals.

Reporting directly to the Commissioner are the areas of Policy and Planning; Administration; Facility Maintenance; Operations; Family Services; Adult Services; General Counsel; and Communications.

The Deputy Commissioner for Policy and Planning oversees the Office of Government and Community Relations and Public Affairs and the Office of Information Technology. The Deputy Commissioner for Administration oversees the Office of Human Resources and Contracts. The Deputy Commissioner for Facility Maintenance oversees the maintenance and repair of existing facilities, as well as the development of new facilities. The Deputy Commissioner for Operations oversees Security and Budget and Finance. The Deputy Commissioner for Family Services oversees the services provided to homeless families, which are Transitional Housing, Intake and Reception and Rehousing. The Deputy Commissioner for Adult Services oversees the services provided to single homeless adults, which are Intake and Assessment, Contract Providers and SRO's. The General Counsel oversees the legal department.

The two main functional areas responsible for operating the transitional housing system and providing support services for homeless families and individuals are the Division of Family Services and the Division of Adult Services. Respectively, they provide shelter to New York City's homeless families and single adults, by overseeing a system of City and non-profit operated transitional housing facilities. For additional details, please refer to the Continuum of Care.

Human Resources Administration

The Human Resources Administration/Department of Social Services (HRA) provides a range of social services, and administers major public benefits programs for residents of New York City. The services and benefits under its aegis include: public assistance; adult protective services; child care for working people on public assistance, and for persons fulfilling their public assistance work or training requirements; it also provides specialized case management and housing support for people with HIV-illness and or AIDS; eviction prevention; food stamps, and it administers the Medical Assistance Program, including Medicaid, home care, and long-term care for the elderly and disabled. Federal, state, and local law and regulations control eligibility and most of the participation requirements.

HRA contains the following major services components: the Family Independence Administration (FIA); Medical Assistance Programs (MAP); HIV/AIDS Services Administration (HASA ,formerly the Division of AIDS Services

and Income Support (DASIS)); the Office of Domestic Violence and Emergency Intervention Services; Office of Health and Mental Health (OHMH); and, the Office of Refugee and Immigrant Affairs.

Other HRA Offices include: Administration; Contracts; Finance; General Counsel; Legislation; Staff Resources; Management Information Systems; Constituent and Community Affairs; Program Reporting, Analysis and Accountability, and Policy and Program Development.

The Family Independence Administration coordinates HRA's welfare reform efforts through Income Support and Job Center operations throughout the City. Its services include temporary financial assistance and employment initiatives for public assistance applicants and recipients, and Food Stamps. Through directly operated and contracted services, FIA programs are designed to promote employment and maximum independence.

The Medical Assistance Program (MAP) includes administration of Medicaid, operation of the Home Care Services Program (HCSP) and the direct provision of Adult Protective Services (APS). MAP makes eligibility determinations for the federal/state Medicaid Program that pays for medical services for low income New Yorkers who qualify, and administers these benefits for persons who receive Public Assistance or Supplemental Security Income. HCSP verifies eligibility and assesses the medical need for home care; determines the appropriate level of care, and assigns eligible home care cases to community-based provider agencies. APS provides services to mentally and physically impaired individuals who are in immediate danger because of their impairment. It has no financial eligibility requirements. It provides investigation, community guardianship for persons who require surrogate decision-making, counseling, financial management, heavy duty cleaning, access to medical and home care services, and help in obtaining entitlements. APS also helps endangered persons who are facing eviction to retain their housing or find an alternative residence.

The HIV/AIDS Services Administration (HASA, formerly DASIS) is the primary mechanism within the Human Resources Administration for expediting access to essential benefits and social services needed by persons living with AIDS or HIV illness and their families. HASA provides specialized intake and needs assessment; direct linkages to financial assistance, Medicaid, Food Stamps, Home Care and Homemaking; ongoing intensive case management, including the development of permanency plans for families as well as periodic monitoring and crisis intervention for single clients to maintain or modify their service packages; emergency, transitional and permanent housing services and placements; voluntary vocational counseling/rehabilitation, job training and placement, supporting a client's choice to work with a transitional benefits package; assistance with clients' applications for Supplemental Security Income and Social Security Disability Income; and referrals to community-based resources for a variety of additional services.

The Office of Domestic Violence and Emergency Intervention Services (ODVEIS) is comprised of 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. They are responsible for the coordination and provision of agency services to victims of emergencies such as hurricanes, snowstorms, heat alerts, public health issues and most recently the 9/11 tragedy. Also under OEIS is the Office of Food Programs and three 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).

The Office of Health and Metal Health (OHMH) provides psychiatric evaluation, crisis intervention, and housing eligibility to people served by other components of HRA.

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.

On July 1, 2003, the Mayor's Office of AIDS Policy Coordination was integrated into with the Department of Health and Mental Hygiene and renamed the Office of Citywide AIDS Policy Coordination.

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. Housing resources for Division of Mental Hygiene clients are primarily planned and funded by the State. 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 Department of Housing Preservation and Development supervises the production of new housing units. Support services required to maintain mental hygiene clients in the community are planned and contracted at the City level. 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.

Department for the Aging

The New York City Department for the Aging (DFTA), as well as being an arm of municipal government, is also the largest of more than 670 Federally-designated Area Agencies on Aging (AAA) in the nation, and part of a countrywide aging network that includes 50 State Offices on Aging. DFTA has had 25 years of experience in conducting research and advocacy and providing a wide array of programs and services, both directly and through contracts with over 400 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. The agency's executive staff also includes the two Deputy Commissioners and seven Assistant Commissioners, who direct the following bureaus responsible for administering DFTA's programs and services.

The Bureau of Senior Assistance and Benefits provides information on benefits and services for the elderly, assistance with government program forms and applications, and referrals to programs that address specific areas of concern for the aging. Units/programs administered within this bureau are: Central Information and Referral; Home Energy Assistance Program (HEAP); Weatherization, Referral and Packaging Program (WRAP); Senior Citizen Rent Increase Exemption Program (SCRIE); Health Insurance Information and Counseling Program (HIICAP); Elderly Crime Victims Resource Center; and the Senior Housing Unit.

The Bureau of Community Services administers contracts with over 400 local agencies to support senior centers, home-delivered and congregate meals programs, health promotion, transportation, case management and assistance, home care, legal assistance, minor home repair, and other services for the elderly in neighborhoods across the City.

The Bureau of Senior Services, Resources, and Partnerships administers programs that call upon the skills and experiences of older people in working with others and enhancing community life. This bureau also operates resource centers that are designed to support caregivers and their families, linking them to needed services and resources in the community. Operating within this bureau are Senior Employment Services, Work Experience Program (which trains Public Assistance recipients to work as home care aides for frail elderly), Foster Grandparents Program, Intergenerational Programs, the Grandparent Resource Center, the Alzheimer's Center and Long Term Care Services.

In addition to the above bureaus, the Department also has a Bureau of Administration and Budget; Office of Intergovernmental, Legislative and Public Affairs; and Office of Management and Policy, which includes Research, Planning, and Development. This Office is the City's primary source of demographic and service data on elderly New Yorkers.

In addition to funding from the City of New York (which provides over 70% 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, and the U.S. Dept. of Agriculture.

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 conducts a variety of activities which include:

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 Building Code (Local Law 58) 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: 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.

DOHMH-Office of AIDS Policy Coordination

On July 1, 2003, the Mayor's Office of AIDS Policy Coordination was integrated into the Department of Health and Mental Hygiene and renamed the Office of Citywide AIDS Policy Coordination. For a description of the Office for Citywide AIDS Policy Coordination (OCAPC) please refer to Supplement: HOPWA Grant, Part I, Section D2. Supportive Housing Continuum of Care for Special Needs Populations, b. Persons with HIV/AIDS.

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. The agency's staff includes three deputy commissioners -- for Law Enforcement, Investigations, and Public Affairs.

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, religion, gender (including gender identity and sexual harassment), disability, sexual orientation, national origin, status as a victim of domestic violence, familial status (whether children are, may be, or would be residing with a person), age, alienage and citizenship status, marital status, conviction or arrest record, lawful occupation, relationship or association, and retaliation. In addition, the City's law prohibits bias-related harassment.

The Commission on Human Rights has two programmatic bureaus.

S 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 Trial 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.

S 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 cultural diversity, the Human Rights Law, and intergroup relations. In addition, the Centers address situations of community unrest by assisting groups with leadership development, mediation, and conflict resolution. Working with over one-hundred immigration advocacy groups, the Neighborhood Human Rights Program conducts a campaign to alert immigrants to the protections provided them under the Human Rights Law and relevant federal laws and to develop leadership in fast-growing or changing immigrant communities. Another program, Project Equal Access, educates senior citizens and the disabled community to city, state, and federal laws on their rights to accessibility in housing and public accommodations and offers advocacy and resolution in specific cases. The Community Service Centers provide mortgage foreclosure counseling and pre-purchase counseling to help deter discrimination in lending and to detect predatory lending practices. 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.

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 two Directors: Studies Implementation; and 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

Youth and Community Development

The Department of Youth and Community Development is a consolidation of the Department of Youth Services and the Community Development Agency. The merger of these two departments builds on the interrelationship of youth and community support services provided through contracts with a broad network of community based organizations throughout New York City. In response to the enabling legislation, the agency has established two separate divisions each headed by a Deputy Commissioner. As part of the mayoral initiative to streamline social services, beginning in City FY 2004, youth employment programs will also be administered by the Department of Youth and Community Development.

Youth Services

The Youth Division supports a variety of youth activities, including structured recreation, athletics, tutoring and remedial education, employment, leadership development, delinquency prevention, cultural enrichment, counseling, adolescent health care, substance abuse prevention and runaway and homeless programs through a combination of City and State funding.

Community Development

The Community Development Division administers the New York City Community Action Program, by awarding federal Community Services Block Grant funds and provides outreach for the non-public assistance component of the City's low-income Home Energy Assistance Program (HEAP). The Division also administers the New York City Adult Literacy Initiative for community based organizations.

Office of Management and Budget

The Office of Community Development within the Office of Management and Budget (OMB) is responsible for the coordination of the City's Community Development Block Grant Program. As indicated in the Citizen Participation Plan, budget requests submitted by community boards and City agencies are evaluated by OMB to determine whether available funding sources are sufficient and appropriate to finance a proposal and whether the proposal is consistent with Mayoral initiatives. The Office of Community Development works with OMB's Task Forces (which oversee the budgets of the various City agencies) to determine whether proposals are CD eligible, and if CD funds are available. Subsequent to approval, the Office of Community Development monitors the expenditures of the CD programs.

Department of Environmental Protection -- Bureau of Customer Services

The Bureau of Customer Services has several primary functions: (1) perform water and sewer billing, collections, customer service and meter reading for more than 800,000 accounts and over two million bills per year; (2) enforcement of water use rules and regulations; (3) management of the installation and maintenance of water

meters; and (4) implementation of customer service policies of the New York City Water Board, including housing-oriented billing programs such as the "Bill Cap", and "Multifamily Conservation" programs. In addition, the bureau administered the Toilet Rebate and Residential Water Survey programs which assist building and homeowners with reducing and managing their water/sewer costs, as well as, controlling future system capital costs. The Bureau also works with the Office of Environmental Analysis on tasks related to future water demand projections.

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:

- S they acquire, manage and develop in rem housing stock;
- S they perform advocacy work on behalf of community residents which serves to prevent tenant displacement and owner abandonment;
- S they are involved in the community and knowledgeable about the neighborhood which assists City agencies in designing and implementing programs that respond to a community's needs;
- S 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
- S 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 co-operative relationship. In recognition of the expertise and commitment shown by these organizations, the City seeks to expand opportunities for non-profit organizations, particularly newer 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-owned residential buildings by soliciting local participation, particularly from the City's abundant 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. HPD operates five borough planning offices in four of the five boroughs that perform these functions and also identify and monitor housing redevelopment sites and projects. In addition, HPD operates four neighborhood offices within the Division of Anti-Abandonment which provide on-site housing assistance to local residents and access to the agency's many programs.

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. In a number of instances, HPD has provided sites or buildings for NYCHA development which are often located in close proximity to City-owned (in rem) buildings.

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 coordinates its tenant selection efforts with the New York City Mayor's Office for People with Disabilities, which maintains links with the disability community and refers qualified applicants with disabilities to HPD properties that offer accessible housing.

HPD works with the New York City Department of Environmental Protection to address issues related to water service rates at affordable housing developments undergoing rehabilitation.

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 works closely with many City, State and Federal agencies. The City agencies

with which DHS has the most interaction include HRA, HPD, NYCHA, Department of Health and Mental Hygiene (DOHMH) and the Department of Employment (DOE). The State agencies that DHS works closest with are OTDA, SOMH, and OASAS. DHS and the Mayor's Community Assistance Unit (CAU) work very closely with HUD during the course of the Continuum of Care SuperNOFA process. In addition, DHS works closely with the non-profit provider community. 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.

DHS works with NYCHA and HPD to provide access to permanent housing for homeless individuals and families. DHS provides capital financing for HPD's SRO Loan Program, which develops supportive SRO housing for homeless single adults. DHS also works closely with HPD in placing shelter clients into these newly developed units. The Department is working with HPD to place homeless families into units in occupied HPD-managed buildings. Sixty percent of the referrals for units developed under the SRO Loan Program must come from the DHS system.

DHS works closely with NYCHA to place homeless families and single adults into NYCHA apartments or to provide them with Section 8 tenant-based vouchers.

DHS receives funds directly from the DOHMH which is administered through a Memorandum of Understanding for all homeless programs. Overall, DMH monitors more than \$22 million in State Community Mental Health Reinvestment Act funds for housing and services for homeless mentally ill individuals and mentally ill substance abusers in New York City.

DHS has also worked closely with the New York City Police Department's (NYPD) Homeless Outreach Unit. DHS assisted in the development of the curriculum and training of officers who are part of this unit. In addition, DHS and the NYPD have established a protocol for identifying clients who have outstanding warrants which can then be addressed and vacated. The Mayor's Community Assistance Unit has lead agency responsibility in addressing encampments located in parks, streets, and other public spaces. The CAU convenes an interagency task force which reviews specific locations and identifies appropriate agencies and resources to offer services to clients and improve the area.

City Interagency Coordinating Council

City Law requires the establishment of an Interagency Coordinating Council (ICC) to oversee the provision of homeless services throughout City government. The ICC consists of representatives from each city agency that provides transitional housing or services to eligible homeless individuals and families. Currently, the Deputy Mayor for Operations serves as the chairperson of the ICC. DHS is required to provide staff to assist the ICC in the performance of its functions.

City and State Initiatives

In 1990, New York City and New York State reached an agreement, known as New York/New York, to create new units of supported housing for single adults who are homeless and mentally ill. The City and the State completed a total of 3,115 units, including 1,426 units developed by the City, mostly in supportive SRO's. New York State has developed 1,689 units, most of which are licensed housing units. As part of the agreement, in addition to the 3,115 newly constructed units, New York State provides supports for New York/New York clients who have been placed in 500 scattered site rental units.

Both the City of New York and the State of New York agreed to create a second round of this New York/New York program to cover a 5-year period. In October 1999 the City signed an expanded New York/New York program that will create 1,500 apartments to serve approximately 2,300 mentally ill homeless people over the next

five years. This program costs the City \$12,000 per unit per year versus keeping the individual in a shelter at a cost of \$20,000 per unit per year.

The City is also working closely with the State Office of Temporary and Disability Assistance (OTDA) to ensure that homeless individuals and families from DHS's NSCs are placed in available housing units developed under the State's Homelessness Intervention Program (HIP).

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, the Medical and Health Research Association, 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 1200 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 Offices of Mental Hygiene, 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 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 Office of AIDS Policy Coordination 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.

Department for the Aging

In its dual role as the largest federal Area Agency on Aging in the country and an agency of the New York City government, DFTA is mandated to plan, coordinate and develop services on behalf of the City's elderly. To meet this mandate, the agency 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, (approximately 2,000 copies are distributed to senior service providers, elected officials, community boards and organizations) with an appeal for response from the community. Public hearings are held once a year in each borough to receive comments and testimony on the Plan.

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 are comprised of a variety of community-based organizations.

In addition, the Department's Community Outreach Unit is devoted exclusively to seeking input, feedback, and ideas from the local communities. There is an outreach representative for each borough who meets regularly with local organizations and programs, and sits on relevant community-based committees.

DFTA also works 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. The SCRIE (Senior Citizens Rent Increase Exemption) Program sponsors landlord "help sessions" in conjunction with the Department of Finance, which are designed to help building owners better understand the rent increase exemption program and the procedures involved. SCRIE also meets and works with landlord organizations to clarify program information for tenants and owners, and to facilitate the reconciliation of landlords' City property tax accounts.

The Senior Housing Initiatives Unit works to formulate policy, forge linkages with other governmental and non-profit agencies, and explore programmatic and financing options for supportive housing. With the NY State Office on Aging, the Housing Unit initiated and sponsors a "Service Coordination Connection" for coordinators and case managers working in elderly housing settings or in housing locations where there is a high concentration of elderly residents. This organization offers professional presentations, training and networking opportunities to over fifty professionals working in this specialized setting.

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, 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 Task Force consists of agency heads of the Mayor's Office of Operations, Mayor's Office of Construction, Mayor's Office of Transportation, Office of the Corporation Counsel, Department of Buildings, Department of Citywide Administrative Services, City Commission on Human Rights, and the Office of Management and Budget, and consults with other agencies as necessary. 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 Task Force is also concerned with the provision of services for people with disabilities in these programs and housing related programs provided by HPD.

Department of Youth and Community Development

The Department of Youth and Community Development provides services to runaway and homeless youth through a network of not-for-profit community based organizations. These organizations are chosen to receive funding through a Request for Funding Proposal (RFP) process. 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 Families and includes emergency shelter grants through United States Department of Housing and Urban Development.

New York City Empowerment Zone

The New York Empowerment Zone (NYEZ), created to revitalize Upper Manhattan and the South Bronx, is an economic development initiative which uses public funds and tax incentives to encourage private investments, and most importantly, to create jobs in these areas. The NYEZ's goal is to provide its residents with the necessary tools to revitalize their community 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 the State. The NYEZ Corporation Board of Directors consists of designees of the City, the State, the 16th Congressional District, the 15th Congressional District, the Upper Manhattan Empowerment Zone Development Corporation, the Bronx Borough President and the Secretary of U.S. Department of Housing and Urban Development.

The fundamental mission of the Corporation is to assist the two local development corporations; The Upper Manhattan Empowerment Zone Development Corporation (UMEZDC), 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 (Yankee Stadium area), 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 \$221,065,304 in loans and grants for implementation of initiatives and projects.

Local Development Corporation Responsibilities

The Upper Manhattan Empowerment Zone Development Corporation (UMEZDC) and the Bronx Overall Economic Development Corporation (BOEDC) are the two designated Local Development Corporations that administer the 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 the Strategic Plan; 3) comprehensive planning and providing opportunities for involvement of the community; 4) selecting service providers and vendors for Zone programs and projects consistent with procurement; 5) negotiating contracts with vendors and service providers, and 6) performance monitoring.

Businesses of all sizes in the Zone benefit from its available resources. Most small businesses currently located in the Zone automatically qualify for many of the tax benefits - particularly if they employ local residents. Many large, national retail companies have also found success in the Zone. *Rite Aid* fills more prescriptions at its Harlem location than at any of its other stores in New York City. *Foot Locker's* Harlem store is among the company's top stores in the nation and by moving to the Bronx Zone, the Bazzini Nut Company reduced its energy expenses by more than \$100,000 and cut its rent by more than half. Recent additions to the EZ growing commercial corridor are Duane

Reade and Seaman's Furniture and in the anchor development, Harlem USA are Disney, Old Navy, Modell's Sporting Goods, Magic Johnson's Theater Complex and Hue-Man Experience in Harlem Bookstore.

Recognizing the vast needs of small businesses and non-profit organizations, UMEZDC established a \$1.5 Million Technical Assistance initiative (TA) to help improve the capacity of small business owners and other entrepreneurs.

UMEZDC and BOEDC have also been focusing and implementing development strategies on several industries including health, education, business services, retail, entertainment and tourism.

Since Zone designation UMEZDC and BOEDC have initiated over 122 primary projects with a total cost \$918 million using \$221 of EZ funds, thus leveraging over \$509 million in private and other government funds. These projects have created 4,757 jobs in the Empowerment Zone.

EDC Activities in the Empowerment Zone

East Harlem: Recently Constructed

- Gotham Plaza: a three story, approximately 90,000 sf mixed used commercial building on East 125th Street between Lexington and Third Avenue. Tenants include Rockaway Bedding, Petland Discounts, Children's Place, Payless Shoes, KFC, and the NYS Department of Motor Vehicles.
- 125 Gateway Ventures, LLC completed a three-story retail and office building of approximately 34,000 sf on the west side of Lexington Avenue between 125th and 126th streets. Duane Reade and Seaman's Furniture occupy the first two floors.

Central Harlem

- Mart 125: EDC and the Manhattan Borough President's office issued an RFP for redevelopment of the Mart 125 building on West 125th Street between Malcolm X and Frederick Douglass Blvds. We have completed interviewing respondents and plan to announce a designating developer by the end of the August 2003.
- Apollo Theater: EDC is funding a total of \$7.15 million in current capital budget allocations to the Apollo Theater Foundation for renovations. Project has received funding from NYS, UMEZ and other Federal sources.

West Harlem

- Citarella: EDC sold the former Tastyee Factory on West 126th St. between Convent and Morningside Aves to Citarella, which intends to rehab the building as a distribution and food preparation center. Construction has been delayed because of difficult site conditions, but a small retail store is supposed to open by Fall 2003 in the small portion of the building that extends onto 125th Street.
- West Harlem Waterfront: NYCEDC is developing final design documents for the construction of a new open space and 2 new piers for ferries, boating, and recreation. The design and construction will be funded by UMEZ, the State of New York, the City of New York, and local elected officials. Construction completion is anticipated in Summer 2005.
- Manhattanville Rezoning: In coordination with the local community and neighborhood stakeholders, NYCDCP has initiated a rezoning effort for the Manhattanville neighborhood that is intended to encourage the area's economic development. UMEZ is involved in the rezoning task force and will be providing the

funds (through NYCEDC) for the environmental review needed to complete the rezoning.

East Harlem: Planned or Underway

- Uptown NY: Urban Strategic Partners LLC plans to construct a street-oriented retail mall of approximately 300,000 sf with accessory parking and a residential tower, on three sites covering portions of three blocks between East 125th and East 127th Streets and Second and Third Avenues. Under negotiation.
- Harlem Auto Mall: Potamkin Development LLC plans construction a 200,000 sf, 2 story complex for car dealerships on a site that comprises most of the block between East 127th and East 128th Street and Second and Third Avenues. To close first quarter FY 2004.
- The Museum for African Art, in partnership with a private developer, plans to construct a new 60,000 sf museum with a residential tower above it on Fifth Avenue between East 109th and East 110th Streets. Under negotiation.
- La Marqueta: Renovation plans have been proposed for La Marqueta, the historic market located between underneath the MetroNorth viaduct between East 111th and East 116th Streets. Developer to be designated for lease.
- The New York College of Podiatric Medicine, in partnership with a private developer, plans to build a new hotel and office tower project with below grade parking on land its owns on the west side of Park Avenue between East 124th and East 125th Streets. (Private Project.)
- Three new food-related businesses and one local existing business will be constructing new facilities on sites located on Park Avenue between East 119th and East 121th Streets.

Auer's Moving and Rigging: sale of building previously leased through HPD and sale of vacant lots across the street (Block 1768, lots 69,70,71,169 and 170), located on east side of Park Ave and East 120th Street. Sale closed June 2003.

Grace's Marketplace (G & J Wholesale Associates) Park Ave mid-block to SE corner East 121th Street. Sale for distribution center and small retail store, possible food preparation area in the future. Sale closed August 2002.

Sale to Blumenfeld Development Group of vacant lots on the east side of Park Avenue, between East 121st - 122nd Street (Block 1770, lots 1-4, 68-72,101, 169 and 170). Sale to developer for construction of two manufacturing facilities for bakers, Dufours Pastry and Parson's & Umanoff. In negotiation.

- The Corn Exchange: Ethel Bates/Resurgence Inc. , and Full Spectrum Construction are rehabilitating this badly damaged landmark structure for a project that will include a full service restaurant and rental office space. Located on northwest corner Park Avenue and East 125th Street.
- GV Moving Systems: EDC recently closed the sale of a 5-story warehouse building and adjacent parking lot to GV. GV and its affiliates have been leasing the Site from the City for over thirty years. The sale will permit GV to renovate the building, retaining 20 jobs year round (40 summer) and creating at least 6 new jobs.

- East River Plaza, is a planned regional mall to be located between 116th-119th Streets, between the East River Drive and Pleasant Avenues. Sale closed September 2002. Project may receive financing, funding from NYC, NYS and UMEZ.

Bronx: Hunts Point

- **Hunts Point Task Force**
Under the direction fo the Mayor's Office, NYCEDC is coordinating an effort to create a land use and transportation vision for the Hunts Point Peninsula. The plan is being developed in collaboration with the Hunts Point Task Force, a task force that was formed by the Bronx Overall Economic Development Corporation and the Mayor's Office, and consists of local businesses, civic and community organizations, government agencies, and elected officials. The plan will set the goals for development over the next 20 years and define specific short-, mid- and long-term actions that the City can undertake to create (a) the best infrastructure for business and (b) the best environment for the residential community. It is anticipated that by February 2004, a draft plan will be developed and by April 2004 the final document will be issued.
- **Freight Ferry Study**
NYCEDC is participating in a studying being conducted by the New York Metropolitan Transportation Council (NYMTC) to investigate the feasibility of freight ferries to transport goods by water to and from the Hunts Point Peninsula. The study was undertaken in response to requests from the local community groups and the Bronx Borough President's Office. The scope will include the investigation of the feasibility and demand for freight ferry service to the Hunts Point Peninsula to potentially reduce truck traffic. Project will commence in September 2003.
- **Streetscaping, Pedestrian Enhancements and Truck Route Signage**
NYCEDC is sponsoring \$2.17 million in Federal TEA-21, State multi-modal, and Iroquois grants to the Hunts Point Economic Development Corporation. The funding is planned to be used to design and begin construction of streetscape improvements and truck route signage that will enhance the Hunts Point community, help prevent trucks from entering residential streets and make the community safer and more pedestrian friendly. In addition, NYCEDC is seeking a \$15 million Federal transportation earmark for increased lighting, signage, and roadway improvements are among the community's highest priorities.
- **Krasdale**
Krasdale Foods, Inc. (Krasdale), a whole food distribution business, operates a 324,600 sf City-owned warehouse facility in the Hunts Point Food Distribution Center. The City built this facility at its own expense in 1969, specifically for lease to Krasdale. The Facility currently employs approximately 500 workers and is one the largest employers in the Bronx. EDC is currently negotiating expansion of Kradale's facility.
- **Fulton Fish Market Relocation Project**
NYCEDC has commenced construction for the new 450,000 sf state-of-art refrigerated seafood market. The new market, which will be fully complaint with food safety laws, is to be constructed on a City-owned 29-acre development site at the Hunts Point Food Distribution Center in the Manhattan to the new facility after construction is complete.
- **A.L. Bazzini**
Bazzini recently acquired 83,000 sf within the Fruit Auction Building.

Bronx: Bronx Terminal Market

EDC recently entered into a non-binding Letter of Intent with the Related Co.'s and Arol Buntzman, the tenant, to settle long-standing litigation. Negotiations for the settlement and development agreement are underway. Related plans a large scale retail development on the site.

HPD Activities in the Upper Manhattan Empowerment Zone

Housing and Community Development Projects

In addition to the thousands of units of housing HPD has already assisted in the New York City Empowerment Zone, HPD currently has an additional 239 housing projects in various stages of development located within the zone. They encompass a broad range of HPD's rehabilitation and new construction efforts, including Bradhurst Redevelopment Project, Bradhurst Urban Renewal Plan, City Home, Homeworks, Neighborhood Entrepreneurs Program, New Homes Program, Neighborhood Redevelopment Program, Cornerstone, ANCHOR, Partnership Rehab, Section 202, Vacant Buildings Program, New Homes Opportunities Program and many other special development projects. The 239 projects will result in 16,273 units of housing.

Empowerment Zone Contractor Training Program

HPD conducts a training program designed to enhance the skills of local businesses and better enable them to compete for City contracts to be awarded in the zone.

Youthbuild

HPD also participates in a hands-on vocational training program for high school dropouts between the ages of 16 and 24 who live in the Empowerment Zone. Participants receive training in the construction field and work in vacant units otherwise occupied City-owned buildings located in the Empowerment Zone. Participants also receive GED education, leadership training, support services, and stipends.

Coordination with Empowerment Zone

City of New York

There is a partnership between the City of New York (City) and the two designated local development corporations responsible for the development and investment in the Empowerment Zone. A representative of the Mayor's Office served as part of the New York Empowerment Zone (NYEZ or Zone) coordination team since its original designation. This representative (Deputy Mayor for Economic Development and Rebuilding) oversees full-time staff assigned to the Empowerment Zone from the Office of the Mayor.

Through its partner agencies, the Upper Manhattan Empowerment Zone Development Corporation (UMEZDC) and the Bronx Overall Economic Development Corporation (BOEDC), the City's Economic Development Corporation, Department of Business Services, Department of Citywide Administrative Services, Department of Employment, Department of Housing Preservation and Development and the State's Empire State Development Corporation, the City also provides funding, technical assistance and support in the areas of site location/acquisition, procurement, business and real estate development.

State of New York

The Governor's office has served as part of the EZ coordinating team since the initial days of the strategic plan. The Empire State Development Corporation (ESDC) is the lead state agency responsible for the State's \$100 million investment in the Empowerment Zone. There are a number of state agencies involved in the activities of both Zones; Empowerment (EZ) and Economic Development (EDZ). The EDZ is an economic development program located in portions of the Bronx and Upper Manhattan. This program complements benefits derived through the federal Empowerment Zone. The EDZ benefits support and enhance the Empowerment Zone's re-development activities and include:

- **EDZ Wage Tax Credit** provides employers with up to \$1500 wage tax credit for each targeted employee paid at least 135% of the minimum wage and a \$750 credit for other individuals employed in the EDZ. Targeted employees include New York State residents that are eligible for the federal Targeted Jobs Credit Act, or for the federal Job Training Partnership Act, are previously unemployed, public assistance recipients, or have income below the US Commerce Department's established poverty level. This credit may be taken for up to five consecutive years and is only appropriate to firms that expand by adding new full-time employees.
- **EDZ Investment Tax Credit (EDZ-ITC)** is available for investments on manufacturing property, industrial waste treatment facilities, air pollution control facilities, and research and development property acquired or built in the Economic Development Zone. Corporate businesses are entitled to a 10% investment tax credit, while personal income taxes (i.e., sole proprietorship) are entitled to an 8% investment tax credit.
- In conjunction with the Empowerment Zone, investment tax credit, the **Employment Incentive Credit (EDC-EIC)** provides an additional three percent credit (or 30% of EDZ investment credit) for corporations that continue to expand EDZ employment (employing at least 101% of the average number of employees in the year before the EDZ investment tax credit was claimed). This credit may be claimed in each of the three years following the year in which the EDZ investment tax credit was claimed.
- **25% capital tax credit** is available for qualified investments and contributions to EDZ capital corporations, investments in certified zone businesses, and contributions of money to non-for-profit community development projects that have been approved by the Economic Development Zone Board.
- **State sales tax exemption** is available through a refund credit process to the contractor or builder for purchases of building materials used in connection with industrial or commercial property. This exemption does not apply if the property is to be used exclusively by one or more retail vendors.

Please call the Mayor's Office New York City Empowerment Zone at (212) 788-7816 for more information. Internal Revenue Service (IRS) forms are available on the Internet www.irs.ustreas.gov, by a toll-free telephone number (1-800-829-3676), or by computer and modem (1-703-321-8020-modem settings N, 8, 1).

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 October 1996, the NYEZ Corporation has approved \$122 million of Empowerment Zone initiatives and leveraged \$509 million in private investment. As a result, 4,757 jobs have been created in the Zone.

Institutional Commitments: Upper Manhattan's healthcare cluster is led by six major hospitals including Columbia Presbyterian and Mt. Sinai. With managed care driving a transformation of the health services industry, growth opportunities exist in managed care facilities, home health care, nursing and other outpatient services. Among the 27 colleges and universities in Upper Manhattan, Columbia University, City College and Yeshiva University are the most renowned.

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. The NYEZ address/tract directory is at the Housing and Urban Development (HUD) web site at www.hud.gov/offices/cpd/ezec/tour.

A map depicting the 1990 census tracts which comprise the New York Empowerment Zone has been provided at the end of this subsection.

Accomplishments within the Empowerment Zone

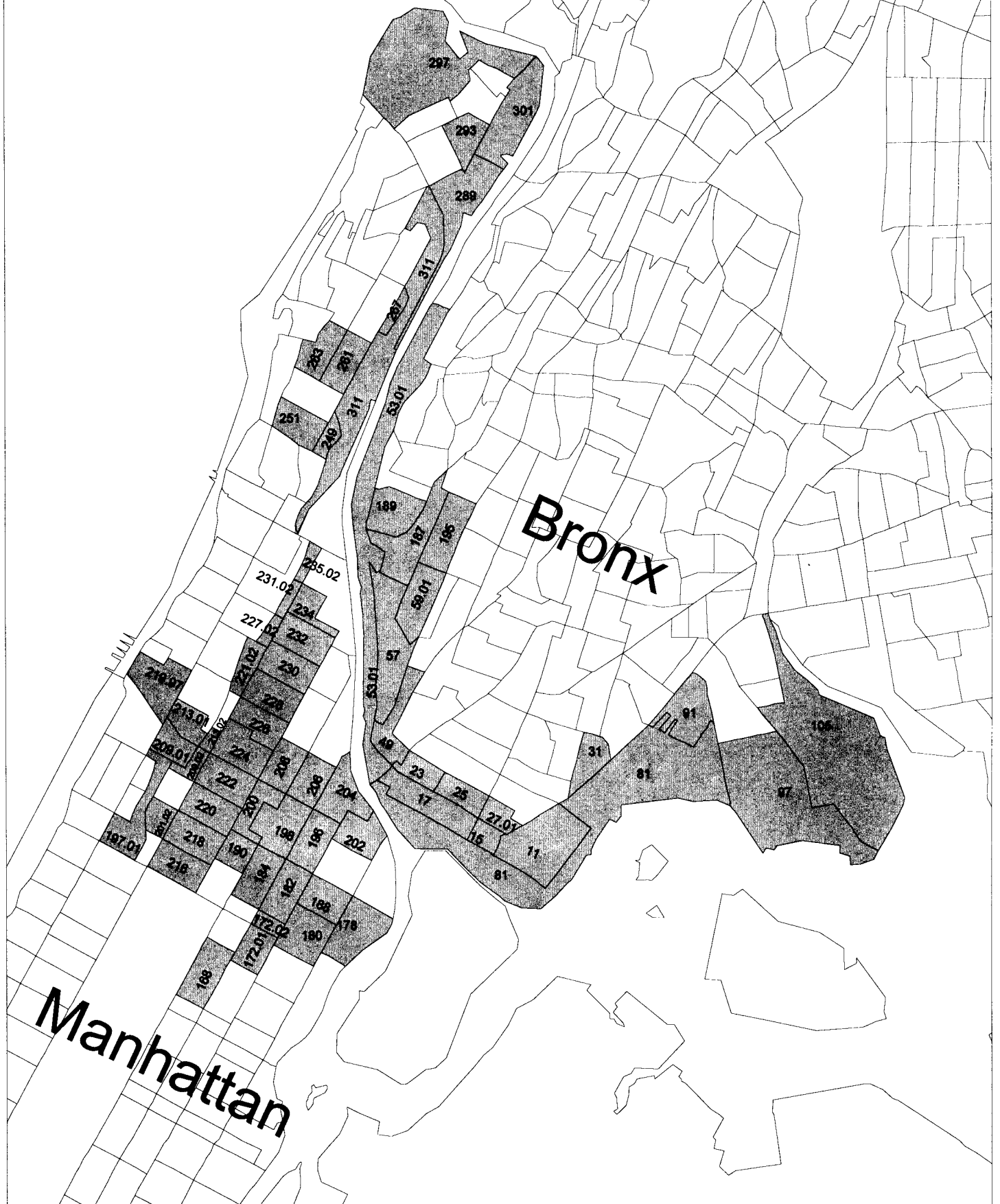
The New York Empowerment Zone Corporation (NYEZC) submits an annual report to HUD on activities and funding expenditures within the EZ. A New Yorker interested in accessing a summary of accomplishments can access the Empowerment Zone's website at: <http://www.ci.nyc.ny.us/html/om/html/nyez.html> or on HUD's website at: <http://www.hud.gov/offices/cpd/ezec/>.

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. One of the objectives of the City's consolidated housing plan is to expand economic opportunity to low and moderate income households. An NYEZ Home Buyer Education initiative informs residents of available opportunities, provides credit counseling and connects them to the Fannie Mae Foundation for source referrals.

The workforce development initiative will provide employers access to a reliable EZ resident labor pool of varying skill levels and specialties. It will provide for assessment and address training, placement and support needs for job seekers. This initiative will be comprehensive and will provide an array of essential services to meet the needs of both job seekers and employers. These are a sampling of objectives of the Upper Manhattan and South Bronx Empowerment Zone program. The EZ application also cites commercial revitalization and maintenance of the built environment in the Empowerment Zone. This policy is a primary goal of New York City's overall housing policy as expressed in the Consolidated Plan.

New York City Empowerment Zone Eligible Census Tracts



New York City Homeownership Zone

The Mount Morris Homeownership Zone was funded by the United States Department of Housing and Urban Development (HUD) in October 1998 to enable the development of 120 privately owned three-family houses (360 units) in Harlem.

As with much of Harlem, the Mount Morris neighborhood was built just before and after the turn of the twentieth century as Manhattan's population expanded north into the area. Harlem rapidly became an integral part of the urban fabric of the City. William Waldorf Astor, Oscar Hammerstein, Henry Morgenthau and August Belmont were among those associated with the development boom. Together with fashionable architects they received commissions in Harlem for some of the city's finest residential structures, churches, synagogues, hotels, social clubs and libraries. They built elevator apartment houses and rows of townhouses in a variety of late-Victorian styles to attract upper and upper middle class families. The buildings in the district represent several architectural styles including Romanesque Revival, Queen Anne and a number of structures designed in the classical and Renaissance traditions popularized by the World's Columbian Exposition of 1893 in Chicago. While demographics have changed dramatically in the last 100 years, much of the Homeownership Zone is characterized by the architectural legacy of this era.

The Mount Morris Homeownership Zone was conceived in recognition of its potential for renewal in accordance with the principles of New Urbanism. Today the area is primarily a residential neighborhood with a mix of housing types and incomes. It is bounded north and south by two major commercial corridors (125th Street and 116th Street, respectively), and east and west by two prominent avenues (Park Avenue and Adam C. Powell Boulevard, respectively).

The Homeownership Zone is distressed. All indicators for the Central Harlem sub-borough area in which it is located demonstrate levels far below City and national averages, as reported in the 2002 New York City Housing and Vacancy Survey. Overall, 25.7% of households in the area fall below the federally defined poverty level, as compared with 17.5% for all of New York City. The median household income is \$24,000, about three-fifths that for the City as a whole. The unemployment rate for adults is 9.8%, more than the 8.6% rate for the city. The homeownership rate in Central Harlem is just 16.1%, half that of the city as a whole and far below the national average. In this sub-borough area 70.1% of households have incomes at or less than 80% of the PMSA median income (compared to 54.2% for the city.)

Three of the four Homeownership Zone projects have been completed, as described below; the remaining project is expected to be completed by January 2004

Shabazz Gardens, the first of the four projects in the Homeownership Zone, consists of 41 three-family townhouses and was completed in September 2000. The project includes landscaped and illuminated pedestrian walkways leading to the group parking at the rear. The Bluestone Organization is the project developer.

Fifth Avenue Homes, the second Homeownership Zone-funded Partnership New Homes project, consists of 40 three-family townhouses and was completed in January 2002. This project occupies an entire city block bounded by 5th and Madison Avenues, East 117 and East 118th Streets. The developer is the Briarwood Organization.

Mount Morris, the third Homeownership-funded New Homes projects, consists of 20 three-family townhouses and was completed in August 2003. Construction was actually completed in February 2003, but there were delays in obtaining Certificates of Occupancy. All of these homes are sold. One homeowner took up occupancy in September 2003; the project is expected to be fully occupied by mid-October 2003. The homes are architecturally contextual with the neighborhood, featuring stoops, pre-cast stone detail, wrought iron grills and fences. AF & F Community

Builders is the developer.

Madison Park, the fourth Homeownership Zone-funded project, consists of 20 three-family townhouses and is approximately 85% complete; it is expected to be completed by January 2004. The marketing effort that concluded in December 2003 generated nearly 2,000 applications. Three of the 20 homes have been sold. The remaining homes are expected to be sold by November 2003. Velez Organization is the developer.

H. HOME HUD Requirements

Described in this section is the federally required information related to the City's use of HOME Investment Partnership-funds: 1) HOME Resale Provisions; 2) Forms of Investment; and 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. Notwithstanding specific differences, there are a number of common elements.

First, 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".

"Affordable " will be defined as a sales price that does not generate payments for principal, interest, taxes and insurance which exceed 30% of the income of a family earning 75% of the then applicable area median. This restriction, by definition, will ensure that all homes sold through the program will be affordable to a range of eligible families. If during the City's monitoring of the program, it discovers that a unit has been sold at a price that exceeds the allowable limit, the City will enforce the terms of the subsidy lien and require immediate repayment of the

subsidy, and if necessary foreclose on the lien.

In addition, 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 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 2004. 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: \$ 49,967

The County of Putnam proposes to provide continued funding for rental assistance, short-term rent, mortgage and utility payments 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 would 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 cost of the activities is as follows:

\$35,000 for rental assistance payments

\$12,000 for short-term rent, mortgage and utility payments

\$2,967 for project sponsor administrative costs

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 does 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 will continue to be a referral source as they identify clients residing in Putnam County. There is a great deal of coordination between ARCS, Putnam DSS, Putnam Department of Health and Putnam Department of Mental Health. Putnam Family and Community Services, Inc. provides a mobile mental health service for people infected and affected with HIV/AIDS.

THE COUNTY OF ROCKLAND (P-OTR-405)

Funding: \$311,792

The County of Rockland proposes to utilize \$311,792.00 to finance a tenant based assistance program as in prior years with the client/household portion of the rent payment, plus the Department of Social Services shelter allowance for qualifying households. This leveraged financing is estimated to provide approximately \$800,000.

The County will continue to operate a tenant based assistance program with legal and counseling services, modeled after the Housing Choice Voucher 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, we will allow a greater number of bedrooms than in the Housing Choice Voucher 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, bring the current 20 assisted persons and their families to 42 assisted persons and families.

Determination of eligibility, screening and assistance in finding suitable apartments is done through the coordinated efforts of the Department of Health and the Department of Social Services. Administrative duties are handled by the Office of Community Development.

Tenant Based Rental Assistance (Office of Community Development)	\$219,952
Counseling Services, 1FTE (Rockland County Health Department)	\$ 35,000
Legal Services (Legal Aid Society of Rockland)	\$ 35,000
Client Services (Rockland County Office of Community Development)	\$ 21,840

The County of Westchester (P-OTR-406)

Funding: \$1,933,157

The County of Westchester is administering the HOPWA funds for the Cities within Westchester County. In FY 2004, the Cities of Mount Vernon, Yonkers, and New Rochelle, and the County of Westchester plan to utilize HOPWA funds for several rental assistance, supportive services programs and facility-based housing operation costs. The 2004 Consolidated Plan incorporates the program and funding descriptions for the County of Westchester and cities of Mount Vernon, Yonkers, and New Rochelle.

Westchester County

In 2004, Westchester County proposes to use \$1,060,119 of HOPWA funds to continue operating its Rental Assistance Program with Case Management Services. The County is requesting HOPWA funds based on the needs for permanent housing for persons living with HIV/AIDS and their families. Currently, there are approximately 270 households receiving assistance. Based on the HOPWA waiting list from project sponsors and the housing gap analysis prepared by the Department of Mental Health for the County’s 2003 Continuum of Care application submission to HUD, there is an unmet need for permanent supportive housing of 200 individuals with HIV/AIDS. HOPWA funds will be used to provide rent subsidies for at least 82 households as well as 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 HOPWA Year 13 (April 1, 2004 - March 31, 2005) allocation will be used to support this program for an additional 12 months by providing:

• Case management services (at least 3 case managers & a per diem clinician)	\$141,840
• Rent subsidies for approximately 83 households	\$717,979
• Salaries and other eligible supports for a not-for-profit agency administering the program	\$ 64,500
• Westchester County Administrative expenses	<u>\$135,800</u>
	\$1,060,119

In 2001, the County selected Grace Church Community Center through a request for proposal process to administer the HOPWA Rental Assistance Program for a period of two (2) years covering Program Years 10 and 11. Because Grace Church Community Center has been administering the County's HOPWA Rental Assistance Program for the past 10 years, the County determined that Grace Church Community Center is the best organization to continue operating the County's program. This agency continued to 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. To date, there are approximately 103 participants waiting for rental subsidy assistance.

From October 2001 through August 2002 the average rent subsidy for program recipients was \$592 per month, down from Fiscal Years 1999-2000, when it was \$625. Since September 2002 thru April 2004, we find that the average rent for the past six (6) months has drastically increased to approximately \$720. We have identified in this amended plan that the number of rental subsidies will be reduced from 90 to 83 provided that the average rent remains constant. This decrease is due to 1) the high cost of market rents in Westchester County and 2) funding reduction. 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, Bureau of HIV/AIDS Epidemiology, the total number persons living with AIDS Westchester County as of December 31, 2003 was 2,161. 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 serves more than 127 individuals as of 12/31/02.

The Westchester County Department of Planning also provides funds for eviction prevention through the Community Development Block Grant (CDBG) and Emergency Shelter Grant (ESG) programs. Those funds flow through several neighborhood housing organizations that provide counseling, referrals and back-rent 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. In the past few 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 \$372,000 in HOPWA Year 13 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 for the 2004 HOPWA grant.

1. Greyston Health Services - \$186,000

Greyston Health Services operates two programs for persons living with HIV/AIDS: Issan House, a permanent housing facility for 35 single adults, and the Maitri Center, a state licensed adult day health care program. In Year 13, Greyston will use \$102,208 to continue to employ staff that will directly impact the ability of approximately 50 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, which are approximately 15 new applicants on a monthly basis. 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 use \$31,735 of HOPWA funds toward the cost of a professional property management services organization that will insure that Issan House is a clean, safe and secure place to live that is in compliance with all applicable regulations.

Difficulties with expenses such as utility payments, rent payments for Yonkers residents and rent payments at Issan House can adversely affect an individual's or family's ability to establish themselves in and retain their housing. Greyston will use \$21,624 to assist persons living with HIV and/or AIDS and their families who are experiencing financial hardship in paying their rent and housing expenses. Hardship will be determined as anyone who is paying more than 35% of their current income on housing. Clients will be required to furnish appropriate documentation for each claimed expense. The large majority of the clients for this service will be identified through the Maitri Adult Day Program enrollment pool, the Maitri Program applicant pool and the Issan House waiting list. HOPWA funds will in all cases be paid directly to the vendors and not the PLWH/A. Greyston will provide rental and move-in support to approximately 20-25 clients.

In Yonkers, permanent housing resources for families with HIV+ family members are very limited and the Greyston staff continues to receive new requests for housing from such families. Greyston will continue to use other sources of public funding to create permanent housing for families with an HIV-positive family member in Yonkers.

Greyston will use \$30,433 of HOPWA funds toward the cost of preparing and providing food to approximately 50 people 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 are needed.

2. The Sharing Community- \$186,000

The Sharing Community is requesting \$186,000 of HOPWA Year 13 funding to continue its Housing Retention/Eviction Prevention Program for Yonkers residents with HIV/AIDS who are either homeless or in danger of becoming homeless. Sharing Community's primary goal is to enable people with HIV/AIDS to obtain and maintain decent permanent housing at an affordable level. This goal will be achieved through the combination of:

- Home-finding assistance for clients who are currently either homeless or living in substandard housing;
- Housing counseling including budget planning and assistance obtaining ongoing housing subsidies available for selected clients through the Westchester County Department of Social Services;
- One-time emergency rent/utility payments when needed to avert immediate eviction; and
- Ongoing shallow rent subsidies for eligible clients who cannot find quality affordable housing without such support.

The Sharing Community will use \$82,055 to provide home-finding assistance and housing counseling to PLWH/A. A HOPWA-funded housing counselor will serve at least 75 eligible households during the course of the year. The counselor will provide clients with training on how to work with landlords, brokers, public agencies and other resources to locate and secure quality affordable housing. The counselor 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.

The Sharing Community will use \$19,036 to assist persons living with HIV and AIDS and their families who are facing imminent eviction with one-time emergency rent and/or utility payments. The housing counselor will screen eligible clients to determine the cause of eviction, analyze each client's financial situation, identify any other available rent subsidies or sources of additional revenues, and, when appropriate, provide one-time payments directly to the involved vendors for rent or utility arrears. Within the program year, 28 households will receive these one-time emergency subsidies.

The Sharing Community will use \$84,909 to provide shallow rent subsidies to approx. 20 persons at an average of \$300 a month for 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. The amount of rental assistance to be provided to any given household will depend on the size of household, the size of the housing unit and the combined adjusted household income. Each unit will be inspected to ensure that it meets HUD's Housing Quality Standards.

The City of Mount Vernon

The City of Mount Vernon is requesting \$406,038 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. Mount Vernon accounts for 256 confirmed cases of AIDS and represents more than 21.6% of the persons living with HIV infection. 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 \$264,797 to continue to provide case management services and coordination of referrals. Two HOPWA funded case managers will provide intensive and comprehensive case management to more than 75 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).

2. Nutritional Services

The City of Mount Vernon will use \$86,635 to continue facilitating food distribution and deliveries to approximately 105 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.

3. Financial assistance through rental subsidies for persons living with HIV/AIDS and their families.

The City of Mount Vernon will use \$54,606 to administer the Shallow Rent Assistance Scattered Site Housing Program. The program will serve approximately 30-35 individuals and their families for an approximate monthly cost of \$4,550. Due to increased demand, the shallow rent subsidy program developed a waiting list and as of 12/31/02, there were approximately 10 persons waiting for rental assistance. The City also receives funding through a Continuum of Care for the Homeless Grant that will be used for additional housing subsidies.

The City of New Rochelle

The Guidance Center, as lead agency of the New Rochelle Alliance for People with AIDS, will utilize \$95,000 to fund and coordinate a local network of service providers to promote access to care for HIV-infected individuals who are homeless, substance abusers and members of other vulnerable populations. Key service elements will include outreach/case finding and engagement, case management, education about HIV/AIDS, access to permanent subsidized housing for persons with co-occurring diagnosis of mental illness, time-limited shallow rent stipends, eviction prevention support, and access to substance abuse treatment and vocational rehabilitation services. Another key element to this support system is the participation of Sound Shore Medical Center and access to other community resources through the New Rochelle Council of Community Services (NRCSS) and the Village Team of New Rochelle. Through these resources, the NRCCS and the Guidance Center plan to initiate an HIV/AIDS awareness campaign. The Village Team which consists of 40 plus agencies, organizations, municipal leaders and concerned citizens will meet monthly under the leadership of Sound Shore Medical Center to promote the health and well being of youth and families.

Project # 1:

New Rochelle will use \$35,228 to continue a health education program for HIV-positive individuals who attend the Infectious Disease Clinic at Sound Shore Medical Center. A registered nurse at the center will continue to be responsible for providing a comprehensive health education program, through one-to-one teaching and support groups, facilitating and monitoring patients' access both to primary health care and to follow-up specialized HIV/AIDS treatment. Through weekly one-to-one and group contacts, this program will serve 60 individuals living with HIV/AIDS over the next program year.

Project #2:

New Rochelle will use \$19,280 for community outreach and targeted referrals for those HIV/AIDS individuals who are untreated as a result of being (1) unaware of their HIV + status, (2) language barriers requiring bilingual services, (3) lost to post-test follow-up or (4) diagnosed and noncompliant with prescribed HIV/AIDS care. The outreach worker from the Guidance Center will cover eight (8) community sites per month and service at least 10 individuals per month. The outreach worker will also provide case management services to those individuals requiring Spanish-speaking service provider.

Project #3:

New Rochelle will use \$40,492 to provide housing case management, as well as substance abuse and mental health interventions, through the Adult Service Center at the Guidance Center. Services will be provided both on-site and through community outreach visits. Housing case management will be provided to those persons living with HIV/AIDS who are contacted through the outreach program, health education services, housing services.

The County of Bergen (P-OTR-501)

Funding: \$515, 415

The County of Bergen through the Division of Community Development will administer the Housing Opportunities for People with AIDS (HOPWA) grant. The funds will be distributed to various HIV/AIDS service providers who address the needs of this special needs population. Activities under the HOPWA program will include supportive housing services such as short term rental assistance, emergency assistance, emergency shelter and other voucher services also tenant based rental assistance and rehabilitation of housing facility for people with HIV/AIDS.

HOPWA Estimated Budget:

Tenant Based Rental Assistance	\$219,953
Voucher services	\$100,000
Operational cost of housing facility	\$180,000
Bergen County Administration	<u>\$ 15,462</u>
	\$515,415

The following services providers are currently recommended to receive HOPWA funding:

Bergen County proposes to continue financing a tenant based rental assistance program with New Jersey Department of Community Affairs (DCA). The clients will be assisted with the client/household portion of the rental payment. We currently provide 19 HOPWA Section 8 vouchers to persons and families with HIV/AIDS.

BCCAP Inc. provides sheltering, supportive transitional and permanent housing, education and training, employment and substance abuse and mental health counseling services to persons infected and affected by HIV/AIDS. Within the past year, BCCAP became the sub grantee for HOPWA case management and outreach services in Bergen County. BCCAP will continue to provide voucher services such as short-term rental assistance, emergency assistance, emergency shelter, other voucher services and referrals to other available services.

Buddies of New Jersey, Inc.(NJB) is a not-for-profit HIV/AIDS Resource Center having its principal place of business in Hackensack, New Jersey. In addition to other services, NJB also operates the Robert A. Harrison House for HIV/AIDS consumers located on the grounds of Bergen Regional Medical Center, Paramus, New Jersey. Robert A. Harrison House was developed exclusively for people in need of long-term affordable solutions or short-

term transitional housing. Founded in 1992 by Buddies of New Jersey, Inc. Harrison House has served over the years as a safe and secure home for over seventy (70) people living with HIV/AIDS. Over the years Harrison House has served, and continues to serve, many as a place to live out their lives in dignity. For others it serves as a transitional home where those hit hard by the disease are able to rebuild their lives. Harrison House is home to a house manager (also HIV positive) and six consumers at any given time. Almost since its inception, the house has been at full capacity, often with a waiting list. It is the intention of the NJB Board to keep Harrison House constantly at full capacity. Referrals for residency usually come from area hospitals, clinics, a physician or other health care providers, social service or home health care agencies. Harrison House provides supportive services and case management to the clients. Bergen proposes to fund the operational cost of the Harrison House facilities.

City of Jersey City (Hudson County) (P-OTR-502)

Funding: \$2,254,941

The City of Jersey City is responsible for administering the HOPWA grant, through the Division of Community Development. Grant funds are used to assist people living with AIDS throughout Hudson County. Jersey City works with existing AIDS housing and service providers to carry out a variety of types of housing and supportive services for low-income people living with HIV/AIDS and their families. This is accomplished by providing oversight for the various activities funded by the HOPWA Program. Oversight is provided in the form of monitoring and providing technical assistance to funded agencies.

As of June 30, 2003, Hudson County is reported to have 4,122 (per 100,000) persons living with HIV/AIDS. The 2002 needs assessment conducted by the HIV/AIDS Planning Council revealed that housing is a high priority for persons living with HIV/AIDS. Seven (7) focus groups were convened to assess needs of persons with HIV/AIDS and all seven (7) focus groups identified housing as one of their top five (5) service needs. As part of the key findings among this group inadequate, insufficient and non-affordable housing are some of the barriers. Other important services identified included case management, medical services, food and medications.

During a recent public hearing, the residents and advocates of Hudson County represented the need of these individuals. Sixty-five percent (65%) of residents attending the hearing indicated that it is more important to keep people in their homes as opposed to building a permanent facility that will only be able to house a very limited number of persons. While rental assistance was identified as the highest priority need, mortgage and utility assistance were identified as the 2nd highest need. Fourteen (14%) of those in attendance emphasized a great need for these services in the community.

The City of Jersey City sub-contracts with various non-profit organizations for the provision of housing and supportive services. Funded organizations are required to provide housing and supportive services in accordance with HOPWA regulations.

Scope of Services

In 2004, the City of Jersey City proposes to use the allocated \$2, 254,941 of HOPWA funds to continue operating the rental assistance programs, facility-based residences, and supportive services programs. The City is requesting HOPWA funds for services provided by five (4) non-profit agencies- American Red Cross, Bergen/Hudson Chapter, Catholic Community Services-Canaan House & Franciska Residence, Hudson County Housing Resource Center and the Jersey City Episcopal CDC. Listed below is a summary of services representing the amount requested. This table is followed by a brief description of each of the proposed projects.

HOPWA Allocation Expenditures

Rental, Mortgage, and Utility Assistance	\$1,314,417
Emergency Shelter	\$ 95,000
Project Based Operating Costs (including Supportive Services programs)	\$ 796,654
HOPWA Administration	<u>\$ 48,870</u>
	\$2,254,941

The following is a description of activities and budgets for each of the providers currently recommended to receive HOPWA funding.

1. American Red Cross (ARC) - Bergen/Hudson Chapter - \$190,000

The proposed community-based program provides an emergency response to homeless individuals and families living with HIV/AIDS. Services include: case management, mortgage and rental assistance and utility payments for individuals and families where one or more persons are diagnosed with HIV/AIDS. Assistance with emergency shelter is also provided as needed for all clients. The ARC also provides information and referrals to medical services, financial assistance and housing related services. Referrals for this program can come from a variety of sources including the Police and Fire Departments, Office of Emergency Management, hospitals, homeless shelters and social service agencies. In addition HIV/AIDS prevention education services will be provided.

2. Catholic Community Services (CCS) "Canaan House"- \$80,000

CCS plans to use HOPWA formula funding in two ways: (1) to sustain existing supported housing services; and (2) to ensure continued program services. Canaan House is a permanent supportive housing program for men, women and families who are living with HIV/AIDS. The facility is a 12-unit apartment building. Applicants must be low-income, at risk of homelessness, have a history of substance abuse or mental health problems and be physically, financially and emotionally capable of living independently.

All applicants accepted into the program undergo an initial intake and assessment with the Program Manager, who holds a Bachelors Degree in Psychology, to determine their specific housing and service needs. The Canaan House staff works collaboratively with the Ryan White Case Manager and any other service providers to address the needs of residents. Staff members and external service providers communicate regularly to monitor and discuss each resident's needs and progress. The type, intensity and method(s) of service delivery are adapted to best meet the resident's unique set of needs and issues.

On-site services at Canaan House, in addition to service planning and coordination, include resident social, psycho-educational and support groups, which are provided by in-house staff, as well as other service providers, educators and community members. Supportive counseling and crisis intervention, as needed, is provided by the Residential Case Workers. Both the Program Director and the Program Manager continue with the community outreach and involvement as an integral part of program services.

3. Catholic Community Services "Franciska Residence" - \$374,654

Franciska Residence is a transitional housing program that provides 24 months of housing to single, homeless men living with HIV/AIDS. The program's capacity is 14 men, who reside in a combination of single and double occupancy rooms. During the course of last year, Franciska Residence accommodated 25 men from racially and ethnically diverse backgrounds. Franciska Residence is staffed 24 hours a day and provides three meals daily, on-

site laundry facilities and transportation as needed to medical and social service appointments. The specific program services are intake/assessment/individual counseling, recovery support/group work, family support, skill building, referrals/linkages & case management support, bereavement counseling & support, medication management, nutrition, recreational programming, alumni services, transportation, and preparation for independent living. Residents pay a monthly programmatic fee of 30% of their income.

Franciska Residence has established rules and regulations, with input from its residents. There is a curfew of midnight, and after a resident has been in the residence for a minimum of eight weeks, he is eligible for overnight passes. It is expected that by the time a resident has successfully completed the program, he has internalized basic and essential communal boundaries, inherent to living with others in a socially acceptable manner. Ideally, old destructive patterns and habits, which usually lead to homelessness or can perpetuate the cycle of chronic homelessness, have been replaced with new life skill mechanisms.

4. Housing Resource Center "Cornerstone Outreach"- \$1,219,417

Cornerstone Outreach is currently the only countywide agency providing long-term rental assistance for those suffering from a diminished income due to HIV/AIDS. Clients who take a drastic cut in their income can no longer afford to live in the apartment/home that they currently occupy without some financial assistance. Cornerstone has alleviated many concerns that clients have by providing financial assistance to persons with HIV/AIDS in the form of rent, mortgage and utility payments.

Cornerstone Outreach has provided over 1000 clients with financial assistance totaling over \$11.7 million dollars. Currently, approximately \$100,000 is needed monthly for long-term rental assistance payments to prevent eviction. Cornerstone Outreach not only has assisted its clients financially but has also assisted them in obtaining quality affordable housing. To date, Cornerstone has found apartments for 220 clients and has assisted many others. As an ongoing effort to build bridges among the organizations, Cornerstone Outreach has been working with and referring clients to Let's Celebrate, Inc. for budget counseling and recently for short-term rental/mortgage assistance. The agency is also working in partnership with FAITH Service's Realtor Liaison to help HIV/AIDS clients locate safe, decent and affordable housing in Hudson County.

5. Jersey City Episcopal Community Development Corporation - \$342,000

Jersey City Episcopal Community Development Corporation (JCECDC) Corpus Christi Ministries Housing Program (CCMH) is currently one of a few permanent Supportive Housing program for people with AIDS in Hudson County. HOPWA funds will enable JCECDC to operate their four CCMH properties and meet the complex and challenging housing, health and social service needs of residents. CCMH presently has two residences for homeless, single men and women with HIV/AIDS and one six-unit apartment building which is home to families living with AIDS. Another five-unit apartment building is currently under development and will be home to five more families. The new building will also have one handicap accessible apartment, which will enable CCMH to house non-ambulatory residents.

For over 10 years, CCMH has been dedicated to serving the needs of people with AIDS (PWA's) in Jersey City. In the beginning, CCMH provided housing to homeless PWA's who were seriously ill and cared for those individuals until they died. As advancements in treatment of the disease developed and many PWA's began living longer, healthier and more productive lives, CCMH began focusing their efforts on providing service to PWA's with Special Needs. PWA's with Special Needs include individuals/families who are dually diagnosed with AIDS and mental illness, addiction, and/or learning disabilities, or are symptomatic for the illness.

Many families with PWA's also have trouble maintaining permanent housing or are at risk of losing their homes because of financial difficulty. In addition, many homeless people in New Jersey fit into the category of PWA's with Special Needs. According to the Supportive Housing Association of New Jersey and The Corporation for Supportive Housing, the estimates of New Jersey's homeless population are well over 40,000 persons. From this number approximately 15% are reported to be HIV positive.

CCMH targets low-moderate income HIV+ individuals, and families with one or more HIV+ family member(s), who lack a stable, permanent residence. In addition CCMH targets individuals and families that are homeless and have a specific identified need to live in a supportive community. Residents who reside in CCMH properties are chronically homeless and unable to live independently without additional encouragement, monitoring and support.

The residents are representative of the Hudson County community. The New Jersey Division of AIDS Prevention and Control reports that in Hudson County, African Americans account for 42% of reported cases of HIV infection, Latinos 37% and Caucasians 19%. The report states further that African Americans also have the highest rate of pediatric HIV infection in Hudson County. However, the Latino community leads in Pediatric cases that have progressed to AIDS with a rate of 40%.

JCECDC's Corpus Christi Ministries Housing Program will use HOPWA funds to continue the operation of its four residences servicing individuals and families living with HIV/AIDS.

It is the intent of the Jersey City Division of Community Development to 1) increase the number of women with HIV/AIDS who have access to decent housing during their transition to permanent living arrangements and; 2) Increase the supply of scattered site housing during the next five (5) years; 3) Place greater emphasis on scattered site affordable and decent housing for persons with HIV/AIDS and Work with non-profits interested in applying for competitive grants to develop housing for persons with HIV/AIDS. In addition to allocating HOPWA funding predominantly for rental and supportive housing assistance, the Jersey City Division of Community Development will continue to serve as the lead agency in facilitating the Super NOFA process.

City of Paterson (Passaic County) (P-OTR-503)

Funding: \$773,123

The emergency services available through the HOPWA grant targets the HIV/AIDS community of Passaic County. These services are utilized only as a last resort and only after beneficiaries are deemed ineligible by or denied benefits from the Board of Social Services, unemployment benefits, or Social Security. The program supports a variety of services aimed at this special needs population, as follows:

- **Transitional Housing:** Temporary apartments are provided to families who are homeless or eminently homeless. Comprehensive support services and intensive case management are also provided to clients in transitional housing. Clients stay for an average of 18 months during which time caseworkers assist clients in obtaining permanent housing and securing financial assistance.
- **Short term rental assistance:** Assists individuals with rental and/or mortgage payments if clients are unable to pay rent due to inadequate incomes. Rental assistance cannot exceed five months in a 52-week period.
- **Advisory and referral services:** This permits service providers to offer clients in need of basic advocacy and referral to access public service agencies, permanent housing, financial assistance and other matters

- Short term rental assistance: Assists individuals with rental and/or mortgage payments if clients are unable to pay rent due to inadequate incomes. Rental assistance cannot exceed five months in a 52-week period.
- Advisory and referral services: This permits service providers to offer clients in need of basic advocacy and referral to access public service agencies, permanent housing, financial assistance and other matters.

**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 '04 (A)	Proposed Accomplishment (B)
	HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS EMSA		\$5,838,395	*****
P-OTR-0404	RENTAL ASSISTANCE/COUNTY OF PUTNAM	\$49,967		12 People
P-OTR-0405	RENTAL ASSISTANCE/COUNTY OF ROCKLAND	\$311,792		42 People Individuals and Families
P-OTR-0406	RENTAL ASSISTANCE/COUNTY OF WESTCHESTER	\$1,933,157		
	County of Westchester			Rental Assistance 83 Households (Individuals & Families) Case Management 95 Households (Individuals & Families)
	County of Yonkers			Housing Case Management/Case Management 200 Households (Individuals & Families) Emergency Rent/Utility Payments 65 Households (Individuals & Families) Shallow Rental Assistance 40 Households (Individuals & Families) Support Services 50 Individuals
	County of New Rochelle			Case Management 60 Individuals Community Outreach 120 Individuals Housing Case Management 80 Individuals Short-term Rental Assistance 20 Individuals
	County of Mount Vernon			Case Management 75 Individuals Food Pantry Bags 105 Individuals Shallow Rental Assistance 37 Households (Individuals & Families)

**SUMMARY TABLE OF FUNDING SOURCES and PROPOSED ACCOMPLISHMENTS
NEW YORK, NEW YORK EMSA**

Project Code	Program Name	Amount	Amount Jurisdiction	Proposed
			Expects to be Received in Federal Fiscal Year '04 (A)	Accomplishment (B)
P-OTR-0501	County of Bergen(NJ)	\$515,415		Rental Assistance 25 Households Case Management 300 Individuals Supportive Services 150 Individuals
P-OTR-0502	City of Jersey City (Hudson County)(NJ)	\$2,254,941		Rental Assistance 350 Individuals Facility Based Housing 30 Units Support Services 300 Individuals
P-OTR-0503	City of Paterson (Passaic County (NJ))	\$773,123		Rental Assistance 110 Households Supportive Services 750 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 chart following 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	Gary B. Sutnick	212-788-7542	212-788-9360
SECTION 202 SUPPORTIVE HOUSING AND ASSISTED LIVING CENTERS	DFTA	Karen Taylor	212-442-1384	212-442-3111
SECTION 811	MOPD	Nicholas Kaminiski	212-788-2505	212-788-2858
YOUTHBUILD	DHS	Bernice McCallum	212-361-7431	212-361-7394
UNIVERSITY AND COLLEGE PROGRAMS	DCP	Charles Sorrentino	212-720-3337	212-720-3495
SECTION 213(A) REVIEW	DCP	Charles Sorrentino	212-720-3337	212-720-3495
FAIR HOUSING INITIATIVE PROGRAM	DCP	Charles Sorrentino	212-720-3337	212-720-3495
HOPE VI PUBLIC HOUSING REVITALIZATION	DCP	Charles Sorrentino	212-720-3337	212-720-3495
HOUSING COUNSELING PROGRAMS	DCP	Charles Sorrentino	212-720-3337	212-720-3495
SECTION 8 MAINSTREAM HOUSING FOR PERSONS WITH A DISABILITY	DCP	Charles Sorrentino	212-720-3337	212-720-3495
COMMUNITY OUTREACH PARTNERSHIP CENTERS	DCP	Charles Sorrentino	212-720-3337	212-720-3495

LEAD AGENCIES

DCP - Department of City Planning

DHS - Department of Homeless Services

MOPD - Mayor's Office for People with Disabilities

MOHMH -Department of Health and Mental Hygiene

DFTA - Department for the Aging

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.

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) 2002, 2003, and 2004, 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.

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;

**LOCAL GOVERNMENT GRANTEE
FY 2003 EMERGENCY SHELTER GRANTS PROGRAM
CERTIFICATIONS BY THE CHIEF EXECUTIVE OFFICER**

I, Daniel L. Doctoroff, Deputy Mayor (designee) of the City of New York, certify that the local government will ensure the provision of the matching supplemental funds required by the regulation at 24 CFR 576.51. I have attached to this certification a description of the sources and amounts of such supplemental funds.

I further certify that the local government will comply with:

1. The requirements of 24 CFR 576.53 concerning the continued use of buildings for which emergency shelter grants are used for rehabilitation or conversion of buildings for use as emergency shelters for the homeless; or when funds are used solely for operating costs or essential services.
2. The building standards requirements of 24 CFR 576.55.
3. The requirements of 24 CFR 576.56, concerning assurances on services and other assistance to the homeless.
4. The requirements of 24 CFR 576.57, other appropriate provisions of 24 CFR Part 576, and other applicable Federal laws concerning nondiscrimination and equal opportunity.
5. The requirements of 24 CFR 576.59(b) concerning the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.
6. The requirements of 24 CFR 576.59 concerning minimizing the displacement of persons as a result of project assisted with these funds.
7. The requirements of 24 CFR Part 24 concerning the Drug Free Workplace Act of 1988.
8. The requirements of 24 CFR 576.56(a) and 576.65(b) that grantees 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 with ESG funds and that the address or location of any family violence shelter project will not be made public, except with written authorization of the person or persons responsible for the operation of such shelter.
9. The requirement that recipients involve themselves, to the maximum extent practicable and where appropriate, homeless individuals and families in policymaking, renovating, maintaining, and operating facilities assisted under the ESG program, and in providing services for occupants of these facilities as provided by 24 CFR 76.56.
10. The requirements of 24 CFR 576.57(e) are met dealing with the provisions of, and regulations and procedures applicable with respect to the environmental review responsibilities under the National Environmental Policy Act of 1969 and related authorities as specified in 24 CFR Part 58.
11. The requirements of 24 CFR 576.21(a)(4) providing that the funding of homeless prevention activities for families that have received eviction notices or notices of termination of utility services will meet the requirements that: (A) the inability of the family to make the required payments must be the result of a sudden reduction in income; (B) the assistance must be

necessary to avoid eviction of the family or termination of the services to the family; (C) there must be a reasonable prospect that the family will be able to resume payments within a reasonable period of time; **and** (D) the assistance must not supplant funding for preexisting homeless prevention activities from any other source.

12. The new requirement of the McKinney-Vento Act (42 USC 11362) to develop and implement, to the maximum extent practicable and were appropriate, policies and protocols for the discharge of persons from publicly funded institutions or systems of care (such as health care facilities, foster care or other youth facilities, or correction programs and institutions) in order to prevent such discharge from immediately resulting in homelessness for such persons. I further understand that State and local governments are primarily responsible for the care of these individuals, and that ESG funds are not to be used to assist such persons in place of State and local resources.
13. HUD's standards for participation in a local Homeless Management Information System (HMIS) and the collection and reporting of client-level information.

I further certify that the submission of a completed and approved Consolidated Plan with its certifications, which act as the application for an Emergency Shelter Grant, is authorized under State and/or local law, and that the local government possesses legal authority to carry out grant activities in accordance with the application laws and regulations of the Department of Housing and Urban Development.

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.

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 91.15(k), following is the City's plan 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"; 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 monitoring procedures currently in place for Consolidated Plan-related programs.

Internal Monitoring

By June 1st, each program or subrecipient which is not on schedule to attain or which projects to exceed its annual goals by 50 percent or more must submit a status report to its agency Consolidated Plan Representative. This report shall explain why their target is not being met and will identify the steps being taken to correct any deficiencies. Likewise, for any situation where goals will be exceeded by 50 percent or more, the report will state why this situation is temporary (additional units coming online due to delays in previous years) or will identify the new procedures or circumstances which are expected to lead to a permanent increase in the program's/subrecipients' goals for future years.

In addition, all programs and subrecipients shall be required to report to their agency Consolidated Plan Coordinator any significant alterations or changes (which will be realized or put into effect for more than 6 months) in the following areas:

1. Needs;
2. Strategies/Policies;
3. Market and Inventory Conditions;
4. Resources; and
5. Implementation.

By June 30th, each agency's Consolidated Plan Representative shall submit to the City's Consolidated Plan Coordinator each of these reports as well as identify any additional corrective action taken by the City agency to ensure conformance with the goals and strategies reported in the Consolidated Plan. Changes in site or area from one borough to another, deletion or addition of a Consolidated Plan activity and changes which result in a funding reduction greater than 50% of a total activity category must be reported immediately to the agency Consolidated Plan Representative.

The City's Consolidated Plan Coordinator will review each report submitted to determine the impacts of the identified changes on the five-year plan. If necessary, the City's Consolidated Plan Coordinator will consult with the agency Consolidated Plan Representative to bring programs and subrecipients into conformance with the Consolidated Plan or to revise the provisions of the Consolidated Plan accordingly. In addition, through the review of these reports, the City's Consolidated Plan Coordinator will determine if a "Substantial Amendment" must be submitted to HUD.