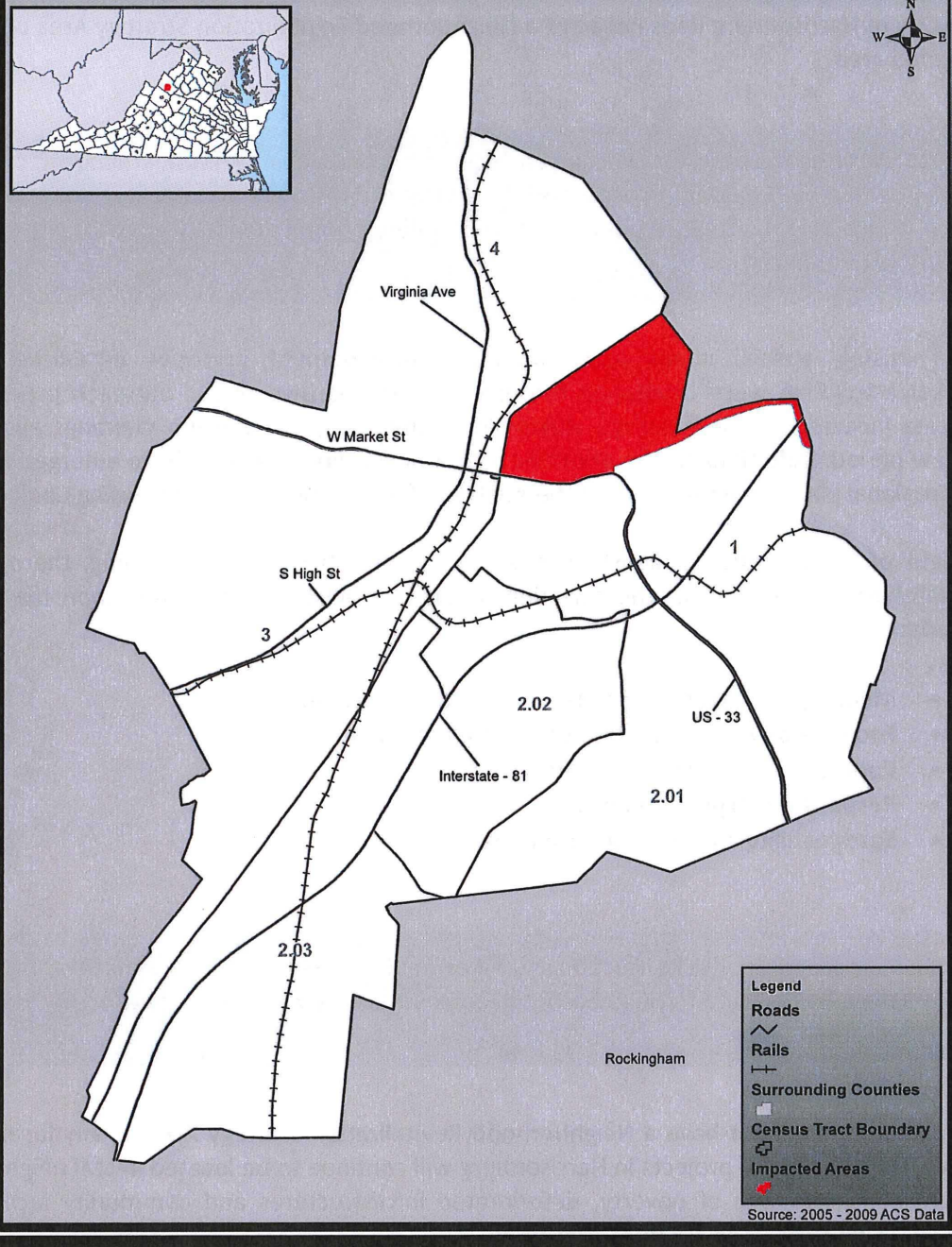




Map 4: Impacted Areas of Concentration of Minority and LMI Persons, 2009

City of Harrisonburg, VA  
Analysis of Impediments to Fair Housing Choice



---

## CITY OF HARRISONBURG

---

- 21.** If applicable, identify the census tracts for Neighborhood Revitalization Strategy Areas and/or any local targeted areas.

The City of Harrisonburg does not have a Neighborhood Revitalization Strategy Area or any local targeted area.

- 22.** Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA) (91.215(a)(1)) and the basis for assigning the priority (including the relative priority, where required) given to each category of priority needs (91.215(a)(2)).

The housing, special needs and community development priorities established in this Consolidated Plan were developed through a comprehensive public outreach process. This process included public meetings, stakeholder interviews, focus group meetings and a public review period. Additionally, the priorities reflect policy directives that have emerged from local and regional planning initiatives and the Analysis of Impediments to Fair Housing Choice.

In light of the priorities established to guide the next five years of funding, the system for establishing the priority for the selection of these projects is predicated upon the following criteria:

- Meeting the statutory requirements of the CDBG program
- Focusing on low and moderate income areas in the city
- Coordination and leveraging of resources
- Response to expressed needs
- Sustainability and/or long-term impact

- 23.** If appropriate, the jurisdiction should estimate the percentage of funds the jurisdiction plans to dedicate to Neighborhood Revitalization Strategy Areas and/or any local targeted areas.

Harrisonburg does not have a Neighborhood Revitalization Strategy Area or any local targeted areas. The majority of projects in Harrisonburg will continue to be located in LMI neighborhoods where concentrations of poverty, deteriorated infrastructures and community facilities, and poor housing conditions are most prevalent.

**24. Identify any obstacles to meeting underserved needs.**

The primary obstacle to meeting underserved needs is the limited funding resources available to address identified priorities. Household incomes that are insufficient to secure quality affordable housing are a major obstacle to meeting the needs of the City's LMI residents.

Intensifying the impact of limited available funding are various repercussions of the national economic recession, i.e. increases in home foreclosures, increased unemployment, increased homelessness and risk of homelessness, and increased supportive services for all those who are in other ways negatively affected by the economy.

Harrisonburg's need to focus its limited resources on priority needs prevents it from allocating resources to other important needs. When feasible, the City will continue to partner with other public agencies, private entities and non-profit organizations to leverage resources and maximize outcomes in housing and community development activities.

**SPECIFIC OBJECTIVES 91.215 (A) (4)**

25. Summarize priorities and specific objectives the jurisdiction intends to initiate and/or complete in accordance with the tables\* prescribed by HUD. Outcomes must be categorized as providing either new or improved availability/accessibility, affordability, or sustainability of decent housing, a suitable living environment, and economic opportunity.

Goals and objectives to be carried out during the strategic plan period are indicated by placing a check in the following boxes

	OBJECTIVE CATEGORY		OBJECTIVE CATEGORY		OBJECTIVE CATEGORY
	Decent Housing (which includes)		Suitable Living Environment (which includes)		Expanded Economic Opportunities (which includes)
	Assisting homeless persons obtain affordable housing	X	Improving the safety and livability of neighborhoods		Job creation and retention
	Assisting persons at risk of becoming homeless	X	Eliminating blighting influences and the deterioration of property and facilities	X	Establishment, stabilization and expansion of small business (including micro-business)
	Retaining the affordable housing stock		Increasing the access to quality public and private facilities		The provision of public services concerned with employment
X	Increasing the availability of affordable permanent housing in standard condition to low-income and moderate-income families, particularly to members of disadvantaged minorities without discrimination on the basis of race, color, religion, sex, national origin, familial status or disability		Reducing the isolation of income groups within areas through spatial deconcentration of housing opportunities for lower income persons and the revitalization of deteriorating neighborhoods		The provision of jobs to low-income persons living in areas affected by those programs and activities under programs covered by the plan
	Increasing the supply of supportive housing which includes structural features and services to enable persons with special needs (including persons with HIV/AIDS) to live in dignity and independence		Restoring and preserving properties of special historic, architectural, or aesthetic value		Availability of mortgage financing for low-income persons at reasonable rates using non-discriminatory lending practices
	Providing affordable housing that is accessible to job opportunities		Conserving energy resources and use of renewable energy sources		Access to capital and credit for development activities that promote the long-term economic social viability of the community

*Identify specific objectives and proposed outcomes by completing Table 1C or 2C – Summary of Specific Objectives*

The City Harrisonburg has provided specific objectives for the following five-year goals in subsequent sections of the Consolidated Plan. Each specific objectives section assigns national objective codes to classify activity types.

---

## CITY OF HARRISONBURG

---

### Housing:

- Goal I: Increase the supply of affordable housing for low- and moderate-income households
- Goal II: Increase the rate of homeownership among low- to moderate-income households
- Goal III: Promote physically accessible housing for those with disabilities through partnerships with nonprofits and other appropriate agencies

### Homelessness

- Goal I: Improve the quality for life for homeless individuals and families by providing funds to public service agencies that serve the homeless population.
- Goal II: Continue to participate in the Harrisonburg/Rockingham County Continuum of Care and support efforts to implement the Harrisonburg Rockingham County Ten-Year Plan to End Homelessness.
- Goal III: Improve the quality of life for homeless individuals and families by providing funds to improve homeless facilities.

### Non-housing community development:

- Goal I: Improve the quality of life in low- and moderate income (LMI) neighborhoods through infrastructure and public facilities improvements, and spot demolition
- Goal II: Improve economic opportunities for low-income residents by fostering partnerships and initiatives that provide living-wage jobs and job training
- Goal III: Support public services that address the housing and community development needs of low- to moderate-income residents, especially extremely low-income persons

## HOUSING

### PRIORITY HOUSING NEEDS 91.215 (B)

26. Describe the relationship between the allocation priorities and the extent of need given to each category specified in the Housing Needs Table (Table 2A or Needs.xls). These categories correspond with special tabulations of U.S. census data provided by HUD for the preparation of the Consolidated Plan.

---

## CITY OF HARRISONBURG

---

The data in the Housing Needs Table indicates that:

- Between 52% and 88% of renters and owner households with incomes less than or equal to 30% of the area Median Family Income (MFI) are cost-burdened.
- Between 36% and 82% of renters and owner households with incomes greater than 30% MFI but less than or equal to 50% MFI are cost-burdened.
- Between 9% and 48% of renters and owner households with incomes greater than 50% MFI but less than or equal to 80% MFI are cost-burdened.

The extent of cost burden among low and moderate-income (LMI) renters and owner households underscores the need for financial assistance for these households, especially those households with incomes that are 50% MFI or less. However, the City of Harrisonburg's relatively small CDBG annual entitlement grant severely limits the amount of CDBG funds that the City can allocate to housing needs.

For the next five years, the City intends to allot \$140,000 of its annual CDBG allocation for debt servicing for the renovation of Harrison Heights – a former public housing development that has been converted to 40 units of project-based Section 8 housing. This \$140,000 allotment will be almost 30% of the City's FY 2012 – FY 2013 allocation. (This allotment combined with the 20% set aside for CDBG program administration will account for one-half of the City's entire FY 2012 – FY 2013 CDBG allocation.) Although the City of Harrisonburg would like to use more CDBG funds to address the housing needs of the City's LMI households, it cannot do so at the expense of ignoring or neglecting other needs of its LMI residents, i.e. provision of public services for special needs populations, construction or rehabilitation of public infrastructure and facilities in LMI neighborhoods, etc.

27. Provide an analysis of how the characteristics of the housing market and the severity of housing problems and needs of each category of residents provided the basis for determining the relative priority of each priority housing need category, particularly among extremely low-income, low-income, and moderate-income households.

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

As noted in response to the previous question, the City of Harrisonburg receives a relatively small annual allocation of CDBG funds to address all of its housing and community development needs. The analysis of housing market characteristics that the City undertook in the preparation of this CP confirmed the shortage of affordable and accessible housing for many City residents, especially LMI households and special needs populations,

As previously stated, the very limited amount of CDBG funds available to Harrisonburg entails that the City cannot address all of its housing needs over the next five years with CDBG funds. Furthermore, as previously noted, Harrisonburg intends to allot \$140,000 of its annual CDBG allocation for the next five years for debt servicing for the renovation of the Harrison Heights development. This is the only portion of its annual CDBG allocation that the City can earmark to address housing needs over the next five years. The standing commitment of almost 30% of the

---

## CITY OF HARRISONBURG

---

City's annual CDBG funds for debt servicing for the next five years effectively obviated the City's need to consider the characteristics of the housing market and the severity of housing problems as a basis to determine the relative priority of each housing need category.

**28. Identify any obstacles to meeting underserved needs.**

The primary obstacle to meeting underserved needs is the limited funding resources available to address identified priorities. Household incomes that are insufficient to secure quality affordable housing are a major obstacle to meeting the needs of the City's LMI residents.

Intensifying the impact of limited available funding are various repercussions of the national economic recession, i.e. increases in home foreclosures, increased unemployment, increased homelessness and risk of homelessness, and increased supportive services for all those who are in other ways negatively affected by the economy.

Harrisonburg's need to focus its limited resources on priority needs prevents it from allocating resources to other important needs. When feasible, the City will continue to partner with other public agencies, private entities and non-profit organizations to leverage resources and maximize outcomes in housing activities.

## **SPECIFIC OBJECTIVES/AFFORDABLE HOUSING 91.215 (B)**

*Note: Specific affordable housing objectives must specify the number of extremely low-income, low-income, and moderate-income households to whom the jurisdiction will provide affordable housing as defined in 24 CFR 92.252 for rental housing and 24 CFR 92.254 for homeownership. (24 CFR 91.215(b)(2))*

**29. Identify each specific housing objective by number (DH-1, DH-2, DH-3), proposed accomplishments and outcomes the jurisdiction hopes to achieve in quantitative terms over a specified time period, or in other measurable terms as identified and defined by the jurisdiction.**

*Complete and submit Table 1C Summary of Specific Objectives or, if using the CPMP Tool, the Summaries.xls file.*

This section provides a summary of five-year housing objectives for the City of Harrisonburg using HUD's numbering system for specific objectives, as described in Figure 33.

**Figure 33**  
**HUD Specific Objectives Matrix**

	Availability/ Accessibility	Affordability	Sustainability
Decent Housing	DH-1	DH-2	DH-3
Suitable Living Environment	SL-1	SL-2	SL-3
Economic Opportunity	EO-1	EO-2	EO-3

Currently, the City of Harrisonburg’s federal CDBG entitlement budget is dedicated heavily to debt servicing and administration, which combined account for roughly 50% of the community’s total CDBG allocation. (About 35%-45% of the City’s CDBG allocation is traditionally used for public improvements, [i.e. sewer lines, street repaving, sidewalk and curb reconstruction] with approximately 10%-15% used for public services.)

The City of Harrisonburg’s housing goal is to provide decent, affordable and accessible housing to meet the needs of LMI City residents, including special needs populations.

To this end, the City of Harrisonburg plans to meet the following specific objectives during the next five years.

**Goal I: Increase supply of affordable housing for LMI households**

Objective A: The City of Harrisonburg intends to allot \$140,000 of its annual CDBG allocation for each of the next five years for debt servicing for the renovation of Harrison Heights (DH-2).

Proposed Accomplishments and Outcomes: Five years of debt servicing obligations fulfilled.

**Goal II: Increase the rate of homeownership among LMI households**

Objective A: The City may apply for State HOME funds through the Central Shenandoah Planning District Commission to use for down payment assistance. If State HOME funds are received, by 2017, the City of Harrisonburg hopes to have assisted 2-5 low- and moderate-income (LMI) households in purchasing a new home (DH-2)

Proposed Accomplishments and Outcomes: The City hopes to assist 2-5 LMI households to become homebuyers.



**Goal III: Promote physically accessible housing for those with disabilities through partnerships with nonprofits and other appropriate agencies**

Objective A: Over the next five years, work with partners to produce 5-10 housing units that will be accessible or adaptable for persons with disabilities (DH-1)

Proposed Accomplishments and Outcomes: 5-10 housing units that will be accessible to or adaptable for persons with disabilities.

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

The primary resource available to Harrisonburg to implement the CP's housing objectives is the City's annual CDBG entitlement allocation. The City's CDBG allocation has shrunk from \$583,140 in FY 2010 – FY 2011 to \$477,713 in FY 2012 – FY 2013. The decrease of federal funding significantly restricts the City's ability to address Harrisonburg's housing and community development needs. The City anticipates using its annual CDBG allocations as follows:

<u>Type of Activity</u>	<u>Percentage of CDBG Allocation</u>
Debt Servicing	30%
Administration	20%
Public Services	10%-15%
Public Facilities	35%-40%

Over the next five years, Harrisonburg will attempt to leverage its CDBG allocations with federal and other public resources, as well as private sector funding sources, to address the City's housing and community development needs.

One very important local public resource is the City of Harrisonburg's General Fund. Each year, the City provides approximately \$1,000,000 of City general funds to support organizations that provide housing and/or supportive services to area residents, including LMI households.

The City of Harrisonburg may apply to the Central Shenandoah Planning District Commission for State HOME funds to use for down payment assistance to help LMI households become home owners.

31. Indicate how the severity of housing problems and the needs of extremely low-income, low-income, moderate-income renters and owners, persons at risk of homelessness, and homeless persons identified in accordance with §91.205 provided the rationale for establishing allocation priorities and use of funds made available for rental assistance, production of new units, rehabilitation of old units, or acquisition of existing units.

See response to Question 27 (analysis of housing market’s impact on funding priorities).

32. If the jurisdiction intends to use HOME funds for tenant-based rental assistance, specify local market conditions that led to the choice of that option.

**Not applicable** – Harrisonburg does not receive a HOME entitlement grant.

## **PUBLIC HOUSING STRATEGY 91.215 (C)**

33. Describe the public housing agency's strategy to serve the needs of extremely low-income, low-income, and moderate-income families residing in the jurisdiction served by the public housing agency (including families on the public housing and Section 8 tenant-based waiting list).

There is no public housing in Harrisonburg, but the Harrisonburg Redevelopment and Housing Authority (HRHA) administers 800+ Section 8 Housing Choice Vouchers.

In order to adequately serve the families currently on the waiting list for Section 8 Housing Choice Vouchers, HRHA will continue the aggressive pursuit of adequate funding from HUD and other sources. To ensure that residents continue to have adequate housing options, the Authority will apply for additional Housing Choice Vouchers to supplement its inventory, and thereby broaden the housing opportunities of its clients.

HRHA’s latest Five-Year Goals outline a strategy for addressing the housing and community development needs of families in the jurisdiction. It is as follows:

### **Mission Statement:**

To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination; and to foster redevelopment of blighted areas to ensure the economic, social and housing vitality of our community.

### **Goals and Objectives:**

#### **1. Promote Adequate and Affordable Housing**

- a. Create and expand access to decent, safe and affordable rental housing

- b. Improve the management, accountability and physical quality of subsidized housing programs
- c. Improve housing opportunities for the elderly, persons with disabilities and the homeless
- d. Provide a leadership role in the Harrisonburg Rockingham Continuum of Care and work with participating agencies to address gaps or needs in the local housing continuum
- e. Expand use of technology to improve quality of services and increase efficiencies

**2. Promote Self-Sufficiency for Residents**

- a. Continue programs that foster economic growth
- b. Promote initiatives that encourage healthy living and lifestyles and access to medical care
- c. Pursue additional partnerships and resources that assist residents in achieving self-sufficiency
- d. Develop and implement youth programs to encourage success in schools and self-sufficiency

**3. Revitalization of Communities**

- a. In Partnership with the City of Harrisonburg, identify and develop solutions to specific redevelopment initiatives that address blight and blighted conditions or promote economic opportunities for its residents
- b. Improve neighborhoods through renovation initiatives with residential developments
- c. Develop mixed income and mixed use communities that incorporate transportation centers
- d. Identify and obtain additional resources to assist in community revitalization
- e. Promote and encourage the use of EarthCraft and LEED building techniques

34. Describe the public housing agency's strategy for addressing the revitalization and restoration needs of public housing projects within the jurisdiction and improving the management and operation of such public housing.

As previously noted, there are no public housing projects in Harrisonburg.

To improve its management and operation, HRHA continues to expand its use of technology to improve its quality of services and increase efficiencies.

---

## CITY OF HARRISONBURG

---

35. Describe the public housing agency's strategy for improving the living environment of extremely low-income, low-income, and moderate families residing in public housing.

There is no public housing in Harrisonburg.

36. Describe the manner in which the plan of the jurisdiction will help address the needs of public housing and activities it will undertake to encourage public housing residents to become more involved in management and participate in homeownership. (NAHA Sec. 105 (b)(11) and (91.215 (k))

There is no public housing in Harrisonburg, but the Harrisonburg Redevelopment and Housing Authority (HRHA) administers a Section 8 Housing Voucher Program. HRHA encourages participation in its Family Self-Sufficiency (FSS) program to assist Section 8 households to become homeowners. The FSS program is intended to provide economic independence for Section 8 residents by offering comprehensive supportive services. By encouraging self-sufficiency, this program positions participants to break the cycle of dependency on public assistance and rental subsidy programs. To date, four tenants who participated in the FSS program have purchased homes.

37. If the public housing agency is designated as "troubled" by HUD or otherwise is performing poorly, the jurisdiction shall describe the manner in which it will provide financial or other assistance in improving its operations to remove such designation. (NAHA Sec. 105 (g))

**Not applicable** – The Harrisonburg Redevelopment and Housing Authority has not been designated as "troubled."

## HOMELESS

### PRIORITY HOMELESS NEEDS

*\*Refer to the Homeless Needs Table 1A or the CPMP Tool's Needs.xls workbook*

38. Describe the jurisdiction's choice of priority needs and allocation priorities, based on reliable data meeting HUD standards and reflecting the required consultation with homeless assistance providers, homeless persons, and other concerned citizens regarding the needs of homeless families with children and individuals.

---

## CITY OF HARRISONBURG

---

The jurisdiction used the Continuum of Care Homeless Population and Subpopulations Chart in Appendix C and information gathered from homeless assistance providers and homeless persons to identify priority needs and allocation priorities. Harrisonburg's priority homeless needs are permanent supportive housing for chronically homeless persons and preventing homelessness for households with children. The information gathered from homeless assistance providers and homeless persons indicated that the homeless and those at risk of homelessness also need a variety of services and financial assistance.

However, due to its relatively small CDBG allocation, the City of Harrisonburg's financial support of homeless needs will be limited to providing funds for public services agencies that serve the homeless population.

39. Provide an analysis of how the needs of each category of residents (listed in question 38) provided the basis for determining the relative priority of each priority homeless need category.

In October 2010, the City of Harrisonburg and Rockingham County published "Ending Homelessness in Ten Years: Harrisonburg and Rockingham County, VA" (TYP). The TYP provides the framework and strategies to eliminate chronic homelessness and reduce overall homelessness in the City and County. The preparation of this plan was a collaborative effort of housing providers, homeless assistance providers and government officials.

The City of Harrisonburg identified the relative priority of homeless needs based on several factors. These factors were primarily the information in the TYP, information gathered through consultation with homeless assistance providers for the preparation of this Consolidated Plan, and the results of the Harrisonburg/Rockingham County Continuum of Care's annual Point-in-Time Count of the sheltered homeless population and subpopulations. (Lack of staff and volunteers made it impossible to conduct a count of the unsheltered homeless population.)

## HOMELESS STRATEGY 91.215 (D)

40. Describe the strategy for reducing and ending homelessness through reaching out to homeless persons (especially chronically homeless individuals and families) persons (especially unsheltered persons), and assessing their individual needs.

In October 2010, the City of Harrisonburg and Rockingham County published "Ending Homelessness in Ten years: Harrisonburg and Rockingham County, VA" (TYP). The plan provides the framework and detailed strategies to eliminate chronic homelessness and reduce overall homelessness in the City and County. The plan is attached as Appendix E.

Priority 4 of the TYP is: Utilize data and research to better align services with need and evaluate the impact of current approaches to homeless prevention and assistance. This priority includes

---

## CITY OF HARRISONBURG

---

the following objectives and strategies that address outreach to the homeless and assessment of their needs:

Objective 4.1: Improve and/or expand current data collection methods.

Strategy 4.1.a.: Improve the point-in-time count and survey.

Strategy 4.1.b.: Increase the utilization of the Homeless Management Information System (HMIS)

Objective 4.2: Incorporate new data collection and evaluation tools to better understand and assess the scope of homelessness.

Strategy 4.2.a.: Evaluate the impact of programs and services based on increased client self-sufficiency.

Strategy 4.2.b.: Obtain and compare hospital, jail, and state correctional facility data to identify the overlap between populations.

Strategy 4.2.e.: Continue receiving feedback and input from the people who have experienced homelessness through focus groups, participation on ten year plan implementation task forces, and a consumer council.

Objective 4.3.: Use data and research to educate the community on the causes of and solutions to homelessness.

Strategy 4.3.a.: Identify trends from the analysis of the point-in-time count and survey.

Strategy 4.3.b.: Develop and implement a public education and media strategy.

In 2011, the Task Force for the TYP prepared its Blueprint for Implementation Year One (July 1, 2011 – June 30, 2012). The Blueprint was reviewed and endorsed by both the City of Harrisonburg Council and Rockingham County Board of Supervisors. The Blueprint contained several goals, including the implementation of a centralized community intake system and a Homeless Intervention School Pilot Program to prevent homelessness and re-house homeless school-age children and their families. Those goals were developed into a program proposal, the Homelessness Intervention Services Project (HISP), which was outlined in Exhibit 2 of the CoC's October 2011 Application.

The CoC continues to collaborate with member agencies to reduce the number of unsheltered homeless households with dependent children by administering the Housing Choice Vouchers awarded under the Non-Elderly Disabled Households and Family Unification Program grant competitions in 2010 and 2009. The CoC's PIT counts have trended down for these households in the last two years.

41. Describe the strategy for reducing and ending homelessness through addressing the emergency shelter and transitional housing needs of homeless persons.

The Ten Year Plan to End Homelessness in Harrisonburg and Rockingham County includes the following objectives and strategies that may help address the emergency shelter and transitional housing needs of homeless persons:

Objective 1.4.: Establish flexible, rapid, and priority services and resources for those at risk of homelessness.

Strategy 1.4.c.: Expand legal aid service to assist people to maintain their housing, including, but not limited to, victims of domestic violence and those experiencing eviction or foreclosure.

Objective 2.1.: Identify the need for additional affordable housing opportunities.

Objective 2.4.: Increase and expand rapid re-housing programs for those with less intensive service needs.

Objective 2.5.: Cultivate a network of landlords who will rent to people experiencing homelessness.

Strategy 2.5.a.: Explore the creation of a community-wide landlord relationship program to intervene to prevent evictions and to re-house people experiencing homelessness.

Objective 2.6.: Expand the number of subsidized rental units available to people experiencing homelessness.

Objective 2.7.: Expand the number of subsidized rental units available to those with low incomes.

Objective 3.2.: Utilize an interdisciplinary case management team of professionals to coordinate and implement plans for individuals and families experiencing homelessness on a path to self-sufficiency and stability.

Objective 3.3.: Expand temporary housing with supports.

Strategy 3.3.a.: Create additional overnight year-round shelter beds, without client restrictions, as necessary.

Strategy 3.4.d.: Create a Healthcare for the Homeless program to deliver health care to people experiencing homelessness. (Note: This strategy has been implemented via James Madison University's Medical Suitcase Clinic that visits homeless shelters to provide resident with medical care.)

Objective 3.5.: Increase income for those experiencing homelessness and for those who have experienced homelessness.

Strategy 3.5.a.: Explore partnerships with employers and existing workforce development programs.

Strategy 3.5.b.: Encourage the prioritization of people experiencing and at risk of homelessness in workforce investment board programs.

Strategy 3.5.c.: Identify appropriate job placements for people experiencing homelessness and arrange for job training as necessary.

Strategy 3.5.d.: Expand legal aid services to assist people apply for disability, unemployment benefits, and other public benefits.

Strategy 3.5.e.: Implement SOAR (SSI/SSDI Outreach, Access and Recovery) to expedite access to mainstream disability benefits.

Objective 4.1.: Improve and/or expand current data collection methods.

Strategy 4.1.a.: Improve the point-in-time count and survey.

Strategy 4.1.b.: Increase utilization of HMIS

42. Describe the strategy for reducing and ending homelessness through helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again.

The January 2011 PIT count identified 29 individuals who are chronically homeless. There is no permanent supportive housing in Harrisonburg for the chronically homeless. One of the goals of the Harrisonburg/Rockingham County Ten-Year Plan to End Homelessness (TYP) is to create permanent supportive housing as a solution to chronic homelessness. The TYP noted that the chronically homeless often face multiple barriers to housing stability, including mental disabilities, chemical dependencies, and other chronic health conditions. Permanent supportive housing provides, first a home, and then continuing supportive services to help individuals maintain that home. These supportive services either directly provide or connect individuals to services in the community. Supportive services include case management that focuses on housing stabilization and can also include direct or coordinated care in the areas of mental health, substance abuse, health care, dental care, education, employment, and access to benefits. There are social service agencies in the Harrisonburg area that provide the services required by the chronically homeless. What is needed is the development of permanent



supportive housing units. The Harrisonburg Redevelopment and Housing Authority intends to use tax-exempt financing and, if needed, low-income housing tax credits to develop 18-24 units of permanent supportive housing. The city supports the HRHA's efforts to create this much-needed housing.

The TYP includes the following objectives and strategies that may help address the issues of homeless persons making the transition to permanent housing, shortening the period of homelessness, facilitating access to affordable housing, and preventing those who were recently homeless from becoming homeless again.

Objective 1.1.: Evaluate effectiveness of prevention activities.

Strategy 1.1.a.: Incorporate all existing prevention services into HMIS to identify whether existing prevention services are preventing homelessness before it occurs.

Strategy 1.4.c.: Expand self-sufficiency programs via family self-sufficiency and individual development accounts (IDA) programs.

Strategy 1.4.d.: Establish a Community Chest to provide flexible funds to prevent homelessness, including short-term grants and loans.

Objective 2.1.: Identify the need for additional affordable housing opportunities.

Objective 2.2.: Evaluate the impact of housing programs in preventing recidivism.

Objective 2.3.: Create permanent supportive housing (Single Room Occupancy dwellings linked with supportive services) for individuals experiencing homelessness with severe needs, including chronic homelessness.

Objective 2.4.: Increase and expand rapid re-housing programs for those with less intensive service needs.

Objective 2.5.: Cultivate a network of landlords who will rent to people experiencing homelessness.

Strategy 2.5.a.: Explore the creation of a community-wide landlord relationship program to intervene to prevent evictions and to re-house people experiencing homelessness.

Objective 2.6.: Expand the number of subsidized rental units available to people experiencing homelessness.

Objective 2.7.: Expand the number of subsidized rental units available to those with low incomes.

---

## CITY OF HARRISONBURG

---

Objective 3.2.: Utilize an interdisciplinary case management team of professionals to coordinate and implement plans for individuals and families experiencing homelessness on a path to self-sufficiency and stability.

Objective 3.5.: Increase income for those experiencing homelessness and for those who have experienced homelessness.

Strategy 3.5.a.: Explore partnerships with employers and existing workforce development programs.

Strategy 3.5.b.: Encourage the prioritization of people experiencing homelessness and at risk of homelessness in workforce investment board programs.

Strategy 3.5.c.: Identify appropriate job placements for people experiencing homelessness and arrange for job training as necessary.

Strategy 3.5.d.: Expand legal aid services to assist people apply for disability, unemployment benefits, and other public benefits.

Strategy 3.5.e.: Implement SOAR (SSI/SSDI Outreach, Access and Recovery) to expedite access to mainstream disability benefits.

Harrisonburg/Rockingham CoC does not currently have permanent housing beds for HUD defined chronically homeless individuals or families. One of its primary goals is to create permanent supportive housing for individuals with severe needs (including those defined as chronically homeless) by June 2013. The CoC's Housing Options Subcommittee (HOS) is charged with developing its Single Room Occupancy (SRO) program and has been continuously engaged in program research and activities to identify funding sources. In the next 12 months, the committee plans to identify a potential site and prepare a statistical profile for a resident population. The HOS's goal is to have an SRO plan in the lease-up phase in two to three years.

The participating agencies of the CoC will continue to look for additional agencies to form partnerships with in order to facilitate the creation of new permanent housing beds. Once a viable project model and program site is selected, the HOS committee will be responsible for guiding the application for pre-development and construction funds; conducting a market study; identifying governmental/regulatory requirements; selecting and defining a scope of work for each member of the project team, etc. The Housing Authority will apply for Housing Choice Vouchers to be used for project basing the program and apply for project development funds and alternative funding options (FHLBA, CDBG, Foundations, CoC, etc.). Once the project completes the construction phase, housing, support service, property management policies/procedures and admission standards and criteria will be established and implemented by community stakeholders, including the members of the CoC.

CoC member agencies will continue to monitor the Harrisonburg/Rockingham County area to assess the impact of the area unemployment rate on the homeless. The CoC will research and

---

## CITY OF HARRISONBURG

---

expand the number of partners who can assist it in gaining access to additional employment resources such as through the increased involvement of the Workforce Investment Board (WIB). It will contact the Department of Rehabilitative Services to investigate ways to gain access to additional services for unemployed and homeless persons who have a disability.

Regarding veterans, many users of the Harrisonburg and Rockingham Thermal Shelter (HARTS) are veterans. Overflow from HARTS goes to the Salvation Army overflow shelter. A representative from Martinsburg, WV Veterans Administration Medical Center is on-call for the CoC to advise on support services, including health care, available to homeless veterans. Our Community Place (OCP), a daytime drop-in center for the homeless, including veterans, provides lunch or dinner, education and substance abuse support groups five days a week. Once a week, OCP hosts the medical suitcase clinic program. The CoC's Housing Options Subcommittee has been working on research and development of an SRO program for its chronically homeless population that includes some veterans. The Workforce Investment Board, Workforce Job Center, Virginia Employment Commission, and Department of Rehabilitative Services are partnering in the CoC's strategy to increase job placement and transportation services for homeless individuals.

With regard to youths, the proposed Homelessness Intervention Services project (HISP) will be a significant effort to address homeless and at-risk youth in the City and County school systems. According to the Virginia Center for Health Statistics, Harrisonburg city has nearly twice the state rate for teen pregnancies among 15 to 17 year olds. CoC member Mercy House operates the only teen pregnancy shelter in the region. In 2010, the teen shelter had one high school graduate and in March 2011 had two teens begin classes at the Community College. The Department of Social Services makes referrals of homeless youth to Harrisonburg Redevelopment and Housing Authority for the assignment of Family Unification Program (FUP) vouchers to families with unstable housing barriers and youth who have aged out of the foster care system.

43. Describe the strategy for reducing and ending homelessness through helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from publicly funded institutions and systems of care into homelessness (such as health care facilities, mental health facilities, foster care and other youth facilities, and correction programs and institutions) or receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs.

The Harrisonburg/Rockingham County 2011 Continuum of Care (CoC) application contained two project proposals. One proposal involved a homeless pilot prevention project and the design and implementation of a centralized intake system in cooperation with a community resource center. The other proposal involved the CoC's Homeless Management Information System (HMIS). The following excerpts from the CoC application provide more detailed descriptions of the two proposals.

---

## CITY OF HARRISONBURG

---

### Homelessness Intervention Services Project (HISP)

A major objective of the multi-jurisdictional, Harrisonburg/Rockingham County, Ten Year Plan (TYP) to end Homelessness (adopted in 2010) is the implementation of services which prevent homelessness. The TYP's Prevention Task Force has been charged with the responsibility of establishing a two-prong approach to providing homelessness intervention supportive services to end homelessness in the region. The two initiatives proposed include: 1) a homeless prevention pilot project in cooperation with the Harrisonburg City and Rockingham County schools; and 2) the design and implementation of a centralized intake system in cooperation with the Community Resource Center (a current HMIS user agency).

(1) The mission of the Homelessness Intervention Services Project (HISP) is to use best practices to provide supportive services and financial assistance to move homeless or at-risk families with school-age children to adequate stable housing and improve self-sufficiency skills at the time of program exit. The program will consist of the following components: 1) crisis intervention; 2) direct services, training, and education; 3) case management; and 4) follow-up assessment and data collection (including use of CoC's HMIS).

Initial data indicates that, in the 2010-2011 school year, there were 33 homeless families comprised of 75 children in Harrisonburg City schools. Rockingham County schools reported there were 37 homeless families with 54 children in its system. Some, but not all, of these families were housed in City emergency and transitional shelters. There are no shelters in Rockingham County. However, the nature of this community is that families double-up with family and friends before turning to the shelters.

(2) The goal of having a centralized intake process will be to: 1) provide an accessible, efficient and coordinated means for persons to obtain assistance related to their housing needs; 2) provide financial and supportive services assistance to at-risk households; and 3) facilitate the rapid re-housing of homeless households.

The targeted population to be served in Harrisonburg City and Rockingham County includes, but is not limited to, military veterans, refugees, persons with substance abuse, behavioral or mental health concerns, and persons discharged from public institutions including correctional facilities. The supportive services proposed would be up-to-date information on services available; completion of an assessment tool at intake to gather information about housing service needs; provision of an appropriate "menu" of supportive services to be accessed, and entering/updating HMIS data on clients. Referrals to recommended services and some case management will also be included in the Centralized Intake System.

### Homeless Management Information System (HMIS)

The Harrisonburg/Rockingham County HMIS is the locally administered, electronic data collection system that stores longitudinal person-level information about individuals who access the region's homeless service system. Local HMIS data is critical to the CoC's goal of participating in the 2012 Annual Homeless Assessment Report (AHAR) to Congress. The HMIS also supports coordinated case management and other community-wide homeless planning

efforts, including a proposed Homelessness Intervention Services Project included in the FY 2011 CoC Application. In 2010-2011, HPRP subgrantee, Mercy House, reported client-level data into the CoC's HMIS and tracked HPRP funds and outcomes for its QPRs and APR. Now that the CoC's HMIS has successfully transitioned to a more user friendly program, Pathways Compass, Inc., the goal is to more efficiently use the program to collect the universal data elements, track assistance provided to clients, and report on their progress.

Pages 29-30 of the Harrisonburg/Rockingham County Ten Year Plan to End Homelessness (see Appendix E) include the following excerpt regarding coordination of services to address the needs of the chronically homeless.

### Service Coordination and Enhancement

*Interdisciplinary case management team:* The goal of the interdisciplinary case management team approach is to assist persons experiencing homelessness, including persons experiencing chronic homelessness, to move towards stability in housing. This model is intended for those individuals who have high service needs and need multiple services to be successful in maintaining stability. Multiple agencies would participate in coordinating a person's or family's action plan and aligning services with the needs of each individual. Agencies would utilize a universal housing and service barrier assessment and would then refer individuals to the case management team.

*Single Point of Entry and No Wrong Door:* The community achieved consensus on the need to create a centralized location of resources as well as streamline access to existing services. The ten-year plan documents the need to consider a "single point of entry" and/or "no wrong door" approach to accessing services.

Both approaches will eliminate the frustration of people in need of assistance who do not know how to access services. Each approach will also streamline existing services and identify gaps and/or overlap of services. Each approach needs to be evaluated to understand which would best fit the community or whether components of each approach should be adopted.

*Mentoring:* Many who are at risk of homelessness or currently experiencing homelessness are in this situation because they do not have a support network on which they can rely and they do not have the financial literacy skills to prevent a homeless episode. Another major theme of community input was the need to expand on existing mentoring programs to provide support to persons experiencing or at risk of homelessness.

The Harrisonburg/Rockingham County Continuum of Care (CoC) has the following protocols in place to ensure that people are not routinely discharged into homelessness:

#### **Foster Care (Youth Aging Out):**

The CoC encourages its agency partners, the local Department of Social Services (DSS), Harrisonburg City and Rockingham County Public Schools, as well as United Way, to follow the service plan policy developed by Virginia Department of Social Services for youth aging out of foster care. In January 2009, Harrisonburg Redevelopment and Housing Authority collaborated

---

## CITY OF HARRISONBURG

---

with the DSS on a grant proposal for the Family Unification Program grant and was awarded 50 Housing Choice Vouchers (HCV). Some of these HCVs are available to be assigned by the CoCs Lead Agency (Harrisonburg Redevelopment and Housing Authority) upon DSS referral to Youth Aging Out.

### **Health Care:**

The CoC supports Rockingham Memorial Hospital, the DSS and other community health providers which follow the discharge protocols developed for the homeless and other high-risk populations by the Virginia Department of Health, Division of Disease Prevention. In 2010 CoC agencies provided research, data and technical writing skills in support of healthcare for the homeless grant proposals to the Robert Wood Johnson Foundation and Harrisonburg CDBG program. In 2011, a pilot medical suitcase clinic project was begun in Harrisonburg shelters manned by JMU student nurses and two paid nursing staff.

### **Mental Health:**

Virginia has in place policies to insure that individuals discharged from state mental health facilities and state mental retardation training centers are not discharged into homelessness. Policies are developed by the Virginia Department of Behavioral Health and Developmental Services (DBHDS). Policies (entitled "Discharge Protocols for Community Services Boards and State Mental Health Facilities" and "Admission and Discharge Protocols for Persons with Mental Retardation Served in State Mental Retardation Facilities") are available at the agency's website ([www.dbhds.virginia.gov](http://www.dbhds.virginia.gov)). Local implementation of these policies is the responsibility of Harrisonburg-Rockingham Community Services Board (CSB). CSB case managers and discharge liaisons work closely with Western State Hospital and Central Virginia Training Center to insure that individuals who are clinically ready for discharge are provided opportunities for safe, affordable housing that meets their unique needs. Individuals are not discharged without such planning. While discharge planning is a statutory responsibility of the CSB, discharge planning is most effective when carried out as a collaborative effort of both CSB and state facility staff

### **Corrections:**

The CoC supports the Harrisonburg City Police Department, Rockingham County Sheriff's Department, and Gemeinschaft House (community half-way home ) in their implementation of the homeless discharge plan protocols of the Virginia Department of Corrections (VADOC). In an attempt to reduce the recidivism rate, VADOC has implemented re-entry and pre-release programs to meet offenders' community readjustment needs. Kingsway Ministries, a community based organization working with inmates pre- and post-release, participated in Ten Year Plan (TYP) focus groups which were held in July 2010.

The Ten Year Plan to End Homelessness in Harrisonburg and Rockingham County includes the following objectives and strategies that may address the issues of helping low-income individuals and families avoid becoming homeless, especially those likely to become homeless after being discharged from public institutions or systems of care, or receiving assistance from public and private agencies.

Objective 1.2.: Create discharge plans from “points of entry into homelessness” – hospitals, foster care, jails and prisons – that ensure appropriate housing options upon discharge.

Strategy 1.2.a.: Create or evaluate the impact of discharge plans from state and private hospitals.

Strategy 1.2.b.: Create or evaluate discharge plans from jails.

Strategy 1.2.c.: Create or evaluate the impact of discharge plans from state correctional facilities.

Strategy 1.2.d: Create or evaluate the impact of discharge plans for youth aging out of foster care without a permanent family.

Strategy 1.2.e.: Create or evaluate the impact of discharge plans from group homes, nursing homes, and other similar institutional settings.

Strategy 1.2.f.: Establish programs providing support to those exiting prison six months prior to community re-entry.

Objective 1.3.: Divert those at risk of homelessness from jails and prisons.

Strategy 1.3.a.: Identify methods to divert people from jails and prisons.

Objective 1.4.: Establish flexible, rapid, and priority services and resources for those at risk of homelessness.

Strategy 1.4.b.: Create and implement a pilot program to reduce the number of children experiencing homelessness. Explore the possibility of replicating a program that targets at-risk families by partnering with the school system to identify children whose school performance is suffering (a possible indicator of housing instability).

Strategy 1.4.c.: Expand self-sufficiency programs via family self-sufficiency and individual development accounts (IDA) programs.

Strategy 1.4.d.: Establish a Community Chest to provide flexible funds to prevent homelessness, including short-term grants and loans.

Strategy 1.4.c.: Expand legal aid service to assist people to maintain their housing, including, but not limited to, victims of domestic violence and those experiencing eviction or foreclosure.

Objective 2.1.: Identify the need for additional affordable housing opportunities.

Objective 2.2.: Evaluate the impact of housing programs in preventing recidivism.

Objective 2.6.: Expand the number of subsidized rental units available to people experiencing homelessness.

Objective 2.7.: Expand the number of subsidized rental units available to those with low incomes.

Objective 3.2.: Utilize an interdisciplinary case management team of professionals to coordinate and implement plans for individuals and families experiencing homelessness on a path to self-sufficiency and stability.

Objective 3.5.: Increase income for those experiencing homelessness and for those who have experienced homelessness.

Strategy 3.5.a.: Explore partnerships with employers and existing workforce development programs.

Strategy 3.5.b.: Encourage the prioritization of people experiencing homelessness and at risk of homelessness in workforce investment board programs.

Strategy 3.5.c.: Identify appropriate job placements for people experiencing homelessness and arrange for job training as necessary.

Strategy 3.5.d.: Expand legal aid services to assist people apply for disability, unemployment benefits, and other public benefits.

Strategy 3.5.e.: Implement SOAR (SSI/SSDI Outreach, Access and Recovery) to expedite access to mainstream disability benefits.

Objective 4.2.: Incorporate new data collection and evaluation tools to better understand and assess the scope of homelessness.

Strategy 4.2.b.: Obtain and compare hospital, jail, and state correctional facility data to identify the overlap between populations.

Strategy 4.2.c.: Identify and evaluate strategies specific to Harrisonburg and strategies specific to Rockingham County, as needed.

Strategy 4.2.d.: Keep abreast of new research and best practices from across Virginia and across the country.



## SPECIFIC OBJECTIVES/HOMELESS (91.215)

44. Identify specific objectives that the jurisdiction intends to initiate and/or complete in accordance with the tables\* prescribed by HUD, and how Federal, State, and local public and private sector resources that are reasonably expected to be available will be used to address identified needs for the period covered by the strategic plan. For each specific objective, identify proposed accomplishments and outcomes the jurisdiction hopes to achieve in quantitative terms over a specified time period (one, two, three or more years) or in other measurable terms as defined by the jurisdiction.

*Complete and submit Table 1C Summary of Specific Objectives or, if using the CPMP Tool, the Summaries.xls worksheets.*

Over the next five years, the City of Harrisonburg plans to meet the following goals and objectives:

### Homelessness

**Goal I: Improve the quality for life for homeless individuals and families by providing funds to public service agencies that serve the homeless population.**

Objective A: The City will allocate CDBG funds to 2-4 agencies that provide supportive services that address the needs of the homeless population.

**Goal II: Continue to participate in the Harrisonburg/Rockingham County Continuum of Care.**

Objective A: Support efforts to implement the Harrisonburg/Rockingham County Ten-Year Plan to End Homelessness

**Goal III: Improve the quality of life for homeless individuals and families by providing funds to improve homeless facilities**

Objective A: The City will allocate CDBG funds to 1-2 agencies that provide shelter to homeless individuals and families.

## NON-HOMELESS SPECIAL NEEDS

*\*Refer to Table 1B Non-Homeless Special Needs or the CPMP Tool's Needs.xls workbook*

**PRIORITY NON-HOMELESS NEEDS 91.215 (E)**

45. Identify the priority housing and supportive service needs of persons who are not homeless but may or may not require supportive housing, i.e., elderly, frail elderly, persons with disabilities (mental, physical, developmental, persons with HIV/AIDS and their families), persons with alcohol or other drug addiction by using the Non-homeless Special Needs Table.

The non-homeless special needs populations in Harrisonburg have a wide range of housing and service needs, including permanent supportive housing, counseling, case management, transportation to health care facilities and employment, and more. Information used to determine priority supportive housing and supportive service needs of the non-homeless special needs populations in the City was derived from interviews and focus group sessions conducted with organizations that serve special needs populations.

Several priorities identified were common across the various subcategories of special needs populations. For example, one priority need identified was more affordable and accessible housing. Another need recognized was supportive housing facilities with adequate case management components. Access to health care, employment opportunities and job training and placement services were also common priorities for all special needs populations.

In regard to the City's elderly and frail elderly populations, there is a strong need for supportive services to allow them to maintain independence on fixed incomes. An additional priority need is affordable, decent housing accessible to persons with disabilities, who often need to be located with proximity to public services, shopping, transit stops, employment or medical care.

46. Describe the basis for assigning the priority given to each category of priority needs.

The priorities for non-homeless housing and supportive services needs were developed by:

- Weighing the severity of the need among all groups and subgroups
- Analyzing the current social, housing, and economic conditions
- Analyzing the relative needs of LMI families
- Assessing the resources likely to be available over the next five years, and
- Evaluating input from focus group sessions, interviews, service provider surveys, City staff and public hearings.

47. Identify any obstacles to meeting underserved needs.

The primary obstacle to meeting underserved housing needs is the limited funding resources available to address identified priorities. In addition, the gap in what households can afford to pay for housing and the price of housing is another obstacle to meeting the needs of the underserved. The income level for some households such as single parent, elderly, disabled, or

---

## CITY OF HARRISONBURG

---

others of limited economic means, is not sufficient to afford even the lowest of the City's market-rate units.

Intensifying the impact of limited available funding are increased unemployment, increased homelessness and risk of homelessness, and the need for increased supportive services for households that are negatively affected by the economy and find themselves with fewer resources.

The City will continue to partner with other public agencies and non-profit organizations, when feasible, to leverage resources and maximize outcomes in providing the housing and supportive services needs of the non-homeless populations.

48. To the extent information is available, describe the facilities and services that assist persons who are not homeless but require supportive housing, and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing.

The following table includes the available facilities and services in Harrisonburg that assist persons who are not homeless but who require supportive housing and/or services.

NAME OF ORGANIZATION	TYPE OF SERVICE
Harrisonburg/Rockingham County Department of Social Services	Human Services
Harrisonburg/Rockingham County Community Services Board	Seriously mentally ill, substance abuse
Valley AIDS Network	HIV/AIDS
Harrisonburg and Rockingham Thermal Shelter (HARTS)	Substance abuse, mental health
Our Community Place	Substance abuse, mental health
Valley Associates for Independent Living	Physical disabilities
Community Resource Center	Housing and social services referral
Salvation Army	Human Services
Pleasant View, Inc.	Disabilities

49. If the jurisdiction plans to use HOME or other tenant based rental assistance to assist one or more of these subpopulations, it must justify the need for such assistance in the plan.

**Not applicable** – Harrisonburg does not plan to apply HOME funds for this purpose during the next five years.

**SPECIFIC SPECIAL NEEDS OBJECTIVES 91.215 (E)**

50. Identify each specific objective developed to address a priority need by number and contain proposed accomplishments and outcomes the jurisdiction expects to achieve in quantitative terms through related activities over a specified time period (i.e. one, two, three or more years), or in other measurable terms as identified and defined by the jurisdiction.

*The jurisdiction may satisfy this requirement by using Table 1C or, if using the CPMP Tool, the Projects.xls worksheets*

See Projects Worksheets in Appendix C.

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

It is increasingly difficult for Harrisonburg to fund non-homeless special needs projects due to the limited amount of CDBG funding received annually to support housing and community development initiatives and the increasing amount of basic community needs resulting from current economic conditions. However, other resources are available on the federal, state, and local levels that area organizations can solicit to help provide affordable housing opportunities and supportive services to non-homeless special needs populations. There are several resources available to support non-homeless special needs housing initiatives, including HUD Section 202 housing funds (elderly projects), HUD Section 811 housing funds (housing for people with disabilities), Section 8 tenant-based rental assistance, Low Income Housing Tax Credits (LIHTC), Federal Home Loan Bank funds, funds from private foundations and other private entities, HOPWA funds, and other state and federal resources.

The City will continue to support the efforts of local and regional organizations that provide housing and supportive services to local non-homeless special needs individuals.

## COMMUNITY DEVELOPMENT

**PRIORITY COMMUNITY DEVELOPMENT NEEDS 91.215 (F)**

*\*Refers to Table 2B or to the Community Development Table in the Needs.xls workbook*

52. Identify the jurisdiction's priority non-housing community development needs eligible for assistance by CDBG eligibility category specified in the Community Development Needs Table\* – i.e., public facilities, public improvements, public services and economic development.

---

## CITY OF HARRISONBURG

---

The City of Harrisonburg will continue to improve the suitable living environment of its LMI neighborhoods and provide public amenities that meet the needs of City residents and businesses.

During the next five years, Harrisonburg's non-housing community development activities will include the following:

- Sustaining and improving the quality of life for LMI persons by creating or completing improvements to infrastructure and public facilities
- Providing public services for LMI households and special needs residents
- Supporting economic development activities that will attract and/or retain businesses and jobs through Micro-Enterprise Assistance

The required Community Development Needs Table is in Appendix C.

53. Describe the basis for assigning the priority given to each category of priority needs provided on Table 2B or the Community Development Table in the CPMP Tool's Needs.xls worksheet.

The community development priorities established as part of the Consolidated Plan are based on needs identified by City departments, service providers, neighborhood groups and citizen input at public hearings

The priorities identified on the Community Development Needs Table were established using the following definitions:

- **High** priorities are those activities that WILL be funded with CDBG funds
- **Medium** priorities are those activities that MAY be funded with CDBG funds, but only after high priorities have been funded.
- **Low** priorities are those activities that will NOT be funded with CDBG funds by the City; however, the City will consider providing certifications of consistency and letters of support for applications submitted by other entities for non-CDBG funds to address these needs.

54. Identify any obstacles to meeting underserved needs.

The primary obstacle to meeting underserved community development needs is the limited funding resources available to address identified priorities.

---

## CITY OF HARRISONBURG

---

The City will continue to partner with other public agencies and non-profit organizations, when feasible, to leverage resources and maximize outcomes in community development activities.

### SPECIFIC COMMUNITY DEVELOPMENT OBJECTIVES

55. Identify specific long-term and short-term community development objectives (including economic development activities that create jobs), developed in accordance with the statutory goals described in section 24 CFR 91.1 and the primary objective of the CDBG program to provide decent housing and a suitable living environment and expand economic opportunities, principally for low- and moderate-income persons.

*Complete and submit Table 2C Summary of Specific Objectives or, if using the CPMP Tool, the Summaries.xls worksheets.*

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

*24 CFR 91.215(a)(4)*

- Community Development/Public Facilities Objectives
- Community Development/Public Improvements Objectives
- Community Development/Public Services Objectives
- Community Development/Economic Development Objectives
- Neighborhood Revitalization Strategy Areas 91.215(g)

This section provides a summary of five-year non-housing community development objectives for the City of Harrisonburg. While these objectives are described by output-based performance measures, the City will also evaluate the results of program activity in terms of outcome-based measures in each year's Consolidated Annual Performance and Evaluation Report (CAPER). Each objective here is classified using HUD's numbering system for specific objectives, as described in Figure 34.

**Figure 34**  
**HUD Specific Objectives Matrix**

	Availability/ Accessibility	Affordability	Sustainability
Decent Housing	DH-1	DH-2	DH-3
Suitable Living Environment	SL-1	SL-2	SL-3
Economic Opportunity	EO-1	EO-2	EO-3

The City of Harrisonburg has identified the following goals and objectives for its community development programs:

---

## CITY OF HARRISONBURG

---

**Goal I: Improve the quality of life in low- and moderate-income neighborhoods through infrastructure and public facilities improvements, and spot demolition.**

Objective A: The City will fund 2-3 infrastructure or public facilities improvements annually for streets, sidewalks, sewers, recreational facilities, etc. Investments will be targeted and coordinated to achieve the maximum public benefit. (SL-3)

Objective B: The City may demolish 1-5 vacant buildings in LMI areas over the next five years to prevent blighting influences. (SL-3)

**Goal II: Improve economic opportunities for LMI residents by fostering and maintaining partnerships and initiatives that provide living-wage jobs and job training**

Objective A: The City will use general funds annually to provide direct financial assistance to at least 2-4 small business interests through the Small Business Loan Program, and the City will research the possibility of utilizing CDBG funds to create a separate micro-lending program to promote small business development to benefit LMI residents. (EO-1)

Objective B: The City will foster and maintain partnerships and initiatives that provide living-wage jobs and job-training opportunities that benefit at least 5-10 persons annually and that encourage a linkage between the job training recipients and City employers. (EO-1)

**Goal III: Support public services that address the housing and community development needs of LMI residents, especially extremely low-income persons.**

Objective A: The City intends to provide CDBG funding for 2-5 public services annually to meet the needs of LMI residents and special needs populations. (SL-3)

56. If the jurisdiction has one or more approved Neighborhood Revitalization Strategy Areas, the jurisdiction must provide, with the submission of a new Consolidated Plan, either: the prior HUD-approved strategy, or strategies, with a statement that there has been no change in the strategy (in which case, HUD approval for the existing strategy is not needed a second time) or submit a new or amended neighborhood revitalization strategy, or strategies, (for which separate HUD approval would be required).

**Not Applicable** -- The City of Harrisonburg does not have a Neighborhood Revitalization Strategy Area.

**BARRIERS TO AFFORDABLE HOUSING 91.215 (H)**

57. Describe the strategy to remove or ameliorate negative effects of public policies that serve as barriers to affordable housing, except that, if a State requires a unit of general local government to submit a regulatory barrier assessment that is substantially equivalent to the information required under this part, as determined by HUD, the unit of general local government may submit that assessment to HUD and it shall be considered to have complied with this requirement.

The City of Harrisonburg recognizes that there are barriers that prevent access to affordable housing for some populations. There are also impediments that affect the maintenance, production and renovation of quality rental housing and the promotion of new construction and renovation of owner-occupied units. These barriers are described previously in the CP, in response to Question 18.

The City of Harrisonburg intends to not only encourage good, affordable housing, but also ensure that current homeowner investments are protected and that future homeowners will realize appreciation on their investments. The City will continue to work with property owners, developers, non-profit community housing providers, and others to diversify the rental housing stock and modernize existing units.

**LEAD-BASED PAINT 91.215 (I)**

58. Describe the jurisdiction's plan to evaluate and reduce lead-based paint hazards and describe how lead based paint hazards will be integrated into housing policies and programs, and how the plan for the reduction of lead-based hazards is related to the extent of lead poisoning and hazards.

In response to Question 11 in this CP, it was noted that there are an estimated 2,385 units with lead-based paint occupied by low- and moderate-income City residents. However, it must be noted that not all units with lead-based paint pose a lead paint hazard. Lead-based paint presents a health hazard primarily to children under the age of six, and then mainly when the paint is in poor condition (e.g., chipping or peeling). Thus, the mere presence of lead-based paint in a unit does not constitute a health hazard unless the unit is occupied by children less than six years old.

It is important to note that Harrisonburg is not included on the Virginia Department of Health's listing of "high risk areas" for lead poisoning. In 2010, the Department's "Prevalence of Elevated Blood Lead Levels and Proportion Tested by Locality of Residence" for children under 72 months listed only one child in Harrisonburg as having an elevated blood lead level.



---

## CITY OF HARRISONBURG

---

Despite the apparently minor extent of lead-based paint hazards in Harrisonburg's housing stock, the City seeks to reduce these hazards as much as possible. While there has been no comprehensive testing for lead hazards in Harrisonburg residential properties, the City will work with other parties to achieve cost effective methods for controlling these hazards through the following:

- As part of its code enforcement efforts, Harrisonburg's building code department will continue to educate City residents about lead paint hazards.
- Properties will be made lead safe during renovation of older residential units.
- Harrisonburg will continue to demolish pre-1978 nuisance housing, which often contains lead-based paint.
- The City will continue to monitor Virginia Department of Health reports regarding Harrisonburg children with elevated blood lead levels.
- The City may apply for a grant to combat lead-based paint hazards via public education, building code department staff training, and residential rehabilitation that controls or eliminates lead-based paint hazards.

### ANTIPOVERTY STRATEGY 91.215 (J)

59. Describe the jurisdiction's goals, programs, and policies for reducing the number of poverty level families (as defined by the Office of Management and Budget and revised annually).

The City does not provide any direct services to reduce the number of households with income below the poverty line. In considering the factors affecting poverty that may be impacted by the City's housing and community development investments, it appears that coordination of production and preservation of affordable housing with supportive programs and services targeted to special needs populations including victims of domestic violence, the physically and mentally handicapped and elderly would benefit this population. In addition, targeted projects such as street and sidewalk improvements, utility replacements and upgrades, and new or upgraded recreational facilities will contribute toward renewed vitality of and pride in affected neighborhoods.

60. Identify the extent to which this strategy will reduce (or assist in reducing) the number of poverty level families, taking into consideration factors over which the jurisdiction has control.

Poverty is a function of income. Factors that affect income are education, job training, health, housing quality, cost of living and employment. As a single unit of government, the City of Harrisonburg has only limited influence on the overall factors that cause poverty. However, the City will collaborate with human service, social service, and economic development agencies and organizations to facilitate their efforts and maximize their resources to provide quality services

---

## CITY OF HARRISONBURG

---

to low-income residents to help them improve their incomes.

Through the collaboration described above, the City can positively influence the likelihood of poverty-stricken residents moving up and out of poverty, reduce the number of residents living in poverty by minimizing threats to individual and family financial stability, and extend services that will provide adequately for those in need.

Ultimately, federal and state policies on welfare, health care, and the minimum wage are also crucial factors in the fight to address and reduce poverty. Harrisonburg will continue to support organizations that provide supportive services to encourage local economic development, and to preserve and improve affordable housing options as part of its strategy to prevent and alleviate poverty.

## INSTITUTIONAL STRUCTURE 91.215 (K)

61. Provide a concise summary of the institutional structure through which the jurisdiction will carry out its consolidated plan, including private industry, non-profit organizations, community and faith-based organizations, philanthropic organizations, the Continuum of Care, and public institutions.

The following list includes agencies that may have a role in addressing identified housing and community development needs in the populations covered in this strategy.

Harrisonburg City Manager's Office: The City office agency providing access to and administration of Federal funds available to cities for the various projects described. The Manager's Office is responsible for the development and implementation of this Consolidated Plan.

Harrisonburg Redevelopment and Housing Authority: A public housing authority providing rent assistance through HUD certificates and vouchers, management of subsidized housing for the elderly, access to funds for development of transitional housing. The City Council appoints the Board of Directors of this Authority, and the City Council must approve all borrowing of funds and issuing of bonds, etc. However, the City does not provide the Authority with any annual funding allocation, nor does the City provide oversight in regards to hiring, procurement, and contracting. The Authority does comply with all state and federal procurement and other procedures.

Harrisonburg-Rockingham Health Department: The public health agency charged with responding to reports of elevated blood lead level in children and conducting outreach, assessment and education services. Although the state appoints the Director of this agency, the City provides the Department with \$\_\_\_\_\_ annually.

City of Harrisonburg Police Department: The Police department has several community-based crime prevention programs including include Community Watch, Auxiliary Police Officers,