

2005 Action Plan APPENDIX

Contents

- ④ **Citizen Participation Public Comments**
- ④ **Funding by Objective and Need Chart**
- ④ **2005 Funding Sources and Uses Chart**
- ④ **Maps of 2005 Projects**
- ④ **Housing Market Data Charts**
- ④ **Housing Hotline Calls Chart**
- ④ **Map of 2005 Proposed Rental Housing Projects**
- ④ **CoC Resource and Leveraging Charts**
- ④ **Other 2004 CoC Goals to Address Homelessness Chart**
- ④ **Exhibit 1 Homeless Charts – Housing and Services**
- ④ **Future Goals to End Chronic Homelessness Chart**
- ④ **MCDHS Housing-Homeless Services Report**
- ④ **MCDHS 2004 Youth Emergency Report**
- ④ **HIV Morbidity Report**
- ④ **AIDS Epidemiologic Profile of Rochester**

Public Comments for 2005 Action Plan

Commenter #1: Maggie Bringewatt, Executive Director of Providence Housing Development Corporation, recommended continued County support of affordable rental housing as a priority to address long waiting lists for families, senior citizens and persons with special needs. One-bedroom rental units are also in demand by residents making minimum wages and disabled persons needing affordable apartments. She asked the County to support the creation of a revolving loan fund for predevelopment costs, to complete the Analysis of Impediments (AI), and to work with community leaders to implement its strategies. She suggested educating planning boards and local leadership to help overcome municipal resistance to rental housing development. She commended the County on its homeownership program and asked that credit repair assistance be added as a component. She recommended a set-a-side of funds from the Homeless Continuum of Care for permanent affordable rental housing and urged the County to work with housing agencies in the next year to prevent proposed federal cuts and retain CDBG and HOME funds at current levels.

Response: Thank you for attending the public hearing and sharing your recommendations on affordable rental housing with us. Monroe County looks forward to the completion of the AI and welcomes the opportunity to work with community leaders in the implementation of identified strategies. Community leaders can also provide valuable input and play a vital role in shaping the program.

Much progress has been made by town and village officials in the CDBG and HOME consortium in supporting affordable housing initiatives in the past decade. Many have submitted their own affordable housing projects as a priority for CDBG funding. We will continue to educate public officials on the mutual merits of affordable housing development, particularly rental housing, in an effort to minimize resistance. Credit repair assistance is currently provided by the Homeownership Program, which offers help with budgeting, assessment of credit reports, education about consumer laws, and solutions to credit problems. Staff will bring your suggestion of a set-a-side rental housing fund to the attention of the Homeless Continuum of Care Team for consideration. We appreciate your commitment to the consolidated plan development process over the years and welcome your continued participation.

Commenter #2: William McDonald, Executive Director of Medical Motor Service, thanked the County for allowing his input into the Five Year Consolidated Plan process. He is concerned about the decrease in HUD funding because the CDBG and HOME programs provide essential services and he feels the County is an excellent steward of these funds. Special transportation services maintain the quality of life for older residents in rural areas and are vital to maintaining independence. In 2000, there were 122,000 suburban elderly persons, the 85+ group increased nearly 35%, and 77% of those 60+ lived in the suburbs, inaccessible to traditional transit and paratransit services. Monroe County's 2003 Senior Action Plan recommends the development of a suburban transportation infrastructure to meet the needs of this growing population. As part of this strategy, he asked that the County continue funding Project Connect-A-Ride (CAR) for frail elderly and disabled rural residents.

Response: We appreciate your comments and participation in the Consolidated Plan process. The federal regulations governing the CDBG program limit the amount of funds spent on community services to 15% of the total CDBG allocation. Together with reductions in federal funding, each year it becomes increasingly more difficult to fund community services, such as CAR. The County commends you for providing these transportation services.

Verbal and written comments on the need for ADA approved access to housing and public places:

Commenter #3: Jennifer Spino, Systems Advocate for Rochester ADAPT, spoke at the public hearing. She suggested that accessible housing projects and public facility improvements funded by CDBG be required to meet basic accessibility requirements that embrace visitability. She noted that many public facilities are still not accessible and expressed her concern over the lack of affordable, accessible and integrated housing, which keeps disabled persons institutionalized.

Commenter #4: Anthony Griggs, a member of the Center for Disability Rights, spoke at the public hearing. He sees a need for additional housing that eliminates stairs, provides larger rooms and adaptable kitchen and bathroom equipment, and other basic amenities to enable wheelchair access. Other priorities include curb cuts on sidewalks and improved access to corner stores, nightclubs and bowling alleys. He feels these improvements are necessary to enable disabled persons to move out of nursing homes and into the community.

Commenter #5: Brenda Pagliarli, a member of the Center for Disability Rights, is physically disabled and blind. She spoke at the hearing to emphasize the lack of wheel chair accessibility in public places such as GEVA Theatre and local businesses and the need for open captioning for hearing impaired persons in movie theaters. She urged Monroe County to help in this regard.

Commenter #6: Chris Hildebrandt, Director of Community Advocacy for the Center for Disability Rights, stressed the importance of continued funding and a focus on disability housing. To meet the high demand for accessibility, he suggested using CDBG & HOME housing funds exclusively to support accessible units. As disabled populations age, they need help staying in their homes. With the unemployment rate for disabled persons at 70%, focus must remain on affordability as well as visitability. The Center's visitability initiative requires some basic access to all homes and apartments without expensive extras. He feels these efforts are necessary to de-institutionalize disabled persons from nursing homes, group homes and developmental centers to the community.

Letter #1: Barbara Forgione is a disabled person who has worked as a social worker for over 20 years. Her letter emphasized the legal right of people with disabilities to have access and integration through the Americans with Disabilities Act. People with disabilities are contributing members of society via taxes, consumers of goods that boost our economy, and volunteers in the community. The ADA is not something disabled persons desire, it is one's legal right, which should translate into priority funding for integration and access. More accessible sidewalks are needed, existing sidewalks need repairs, and many buildings still lack public access. She urged the County to be creative with HOME funds to develop safe, accessible housing for disabled persons, home ownership opportunities and to make funds available to landlords to make properties accessible. She supports the Visitability Project, which makes homes accessible through no step entrances and accessible hallways and bathrooms. She feels the County can prioritize funds and make a tangible difference in the quality of life of disabled persons.

Letter #2: Ismael Massa, Jr. sent a letter in which he described the needs of disabled persons in the community. He came to Rochester from Puerto Rico as a disabled person seeking a better quality of life and independence. He has a subsidized apartment but has searched for three years for a two or three bedroom apartment or rental house and has found no options. He cited the need for funding to improve sidewalks and public accessibility and supports the Visitability Project and other programs that promote affordable, accessible housing with choices.

Response: Thank you for taking the time and effort to attend the public hearing and to raise concerns and public awareness of the accessibility needs of persons with special needs in our community. Monroe County strongly supports and complies with visitability requirements in its affordable housing initiatives funded by the HOME Program in eligible suburban areas. Limited HOME funds must be used to target the neediest populations eligible for assistance. In addition to persons with special needs, they include low-moderate income families, elderly persons, homeless persons and near-homeless persons. We have begun integrating basic visitability improvements into special needs and senior housing and intend to maintain this focus in future projects. We

welcome the completion of the updated Analysis to Impediments (AI), which Monroe County is currently funding. Results should yield strategies that address visitability requirements and guide affordable housing development in this regard.

We agree with your assessment on the need to make public entertainment venues more accessible to persons with special needs. Unfortunately, these facilities are not eligible for CDBG funding. In the past fifteen (15) years, CDBG funds have provided accessibility improvements to an average of ten (10) municipal public facilities annually. These include municipal buildings, community centers and parks. We have also funded the purchase of adaptive outdoor sports equipment for use by disabled and able-bodied persons participating in the SportsNet Initiative. In 2002, we purchased adaptive equipment for the Rundel Library to enable deaf and visually impaired persons to use library computers and technology resources. These projects remain a priority because we feel disabled persons not only need access; they need access to activities they can participate in. Monroe County supports the visitability concept, particularly the zero step entrance component. Since our first interaction with the Center for Disability Rights in 2002, we have integrated visitability components into the design of suburban affordable rental developments.

Commenter #7: Clarence Thompson operates Northstar America, Inc., a for-profit consulting company that is registered with HUD for the Super NOFA Program to assist in the affordable housing credit program. He voiced his concern for that segment of the population that is unable to secure commercial loans and offered his research statistics to Monroe County for review. He supports Monroe County's affordable housing initiatives that assist disabled persons, senior citizens and low-moderate income families and hopes that funding continues.

Response: Thank you for your support of Monroe County's Affordable Housing Programs and your participation in local housing development efforts. We share your concern for low-moderate income families, senior citizens and disabled persons who are unable to secure loans. As funds allow, Monroe County will continue developing affordable housing options to meet the increasing needs of all suburban residents.

Commenter #8: Bonnie Hadden, Director of Development for the Salvation Army, thanked Monroe County for funding the After Care Program for homeless youth at Genesis House with CDBG funds. In 2004, 251 youths were served, which is an increase of 31% over 2003 when 191 youths were served. Genesis House received an operational certificate from the NYS Office of Children and Family Services to increase beds from 10 to 14, suggesting State awareness of Monroe County's increase in homeless youth. CDBG funds provide a case manager who she feels is vital to the program. In 2004, only 23 youths, or less than 10%, returned for services. Bonnie highlighted the need for accessible, safe and affordable housing mentioned by previous speakers, since it is essential to transitioning youth back into the community. She offered to provide a tour of Genesis House for those interested.

Response: Thank you for summarizing the accomplishments of the After Care Program funded by CDBG. We appreciate your efforts and those of your staff in administering this program. Funding for the CDBG and HOME programs has been reduced in the past several years, making it difficult to fund services at the same level each year.

Commenter #9: Josephine Matela, Mayor of the Village of Brockport, commended the CDBG Program for improving the quality of life of residents through economic development and affordable housing projects. She feels the program is vital to providing essential services that municipalities are unable to fund. She thanked Monroe County for its assistance and continued support.

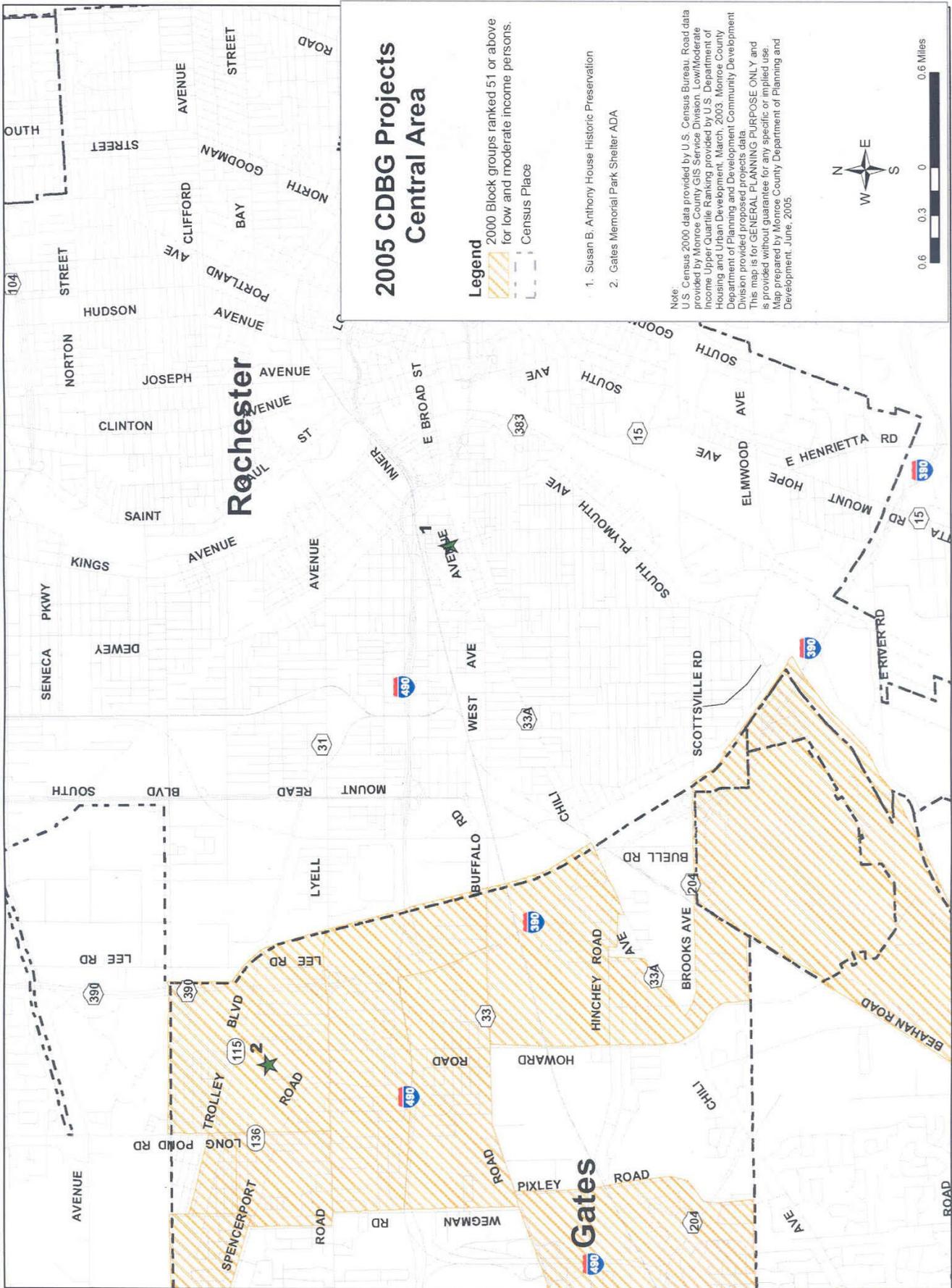
Response: Thank you for describing the benefits of the CDBG program in your community. Although funds are limited, Monroe County remains committed to serving the priority needs of low and moderate-income suburban residents and assisting municipalities in this endeavor.

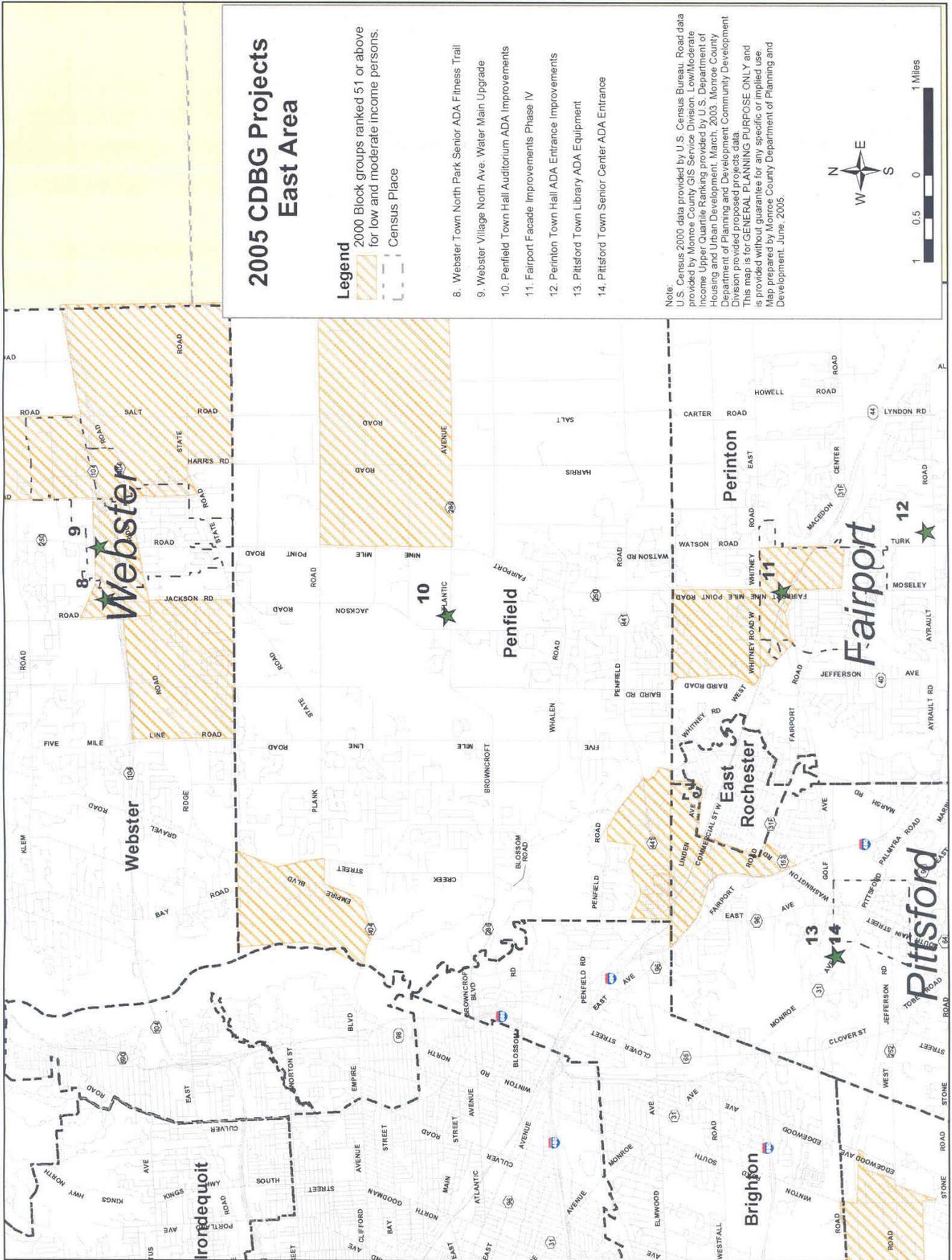
FUNDING BY OBJECTIVE AND NEED	ASSISTANCE	PROGRAM
1. Develop affordable rental and homeownership opportunities for all low to moderate-income residents, without discrimination		
Home Ownership Program	\$80,000	CDBG
First-Time Homebuyer Program (direct subsidy)	Prior years' funds	HOME
First-Time Homebuyer Program (direct subsidy)	\$51,090	ADDI
Affordable Rental Housing Development	\$254,565	HOME
Affordable Rental Housing Development	\$796,949 Prior years' funds	HOME
CHDO Rental Projects	\$183,713	HOME
New Construction First-Time Homebuyer Program (direct subsidy)	\$250,000	HOME
Homeless Continuum of Care & Subcommittees	Technical Assistance	
2. Repair and conserve existing housing stock		
Home Improvement Program	\$340,000	CDBG
Home Improvement Program	\$450,000	HOME
Lead-Based Paint Testing for Home Improvement Program	Prior years' funds	CDBG
3. Improve access to and quality of public facilities		
Monroe County Parks ADA Playground Equipment	\$50,000	CDBG
Gates Memorial Park Shelter ADA	\$35,000	CDBG
Hamlin Recreation Shelter and ADA Restrooms	\$35,000	CDBG
Ogden Community Center ADA Ramp	\$18,000	CDBG
Parma Town Hall Park Lot Improvements	\$19,800	CDBG
Penfield Town Hall Auditorium ADA	\$35,000	CDBG
Perinton Town Hall ADA Entrance	\$18,000	CDBG
Pittsford Senior Center ADA Entrance	\$6,000	CDBG
Pittsford Library ADA Equipment	\$30,000	CDBG
Riga ADA Recreation Walkways	\$22,800	CDBG
Rush Town Hall ADA Entrance	\$7,500	CDBG
Sweden Town Park ADA Walkway & Parking	\$30,000	CDBG
Webster Town Park Senior ADA Fitness Trail	\$30,000	CDBG
Wheatland Municipal Building ADA Improvements	\$22,500	CDBG
Honeoye Falls Fire Department Community Room ADA	\$22,500	CDBG
Scottsville Municipal Building ADA Improvements	\$27,000	CDBG
4. Provide essential utility infrastructure in lower income areas		
Henrietta Sanitary Sewer Rehabilitation	\$35,000	CDBG
Brockport Storm Sewer Replacement Phase II	\$35,000	CDBG
Webster Village Water Main Upgrade	\$30,000	CDBG
5. Provide job training and economic development opportunities for low to moderate-income persons and persons with special needs		
Revolving ED Grant and Loan Fund	\$415,000	CDBG
Section 108 Loan Guarantee Authority		CDBG
Section 3 Business Start-Up Resource Program	\$12,500	CDBG
6. Provide essential public services, particularly those that promote homeownership, fair housing and housing stability		
Home Ownership Program (Providence Housing)	\$80,000	CDBG
Safety and Security for Seniors (Lifespan)	\$50,000	CDBG

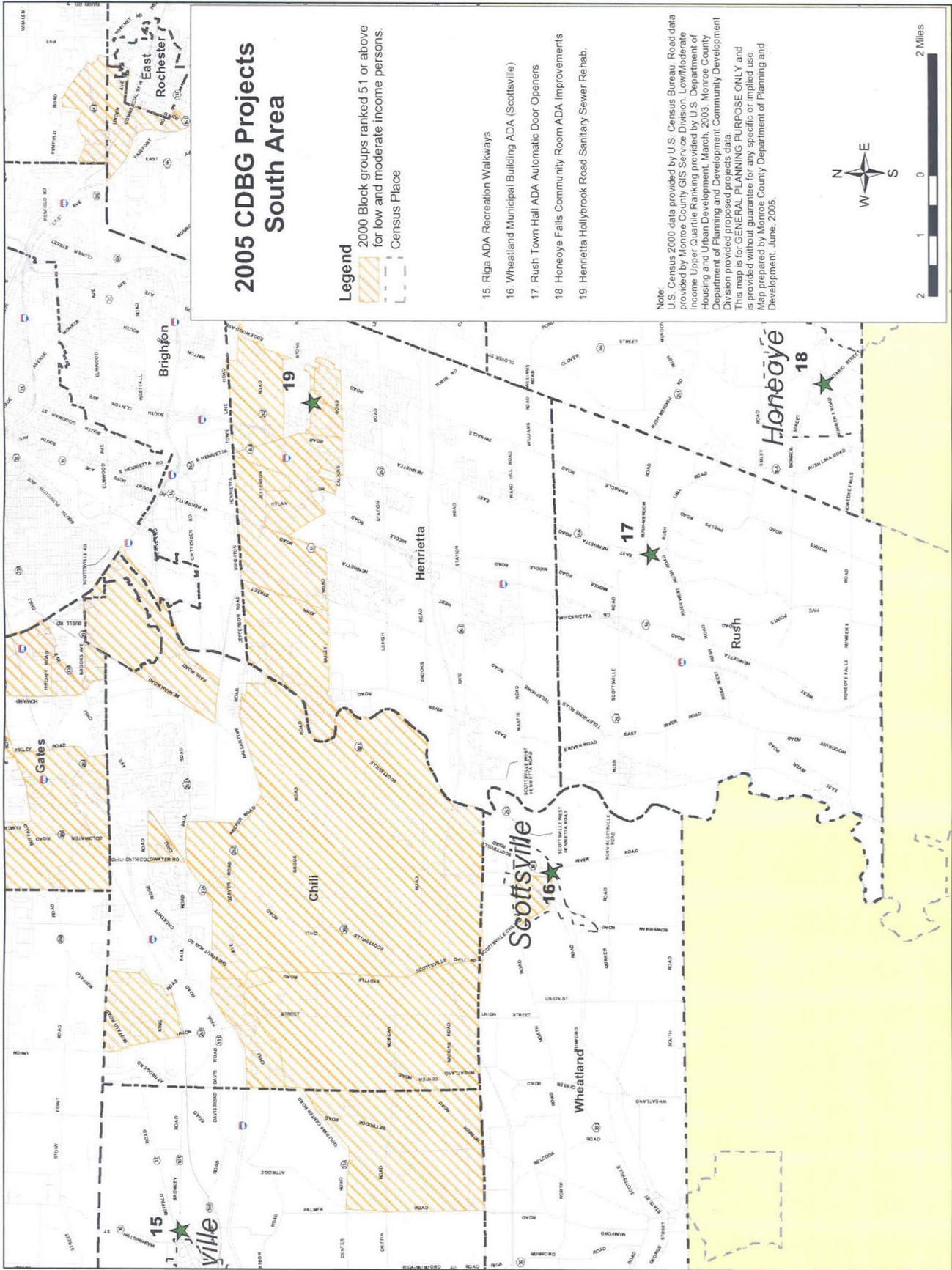
FUNDING BY OBJECTIVE AND NEED	ASSISTANCE	PROGRAM
Fair Housing Education & Outreach (The Housing Council)	\$65,550	CDBG
Landlord/Tenant Counseling & Housing Hotline Services (The Housing Council)	\$55,575	CDBG
Foreclosure Prevention & Predatory Lending Counseling (The Housing Council)	\$43,225	CDBG
Community Choice Advisory Committee	Technical Assistance	
7. Revitalize deteriorated neighborhoods		
Fairport Façade Program Phase IV	\$30,000	CDBG
Susan B. Anthony House Historic Preservation	\$35,000	CDBG

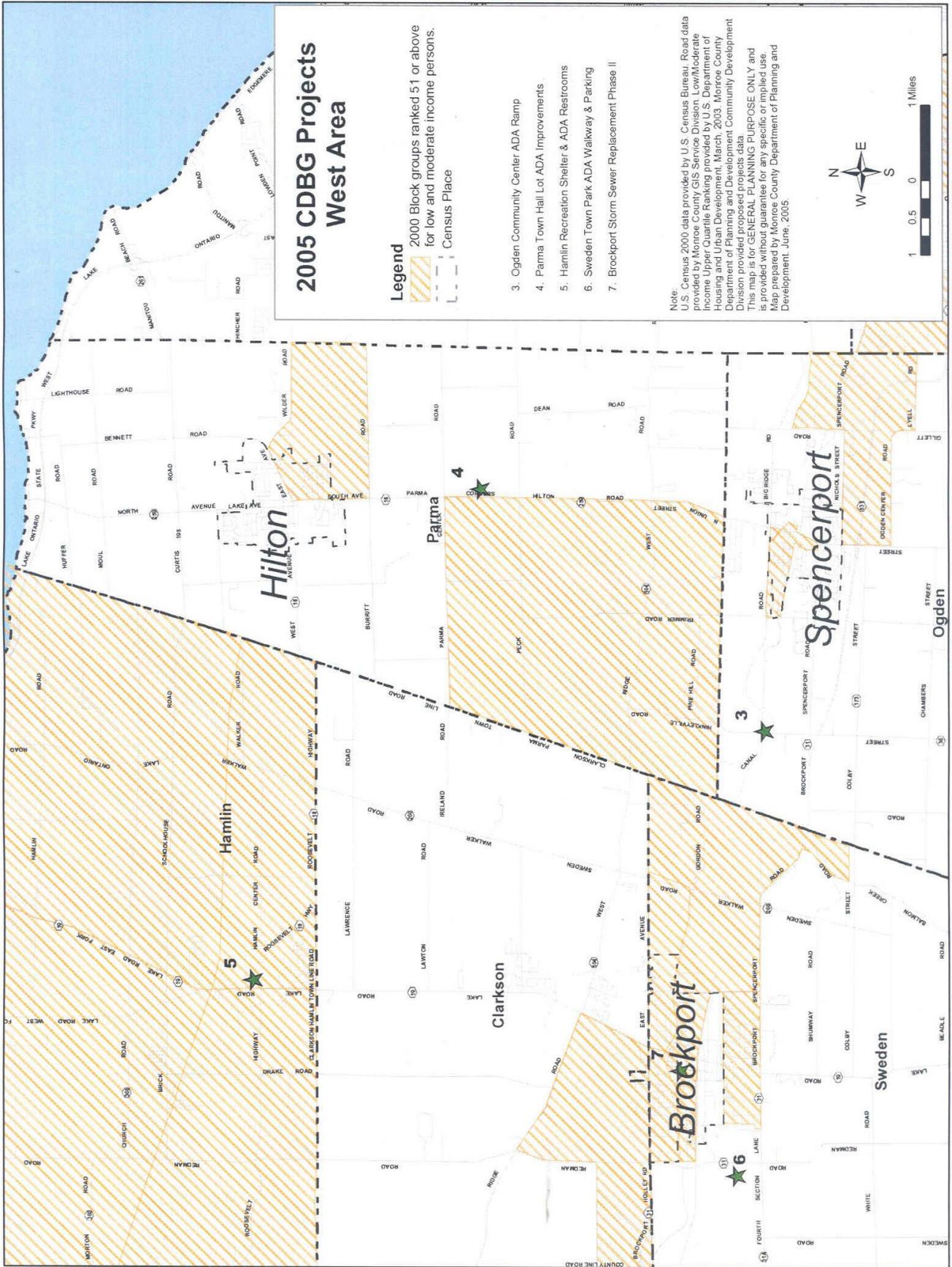
Project Name	Applicant	CDBG	CDBG/HOME Admin	HOME	ADDI	Reprogrammed Funds	Program Income	Total
Memorial Park ADA Improvements	Gates	\$35,000						\$35,000
Recreation Shelter ADA Restrooms	Hamlin	\$35,000						\$35,000
Hollybrook Road Sanitary Sewer Project	Henrietta	\$35,000						\$35,000
Community Center ADA Ramp	Ogden	\$18,000						\$18,000
Town Hall Park Lot ADA Improvements	Parma	\$19,800						\$19,800
Town Hall Auditorium ADA Improvements	Penfield	\$35,000						\$35,000
Town Hall ADA Entrance Improvements	Perinton	\$18,000						\$18,000
Senior Center ADA Entrance & Equipment	Pittsford	\$6,000						\$6,000
Library ADA Equipment	Pittsford					\$30,000		\$30,000
ADA Recreation Walkways	Riga	\$17,018				\$5,780		\$22,798
Town Hall Entrance ADA Improvements	Rush	\$7,500						\$7,500
Town Park ADA Walkway & Parking Project	Sweden	\$30,000						\$30,000
Park Senior ADA Fitness Trail	Webster					\$30,000		\$30,000
Municipal Building ADA Improvements	Wheatland	\$2,500				\$20,000		\$22,500
Storm Sewer Replacement Phase II	Brockport	\$35,000						\$35,000
Façade Improvement Program Phase IV	Fairport	\$30,000						\$30,000
Community Room ADA Improvements	Honeoye Falls	\$22,500						\$22,500
Municipal Building ADA Improvements	Scottsville	\$27,000						\$27,000
North Avenue Water Main Upgrade	Webster (Village)	\$30,000						\$30,000
ADA Playground Equipment	County Parks					\$50,000		\$50,000
Historic Preservation Project	Susan B. Anthony House	\$3,130				\$31,870		\$35,000

Project Name	Applicant	CDBG	CDBG/HOME Admin	HOME	ADDI	Reprogrammed Funds	Program Income	Total
Home Ownership Program	Providence Housing	\$80,000						\$80,000
Landlord/Tenant Counseling, Housing Hotline	Housing Council	\$55,575						\$55,575
Foreclosure Prevention & Predatory Lending Counseling	Housing Council	\$43,225						\$43,225
Fair Housing Education & Outreach	Housing Council	\$65,550						\$65,550
Safety & Security for Seniors Program	Lifespan	\$50,000						\$50,000
Home Improvement Program	Monroe County	\$340,000		\$450,000				\$790,000
Economic Development Revolving Grant & Loan Fund	Monroe County	\$415,000						\$415,000
Business Development Program	Rochester Business Alliance	\$12,500						\$12,500
CDBG General Administration	Monroe County		\$185,000				\$260,000	\$445,000
CDBG General Program Delivery	Monroe County	\$50,000						\$50,000
First Time Homebuyer New Construction Program	Monroe County			\$250,000				\$250,000
First Time Homebuyer Program	Monroe County				\$51,090			\$51,090
Rental Housing Production	Various Developments			\$254,565				\$254,565
Rental Housing Production	Various CHDO's			\$183,713				\$183,713
HOME General Administration	Monroe County		\$86,475				\$40,000	\$126,475
Totals		\$1,518,298	\$271,475	\$1,138,278	\$51,090	\$167,650	\$300,000	\$3,446,791

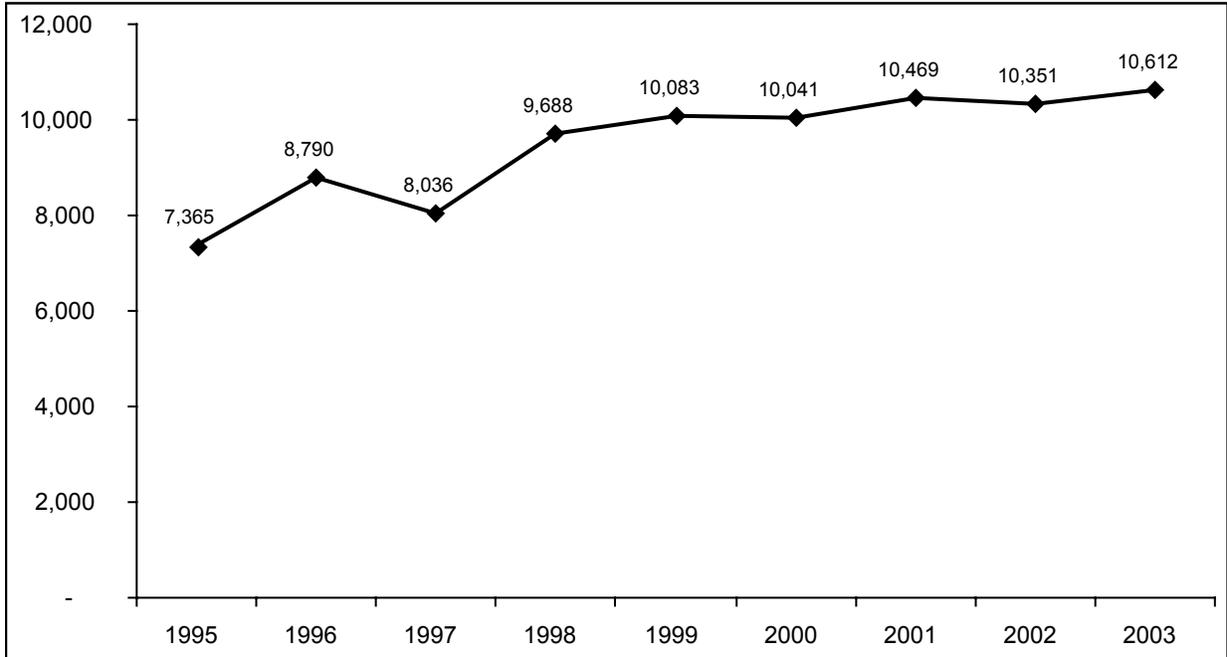






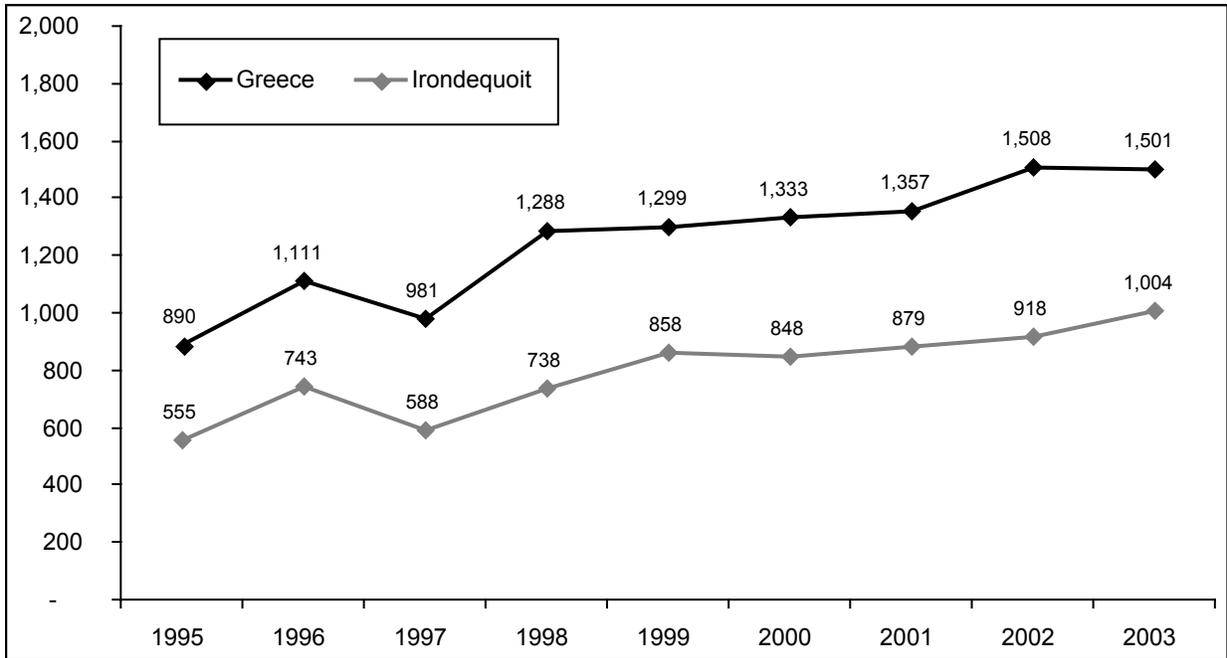


**Owner Occupied Home Purchase Mortgage Originations
Between 1995 and 2003 in Monroe County**



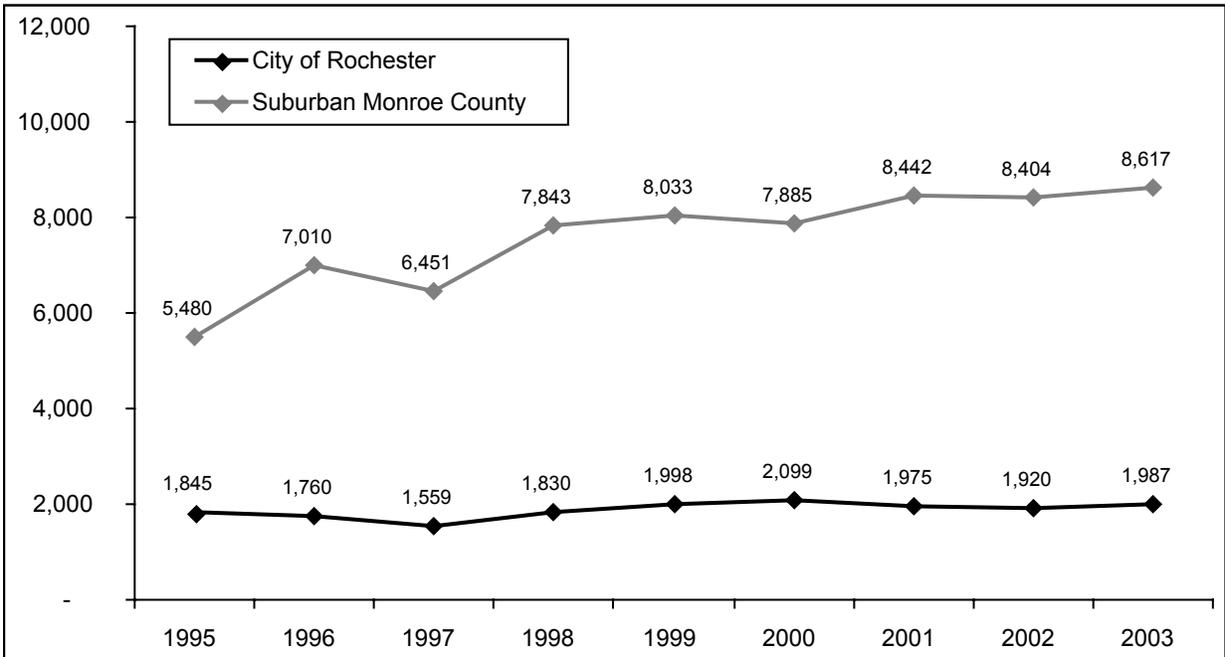
SOURCE: Analysis of HMDA Loan Application Registry data by The Housing Council.

**Owner Occupied Home Purchase Mortgage Originations Between 1995 and 2003
in Greece and Irondequoit**



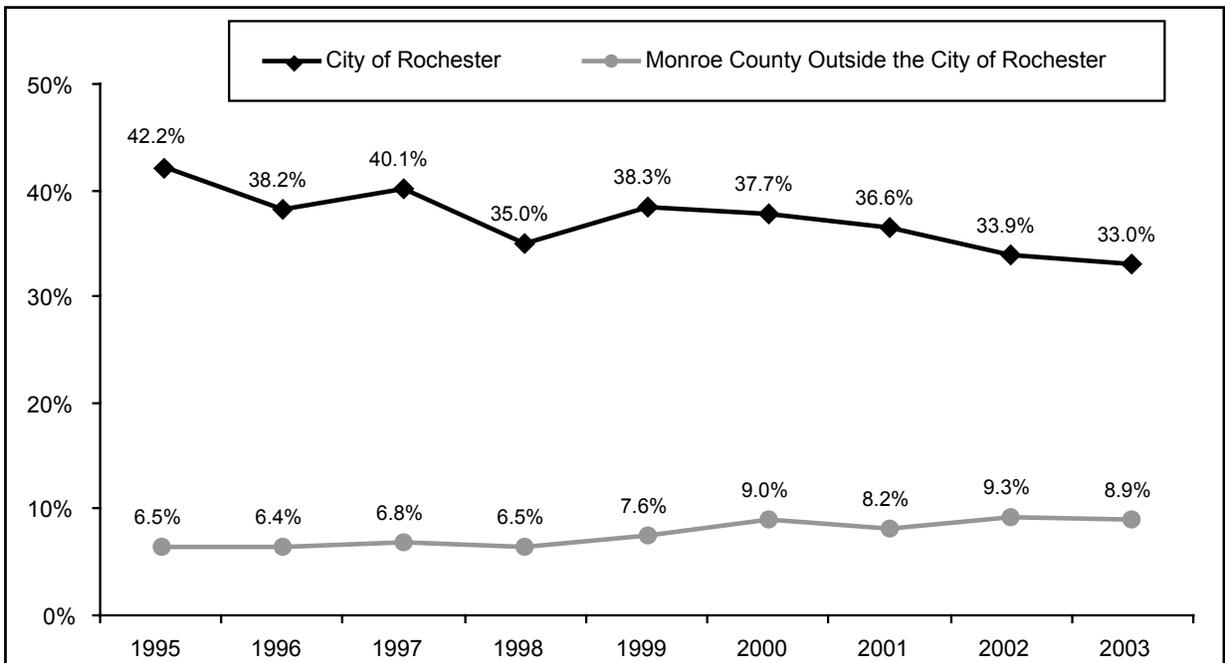
SOURCE: Analysis of HMDA Loan Application Registry data by The Housing Council.

Owner Occupied Home Purchase Mortgage Originations Between 1995 and 2003 in the City of Rochester and Monroe County Outside the City of Rochester



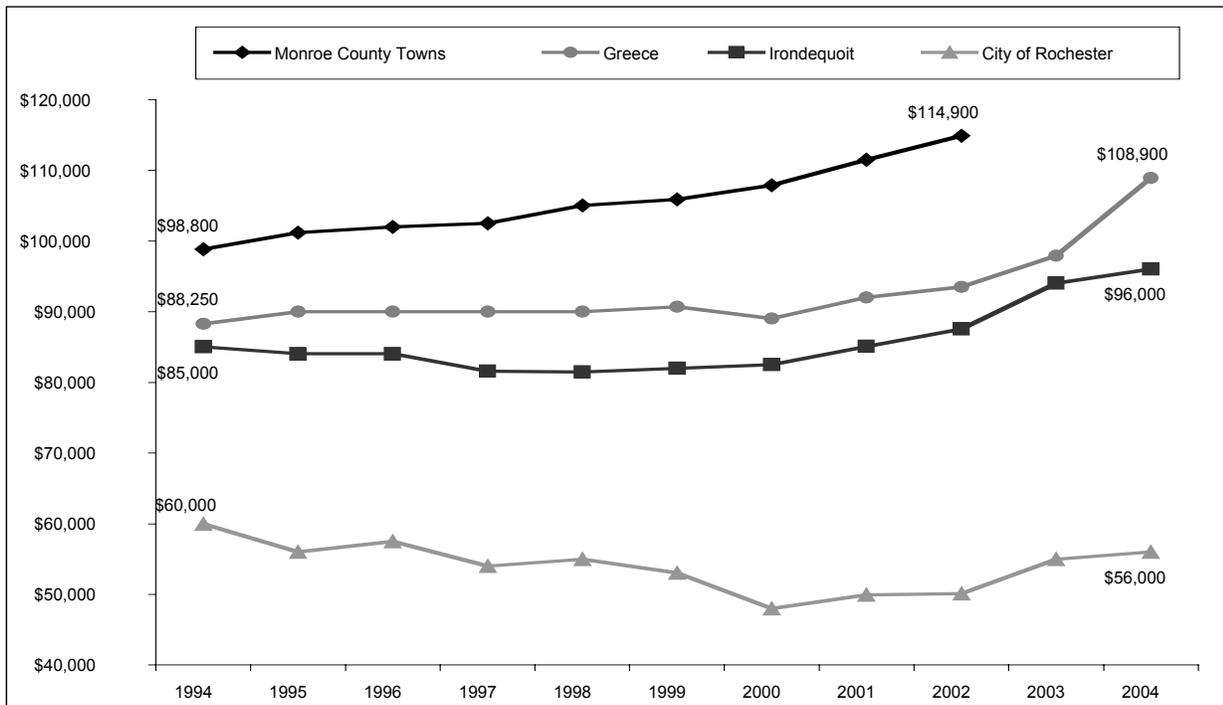
SOURCE: Analysis of HMDA Loan Application Registry data by The Housing Council.

Minority Market Share of Owner Occupied Home Purchase Mortgage Originations in the City of Rochester and Monroe County Outside the City of Rochester, 1995-2003



SOURCE: Analysis of HMDA Loan Application Registry data by The Housing Council.

Median Sales Prices for Existing Single Family Homes, 1994-2004



SOURCE: Greater Rochester Association of Realtors, Inc.

Median Sales Prices for Existing Single Family Homes, 1994-2004

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
Monroe County Towns	\$ 98,800	\$ 101,150	\$ 102,000	\$ 102,500	\$ 105,000	\$ 105,900	\$ 107,900	\$ 111,500	\$ 114,900		
Brighton	\$ 115,000	\$ 112,000	\$ 113,000	\$ 111,000	\$ 114,000	\$ 115,000	\$ 127,000	\$ 126,000	\$ 137,200	\$ 142,000	\$ 156,000
Chili	\$ 90,000	\$ 90,000	\$ 93,775	\$ 92,000	\$ 97,475	\$ 95,500	\$ 97,700	\$ 101,000	\$ 103,900	\$ 111,950	\$ 120,000
Clarkson*	\$ 83,450	\$ 91,500	\$ 99,400	\$ 89,450	\$ 99,500	\$ 97,000	\$ 96,500	\$ 105,500	\$ 112,900	\$ 118,950	\$ 121,500
East Rochester*	\$ 73,000	\$ 72,100	\$ 74,900	\$ 74,750	\$ 66,500	\$ 73,263	\$ 69,900	\$ 76,000	\$ 78,000	\$ 81,250	\$ 79,000
Gates	\$ 82,500	\$ 84,000	\$ 83,000	\$ 83,500	\$ 84,000	\$ 84,000	\$ 84,900	\$ 85,950	\$ 87,500	\$ 90,000	\$ 95,000
Greece	\$ 88,250	\$ 90,000	\$ 90,000	\$ 90,000	\$ 90,000	\$ 90,700	\$ 89,000	\$ 92,000	\$ 93,500	\$ 97,900	\$ 108,900
Hamlin*	\$ 77,500	\$ 77,000	\$ 80,500	\$ 79,900	\$ 81,500	\$ 82,500	\$ 84,500	\$ 83,900	\$ 86,330	\$ 86,950	\$ 85,500
Henrietta	\$ 89,000	\$ 91,125	\$ 90,450	\$ 89,000	\$ 91,900	\$ 92,500	\$ 94,700	\$ 96,750	\$ 101,000	\$ 109,900	\$ 113,900
Irondequoit	\$ 85,000	\$ 84,000	\$ 84,000	\$ 81,600	\$ 81,500	\$ 82,000	\$ 82,500	\$ 85,050	\$ 87,500	\$ 94,000	\$ 96,000
Mendon*	\$ 170,000	\$ 160,000	\$ 183,500	\$ 178,000	\$ 195,000	\$ 193,500	\$ 209,500	\$ 215,000	\$ 229,900	\$ 217,000	\$ 298,000
Ogden*	\$ 102,250	\$ 95,000	\$ 96,500	\$ 104,000	\$ 108,500	\$ 105,250	\$ 111,250	\$ 118,500	\$ 118,000	\$ 121,200	\$ 142,350
Parma*	\$ 88,000	\$ 89,900	\$ 88,950	\$ 89,000	\$ 90,000	\$ 91,000	\$ 98,800	\$ 104,000	\$ 103,000	\$ 118,000	\$ 138,000
Penfield	\$ 123,500	\$ 123,750	\$ 126,250	\$ 127,000	\$ 135,000	\$ 132,500	\$ 145,000	\$ 148,000	\$ 163,875	\$ 158,000	\$ 176,000
Perinton	\$ 133,000	\$ 138,000	\$ 135,000	\$ 141,500	\$ 139,000	\$ 140,500	\$ 142,900	\$ 151,900	\$ 162,000	\$ 165,000	\$ 181,000
Pittsford	\$ 174,500	\$ 180,000	\$ 180,000	\$ 178,000	\$ 177,000	\$ 189,950	\$ 213,500	\$ 217,500	\$ 214,950	\$ 228,000	\$ 253,000
Riga*	\$ 94,500	\$ 116,450	\$ 109,500	\$ 106,000	\$ 112,500	\$ 96,700	\$ 111,900	\$ 105,000	\$ 110,000	\$ 110,500	\$ 110,000
Rush*	\$ 121,000	\$ 123,500	\$ 140,000	\$ 134,000	\$ 131,500	\$ 130,800	\$ 138,600	\$ 157,450	\$ 128,000	\$ 157,012	\$ 138,500
Sweden*	\$ 84,000	\$ 90,000	\$ 84,250	\$ 83,000	\$ 89,900	\$ 93,000	\$ 89,900	\$ 96,750	\$ 97,500	\$ 103,250	\$ 125,000
Webster	\$ 112,000	\$ 113,250	\$ 115,000	\$ 115,000	\$ 115,000	\$ 118,000	\$ 129,900	\$ 128,450	\$ 139,900	\$ 150,000	\$ 169,000
Wheatland*	\$ 87,500	\$ 87,900	\$ 96,000	\$ 86,000	\$ 86,500	\$ 87,000	\$ 89,750	\$ 109,000	\$ 94,000	\$ 118,900	\$ 109,000
City of Rochester	\$ 60,000	\$ 56,000	\$ 57,500	\$ 54,000	\$ 55,000	\$ 53,000	\$ 48,000	\$ 49,900	\$ 50,101	\$ 55,000	\$ 56,000
United States	\$ 107,200	\$ 110,500	\$ 115,800	\$ 121,800	\$ 128,400	\$ 133,300	\$ 139,000	\$ 147,800	\$ 158,100	\$ 170,000	\$ 184,100

SOURCE: Greater Rochester Association of Realtors, Inc.

Median Sales Prices for Existing Single Family Homes, 1994-2004

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
Rochester MSA	\$ 85,600	\$ 85,000	\$ 86,200	\$ 86,800	\$ 89,000	\$ 87,700	\$ 87,600	\$ 92,200	\$ 93,800	\$ 99,400	\$ 106,500
Monroe County	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	\$ 113,900
Monroe County Towns	\$ 98,800	\$ 101,150	\$ 102,000	\$ 102,500	\$ 105,000	\$ 105,900	\$ 107,900	\$ 111,500	\$ 114,900	N/A	\$ 128,000
City of Rochester	\$ 60,000	\$ 56,000	\$ 57,500	\$ 54,000	\$ 55,000	\$ 53,000	\$ 48,000	\$ 49,900	\$ 50,101	\$ 55,000	\$ 56,000
Genesee County	\$ 69,950	\$ 70,000	\$ 72,900	\$ 72,000	\$ 76,000	\$ 76,000	\$ 72,000	\$ 76,000	\$ 75,500	\$ 83,100	\$ 85,000
Livingston County	\$ 76,500	\$ 77,750	\$ 77,900	\$ 82,500	\$ 77,500	\$ 85,000	\$ 79,700	\$ 84,900	\$ 90,500	\$ 95,200	\$ 105,000
Ontario County	\$ 83,750	\$ 86,000	\$ 90,000	\$ 89,900	\$ 87,000	\$ 90,000	\$ 92,000	\$ 97,950	\$ 109,000	\$ 112,900	\$ 116,500
Orleans County	\$ 59,550	\$ 59,300	\$ 63,000	\$ 63,000	\$ 68,500	\$ 64,363	\$ 64,500	\$ 65,400	\$ 63,700	\$ 72,950	\$ 72,500
Wayne County	\$ 79,000	\$ 83,000	\$ 81,750	\$ 80,000	\$ 80,000	\$ 86,000	\$ 84,000	\$ 87,500	\$ 89,900	\$ 95,500	\$ 98,500
Wyoming County	\$ 57,000	\$ 60,000	\$ 61,060	\$ 63,200	\$ 65,000	\$ 62,000	\$ 65,000	\$ 74,000	\$ 70,000	\$ 74,950	\$ 69,000

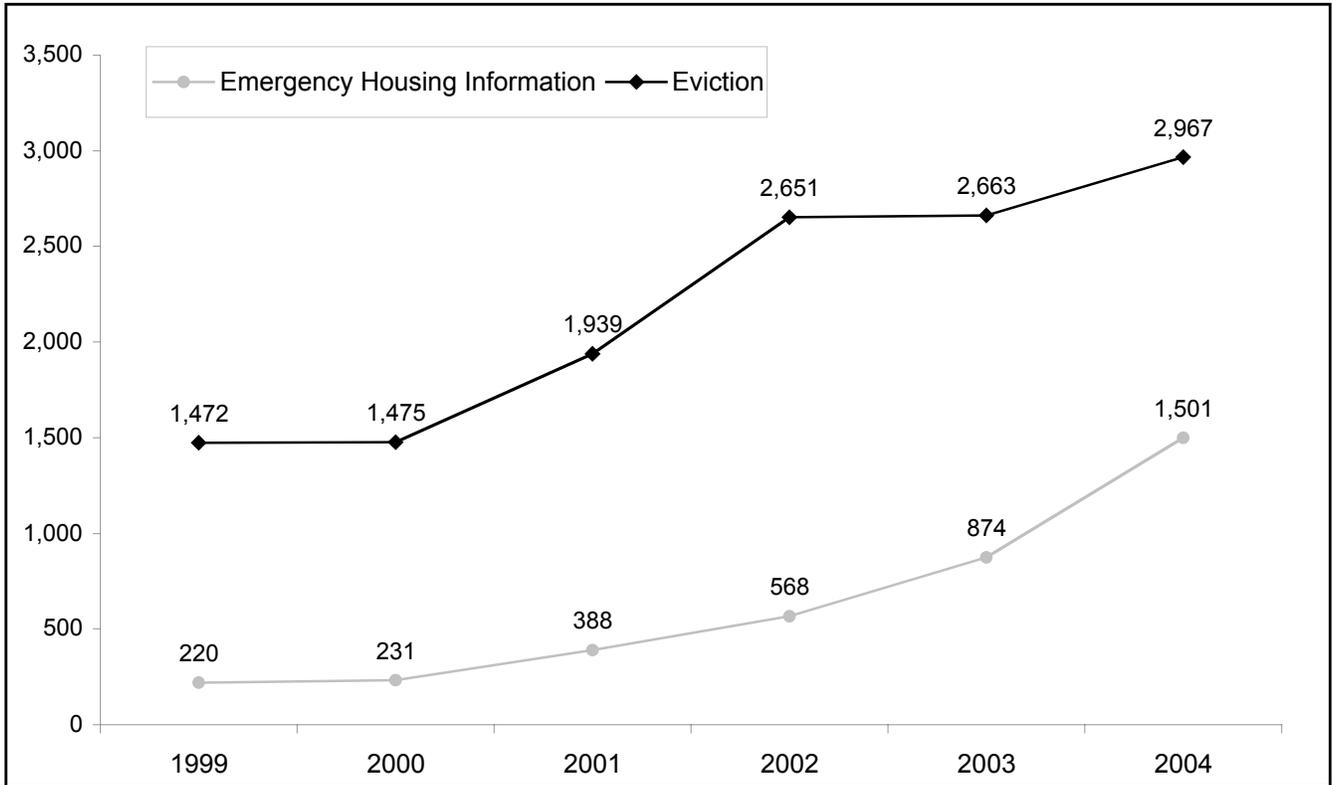
SOURCE: Greater Rochester Association of Realtors, Inc.

Number of Existing Single Family Homes Sold, 1994-2004

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
Rochester MSA	9,218	8,763	9,183	8,979	9,854	10,400	10,369	10,441	10,846	9,571	
Monroe County	6,604	6,313	6,593	6,419	7,131	7,617	7,502	7,556	7,740	6,925	8,522
Monroe County Towns	5,055	4,891	5,204	5,155	5,762	6,029	5,684	5,897	5,909	5,282	6,636
City of Rochester	1,549	1,422	1,389	1,264	1,369	1,588	1,818	1,659	1,831	1,643	1,886
Genesee County	411	413	363	360	370	411	398	337	365	335	402
Livingston County	467	416	437	417	460	460	452	491	560	484	584
Ontario County	722	666	817	825	863	863	917	942	936	812	1,053
Orleans County	335	276	245	268	263	282	317	298	316	276	366
Wayne County	679	679	728	690	767	767	783	769	929	739	985
Wyoming County	148	138	120	116	127	123	135	139	108	106	134
Total 7 County Area	9,366	8,901	9,303	9,095	9,981	10,523	10,504	10,580	11,030	9,677	12,041

SOURCE: Greater Rochester Association of Realtors, Inc.

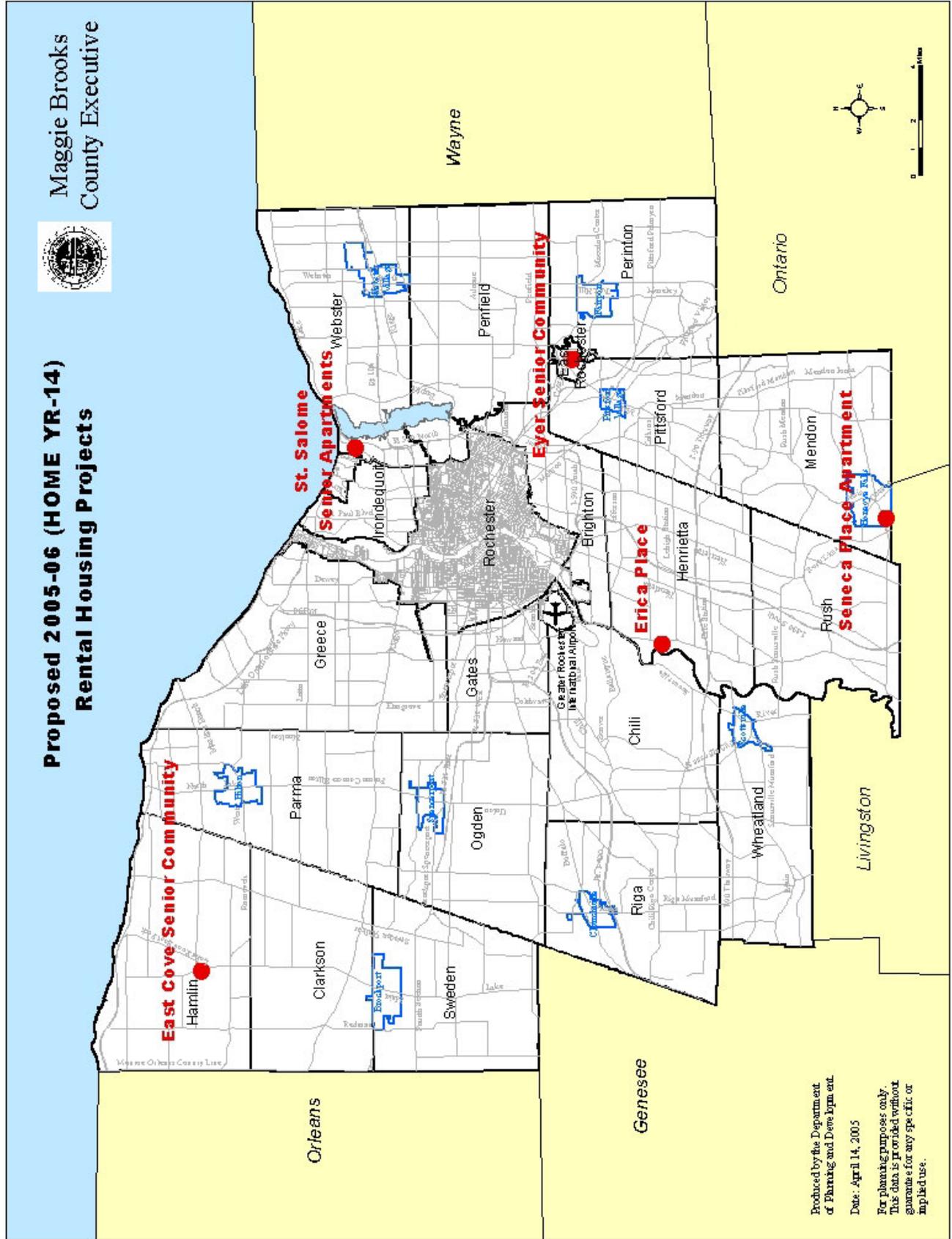
Number of Housing Council Hotline Calls Regarding Eviction and Emergency Housing Information from 1999 through 2004



SOURCE: The Housing Council

**Proposed 2005-06 (HOME YR-14)
Rental Housing Projects**

Maggie Brooks
County Executive



Produced by the Department
of Planning and Development
Date: April 14, 2005
For planning purpose only.
This data is provided without
guarantees for any specific or
implied use.

Mental Health Block Grant	Support for Single Point of Access for mental health housing and case management services; homeless individuals access these mental health services through this mechanism	Monroe County SPOA	\$ 478,310
	Crisis Outreach/Mental Health Mobile Crisis Team: addresses mental health crises at community based sites, including homeless shelters	Strong Mobile Crisis Team	\$ 600,000
	Mental health clinic treatment and evaluation at community mental health centers, including evaluation, assessment for homeless individuals	Rochester Mental Health Center and Unity Health Systems	\$ 62,000
Substance Abuse Block Grant	Transitional housing for individuals who are chemically dependent	East House, PRCD, MainQuest	\$1,806,924
	Intensive residential chemical dependency treatment for homeless women, including women with children	Liberty Manor, Freedom House	\$ 606,238
	Supportive living and outpatient treatment for women with chemical dependency, including women with children	YWCA – Steppingstone	\$ 442,122
	Detoxification and inpatient rehabilitation beds for chronic homeless individuals with chemical dependency	MainQuest	\$ 345,866
Social Services Block Grant	Quality housing inspection of units to be occupied by the homeless	Pro Active Property Management	2,305 units
	After hours response/support	MCDHHS Housing Unit	\$ 100,000
	Housing Unit Staff	MCDHHS Housing Unit	\$ 1,113,114
	Emergency Assistance Team Staff	MCDHHS Housing Unit	\$ 714,119
	Home Economics (Furniture vouchers)	MCDHHS Housing Unit	\$ 900,940
	Per diem emergency housing funding	MCDHHS Housing Unit	\$ 4,944,494
	Per diem transitional housing funding	MCDHHS Housing Unit	\$ 4,079,061
		MCDHHS Housing Unit	
Other Federal Sources	HHS Runaway/Homeless Youth –Basic Center Grants	Genesis House	\$ 100,000
	HHS Runaway/Homeless Youth –Basic Center Grants	Center for Youth Services	\$ 200,000
	HHS Runaway/Homeless Youth – Transitional Living Program	Center for Youth Services	\$ 400,000
	HHS Runaway/Homeless Youth – Street Outreach Program	Center for Youth Services	\$ 200,000

	US Dept. of Labor – Homeless Veterans Reintegration Program and Discretionary Funds Veterans Administration	Salvation Army – Project Redirect Booth Haven	\$ 480,822 \$ 25,000
State-Funded Programs	NYS SHFYA – supportive housing for families and young adults NYS HIP – Homeless Intervention Program NYS SHIP – Supplemental Homeless Intervention Program NYS Emergency Shelter Grant	YWCA – transitional housing program Salvation Army – retention in permanent housing Salvation Army – retention in permanent housing Hope House – operating expenses	\$ 33,380 \$ 38,000 \$ 174,560 \$ 178,000
City/County Funded Programs City of Rochester	Emergency Shelter Grant Funds for Operating and Essential Services	Alternatives for Battered Women CFC -Women’s Place CFC-Francis Center Hunter House Dimitri House RAIHN VOA Center for Youth	\$ 48,000 \$ 60,000 \$ 36,000 \$ 12,000 \$ 36,000 \$ 6,000 \$ 16,000 \$ 6,000
Private United Way	Emergency Housing Services Emergency Assistance	Genesis House Booth Haven Hillside – AIY YWCA – SRO Emergency Assistance Providers Collaboration	\$ 246,130 \$ 159,375 \$ 152,500 \$ 87,920 \$3,690,175
Foundations (Identify by name)	Rochester Community Foundation Wilson Foundation Buffalo Bills Youth Foundation	Sojourner House/YWCA – WAS Program – after care services Genesis House – Operational Support Center for Youth Services – general operating of emergency shelter	\$ 9,000 \$ 10,000 \$ 7,500

Refer to the CoC Project Leveraging Chart below regarding available leveraging funds in the CoC System for homeless persons:

**2004 Exhibit 1: Continuum of Care
Supplemental Resources Project Leveraging Chart**

Continuum of Care Project Leveraging				
Project Priority Number	Name of Project	Type of Contribution	Source or Provider	*Value of Written Commitment
1	Rochester Housing Authority/MCDHHS/Shelter Plus 9 (\$2,084,610)	Outreach	MCDHHS	36,000
		Support Services	MCDHHS	90,090
		Case Management Services	MCDHHS	566,100
		Case Management Services	MCDHHS	1,020,900
		Case Management Services	MCDHHS	371,520
2	Spiritus Christi – Jennifer House (\$789,500)	Cash	Fundraising and General Contributions	133,500
		Per Diem Housing Contract	MCDHHS	243,000
		Volunteer Hours	5000 hours@\$10.00/hour	150,000
		Cash	United Way Donor Designations	30,000
		Cash	City of Rochester – Emergency Shelter Grant	30,000
		Value of Building, 934 Culver Road	Renovation funds provided by NYS Homeless Housing Assistance Program	128,000
		Cash	Foundation Grants	75,000
3	Rochester Monroe County Youth Bureau – Homeless Youth Project (\$3,300,000)	Cash	NYS Office of Children & Family Services: Runaway/Homeless Youth funds	2,100,000
		Cash	Hillside Children’s Center – Hillside Children’s Foundation and United Way	1,200,000
4	Sojourner House – Permanent Housing (\$734,574)	Cash	Sojourner House	734,574
5	Salvation Army – Safe Haven/Drop-In Center (\$3,975,000)	Primary Health Care Services	Unity Health	60,000
		Mental Health Services/assistance	Unity Health	2,550,000

		with accessing SSI/SSD entitlements		
		Primary Health Care Services	Veterans Administration	840,000
		Outreach/Case Management Staff	Veterans Administration	225,000
		Inkind - Value of Physical Facility of project	Salvation Army	300,000
6	Sojourner House/YWCA/WAS Project (\$1,181,300)	Homelessness Prevention Services	YWCA – NYS HIP grant	248,250
		Case Management/Support Services	YWCA – NYS SHFYA Grant	248,100
		Case Management/Support Services	YWCA – NYS SHIP Grant	125,550
		After Care Services	YWCA/Sojourner House – United Way	225,000
		Cash	Tenant Rent – Sojourner Development Corporation	202,835
		Cash	Management Fees– Sojourner Development Corporation	35,700
		Value of units at Nancy Watson Dean Place	Sojourner Development Corporation	95,865
7	Veterans Outreach Center – Richards House (\$1,487,763)	Cash	Per Diem Housing Contract – MCDHHS	740,340
		Cash	United States Department of Veterans Affairs – Grant Per Diem	501,675
		Cash	General Contributions/Fundraising Events	167,748
		Cash	City of Rochester – Emergency Shelter Grant	51,000
		Cash	Rental Income	27,000
8	Sojourner House – Transitional Housing (\$2,313,804)	Cash	Per Diem Housing Contract – MCDHHS	937,599
		Cash	United Way Donor Designations	110,604
		Cash	City of Rochester – Emergency Shelter Grant	69,000
		Cash	Tenant Rent	6,309
		Cash	General Contributions/Fundraising/Grants	1,190,292
9	Rochester Housing Authority/VIA Health Behavioral Health Network – Shelter Plus Care (\$1,720,075)	Case/Care Management Services	ViaHealth Behavioral Health Network	475,875
		Value of Office Space for Case/Care Management staff	ViaHealth Behavioral Health Network	6,400
		Behavioral Health Services	ViaHealth Behavioral Health Network	540,000
		Medications	ViaHealth Behavioral Health	300,000

			Network/Medicaid	
		Cash	Tenant Rent	397,800
10	Catholic Family Center – Sanctuary House (\$421,021)	Cash	Per Diem Housing Contract – MCDHHS	401,216
		Cash	Per Diem Agreement - Salvation Army	2,400
		Cash	City of Rochester – Emergency Shelter Grant	10,000
		Cash	FEMA grant – United Way	2,948
		Food	Foodlink	4,457
11	Rochester Housing Authority/Salvation Army – Shelter Plus Care 4 (\$1,048,089)	Housing Allowance (Tenant Rent), Food Stamps and Medicaid	MCDHHS	1,048,089
12	NYS Dept. of Mental Health/Winship – Shelter Plus Care (\$217,570)	Recreation Services	DePaul Community Services	10,000
		Clinical Services	DePaul Community Services	102,070
		Risk Management	DePaul Community Services	2,000
		Psychiatric Assignment Officer	DePaul Community Services	2,000
		Furnishings	DePaul Community Services	6,000
		MICA Services	DePaul Community Services	60,000
		Case Management Services	DePaul Community Services	35,500
13	NYS Dept. of Mental Health/DePaul Community Services – Shelter Plus Care (\$157,570)	Recreation Services		10,000
		Clinical Services	DePaul Community Services	102,070
		Risk Management	DePaul Community Services	2,000
		Psychiatric Assignment Officer	DePaul Community Services	2,000
		Furnishings	DePaul Community Services	35,500
		Case Management Services	DePaul Community Services	6,000
14	Rochester Housing Authority/MCDHHS – Shelter Plus Care 1 (\$425,724)	Outreach	MCDHHS	31,200
		Support Services	MCDHHS	18,018
		Case Management	MCDHHS	376,506
15	Rochester Housing Authority/Salvation Army – Shelter Plus Care 3 (\$1,017,924)	Services and Material Assistance to clients	MCDHHS	1,017,924
16	Rochester Housing Authority/MCDHHS – Shelter Plus Care 5 (\$299,772)	Outreach	MCDHHS	31,200
		Support Services	MCDHHS	18,018
		Case Management	MCDHHS	250,554

17	Rochester Housing Authority/MCDHHS – Shelter Plus Care 2 (\$483,336)	Outreach	MCDHHS	31,200
		Support Services	MCDHHS	18,018
		Case Management	MCDHHS	434,118
18	NYS Office of Alcoholism and Substance Abuse/Providence Housing Development Corporation – Shelter Plus Care 1 (\$649,435)	Case Management	Providence	21,000
		Administration	Providence	9,000
		Case Management	ViaHealth	73,035
		Shelter Allowance	MCDHHS	84,624
		Food Stamps	MCDHHS	61,776
		Medicaid	MCDHHS	400,000
19	NYS Office of Alcoholism and Substance Abuse/Providence Housing Development Corporation – Shelter Plus Care 2 (\$643,400)	Case Management	Providence	21,000
		Administration	Providence	9,000
		Case Management	Catholic Charities Community Services	15,000
		Case Management	Catholic Family Services	36,000
		Credit Restoration	Providence	16,000
		Shelter Allowance	MCDHHS	84,624
		Food Stamps	MCDHHS	61,776
		Medicaid	MCDHHS	400,000
TOTAL				22,950,467

Other CoC 2004 Goals and Specific Action Steps to Address Homelessness.

Goal: Other Homelessness	Action Steps	Responsible Person/ Organization	Target Dates
<p>Goal 1: Maintain current capacity of shelter beds and homeless support services</p>	<p>Engage funders to discuss the need to maintain current level of funding of homeless programs</p> <p>Continue to identify potential new funding sources</p>	<p>Homeless Servcs. Network, CoC Team, agency execs</p> <p>CoC Team – email tree</p>	<p>Fall, 2004</p> <p>8/04 – 7/05</p>
<p>Goal 2: Increase affordable Permanent Housing options for homeless individuals and families.</p>	<p>Support development of affordable rental units for low -income households and the homeless by providing technical assistance and allocation of mainstream resources. (i.e. HOME,CDBG, NYS DHCR, HUD 811/202, FHLB)</p> <p>Encourage development of at least one new affordable rental project annually, working with local private and non-profit housing developers to obtain priority access for homeless persons.</p> <p>Begin operation of new Shelter Care Programs awarded in 2003 SuperNOFA</p> <p>Begin renovation at 79 North Clinton Avenue: 26 affordable housing units; 13 dedicated to homeless</p> <p>Encourage new applications for Shelter+Care beds for homeless special populations through SuperNOFA</p>	<p>Monroe Co. Planning & Development, CDA City of Rochester Community Development NYS DHCR FHLB of NY HUD</p> <p>CoC Team, HSN, Permanent Housing Sub-Committee</p> <p>RHA, Unity Health System – IMPACT Project, Uof R – Miles Project</p> <p>Catholic Family Center</p> <p>CoC Team, HSN, Permanent Housing Sub-Committee</p>	<p>8/04-7/05</p> <p>8/04-7/05</p> <p>September 2004</p> <p>3/06</p> <p>8/04-7/05</p>
<p>Goal 3: Continuously improve CoC planning to ensure process is ongoing, inclusive & able to identify priority gaps & needs & secure resources.</p>	<p>Continue to broaden CoC Team and HSN to include representatives from local banking industry, faith-based community & key businesses.</p>	<p>CoC Team; HSN</p>	<p>8/04-7/05</p>

	Continue to coordinate needs, assessment & planning activities with other community constituencies to incorporate CoC strategies into other community plans	Monroe County Planning & Com. Development, CDA, Office of Mental Health, Youth Bureau, MCDHHS, City of Rochester Community Development	8/04-7/05
Goal 4: Improve system to assess impact of CoC funded projects	Conduct annual monitoring visit of each HUD funded project Prepare annual report of the impact of all CoC projects Oversee continuous coordination & effective delivery of all existing & proposed CoC supportive services.	CoC Monitoring Team CoC Monitoring Team CoC Monitoring Team, HSN	9/04-5/05 7/05 8/04-7/05
Goal 5: Implement comprehensive, user-friendly HMIS to support service delivery within homeless provider system.	Implementation plan is in HMIS Narrative	Catholic Family Center/HMIS Committee/Homeless Srvcs. Network	October 2004 (system begin operations)

Exhibit 1: Continuum of Care Housing Activity Chart

Fundamental Components of CoC System – Housing Inventory Chart												
EMERGENCY SHELTER												
Provider Name	Facility Name	HMIS	Geo Code	Target Population 2004 Year Round Units/Beds				2004 All Beds				
				A	B	Family Units	Family Beds	Individual Beds	Year Round	Seasonal	Overflo w/ Voucher	
Alternatives for Battered Women	Same	P- 12/05	36544	M	DV	10	30	8		38		
Bethany House	Same	P- 12/05	36544	SF				6		6		
Catholic Family Center	Francis Center	P-12/04	36544	SM				26		26		5
Catholic Family Center	Women's Place	P-12/04	36544	M		11	30	5		35		
Center for Youth Services	Emergency Shelter	P-05/05	36544	YMF				6		6		
Dimitri House	Same	P- 12/05	36544	SM							7	
The Health Association	Mainquest	P- 12/05	36544	SM				10		10		
House of Mercy	Same	N	36544	SM				19		19		
Mercy Residential Services	Emergency Housing	P-12/04	36544	FC		4	8			8		
Open Door Mission	Samaritan House	P-05/05	36544	SM				40		40		10
Salvation Army	Booth Haven	P-05/05	36544	SM				39		39		10
Salvation Army	Genesis House	P-05/05	36544	YMF				10		10		
Salvation Army	Hope House	P-05/05	36544	SF				19		19		
St. Joseph's House of Hospitality	Same	P- 12/05	36544	SM				10		10		5
TEMPRO	Leased Houses	P- 12/05	36544	FC		11	58			58		
Veterans Outreach Center	Emergency Housing	P-12/04	36544	SM	VETS			6		6		
YWCA	Emergency Housing	P-05/05	36544	M		4	11	4		15		
					SUBTOTAL	40	137	208		345	7	30

None under Development

Fundamental Components of CoC System – Housing Inventory Chart

TRANSITIONAL HOUSING													
Provider Name	Facility Name	HMIS	Geo Code	Target Population 2004 Year Round Units/Beds					2004 All Beds				
				A	B	Family Units	Family Beds	Individual Beds	Year Round	Seasonal	Overflo w/ Voucher		
Catholic Family Center	Francis Center	P-12/04	36544							10			
Catholic Family Center	Sanctuary House	P-12/04	36544			10	28	2		30			
Center for Youth Services	Transitional Housing	P-5/05	36544			1	2	5		7			
Hillside Children's Center	AIY	P-5/05	36544					17		17			
Cephas	Hunter House	P-12/05	36544					8		8			
Mercy Residential Services	Families First	P-12/04	36544			3	6			6			
Mercy Residential Services	McAuley Housing	P-12/04	36544			5	15			15			
Mercy Residential Services	Melita House	P-12/04	36544			4	8			8			
Open Door Mission	Caring Center	P-12/05	36544					27		27			
Salvation Army	Genesis House	P-5/05	36544					4		4			
Sojourner House	Same	P-12/04	36544			8	16	8		24			
Spiritus Christi	Jennifer House	P-12/04	36544			2	4	6		10			
Veterans Outreach Center	Richards House	P-12/04	36544					17		17			
Veterans Outreach Center	Building Two	P-12/04	36544					8		8			
Volunteers of America	Same	P-12/05	36544					20		20			
Wilson Commencement Park	Same	P-5/05	36544			9	36			36			
YWCA	Women In Transition	P-5/05	36544			7	17	1		18			
						SUBTOTAL		49	132	133			

None under Development

Fundamental Components of CoC System – Housing Inventory Chart

PERMANENT SUPPORTIVE HOUSING

Provider Name	Facility Name	HMIS	Geo Code	Target Population 2004 Year Round Units/Beds					2004 All Beds			
				A	B	Family Units	Family Beds	Individual Beds	Year Round	Seasonal	Overflo w/ Voucher	
Bethany House	Same	P-12/05	36544	SF					2	2		
DePaul Community Services	Carriage House	P-5/05	36544	SMF	SMI				6	6		
DePaul Community Services	Cornerstone	P-5/05	36544	SMF	SMI			16		16		
DePaul Community Services	Shelter Plus Care	P-5/05	36544	M	SMI	2	4	8		12		
DePaul Community Services	Winship – Shelter Plus Care	P-5/05	36544	M	SMI/SA	2	4	8		12		
Providence Housing	Shelter Plus Care 1	P-12/04	36544	M	SA	8	21	18		39		
Providence Housing	Shelter Plus Care 2	P-12/04	36544	M	SA	11	29	13		42		
RHAMCDHHS	Shelter Plus Care 1	P-5/05	36544	M		46	132	27		159		
RHAMCDHHS	Shelter Plus Care 2	P-5/05	36544	M		23	64	25		89		
RHAMCDHHS	Shelter Plus Care 5	P-5/05	36544	M		18	57	18		75		
RHA/Salvation Army	Shelter Plus Care 3	P-5/05	36544	M		29	86	13		99		
RHA/Salvation Army	Shelter Plus Care 4	P-5/05	36544	M		34	127	14		141		
RHA/Veterans Outreach Center	Shelter Plus Care 6	P-12/04	36544	SM	VETS/SA			10		10		
Sojourner House	Fairchild Place	P-12/04	36544	FC		12	30			30		
Sojourner House	Monica Place	P-12/04	36544	M		18	38	3		41		
Sojourner House	Nancy Watson Dean Place	P-12/04	36544	FC		7	17			17		
Sojourner House/HOP	Marketview Heights/Canal Place/Anthony Place	P-12/04	36544	FC		23	69			69		
TEMPRO/HOP	Permanent Housing Program	P-12/05	36544	FC		10	31			31		
YWCA	Long Term Residence	P-5/05	36544	SF				31		31		
YWCA	Vermont Place	P-5/05	36544	FC		2	4			4		
				SUBTOTAL			245	713	212	925		
Under Development												
RHA/Unity Health	Shelter Plus Care	P-12/05	36544	M	SMI	5	15	20		35		
RHA/Strong Ties	Shelter Plus Care	P-12/05	36544	M	SMI			15		15		
Catholic Family Center	79 North Clinton Avenue	P-12/05	36544	M		7	24	6		30		
				SUBTOTAL			12	39	41	80		

Exhibit 1: Continuum of Care Service Activity Chart

Fundamental Components in CoC System -- Service Activity Chart
<p>Component: <u>Prevention</u></p> <p>Services in place:</p> <ul style="list-style-type: none"> • <u>Rent/Mortgage Assistance</u> <ul style="list-style-type: none"> ○ <u>Emergency grants</u> to pay rent and mortgage arrears, utility payments or security deposits (MCDHHS, Salvation Army, Red Cross, Housing Council, Baden Street Settlement House, Catholic Family Center and AIDS Rochester) ○ <u>Eviction Prevention Program</u>, MCDHHS and Legal Aid Society provide case management, financial and legal representation to prevent evictions or relocate family prior to eviction ○ <u>Proactive Property Management Program</u>, MCDHHS and City of Rochester ensure that housing units into which homeless families and individuals receiving TANF or Safety Net benefits meet HUD Housing Quality Standards, preventing a reoccurrence of homelessness due to substandard conditions. ○ <u>Housing Council Landlord Tenant and Tenant/Education/Mediation Program</u>, Counseling to create and affect the landlord tenant relationships that are beneficial to both parties, the neighborhoods and community at large. ○ <u>Housing Council Mortgage Default Resolution</u>, Provides mortgage default resolution services and funds to prevent mortgage foreclosure. Services include household income, budget and debt analysis, followed by negotiation with mortgage holders and other parties, including mainstream funding sources. Possible resolutions include refinancing, negotiated repayments and grants for eligible clients. ○ <u>Area Churches</u>: Provide limited funds for rent and mortgage arrears, security deposits and utility payments for households not able to be served with mainstream funds ○ <u>Food Pantries/Clothing Rooms</u>: Provide food and clothing to households that can allow more household income to be used for housing related expenses <p>Services planned:</p> <ul style="list-style-type: none"> ✓ Existing programs to remain fully funded. ✓ Develop discharge protocols to facilitate planned discharges from institutions (jail, prisons, hospitals, etc.) with housing in place. ✓ Continue to explore other program models that will prevent homelessness. <p>How persons access/receive assistance:</p> <p>Prevention activities/financial assistance to prevent homelessness are publicized throughout the community. The agencies that provide emergency grants to pay rents, utilities and other needs meet on a monthly basis to coordinate delivery of services. This coordination ensures that clients receive prevention assistance from the most appropriate agency.</p>
<p>Component: <u>Outreach</u></p> <p>Outreach in place:</p> <p>(1) Outreach activities for homeless persons who are living on the streets in your CoC area and how they are connected to services and housing.</p> <ul style="list-style-type: none"> ○ <u>City/County Homeless Outreach Team</u>, staff from MCDSS, Rochester Police Dept, SNAP Team, & Pastor from St. Mary's Church go to streets, parking garages, vacant houses and other inhabitable places at midnight to assist chronically homeless in securing housing and supports monthly. ○ <u>The Salvation Army and Roberts Wesleyan College students</u>, outreach to the chronic street homeless via a street-feeding program. ○ <u>Unity Health</u> , primary health, mental health and substance abuse outreach via a mobile medical unit ○ <u>Poor People United</u>, a grassroots organizing group, conducted nightly outreach during the winter months to subway beds, bridges and parking garages to encourage them to access shelter beds <p>How are they connected to housing and services?</p> <ul style="list-style-type: none"> ✓ Both the Salvation Army and MCDHHS have agreements/contracts with local shelters and hotels to provide emergency housing. Homeless found on streets are transported to either shelters or placed in hotels. ✓ SNAP Team case managers meet with them to assist them with accessing mainstream services ✓ Mental health outreach/case management programs meet weekly in an effort to coordinate housing placements and services for the most difficult to house. ✓ Homeless found by Poor People United were transported to shelters or hotels where they would be connected to services <p>(2) Outreach to other homeless:</p>

Veterans:

- Veteran's Outreach Center, street outreach for veterans and their families.
- The Salvation Army and the Veterans Outreach Center, outreach and link Veterans in jail with main stream services available to Veterans, housing and employment services to prevent homelessness
- Operation Stand Down, every year Monroe County in collaboration with all the area veteran service providers and many social service providers hold an outreach program for homeless vets. Vets are given free legal advise, health, dental and vision exams, assistance with housing, access to veteran services such as health care and substance abuse and military surplus items such as sleeping bags, boots, coats and gloves.
- The Veteran's Administration, provides outreach in soup kitchens and shelters.

AIDS/HIV:

- AIDS Rochester, Catholic Charities Community Services, Action for a Better Community, Baden Street Settlement House and Monroe County Health Department, provide outreach, counseling, education and testing to adults and youth with or at risk of HIV/AIDS

Seriously Mentally Ill and Substance Abusers:

- MCDHHS Division of Mental Health Homeless MICA Program. Case managers from Rochester Mental Health Center, Strong Memorial Hospital and Unity's Health Care for the Homeless and Project Impact go to shelters and soup kitchens to conduct mental health assessments and link individuals with mental health services. An Examiner from MCDHHS is a part of the team who assists with accessing mainstream entitlement benefits. The ACT Team (Strong Ties) and Intensive Case Management Programs (Unity, Strong, Via) provide support and links to mainstream mental health services.
- Via Health Peer Advocacy. Mental health consumers provide outreach at shelters
- Mental Health Association Consumer Drop in Center. Provides peer outreach and support
- AIDS Rochester. Specialized outreach case management service and HIV testing for substance abusers.

Domestic Violence:

- ABW, operates a 24 hour a day 7 days a week hot line to provide housing and services to victims of domestic violence
- MCHHS, operates an after hours hot line that provides housing to victims of domestic violence.
- MCHHS Domestic Violence Liaison. Caseworker is available during business hours to assist TANF applicants and recipients in safety planning and securing waivers to TANF regulations that would put them at risk.
- Lifeline, operates a 24 hour a day 7 days a week hot line that can be accessed by dialing 911 that will contact the ABW or DSS hot line to arrange services while the caller remains on their line.
- Rochester, Greece and Irondequoit Police Department, Monroe County Sheriff and Family and Crisis Intervention Team (FACIT). Crisis response and linkages to shelters

Youth:

- Center for Youth, Hillside Children's Center, Street outreach to runaway and homeless youth
- Center for Youth: Docs On Board, Medical residents from Strong Memorial Hospital ride on outreach van and conduct basic primary health screenings for homeless youth
- MCDHHS, Salvation Army (Genesis House), Hillside Children's Center, Staff reach out to youth residing in shelters and unable to live with parents. MCDHHS Housing Unit, Youth Opportunities Unit, and Child Protection Services and provide ongoing case management. Many are referred to the Supportive Services Apartment Program, a transitional housing program operated by Hillside Children's Center and the Rochester Housing Authority.
- Hillside Children's Center, operates drop in center for homeless/runaway youth 3 days/week and all major holidays. Provides meals, laundry services, groups with peers as co-leaders, counseling.

Prison:

- Spiritus Christi Prison Outreach, Case management and group counseling for men and women soon to be released from the Monroe County jail, and the state prison.
- Jail Outreach, Staff from Bethany House, Sojourner House, and the YWCA go to the Monroe Correctional Facility quarterly to conduct informational sessions on homeless services for incarcerated women upon release.
- MCDHHS Division of Mental Health, Case managers work with the homeless mentally ill jail residents to secure housing, mental health services, including medications and Medicaid upon release from jail.

All Homeless Populations:

- Lifeline, 24 hour Phone Crisis Hotline, linked to the local 911 system.
- MCDHHS and Salvation Army After Hours Phone crisis line available during non-business hours.
- Unity Health, Mobile health primary health services for the homeless

Outreach planned:

- As we continue to develop our programs that target the chronically homeless we will also pursue opportunities to better coordinate current outreach activities.
- The proposed Safe Haven/Drop In Center project will have an outreach component.

Component: Supportive Services
Services in place:

Assessment:

Assessments of homeless in this community are completed for each homeless individual and family as they enter a homeless facility and/or program. The assessment process includes an evaluation of barriers to employment, assessment of mental health and chemical dependency problems, causes of homelessness, educational levels, health care, income and eligibility for mainstream public benefits, and an identification of personal supports within the community. Several expert community supports have been put into place to complete a more thorough assessment for those individuals who would benefit from the assistance of these specialists on-site at the request of each shelter. They are as follows:

- Veterans Outreach Center, Assessment for veterans and their families to explore eligibility for veteran services such as VA benefits, Veterans health care and rehabilitation programs.
- AIDS Rochester, Assessments for AIDS/HIV+ youth and adults to facilitate enrollment in community AIDS-related programs and assistance with securing SSI benefits and housing subsidies.
- MCDHHS, Case Workers go to shelters, meal sites and drop-in centers to assist homeless with accessing services and complete assessments to determine necessary support services and mainstream funding eligibility. All homeless are interviewed to determine eligibility for TANF, Medicaid and Food Stamps. All homeless are also screened for drug and alcohol issues as well as domestic violence. Any positive screens on the drug and alcohol assessment will result in a CD evaluation. Clients with domestic violence issues are offered an interview with the domestic violence liaison. During this preliminary assessment a determination is made as to which shelter could most appropriately serve the individual. The client is then placed at that shelter and MCDHHS continues to work with the person while at the shelter to ensure mainstream resources are secured.
- Unity Health, Provides primary health, mental health and substance abuse assessments using either their mobile medical unit or with staff on-site at shelters.
- Strong Memorial Hospital, Mobile, mental health crisis team conducts mental health assessments at shelters, soup kitchens and on the street
- MCDHHS, SNAP (Safety Net Assistance Program), Conducts mental health assessments in shelters and on the street
- Homeless MICA Program, MICA workers conduct mental health assessment at the shelters and link homeless with existing mainstream mental health programs

Case Management:

- Homeless shelter and housing providers, Most emergency and all transitional and permanent supportive housing programs include case management as a component of the services available to their program participants.
- Salvation Army's Project ReDirect, Provides homeless individuals and families with major barriers to employment; stable housing, life skills, intensive employment preparation and skills training program as well as long term case management
- Safety Net Assistance Program, operated by MCDSS, provides ongoing case management to homeless individuals with mental health issues to assist them in accepting mental health services and developing an ongoing relationship to ensure they are able to achieve their maximum level of self sufficiency and prevent re-occurring bouts of homelessness
- Mental Health Providers, Case management services for the SMI homeless population are provided by Strong Ties (Project Link, Project Action Assertive Community Treatment Team), MICANet, PATH Project (Peer case advocacy support for the homeless), Mental health case managers for the homeless (Rochester Mental Health Center, Strong Memorial), Intensive and Supportive case management (Strong Ties, Via Health, Unity Health System)

Life Skills:

- Youth shelters and adult transitional living facilities, as well as by the Salvation Army's Project Redirect provide life skills training as a program component. Life skills training includes the areas of personal hygiene, budgeting, housekeeping, job readiness skills training, transportation, parenting, meal planning and preparation
- Housing Council, Provides instruction in housekeeping skills and communication skills focused on improving relationships with landlords, neighbors, etc. to TANF families who have had frequent moves and/or evictions to prevent future episodes of homelessness due to eviction

Alcohol and Drug Abuse Treatment

- Homeless providers maintain linkages with mainstream substance abuse treatment providers in the community. Substance abuse treatment services available include inpatient rehabilitation and detox, crisis services, outpatient treatment, outpatient detox., specialized residential treatment and community residential housing options. Many programs have specialized services for target populations (i.e. HIV/AIDS, Hispanic, MICA).

Mental Health Treatment

- Homeless providers maintain linkages with mainstream mental health treatment and support services providers in the community. Mental health treatment services available include a range of outpatient services, inpatient and crisis services, IPRT programs and community support programs, including case management, employment, peer advocacy and support, drop-in center and an assertive community treatment team and mobile crisis services. Many programs have specialized services for target populations (i.e. HIV/AIDS, Hispanic, MICA).

AIDS/HIV Treatment:

- AIDS Rochester, Catholic Charities Community Services, Action for a Better Community, Baden Street Settlement House, the Health Association and Monroe County Health Department, provide outreach counseling, education and testing to homeless adults and youth with or at risk of HIV/AIDS

Education:

- Housing Council Landlord/Tenant, Tenant Education and Mediation Program, Counseling to create and effect the landlord tenant relationships that are beneficial to both parties, the neighborhoods and the community at large.
- Housing Council Mortgage Default Resolution, Provides mortgage default resolution services and funds to prevent mortgage foreclosure. Services include household income, budget and debt analysis, followed by negotiation with mortgage holders and other parties, including mainstream funding sources. Possible resolutions include refinancing, negotiated repayments and grants for eligible clients.
- GED Programs, Homeless access GED programs offered at Salvation Army – Project ReDirect, VOA Neighborhood Outreach Center, TILC, and through linkages with mainstream resources, i.e. Rochester Educational Opportunity Center, Monroe Community College Stage Program, Family Learning Center and Rochester City School District Adult Education
- Tutoring, The Center for Youth Services' emergency shelter and Genesis House receive Title I funding to provide on-site tutoring and educational advocacy for homeless youth

Employment Assistance:

- Project ReDirect through the Salvation Army provides job readiness training, work site training, job placement, and a housing specialist and job developer that assists homeless in securing low income housing and stable employment
- YWCA – YESS Program, Provides homeless women with employment services including identifying barriers to employment, life skills, support services, job search and job placement.
- Job Training Opportunities: A wide variety of job training programs are available throughout the community. Case managers working with the homeless assist the homeless with accessing these services.
- Rochester Works, One Stop Employment Centers, one centrally located in downtown Rochester and one located at main MCDHHS office provides both businesses and job seekers with a network of employment resources and services. Homeless who are employable are often accompanied to Rochester Works by case managers to assist them with DOL computer search and accessing job training opportunities.

Child Care

- Western New York Child Care Council: provides homeless families with the names of 3 providers located near the shelter. MCDHHS utilizes TANF funds to pay for day care to ensure homeless adults are able to look for housing and employment and participate in treatment and rehabilitation programs
- Wilson Commencement Park: Child care on-site at transitional living facility

Transportation

- The MCDHHS gives each TANF applicant an unlimited ride 30-day bus pass.
- All of the local shelters either a van and/or distribute bus tokens to provide transportation to its residents.

Health Care:

- Mobile Medical Van St Mary's Hospital, medical and mental health services are provided at the shelters to all homeless in this community
- Alternatives for the Blind and Visually Impaired - Project Eye Care, Provides free eye exams and glasses for the homeless in Monroe County
- University of Rochester Eastman Dental Program, Provides free dental care for homeless in Monroe County

Legal Services

- Monroe County Legal Assistance (MCLAC) and Legal Aid Society, Provide legal representation at eviction

proceedings, eviction prevention services

- MCLAC/Public Interest Law Office of Rochester, Provide representation at fair hearings for financial entitlement programs and SSI/SSD denial hearings
- Legal Aid Society, Provides legal representation for youth for educational law and will assist homeless youth with affidavit preparation

Aftercare Services

Once an individual is homeless and has been placed in the shelter system, they are connected with a case manager to develop goals to prevent the recurrence of homelessness. Many of the shelters have aftercare services as well:

- Sojourner House, Mercy Residential Services, YWCA and Genesis House, Provide follow-up services to former residents in permanent housing to prevent future incidences of homelessness.
- Salvation Army's Project ReDirect, Provides follow-up case management, mental health, and substance abuse counseling, for up to four years, to "high risk" homeless during job training and after placed in employment and permanent housing to prevent future episodes of homelessness.
- SNAP Program, provides ongoing case management services this community's chronically homeless population to prevent future bouts of homelessness.

Services planned:

- Existing services to remain fully funded.
- The CoC is finalizing planning for its HMIS system, with implementation beginning by September 2004.

How homeless persons access/receive assistance:

Supportive Services programs have established linkages with a full range of homeless providers, as well as other health and human service agencies in the community. Access to supportive services may be through a number of means, including MCDHHS, emergency and transitional shelters, or outreach and case management services. Supportive services are integrally linked with housing options, as these services are aimed at maintaining individuals in appropriate housing options, preventing the reoccurrence of homelessness and movement towards independence and self-sufficiency.

**Monroe County Department of Human Services
SUMMARY – HOMELESS DATA 2004**

Placements

In 2004, the Monroe County Department of Human Services [MCDHS] made 8,683 emergency housing placements for families and individuals. This was an increase of 9% from the number of placements that were done in 2003.

Major Reason for Placement in 2004

- * The major cause of homelessness, 62%, continues to be eviction by primary tenant. (Families/individuals residing in the homes of relatives or friends that are asked to leave. They are often asked to leave due to overcrowded conditions, substance abuse, domestic disputes, family breakup and strained relationships.)
- * The second leading cause of homelessness, 15%, was due to being released from an institution without a plan for permanent housing. (Institutions include hospitals, substance abuse treatment programs and the Monroe County Jail.) It is important to note that we have seen an 8% decrease in this area since 2000. Several community efforts appear to be positively influencing this decrease. Under the leadership of the Homeless Services Network, representatives from community shelters, hospital emergency departments and MCDHS have worked together to develop community discharge protocols. Additionally, the Rochester/Monroe County Continuum of Care team has worked with providers to expand the number of Shelter Plus Care Certificates. These housing subsidies with case management services for disabled homeless individuals and families have successfully provided permanent housing with supports to ensure individuals are able to maintain housing.

Youth

- * In 2004, 1,033 emergency housing placements were made for 668 youths (16-21). Of the 1,033 placements; 31% of the placements were in the youth shelter system, 53% were placed in the adult shelter system and 16% were placed in hotels.

Placement Data

Year	Families	Individuals	Total	Change from previous year's total	% Change	Total Cost	Average cost per placement
2000	1,566	4,911	6,477	842	13%	\$3,635,167	\$561
2001	1,615	6,857	8,472	1995	30%	\$3,971,979	\$469
2002	1,707	6,846	8,553	81	1%	\$3,896,863	\$456
2003	1,596	6,395	7,991	-562	-6%	\$3,625,893	\$453
2004	1,802	6,881	8,683	692	9%	\$3,951,628	\$455

Reasons for Placement

<u>Cause of Homelessness</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>	<u>Change</u>
Eviction by Primary Tenant	46%	53%	56%	60%	62%	+2
Released from Institution	23%	22%	20%	17%	15%	-2
Evicted by Landlord	10%	10%	10%	7%	6%	-1
Domestic Violence	9%	7%	7%	8%	10%	+2
Building / Utility Problems	4%	2%	1%	1%	<1%	N/C
Arrived from Out-of-County	4%	4%	4%	4%	4%	N/C
Fire	2%	1%	1%	1%	<1%	N/C
Transience	2%	1%	1%	2%	<1%	-1
Sweep			<1%	1%	1%	NA

Available Beds

- * During 2004, MCDHS contracted with various community agencies for a total of 347 emergency beds for homeless families and individuals. When the shelters are unable to accommodate a placement, the MCDHS utilizes various hotels in the area; this adds approximately 100 additional beds for men, women and children.
- * In 2004, the Rochester Area Interfaith Hospitality Network [RAIHN] started a program to temporarily house homeless families, and are able to accommodate up to 14 individuals. MCDHS entered into a Memo Of Understanding with RAIHN in order to utilize this program when there is space available, and MCDHS has clients who are appropriate for the program.
- * In 2004, 71% of the placements were in shelters.

Percentage of clients placed in hotels/shelters.

<u>Type of Facility</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>
Shelters	77%	70%	71%	78%	71%
Hotels	23%	30%	29%	22%	28%
Leased Houses					1%

EMERGENCY FACILITIES with MCDHS Contracts

Alternatives for Battered Women	- 38 beds, women and children
Catholic Family Center-Francis Shelter	- 36 beds, single men only
Catholic Family Center-Sanctuary House	- 16 beds, women and children
Catholic Family Center-Women's Place	- 19 beds, women and children
Center for Youth	- 12 beds, male/female teenagers
*MainQuest	- 11 beds, single men only
Mercy Residential (Melita House)	- 8 beds for women**
Open Door Mission	- 40 beds, single men only
Salvation Army Men's Shelter-Booth Haven	- 39 beds, single men only
Salvation Army Youth Shelter- Genesis House	- 14 beds, for youths (16-21)
Salvation Army Women's Shelter-Hope House	- 19 beds, single women only
Tempo Development (Temple B'rith Kodesh)	- 11 units for families (58 beds)
Spiritus Christi Prison Outreach (Jennifer House)	- 8 beds for women**
VOC-Richards House	- 6 beds
Volunteers of America	- 10 beds, single men only
YWCA	- 13 beds, single women and children
Total Shelter Beds	- 347
Various Motels	- 100 beds, men, women and children
Total	- 447
Average Per Diem (Shelters)	- \$41.09
Average Per Diem (Hotels)	- \$51.16
Overall Average Per Diem	- \$43.84

*These beds were reclassified during 2004

**These beds can be used as transitional beds also.

TOP PLACEMENT SITES

<u>2003</u>		<u>2004</u>	
1. Catholic Family Center	2,813	1. Catholic Family Center	3,337
Women's Place	685	Women's Place	878
Sanctuary House	568	Sanctuary House	684
Francis Center	1,560	Francis Center	1,775
2. Cadillac Hotel	1,830	2. Cadillac Hotel	2,232
3. Salvation Army	1,541	3. Salvation Army	1,373
Booth Haven	744	Booth Haven	627
Hope House	612	Hope House	521
Genesis	185	Genesis	225
4. Alternatives for Battered Women	495	4. Alternatives for Battered Women	330
5. Open Door Mission	475	5. Open Door Mission	419
6. MainQuest	377	6. MainQuest	188

Average Length of Stay

The goal at MCDHS is to assist the homeless in securing permanent housing as soon as possible. During 2004 the average number of days that an individual or family was in emergency housing decreased for all types of emergency housing.

LENGTH OF STAY- IN DAYS

FAMILIES

SINGLES

	2000	2001	2002	2003	2004		2000	2001	2002	2003	2004
HOTELS	8	8	7	6	5		5	3	4	3	2
SHELTERS	11	15	14	12	10		8	10	12	9	8
HOUSES	33	31	30	28	26		-	-	-	-	-

Housing Quality Improvement

The Quality Housing Unit resides within the Housing Unit at MCDHS and works with landlords, recipients of public assistance, and the City and towns in Monroe County to improve the quality of housing in our community.

MCDHS issues a Landlord/Tenant Security Agreement (LTA) in lieu of a cash security deposit. The LTA secures the landlord against tenant-caused damages and unpaid rent up to a maximum amount equal to two months of the Shelter Allowance.

LANDLORD TENANT CLAIMS FOR DAMAGES/UNPAID RENT

	2000	2001	2002	2003	2004
Claims received	1,516	1,236	1,049	904	729
Claims Approved	1,168	1,013	777	651	587
Claims Denied	348	223	272	253	183

The Quality Housing Unit operates the Rent Withholding Program, which works to ensure that buildings occupied by Temporary Assistance recipients that are in violation are brought up to code compliance. When necessary, rental payments are withheld until major violations are corrected.

PROPERTY CODE VIOLATIONS

	2000	2001	2002	2003	2004
Notice and Orders Received	987	1,565	1,505	1,028	728
Compliance Prior to Withholding	228	348	92	286	98
Rents Withheld	338	1,043	768	631	445
Rents Released	109	372	298	175	125

MCDHS- Housing Unit

The Monroe County Department of Human Services Housing Unit was established to serve the emergency needs of the homeless and the housing needs of the low-income residents in our community. The following services are provided by the Housing Unit and various other units within MCDHS:

- One Housing Unit staff is assigned to each of the 14 shelters to serve as a liaison with shelter staff and work with shelter providers to assist residents in securing financial assistance, locating housing and providing relocation services such as moving, utility turn-on and purchase of furniture and appliances.
- Provide housing assistance and linkages to other County staff including Adult Protective, Child Protective, Financial Assistance, Mental Health, Youth Bureau, Probation, as well as community service providers.
- Operate a 24-hour placement line. The After Hours telephone coverage is available year round to provide emergency assistance to the homeless (442-1742). Coverage staff works in collaboration with Lifeline and Salvation Army after-hours staff to provide emergency assistance during non-business hours.
- Central point of entry for MCDHS placement is the Housing Unit. Staff coordinate placement of homeless in available community beds. Daily census is taken of all shelters to maximize use of available beds and identify and address any client-specific barriers to relocation into permanent housing.
- Screening of all homeless families and individuals who are not receiving Temporary Assistance to determine eligibility for temporary housing assistance. When appropriate, expedited Food Stamps, personal needs allowances and assistance with first month's rent are issued.
- Operates a Landlord Complaint "Hotline" (274-6630). Complaints are resolved quickly and, in many instances, have prevented evictions. Staff works directly with landlords to resolve agency/landlord disputes.
- Periodically inspects emergency facilities to ensure safe and sanitary housing is being provided to the homeless.
- Process claims for damages and/or lost rent in order to encourage landlords to rent to Public Assistance recipients.
- Provide emergency payments to financially eligible households, including payments to prevent tax or mortgage foreclosures and help with necessary repairs to maintain current occupied housing.
- The Emergency Assistance unit processed 19,099 applications for emergency assistance in 2004, assisting those who were eligible by either making payments to prevent eviction, authorizing first month's rent, assistance with utility payments, issuance of expedited Food Stamps or placement in emergency housing.

The Monroe County Department of Human Services operates and/or works in collaboration with various community agencies on a number of programs that address the unique needs of the homeless in our community. These programs provide outreach, case management, low-income housing and programs to improve the quality of housing in Monroe County.

Outreach Programs

- **The City/County Homeless Outreach Team: (Formerly the Housing Demonstration Program)** Provides outreach to the community's most difficult to serve homeless. MCDHS Housing Unit staff, staff from the Safety Net Assistance Program, Officers from the Rochester Police Department, and the Pastor from St. Mary's Church go out to subway beds and parking garages to assist homeless living on the streets. These individuals, who have difficulties in accessing services, are assisted in securing emergency and permanent housing as well as obtaining necessary support services. This program received the National Association of Counties Achievement Award in 1990. In 2004, this outreach resulted in a total of 92 emergency housing placements for individuals who had been residing on the streets. Typically, these chronically homeless individuals have significant histories of mental illness, often coupled with chemical dependency.
- **Homeless Youth Project:** MCDHS operates a HUD funded homeless youth program to address the needs of homeless youth aged 16 to 21. Welfare reform enacted changes in Public Assistance regulations mandating that youth must reside with a responsible adult or in a supervised housing program. Many of this community's youth lack connections to responsible adults and the availability of supportive housing does not meet the demand.
- **Homeless Youth Project/Rochester Monroe County Youth Bureau:** The Youth Bureau, a division of MCDHS provides assistance to youth who are residing in youth shelters and unable to reside with their parents. MCDHS Child Protective staff conducts investigations to locate responsible adults, or in the event no adult is available, work with shelter providers and Housing staff to make recommendations for services and housing. Housing Unit staff work with shelter providers to implement these recommendations. The Salvation Army and Hillside Children's Center provide ongoing case management to these "independent youth". Hillside operates a transitional housing program and MCDHS operates Shelter Plus subsidies for this population.
- **Mercy Residential Program/Supportive Housing for Youth:** HUD provides funding for the Mercy Residential Supportive Housing Program for Homeless Youth and a youth worker at MCDHS. The MCDHS youth worker assists youth residing in adult shelters and hotels to access age-appropriate services within the community.

Case Management Programs

- **Homeless MICA Program:** This program, funded by the MCDHS Division of Mental Health, uses a team approach to serving homeless MICA individuals. A staff person from MCDHS, Strong Memorial Hospital and Rochester Mental Health Center work together and are able to draw upon the resources of their respective agencies. During 2004, 124 homeless individuals with mental health issues were assisted in securing financial assistance, emergency, supportive and permanent housing by Housing Unit staff. Case managers at Strong Memorial Hospital and Rochester Mental Health Center provided linkages to mental health services and ongoing case management.
- **Safety Net Assistance Program:** This program, funded by New York State OTDA, provides ongoing mental health case management services to this community's homeless. These

individuals have severe mental health issues that prevent them from accepting mainstream mental health services. Case managers assist clients in securing housing and obtaining SSI benefits. After developing a trusting relationship, staff are able to begin to assist the individual in receiving appropriate mental health services. SNAP staff maintain an ongoing relationship with the client and landlord after the client has been effectively linked with community mental health services. We have found that this population will often disengage with community health programs. Our ongoing relationship has enabled us to quickly reengage the client, preventing homelessness. Continued contact with the landlord has expanded the number of landlords that are willing to rent to this population as DHS staff will quickly address any housing-related problems that occur. In 2004, on 524 different occasions, the SNAP program engaged this population to some degree.

Housing Quality Improvement

- **Move-In/Move-Out Inspection Project:** MCDHS issues a Landlord/Tenant Security Agreement (LTA) in lieu of a cash security deposit. The LTA secures the landlord against tenant-caused damages up to a maximum amount equal to two months of the Temporary Assistance shelter allowance. MCDHS entered into an agreement with the City of Rochester Bureau of Property Conservation to operate the Move-In/Move-Out Inspection Project. Claims made under the LTA in all City zip codes require that an inspection be made by City inspectors to verify damages. Before the unit can be re-occupied, it must be re-inspected to insure that the necessary repairs were made.
- **Pro-Active Property Management Project:** The intent of this project is to promote landlord and tenant responsibility and to promote self-sufficiency through the establishment of quality housing in stable and safe communities. The major component to this project is a quality housing inspection that is tied to the issuance of direct rent to a property. All landlords with properties located in the City of Rochester, must agree to a Quality Housing inspection as a requirement to receive direct rent. The inspections are conducted by a City of Rochester property inspector and properties that fail the inspection do not qualify for direct rent payments. Clients/tenants who reside in properties that fail the quality standards criteria, but do not contain health and safety code violations, can continue to receive a shelter allowance. In 2004, over 6,000 quality housing inspections were conducted.
- **The Rent Withholding Program:** Operated in conjunction with the City of Rochester and the Monroe County Department of Public Health, it ensures that buildings occupied by Temporary Assistance recipients, that are in violation (including lead poisoning), are brought up to code compliance. When necessary, rental payments are withheld until major violations are corrected. This program has assisted in the prevention of households from becoming homeless due to unsafe conditions.
- **Lead Paint Program:** Operated by the Monroe County Health Department and MCDHS this program assists families residing in units with lead paint violations. Families are temporarily relocated into emergency housing while the landlord corrects the lead paint violations. HUD funds are available through the Monroe County Health Department and the City of Rochester to assist landlords in making units lead safe. Families are identified by the County Health Department based on elevated lead blood levels of the children.

Low Income Housing Programs

- **RHA/HHAP Housing Program:** This program, funded by New York State, provides seven affordable housing units to families who have worked their way off Temporary Assistance.

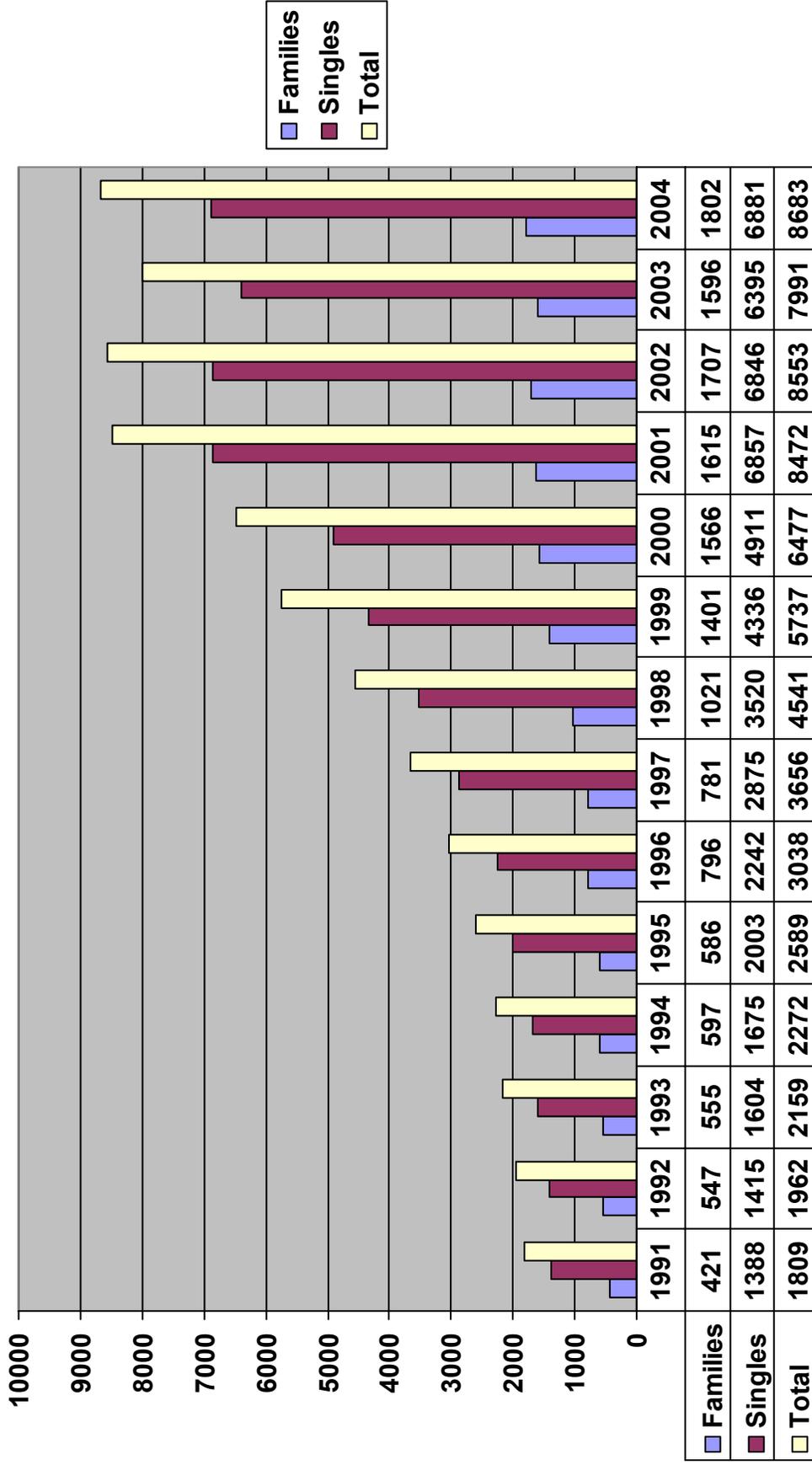
- **Family Reunification Supportive Housing Program:** Funded by HUD, this program operated jointly by MCDHS and the Rochester Housing Authority, provides housing for seven families. The Project targets families whose children are being returned to the household by our Child Protective staff as the head of household has successfully completed chemical dependency treatment. Families are provided quality, affordable housing that can accommodate the entire family. This allows Child Protective staff to coordinate overnight visits with the goal of family reunification in the dwelling. Housing Unit staff provides ongoing case management after Child Protective has successfully terminated their involvement.
- **Shelter Plus Care Program:** This program, funded by HUD, provides over 159 low-income housing units to homeless families and individuals in which the head of household suffers from mental illness, chronic substance abuse and/or other disabilities. Rochester Housing Authority manages the rental stipend. Assistance in locating housing and ongoing case management is provided by DHS Housing Unit staff. Case management services are provided by Strong Memorial Hospital, Rochester Mental Health, East House, Catholic Family Center, AIDS Rochester, Sojourner House, the Veteran's Administration, Catholic Charities, St. Joseph's Villa, Hillside Children's Center, Ibero, St. Mary's Mental Health and DHS Safety Net Assistance.
- **Family Unification Program:** This program, funded by HUD, provides 200 Section 8 vouchers to families with children in foster care whose major barrier to reunification is housing related.
- **Welfare to Work Housing Assistance:** This program, funded by HUD and jointly operated by DHS and RHA, provides Section 8 vouchers to families who are leaving the welfare roles for jobs. Although, this program is being phased out by HUD, there currently are 376 participants.

Monroe County Department of Human Services staff are also active participants in the following organizations:

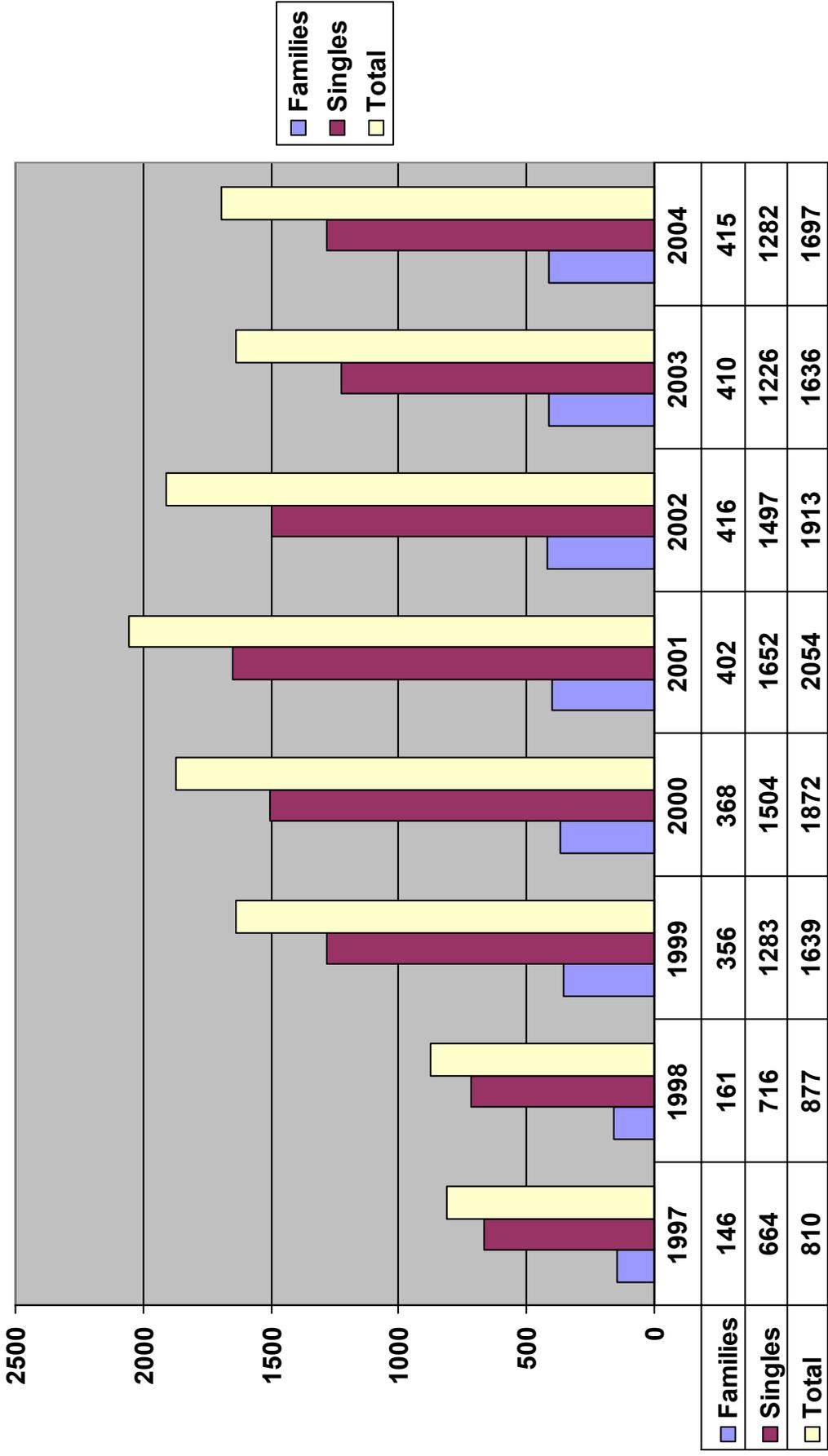
- **Homeless Continuum of Care Team:** This team, composed of staff from Monroe County, the City of Rochester, the United Way of Greater Rochester and the Homeless Service Providers' Network, facilitates and evaluates the implementation of the local Homeless Continuum of Care Plan. Each year, this group is responsible to coordinate the community's submission for the HUD Super NOFA. This includes collecting community data, ranking proposals to meet community needs and writing the Rochester/Monroe County application for HUD funds. The Team is accountable to all of its respective membership organizations and regularly reports progress to them and to the broader community.
- **Homeless Services Network:** This organization facilitates networking, coordinating, consulting and fund raising among individuals who work for or with agencies who provide high quality accessible and effective health, social, housing and other services to people who are homeless. Members represent over 50 community agencies, including County and City departments.
- **Homeless/MICA Outreach/Case Manager Providers Group:** Under the leadership of the Monroe County Department of Human Services Division of Mental Health, Coordinated Care Services, Inc. [CCSI] convenes a monthly case conference with all of the community's homeless mental health outreach and case management workers. As CCSI is the contract manager for MCDHS mental health programs, including the Single Point of Entry, this monthly meeting ensures that homeless individuals are able to access all appropriate

community mental health programs. The group also identifies larger systemic barriers to the MICA population and brings the appropriate people to the table to develop mechanisms to overcome these barriers.

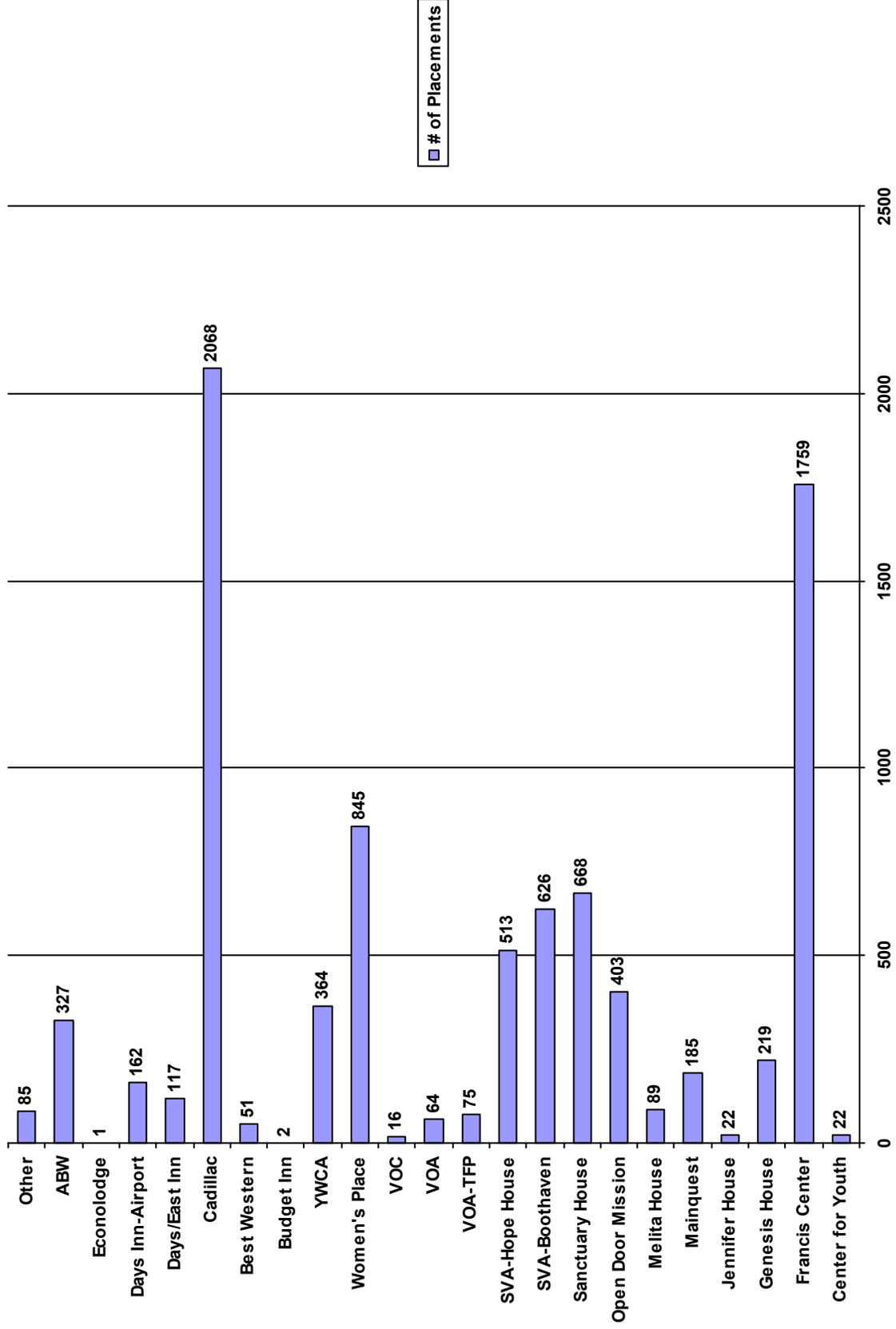
EMERGENCY PLACEMENTS 1991-2004



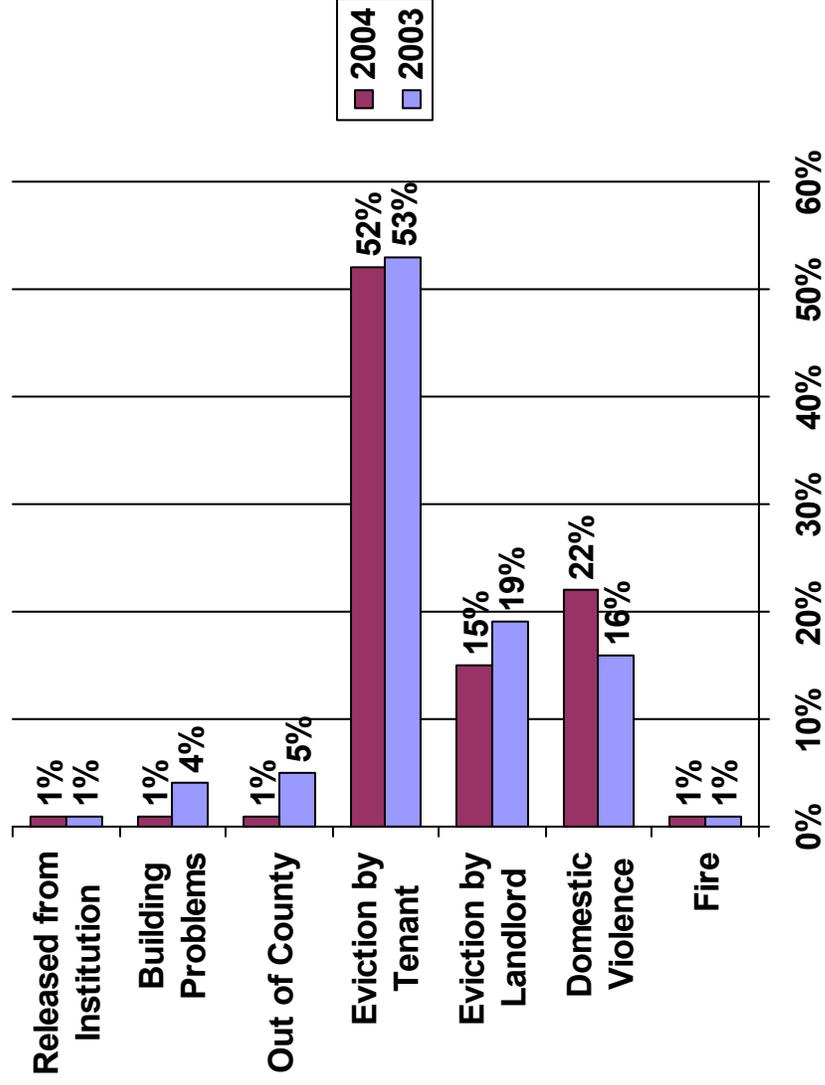
EMERGENCY PLACEMENTS- NO SHOW 1997-2004



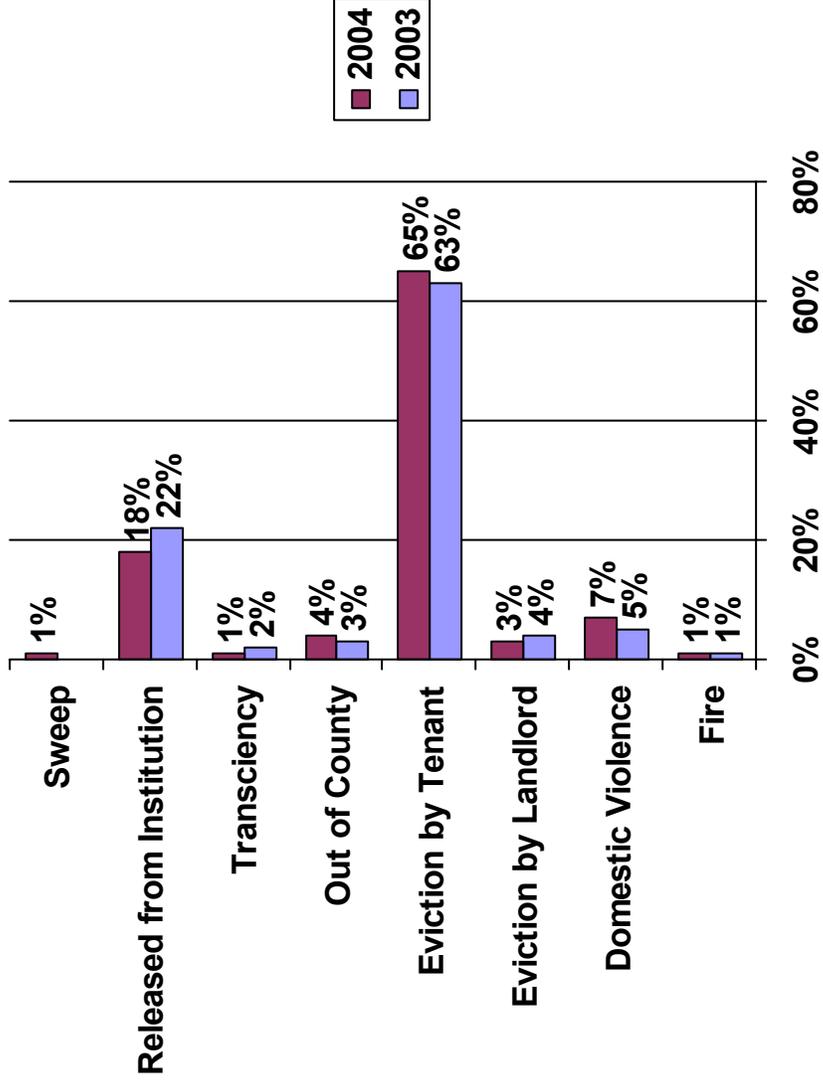
2004 Placements by Site



Reason for Placement-Families



Reason for Placement-Singles



**Youth Emergency Housing Specialist
Monroe County Department of Social Services
2004-Year End Outcome Evaluation**

A. Client Profile/Demographics

Age	Sex	Race
0 - 9 319	Male - 201	White - 133
10 - 15	Female - 467	Black - 440
16 - 20 668		Hispanic- 91
		Asian- 4

***319** "children of teenagers" are not counted in the total of youth served.

Teen parents broken down by age and number of children in each age group.

Sixteen year olds 13/5	Seventeen year olds 66/90
Eighteen year olds 193/47	Nineteen year olds 206/84
Twenty year olds 190/88	

B. Objectives/Findings

By December 31, 2004 the Youth Emergency Housing Specialist will certify 175 homeless youth aged 16 - 20 years of age for Monroe County Department of Health and Human Service Temporary Assistance in coordination with the Runaway/Homeless Youth Service Programs.

Findings:

Youth had the following sources of income when applying for emergency housing: No income **555**, Temporary Assistance Benefits **87**, Supplemental Security Income **15**, **11** had jobs.

A total of **668** youth received emergency housing. Of these **668**, **365** youth had a subsequent bout of homelessness and were once again placed in emergency housing. A total of **1,033** placements were made for the **668** homeless older youth.

Placements were made at the following facilities:

Adult Shelter System:	547
Hotels:	169
Youth Shelter System:	317

C. Analysis of Program Performance

Monroe County DHS Youth Emergency Housing Specialist (YEHS) made a total of 1033 (duplicated) placements for youth ages 16 up to 21 years of age. During 2003 and 2004 the Adult Service System continued to be the major provider for older homeless youth.

During 2004 **169** youth which is **25%** of unduplicated placements made were placed in Hotels by Monroe County DHS, as no beds were available in the youth or adult shelter system or the youth did not “fit” in either system. This has challenged Monroe County DHS to provide services to this vulnerable population.

During 2004 the youth failed to go to the placement site in **211** instances. This is a **32%** no show rate. During 2003, **235 (25%)** of the **940** youth failed to go to the placement site.

2004 Program Performance

- YEHS has worked aggressively this past year to link youth that were not accepted by the youth or adult system to appropriate support services in the community. YEHS has interfaced with Mental Health programs, RPD F.A.C.I.T. unit, health care centers, schools and churches in order to facilitate services for these youth.
- Monroe County DHS continues to engage Via Health’s Mobile Crisis Team and Joyce Smith, MSW, Crisis Therapist to provide mental health screens, set up crisis intake appointments at local mental health facilities and make appropriate referrals.
- YEHS has continued to meet with youth service providers to educate them on DHS eligibility requirements, systems and new policies.
- YEHS continued to advocate for youth to receive services from the youth system.
- YEHS continued to provide support to adult service providers serving youth.
- YEHS continued to explore alternative housing services for youth placed in hotels
- YEHS continued to conduct minor applicant interviews with those youth 16 and 17 years as referred by DHS Emergency Team.
- YEHS continued to be available to all RHYS program staff for technical assistance for individuals’ cases and to act as a liaison between Monroe County DHS and the RHYS programs.
- YEHS continued to refer homeless youth to appropriate community services.
- YEHS continued to assist youth in securing safe and affordable housing.
- Whenever possible the YEHS has assisted in clarifying service gaps and obstacles as a result of being cognitive of homeless youth need, and services of other community programs and Monroe County DHS systems.

Highlights and other Accomplishments

- The YEHS has attended the RHYS providers meetings as scheduled. Ongoing communications, shared resources and knowledge between Monroe County DHS Housing Unit staff and the RHY service providers have directly benefited the homeless youth.
- YEHS has been able to use the RHT providers meeting as a forum to share changes in the Monroe County DHS division of Temporary Assistance.
- YEHS continued to offer information and support to the adult shelter providers with youth in their shelters, DHS Temporary Assistance examiner and a variety of other DHS service programs with youth related questions around homeless youth.
- YEHS has continued to monitor the minor applicant process and has worked toward building a stronger working relationship with the Youth Opportunity Unit and Child Protective services to ensure that homeless youth’s needs are met.

- YEHS has triaged with local hospitals, youth service providers and preventive services at DHS to secure appropriate permanent housing for 2 homeless youth. One of these youth went to a Residential Treatment Facility (RTF) and the other was accepted in to a Therapeutic Foster Care program.

E. Customer Needs

- Homeless youth that do not fit the adult or youth shelter system for mental health or medical reasons continue present challenges to the Monroe County Housing Unit. The Housing Unit does not have the resources to provide the level of case management necessary to assist these youth.
- Youth who receive Temporary Assistance benefits from DHS must be engaged in meaningful work activities. This includes attending school or participating in an employment development program. The repercussion of non-participation is durational sanctions on benefits. This makes it all the more important that educational opportunities meet the needs of homeless youth.

G. Obstacles

- There continues to be a shortage of safe affordable housing options for pregnant and parenting homeless youth.
- The number of homeless who present with current mental health and or a co-existing substance use disorder has been on the rise. Obtaining appropriated evaluations in a timely manner has been an issue.

Monroe County Department of Health - HIV MORBIDITY REPORT
Newly Diagnosed Adult HIV Cases Reported* in Monroe County
06/01/00 – 12/31/03 PRELIMINARY DATA

Cases Reported in Monroe County (MC) by Gender and Race/Ethnicity
Compared to CDC Estimates

* Date Report received by MCDOH

		Monroe County All cases Reported 06/01/00 - 12/31/03		CDC Estimates United States
		Total #	%	
Total Cases by Gender				
	Male	259	68%	70%
	Female	120	32%	30%
				40,000
	Total	379	100%	
Total Cases by Race/ethnicity				
	White	130	34%	26%
	Black	193	51%	54%
	Hispanic	37	10%	19%
	Other/Unknown	19	5%	
	Total	379	100%	
Female Cases by Race/ethnicity				
	White	25	21%	18%
	Black	74	62%	64%
	Hispanic	16	13%	18%
	Other/Unknown	5	4%	
	Total	120	100%	
Male Cases by Race/ethnicity				
	White	105	41%	30%
	Black	120	46%	50%
	Hispanic	21	8%	20%
	Other/Unknown	13	5%	
	Total	259	100%	
Total Cases by Risk Behavior				
	IDU	32	8%	25%
	MSM	112	30%	42%
	*HETERO - CDC	50	13%	33%
	**NIR	127	34%	
	Perinatal	0	0%	
	***Unknown	58	15%	
	Total	379	100%	
Female Cases by Risk Behavior				
	IDU	7	6%	25%
	*HETERO - CDC	29	24%	75%
	**NIR	64	53%	

	Perinatal		0	0%	
	***Unknown		20	17%	
	Total		120	100%	
Male Cases by Risk Behavior					
	IDU		25	10%	25%
	MSM		112	43%	60%
	*HETERO - CDC		21	8%	15%
	**NIR		64	25%	
	Perinatal		0	0%	
	***Unknown		37	14%	
	Total		259	100%	
Total Cases by Age					
	0 - 12		0	0%	
	13 - 19		11	3%	
	20 - 24		25	7%	15%
	25 - 29		37	10%	35%
	30 - 39		149	39%	
	40 - 49		107	28%	
	50+		46	12%	
	Unknown		4	1%	
	Total		379	100%	
Female Cases by Age					
	0 - 12		0	0%	
	13 - 19		6	5%	
	20 - 24		10	8%	
	25 - 29		15	13%	
	30 - 39		43	36%	
	40 - 49		35	29%	
	50+		11	9%	
	Unknown		0	0%	
	Total		120	100%	
Male Cases by Age					
	0 - 12		0	0%	
	13 - 19		5	2%	
	20 - 24		15	6%	
	25 - 29		22	8%	
	30 - 39		106	41%	
	40 - 49		72	28%	
	50+		35	14%	
	Unknown		4	2%	
	Total		259	100%	

Source: Monroe County Department of Health, STD/HIV Program

Definition of terms:

Newly Diagnosed - Someone who tests antibody positive, with no prior history of HIV on follow up investigation. Some individuals included in this preliminary report as 'newly diagnosed HIV cases' may be reclassified as more information becomes available.

IDU - Injection Drug User

MSM - Men Who Have Sex with Men

***Hetero - The CDC definition of Hetero includes only those heterosexuals who can name a sexual partner who is bisexual, IDU, transfusion recipient, or known to be HIV infected. All other heterosexuals are put in the NIR category.**

****NIR - No Identified Risk as defined by the CDC's HIV/AIDS surveillance case definitions. The NIR category may include heterosexuals with one or more of the following risk behaviors: cocaine use, partner of cocaine user, person exchanging sex for money/drugs, partner who exchanges sex for money/drugs, recent STD diagnosis.**

*****UNKNOWN - Includes those who are currently being followed up by health department officials; in which exposure history is missing or incomplete; including those who decline interview, died, or were lost to follow up. This category also includes those who are transfusion recipients or who have an occupational exposure.**

Age - refers to age at diagnosis.

Surveillance Procedures - Cases are counted in the calendar year of the date of report. When additional information is received on a confirmed case, data for that individual may be updated.

CDC Estimates - Taken from the Centers for Disease Control and Prevention document: HIV/AIDS UPDATE, A Glance at the Epidemic. This document can be viewed at: www.cdc.gov/hiv/pubs/facts.htm#Policy. This document provides estimates for new HIV infection in the U.S. Caution must be used in comparisons of local data with CDC estimates due to the large difference in the size of the populations.

3/17/04--KMC updated

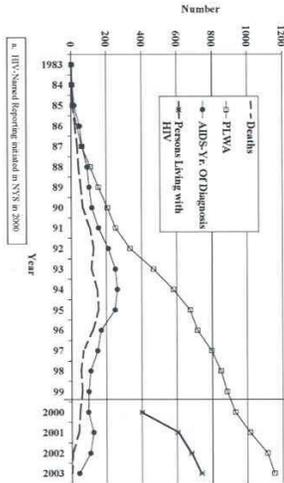
Epidemiologic Profile of the Rochester Ryan White Region of New York State: Data through December 31, 2003



Important Data Notes

- HIV and AIDS data from BHAIE are through December 31, 2003. Case numbers for years 2002 and 2003 may increase due to report processing time.
- Unless individuals are known to be deceased from the NYS or NYC Vital Records or the National Death Index, they are presumed to be living.
- HIV/AIDS case data from BHAIE are [a] all CDC-confirmed cases for which race/ethnicity must be included, [b] all surveillance cases for which race/ethnicity is unknown, and [c] exclusive of prisoners, unless otherwise noted.

Reported AIDS Cases, Persons Living with HIV, Persons Living with AIDS, and Deaths in the Rochester Ryan White Region of New York State - 1981 through 2003¹

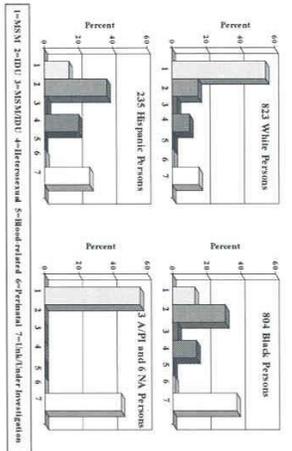


Persons Living with HIV and AIDS and Cumulative AIDS Cases by County¹

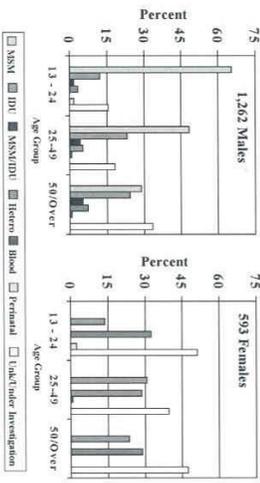
County of Residence at Time of Diagnosis	Living with HIV/Infection Excluding Prisoners		Living with AIDS Excluding Prisoners		Cumulative AIDS Cases Excluding Prisoners	
	Including Prisoners	Excluding Prisoners	Including Prisoners	Excluding Prisoners	Including Prisoners	Excluding Prisoners
Chenango	37	86	36	87	119	243
Livingston	18	102	24	88	59	184
Montro	581	608	979	995	2,024	2,053
Ontario	22	22	33	34	57	38
Schuyler	2	7	2	4	13	15
Seneca	12	116	8	49	18	61
Spartan	19	20	29	29	73	73
Wayne	32	42	38	52	88	105
Yates	6	6	2	2	9	9
Totals	728	1,009	1,151	1,340	2,460	2,802

2002 data from the NYS Comprehensive Newborn Screening Program notes that women giving birth in the Rochester RWRV had a prevalence of 0.11% or approximately one in 909 women giving birth had a positive HIV test result.

1,871 Persons (for whom Race/Ethnicity is known) Living with HIV and AIDS by Percent Distribution of Transmission Category¹



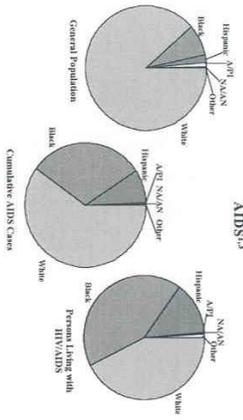
1,855 Persons (aged ≥ 13 years with known gender) Living with HIV and AIDS by Gender, Transmission Category and Age Group¹



Key Regional Descriptors and Vital Statistics³

Descriptor	Value
Low Births Weight per 100 Live Births	6.9
Ten Pregnancy per 1,000 Females 10-17	17.1
Cocaine Discharges per 100,000 Population ages 15-54	409
Opioid Discharges per 100,000 Population ages 15-54	149
Percent Population 19 and under	29%
Percent Population Communities of Color (Non-White)	12%
Percent Population Hispanic-Any Race	2%
Percent Population Living in Poverty-1990	10%

Rochester RWR Population Comparison: General Population, Cumulative AIDS Cases and Persons Living with HIV and AIDS^{1a}



- Data Sources**
1. Bureau of HIV/AIDS Epidemiology, NYSDOH (BHAIE)
 2. Vital Statistics of New York State - 2000, NYSDOH
 3. Community Needs Index for Northeastern New York - 2000, AIDS Institute, NYSDOH

Contact Information:
 Bureau of HIV/AIDS Epidemiology
 New York State Department of Health
 Corning Tower, Albany, New York 12237
 (518)474-4284 E-mail: bhiae@health.state.ny.us

BHAIE 07-2004 Final