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Acronyms

ACRONYM	DEFINITION
AFAN	Aid for AIDS of Nevada
AHRC	Affordable Housing Resource Center
AIDS	Acquired Immune Deficiency Syndrome
AMI	Area Median Income
AODA	Alcohol and Other Drug Abuser
ASI	Accessible Space, Inc.
BADA	Bureau of Alcohol and Drug Abuse (State of Nevada)
BC	Boulder City
BLM	U. S. Bureau of Land Management
BONDS	Private Activity Bonds, Tax-Exempt Bonds
CAC	Citizens Advisory Committee
CAT	Citizen's Area Transit
CBOC	Community Based Outreach Clinic (VA)
CC	Clark County
CCDC	Clark County Detention Center
CCHA	Clark County Housing Authority
CCHD	Clark County Health District
CCSD	Clark County School District
CCSN	Community College of Southern Nevada
CCSSA	Clark County Social Services Agency
CDAC	Community Development Advisory Committee
CDBG	Community Development Block Grant
CDC	Community Development Corporation
CDRB	Community Development Recommending Board
CGP	Comprehensive Grant Program
CHAS	Community Housing Affordability Strategy
CHDO	Community Housing Development Organization
CHIP	Community House-Based Initiatives Program, Nevada Division of Aging
CHRAC	Community Housing Resource Advisory Committee
CHRB	Community Housing Resource Board
CIAP	Comprehensive Improvement Assistance Program
CIC	Crisis Intervention Center (MASH)
CIP	5-Year Capital Improvements Plan
CLV	City of Las Vegas
CLVDC	City of Las Vegas Detention Center
CoC	Continuum of Care: Supportive Housing Program, Shelter+Care, and SRO Mod/Rehab Program (Emergency Shelter Grant Entitlement)
Comp. Planning	Clark County Comprehensive Planning Department
CRA	Community Reinvestment Act
CRM	Community Resources Management
CSA	Community Services Agency

ACRONYM	DEFINITION
DETR	Department of Employment, Training and Rehabilitation (State of Nevada)
DHR	Department of Human Resources
DOL	Department of Labor
DRC	Desert Regional Center
EOB	Economic Opportunity Board
ESG	Emergency Shelter Grant
ETPO	Emergency Temporary Protective Order
FANNIE MAE	Federal National Mortgage Association
FDIC	Federal Deposit Insurance Corporation
FEMA	Federal Emergency Management Assistance
FHLB	Federal Home Loan Bank
FIRE	Finance, Insurance and Real Estate
FmHA	Farmer's Home Administration
FMR	Fair Market Rents
FRC	Family Resource Center
FSS	Family Self-Sufficiency Program
Fund 437	Clark County General Funds
FY	Fiscal Year
FYS	Family and Youth Services (Clark County)
HAMFI	HUD Adjusted Median Family Income
HCP	HUD Consolidated Plan
HELP Team	Metropolitan Police Department Homeless Evaluation Liaison Project
HIV	Human Immunodeficiency Virus
HOME	Home Investment Partnerships Program
HOPE	Homeownership Opportunities for People Everywhere Program
HOPWA	Housing Opportunities for Persons with AIDS
HQS	Section 8 Housing Quality Standards
HUD	U.S. Department of Housing and Urban Development
IHAs	Indian Housing Authorities
IHN	Interfaith Hospitality Network
IRS	Internal Revenue Service
LIHTC	Low Income Housing Tax Credits
LIHTF	Low Income Housing Trust Fund
LISC	Low Initiatives Support Corporation
LLEBG	Local Law Enforcement Block Grant
Local Jurisdictions	Clark County, Las Vegas, North Las Vegas, Boulder City, Mesquite
LVHA	Las Vegas Housing Authority
MASH	Mobilized Assistance and Shelter for Homeless
METRO	Clark County Metropolitan Police Department
MFI	Median Family Income
MHDS	State of Nevada Division of Mental Health and Developmental Services
MOU	Memorandum of Understanding
NAH	Nevada Association for the Handicapped
Nbd's	Neighborhoods

ACRONYM	DEFINITION
NBS	Nevada Business Services
NCCJ	National Conference for Community Justice
NCRC	Nevada Community Reinvestment Corporation
NDA	Nevada Development Authority
NHS	North Las Vegas Neighborhood Housing Services, Inc.
NIMBY	Not In My Back Yard
NLVHA	North Las Vegas Housing Authority
NLV	City of North Las Vegas
NMI	Nevada Micro Enterprise Initiative
NSD	City of Las Vegas Neighborhood Services Department
OMB	Office of Management and Budget (federal)
PATH	Federal Projects for Assistance in Tuition from Homelessness Program
PHA's	Public Housing Authorities
PIC	Private Industry Council,
REOs	Real Estate Offerings
RFP	Request for Proposal
RTC	Regional Transportation Commission
SAFAH	Supplemental Assistance for Facilities to Assist the Homeless Program
SBA	Small Business Administration
Section 202	Section 202 Supportive Housing for the Elderly Program
Section 504	Section 504 Americans with Disabilities Act
Section 515	FmHA Section 515 Rental Assistance Program
Section 8	Section 8 Rental Housing Assistance Program
Section 8 SRO	Section 7 Moderate Rehabilitation Single Room Occupancy Program
Section 811	Section 811 Supportive Housing for Persons with Disabilities Program
SHP	Supportive Housing Program
SMI	Severely Mentally Ill
SNAMH	Southern Nevada Adult Mental Health
SNEC	Southern Nevada Enterprise Community
SNEZ	Southern Nevada Empowerment Zone
SNHC	Southern Nevada Homeless Coalition
SNRABC	Southern Nevada Reinvestment and Accountable Banking Committee
SRO	Single Room Occupancy
SSI	Supplemental Security Income
TADC	Temporary Assistance for Domestic Crisis
TANF	Temporary Aid for Needy Families
TCU	Transportation, Communications and Utilities
TPO	Temporary Protective Order
UMC	University Medical Center
UNLV	University of Nevada, Las Vegas
URA	Uniform Relocation Act
VA	Veterans Administration
VAMC	Veterans Administration Medical Clinic
WDC	Women's Development Center

EXECUTIVE SUMMARY

Introduction

The HUD Consolidated Plan meets the United States Department of Housing and Urban Development (HUD) requirements for consolidating the application for several grant programs into one submission. The programs include: the Community Development Block Grant (CDBG), HOME Investment Partnership Act (HOME), Housing Opportunities for Persons with AIDS (HOPWA) and Emergency Shelter Grant (ESG). These programs are intended to accomplish three main goals: Secure decent housing, provide a suitable living environment; and expand economic opportunities for low- and moderate-income persons. The Consolidated Plan brings together the planning, application, reporting and citizen participation components of each of the grant programs. The coordination of these processes is accomplished through a consortium of local jurisdictions referred to as the HCP Consortium.

HCP Consortium

Clark County and the Cities of Las Vegas, North Las Vegas, Mesquite and Boulder City are the local entitlement communities that comprise the HCP Consortium. The City of Henderson is an affiliate jurisdiction but operates its program independently. The HCP Consortium was formed to respond to HUD's requirements for completion of the Consolidated Plan. Clark County is the lead agency in the HCP Consortium. The planning period for the HCP is from 2000 to 2004. All members have the same program year.

The HCP is a five-year plan, which provides an assessment of the Consortium's needs, resources and gaps as well as develops strategies to eliminate any gaps in service. The HCP consists of three main five-year plans including the **Housing Plan, Continuum of Care for the Homeless Plan** and the **Community Development Plan**. In addition, the HCP contains a fourth component, the Action Plan, which describes the actions each jurisdiction will take on an annual basis toward accomplishing the five-year strategies.

Citizen Participation

There was an extensive citizen participation process for the HCP Consortium Consolidated Plan including community meetings, committees and task forces focusing on specific issues and public hearings at the monthly meetings of the jurisdictional governing bodies. Specific information on citizen participation is available at the beginning of each major section of the plan. The Citizen Participation Plan is available in Appendix B.

Community Profile

The majority of the 7,910 square miles within Clark County is owned by agencies of the federal government, including the Bureau of Land Management, the Department of Defense, and the U.S. Forest Service. The County contains five incorporated jurisdictions including Henderson, which is not a part of the Consortium. Development occurs in both the unincorporated and incorporated areas of the County. The Consortium is currently one of the fastest growing metropolitan areas in the nation with an average rate of 6.1% per year, which equals 50,000 new residents. The growth is largely fueled by the hotel and gaming industry creating job growth and high in-migration.

Since 1990, the household population and number of households have increased by 75% and 58% respectively. The ethnicity of the population shows an increase in the number of Hispanics and Asians by 99% and 52% respectively. Hispanics and Asians now account for 13.8% and 6% of the total population respectively. In addition, the age of the Consortium's population has shifted with children ages 0-5 showing a 91% increase, while school aged children overall have increased by 68%. This has placed substantial pressure on the school system. In addition, persons aged 55-64 and 55+ have increased in number by 91% and 99% respectively, reflecting the massive in-migration of retirees or near retirees who move here to enjoy the warm weather and recreational activities. In 1990, 38% of the households in the Consortium were defined as low income (earning less than 80% of Area Median Income). The majority of low-income households were renters (65%), and elderly households (29%). North Las Vegas had the highest number of low-income households at 53%.

The Service Industry, which includes hotel/gaming/recreation jobs accounts for 45% of all Las Vegas Metropolitan area jobs, which offer low to moderate wages with periods of lay-offs and reduced hours. The average monthly salary is slightly more than \$2,200, which is inadequate to afford the average monthly apartment rent of \$698. The retail and trade sector is the second largest industry at 20.8% of all Las Vegas Metropolitan area jobs and offers an average monthly salary of slightly more than \$1,800.

Consortium Housing Plan

The following summary is provided to illustrate the primary housing issues facing the HCP Consortium and the strategies that will be pursued over the next five years. The comprehensive review of housing needs and the market analysis by jurisdiction is available in the Housing Plan section. The data used in this section is from the 1990 US Census unless otherwise indicated.

Housing Needs Assessment

- As of 1990, approximately 20% of all households in the HCP Consortium Area were extremely low-income households (earning at or below 30% of MFI).
- Within each jurisdiction in the HCP Consortium Area, over two-thirds (between 66% and 69%) of those households with a housing cost burden and/or a severe housing cost burden were renter households.

- A full 17% of all renters or 21,529 households are paying more than 50% of their income for housing costs in the HCP Consortium.
- Of all HCP Consortium income groups, Renter households in the 31-50% of MFI range are the most likely to be paying more than 30% of their incomes for rent (79%), with households in the 0-30% of MFI range having the highest incidence of severe cost burden (64% paying over 50% of their incomes for housing related costs).
- Of all household groups, elderly renter households are the most cost burdened, with 53% paying more than 30% of their incomes for rent.
- Of all HCP Consortium homeowners, those within the extremely low-income category (0-50% of MFI) are most likely to be paying more than 30% of their income on housing related costs. As might be expected for homeowners, those in the lowest income category (0-30% of MFI) are most cost burdened with housing expenses (70%), although those in the 31-50% of MFI category are similarly cost burdened at 64%.
- Over 18,000 renter households in the HCP Consortium Area were living in overcrowded conditions. Approximately 63% (11,367 households) of these households were categorized as having incomes at 80% or below MFI.
- Geographic areas with the highest concentration of Black and Hispanic households coincided with areas of high concentrations of households below the poverty level.
- On a percentage basis, North Las Vegas and Boulder City had almost twice as many occupied substandard rental housing units in 1990 than other cities in the HCP Consortium Area. North Las Vegas and Mesquite have the highest proportion of substandard owner dwelling units in the HCP Consortium Area. Clark County and Las Vegas had the highest number of substandard owner units with 74,138 and 51,629 units respectively.
- The special needs population includes elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents. Self-sufficiency is not a realistic goal for certain segments of the special needs population due to age and/or need for services. There are approximately 26,000 persons with special needs in the HCP Consortium and a supply of 7,603 units specifically designed to meet their needs.

Housing Market Assessment

- Between 1990 and 1999, the total number of housing units in the HCP Consortium increased from 180,992 to 460,410, an increase of 154%.
- Owner occupied housing units increased from 58% to 61.5% while renter occupied housing

units decreased from 42% to 38.5%.

- The majority of the housing stock has been constructed since 1980.
- Extremely–Low, Low, Moderate and Middle income families are able to afford to purchase homes at a maximum price of \$35,814, \$59,767, \$95,581, and \$106,982 (8.75% interest rate) respectively while the Mean price of a home is \$142,692.
- A household would have to earn 115% of AMI to afford the purchase of a Mean sales priced home.
- The average monthly apartment rental rate for the Valley in 1990 was \$461.00, while in 1998 it had increased to \$664, an increase of 44%.
- There are 11,252 assisted housing units in the HCP Consortium with over 4,000 families on waiting lists for public or Section 8 housing.

Summary of Consortium Housing Strategy

The following are the Consortium’s priorities and strategies as they relate to housing. This information is available for specific jurisdictions in the Housing Strategic Plan (Table 42).

High Priority:

Extremely low-income and low-income renter households
Extremely low-income and low-income existing owner households
Persons with Special Needs
All first time homebuyers

Medium Priority:

Moderate-income renter households
Moderate-income existing owner households

Consortium Housing Policies and Strategies include but are not limited to:

- Increase the supply of affordable rental housing for low- and moderate-income households by supporting the construction and rehabilitation of housing for people at 60% of AMI or below.
- Increase the supply of affordable housing for formerly homeless and extremely low-income households by supporting the construction of transitional, supportive and affordable housing for those at 40% of AMI and below.

- Preserve and increase the supply of assisted housing within Clark County through Section 8, TBRA, and existing Section 8 programs.
- Preserve and enhance housing conditions in Clark County through housing rehabilitation.
- Increase homeownership opportunities for low and moderate-income households through downpayment and closing costs assistance and through the construction of affordable owner housing.

Consortium Special Needs Strategy Summary

- Increase the supply of housing for those with special needs through the support of funding for supportive housing, downpayment assistance for people with disabilities, rehabilitation and adaptation of existing owner occupied homes and construction of special needs housing.

Consortium Strategy to Remove Barriers To The Production Of Affordable Housing

Current barriers to the production of affordable housing include the high costs of development (local government regulations/fees, lengthy review processes, and environmental regulations), lack of community support, and limited resources. Over the next five years, the HCP Consortium will work on reducing local government regulatory driven costs, increasing public education on housing issues, and developing new resources.

Consortium Fair Housing Strategy

Utilizing the expertise of fair housing specialists, the HCP Consortium will continue to receive technical training on fair housing issues, specifically issues related to zoning, planning and housing accessibility for the disabled. The strategic plan outlines efforts to promote housing choice by creating incentives for affordable housing development, ensuring that codes and policies affirmatively further fair housing, educating the public on fair housing, and investigation of fair housing complaints.

Consortium Lead-Based Paint Hazard Reduction

The potential for lead-based paint poisoning is not a major issue in the HCP Consortium Area, based on the relative age of housing (an estimated 42% of all dwelling units were constructed after 1978, and approximately 48% were constructed between 1960 and 1979), and the low incidents of lead poisoning in children reported by the Nevada State Laboratory. However, the strategies to be pursued by the Consortium include reducing lead-based paint hazards by testing all children under age 6 who are occupants of housing that qualifies under a rehabilitation program, acquiring an XRF Analyzer for the purposes of identifying lead paint, and abatement of lead paint found in rehabilitation projects.

Continuum of Care for the Homeless

Summary of Homeless Needs

The UNLV Homeless Study conducted a point in time count of the homeless during the night of May 12-13, 1999. A hard count of 3,821 homeless individuals was completed and then extrapolated to cover an estimated number of those who were anticipated to have been missed from the count by the enumerators in the one-day survey. This equaled 6,707 homeless in the street or in shelters.

In the second major portion of the study, interviews were conducted for profiling the homeless population. It is important to note that the results of the UNLV study correspond to the Stand Down surveys. (The UNLV Homeless Study is available in its entirety from each of the local governmental jurisdictions.)

Based upon the UNLV Homeless Study, we know that:

- The majority of Las Vegas' homeless are men (87.6%). However, females (12.4%) are more likely to seek shelter in motels and weekly rentals, areas that fall outside the stricter homelessness definition used for the count.
- The homeless people located on the point-in-time count night were identified as 68.1% White, 21.3% Black, 8.3% Hispanic and 2.3% fell into other categories.
- When age data for sheltered and non-sheltered are combined, 20.2% of homeless are estimated to be 30 or younger, 28% are 31-40, 29.5% were 41-50, and 22.3% were estimated to be 51 or older.
- Up to 14.1% of homeless adults have children with them.
- More than one-third of homeless individuals were Veterans

Summary of Inventory for Homeless

There are currently 1,650 shelter beds, 1,258 transitional housing spaces, 67 permanent supportive housing spaces and 185 permanent housing units specifically set-aside for homeless persons.

Homeless Strategies:

- Reduce barriers to providing shelter and services to homeless
- Increase the supply of housing for extremely low-income and formerly homeless
- Increase supportive and essential services for homeless
- Work to coordinate the service delivery system to avoid unneeded duplication, improve services, and promote collaborations to maximize funding
- Provide services for homeless unaccompanied youth

Community Development Plan

- Support the provision of new community facilities and improve the quality of existing community facilities to serve lower income residents such as recreation centers and child development centers.
- Provide supportive services and facilities for seniors and disabled such as senior centers, transportation and respite care.
- Provide supportive services and facilities for youth, particularly those considered at risk through the construction of youth facilities and the provision of recreational, mentoring, and cultural arts programs.
- Provide for needed infrastructure improvements in low-income areas particularly sidewalk and street improvements in revitalization areas.
- Support neighborhood preservation and improvement activities through property maintenance training and code enforcement.
- Assist families in achieving stabilization and self-sufficiency through parenting classes, transportation services and quality childcare.
- Provide educational opportunities such as English as a Second Language classes and computer literacy programs
- Provide for the economic development needs of low-income areas by stimulating small business, attracting large-scale development, and providing job training and placement.
- Provide for affordable health care through the establishment of health clinics and substance abuse treatment and counseling.
- Improve public safety through prevention programs such as peer mediation programs and street lighting upgrades.

Anti-Poverty Strategy

According to the 1990 Census there were 72,182 persons below the poverty level in the HCP Consortium Area, or approximately 11% of all persons for whom poverty status was determined. The HCP Consortium believes that the main opportunities to assist those below poverty level to achieve economic independence in coordination with affordable housing activities is through education and job training apprenticeship programs provided through the public housing authorities, and through transitional housing programs operated by non-profit organizations. Programs for young people and which focus on building self-esteem and promoting education are also essential to foster personal achievement and break the cyclical nature of poverty. Support of funding for preschools and day care centers will allow low-income households to secure job training and

placement with the knowledge that their children are well cared for during working hours. English as a Second Language and classes designed to assist high school dropouts in receiving their GED are also important aspects of the HCP Consortium anti-poverty strategy. Programs such as these provide the basic skills necessary to enter job training and job placement programs.

INTRODUCTION

Background

The purpose of this HUD Consolidated Plan (HCP) is to provide current information on housing and community development, to estimate housing needs, to identify relevant issues, and to outline housing and community development policies to address existing and future problems.

The overall goal of the HCP is to establish a collaborative process whereby respective jurisdictions establish a unified vision for community development. The HCP works to integrate economic, environmental, community, and human development in a comprehensive and coordinated effort so that families and communities can work together and prosper. The HCP sets goals, objectives and performance benchmarks for measuring progress and establishes a framework plan for revitalization.

Goals

Elimination of slums and blight, elimination of conditions that are detrimental to health, safety and public welfare, conservation and expansion of housing stock, expansion and improvement of the quantity and quality of community services, better utilization of land and other natural resources, reduction of the isolation of income groups within the community and geographical area, and alleviation of physical and economic distress.

Annual Action Plan

The HCP includes an Annual Action Plan constituting an application for funds under four Community Planning and Development formula programs from the Department of Housing and Urban Development (HUD):

- § Community Development Block Grant (CDBG)
- § Home Investment Partnerships (HOME)
- § Emergency Shelter Grant (ESG)
- § Housing Opportunities for Persons with AIDS (HOPWA)

HCP Consortium

Clark County and the Cities of Las Vegas, North Las Vegas, Mesquite and Boulder City are the local entitlement communities that compose the HCP Consortium. The HCP Consortium was formed to respond to HUD's requirements for completion of the Consolidated Plan. Clark County is the lead agency in the HCP. The planning period for the HCP is from 2000 to 2004. All members have the same program year.

Other Consortia

There are currently two housing and community development consortia in Clark County: 1) the Urban County CDBG Consortium (consists of Clark County and the Cities of North Las Vegas, Boulder City, and Mesquite); and 2) the Clark County HOME Consortium (Clark County, Las Vegas, North Las Vegas, Boulder City and Mesquite). The City of Las Vegas is a separate entitlement recipient for CDBG funds. The City of Henderson is also a separate CDBG entitlement recipient and is submitting its own Consolidated Plan.

Consultation

The consultation with housing authorities, residents, community development agencies, housing agencies and many more is described in detail in each major section of the plan. Consultation took place through a variety of forums including community meetings, workshops, focus groups, telephone conversations, and individual meetings.

Citizen Participation Plan

The Citizen Participation Plan outlines the methods by which social service providers, other governmental agencies and residents of affected areas may have input into the consolidated plan process and is available in the Appendix. The threshold for amendments is outlined as well as the method for input into amendments. The citizen participation that took place prior and during the development of the plan is described at the beginning of each major section of the plan.

Community Profile

The Community Profile provides the demographic background for the Consolidated Plan, outlining the tremendous population growth and shift toward an older population that is taking place in Southern Nevada.

Plan Elements

The Consolidated Plan consists of the following main components:

1. **Housing Plan**: This section provides an estimate of the HCP Consortium's housing and needs as projected over a five-year period. These needs are based upon analysis of Census data, recently conducted surveys and studies, consultation with social service agencies and public participation. This section also describes the HCP Consortium's private, public and assisted housing stock with respect to housing supply and demand, age and condition, cost, availability to persons with AIDS/HIV and their families, and areas where there exists racial/ethnic minority and low-income household concentrations. Housing needs of persons with special needs are included in this section. The Housing Strategic Plan identifies where, geographically, funding will be allocated to address housing needs, as well as the priorities and justification for such allocations. Housing programs include the provision of affordable housing, housing to meet the needs of large related family households, and supportive housing for those with special needs such as the elderly and disabled.

2. Continuum of Care for the Homeless: This section provides an estimate of the number and types of homeless persons, and their service and housing needs as projected over a five-year period. These needs are based upon analysis of recently conducted surveys and studies, consultation with homeless service providers and public participation. This section also identifies the transitional and emergency housing supply, supportive services, and permanent supportive housing for homeless persons with special needs. The Homeless Strategic Plan identifies the priorities and justification for the priorities for funding of homeless programs.
3. Non-Housing Community Development Plan: This section describes the capital and public service community development needs and the rationale for supporting certain activities over others. Non-housing needs include the construction or improvement of streets, sidewalks, storm drainage, water and waste water systems, seismic retrofit, graffiti removal, the establishment of economic development programs and support of services targeting low and moderate income persons. The Community Development Plan describes the geographic location of community development strategies and the priorities for funding.
4. Action Plan: This section, published separately, describes those resources anticipated on an annual basis for allocation toward programs addressing housing and non-housing community needs. The Action Plan describes the activities/programs to be implemented over the following year to address priority needs including estimates of the number and types of families to be assisted as well as community improvements.

Data Resources

1990 Census
1998 American Housing Survey
1990-1999 Las Vegas Perspective
1999 Continuum of Care Application
“1997 Low-Wage Workers Survey”
“Affordable Housing Needs in Clark County, 1996-2010”
Clark County Affordable Housing Committee Strategic Plan
Clark County, Las Vegas and North Las Vegas Development Code
UNLV Housing Market Conditions
“Infill Development in the Las Vegas Valley”
UNLV Homeless Study 1999

COMMUNITY PROFILE

Introduction

Clark County, Nevada contains 7,910 square miles and is located at the southernmost portion of Nevada. Larger than the state of New Jersey, most of the land area in Clark County is owned by agencies of the federal government, including the Bureau of Land Management, the Department of Defense, and the U.S. Forest Service. There are five incorporated jurisdictions in the County including Las Vegas, North Las Vegas, Boulder City, Henderson and Mesquite. Clark County provides traditional county services (social services, property assessment) as well as urban services (fire, police, water, sewer). As a result, urban development occurs in the unincorporated areas of Clark County as well as within the cities. The small but growing communities of Pahrump and Mesquite rely primarily on the services provided in the Las Vegas Valley for serving their low-income and homeless populations. The Las Vegas Valley is the nearest metropolitan area to these communities, with the other major metropolitan area of Nevada (the Cities of Reno and Sparks in Washoe County) being approximately a 7-hour drive northwest.

The HCP Consortium Consolidated Plan will involve all of the jurisdictions described above except the City of Henderson. Henderson is its own entitlement community and is not part of the current Consortia. The jurisdictions that are a part of this analysis include unincorporated Clark County, Las Vegas, North Las Vegas, Boulder City and Mesquite, which will be referred to collectively as the HCP Consortium.

Map 1
Clark County, Nevada



Population Growth

The HCP Consortium Area is currently one of the fastest growing metropolitan areas in the nation, with one or more of its cities experiencing a population growth of over 10% each year for the past ten years. The region now has 1.1 million of Nevada's 1.7 million residents, and more than three-quarters of its Temporary Aid to Needy Families (TANF) recipients.

The HCP Consortium population is continuing to grow at an average rate of 6.1% per year, which equates to almost 50,000 new residents per year. As of June 1999, the population of the Consortium was 1,118,082 as indicated in Figure 1. The population of the HCP Consortium is estimated to reach 1,874,431 by the year 2010.

Figure 1
Population Growth
HCP Consortium

Jurisdiction	1990 Census	1999 Estimate	Percent Change 1990 to 1999
Clark County	318,311	524,541	65%
City of Las Vegas	258,295	456,700	77%
City of North Las Vegas	47,707	108,847	128%
Boulder City	12,567	15,686	25%
Mesquite	1,871	12,308	558%
Consortium*	638,751	1,118,082	75%

*Consortium does not include the City of Henderson

Source: Clark County Comprehensive Planning Department, Advanced Planning Division, 2000.

The population growth in the HCP Consortium is largely fueled by the continued expansion of the hotel and gaming industry. An additional 12,476 new hotel rooms were added to the hotel inventory in 1999 with an additional 3,537 planned for 2000, creating an additional 22,500 jobs. This job growth creates a very high migration of persons into Nevada looking for employment and housing.

In-migration from other depressed areas in the United States has presented diverse challenges to the social services and community development infrastructure of the valley. As with other 'Boomtowns' across the nation, the Las Vegas Valley is attracting the poor with plenty of work, but is unable to control the rising housing costs that result from a supply-demand deficit. Individuals and families coming to Las Vegas frequently find that they do not have the skills required for available jobs, that the available jobs do not pay enough to afford the cost of housing, and that the cost of living is not as low as they had anticipated.

Household Population

A household according to the Bureau of the Census is any group of persons living together in a dwelling unit. In addition, a family is defined as persons living in the same household who are related to the householder by birth, marriage, or adoption. Figure 2 indicates the household population and number of households for the HCP Consortium. The household population and number of households have increased by 75% and 58% respectively.

Figure 2
Household Population Data
HCP Consortium

Jurisdiction	Household Population		Number of Households	
	<u>1990</u>	<u>1999</u>	<u>1990</u>	<u>1999</u>
Unincorp. Clark County	318,311	524,541	160,207	231,985
Las Vegas	258,295	456,700	109,670	183,481
North Las Vegas	47,707	108,847	15,837	34,844
Boulder City	12,567	15,686	5,390	6,450
Mesquite	1,871	12,308	684	3,650
Consortium	638,751	1,118,082	291,788	460,410

Source: 1990 Census and Clark County Comprehensive Planning Department, Advanced Planning Division, 2000.

Race/Ethnicity of Population

As Figure 3 indicates, there have been two substantial population shifts in the past nine years. The Hispanic population has increased by more than two percentage points, from 11.6% of the population in 1990 to 13.8% of the population in 1999. The in-migration of Hispanic families into Clark County [HCP Consortium] has also been noted in local newspapers. In fact, this population may be undercounted due to the increased numbers of illegal immigrants from Mexico and Latin America. An article from the December 5, 1999 Las Vegas Sun newspaper estimates approximately 55,000 illegal immigrants reside in Clark County. The other notable increase is the Asian/Pacific Islander population, which has increased from 3.5% in 1990 to 6.0% in 1999.

Figure 3
Race and Ethnicity, 1990 & 1999
HCP Consortium

Ethnic Group	White		Black		Amer. Indian/ Eskimo		Asian/Pac. Islander		Hispanic		Other	
	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>
<u>1990</u>												
County	259,677	80.0	18,590	5.7	2,025	.6	12,846	4.0	31,285	9.6	317	.1
Las Vegas	186,232	72.1	28,704	11.1	1,953	.8	8,735	3.4	32,369	12.5	302	.1
N. Las Vegas	18,061	37.9	17,549	36.8	401	.8	988	2.1	10,590	22.2	118	.2
Boulder City	11,840	94.2	74	.6	71	.6	115	.9	465	3.7	2	0
Mesquite	1,615	86.3	7	.4	17	.9	14	.7	215	11.5	3	.2
Total	477,425	74.0	64,924	10.1	4,467	.7	22,698	3.5	74,924	11.6	742	.1
<u>1999</u>												
Clark County Overall	780,531	69.8	106,751	9.5	10,239	.9	66,557	6.0	154,004	13.8	0	0

Source: 1990 Census and Clark County Comprehensive Planning Department, Advanced Planning Division, 2000.

Age Composition

The age structure of a population is also an important factor in evaluating housing and community development needs and determining the direction of future housing development. A comparison of 1990 Census data and estimated 1999 data indicates a shift in the age of the HCP Consortium's population as shown in Figure 4. As a percentage of the total population the 0-5, 55-64 and 65+ age groups have increased by at least 2%. Furthermore, the numbers of persons within these age groups has increased by 91 to 99% between 1990 and 1999. The aggregate 68% increase in school age children has placed substantial pressure on the local school system as is evidenced by the continuing increases in school enrollment and overcrowding (even with the implementation of year-round school, double sessions and aggressive construction schedules). The other population group showing a significant increase is the 55+ population, which has increased 95% over the past nine years. This reflects the massive in-migration of retirees or near retirees who move here to enjoy the warm weather and recreational activities.

Figure 4
Age Characteristics of the Population*, 1990 & 1999
Clark County

Age Group	1990		1999		1990-1999 Change	
	No.	%	No.	%	No.	% Change
0-5	67,322	9	128,341	11	61,019	91
6-11	66,095	9	92,969	8	26,874	41
12-17	52,958	7	91,717	8	38,759	73
18-24	60,875	8	70,117	6	9,242	15
25-34	130,035	17	155,136	13	25,101	19
35-44	124,634	16	168,283	14	43,649	35
45-54	96,197	13	162,147	14	65,950	69
55-64	76,505	10	146,370	12	69,865	91
65+	87,864	12	174,418	15	86,554	99

*Includes City of Henderson

Source: Las Vegas Perspective, 1990 and 1999

Income

Household income looks at the total income for a single household unit, regardless of how many wage earners live within the household. The distribution of household income in a community is useful in analyzing whether the housing supply is affordable. According to the 1990 Census, 38% of the households in the HCP Consortium are defined as low income, as indicated in Figure 5. A low-income household means that the total household income is less than 80% of the median income for the metropolitan area. The median household income for Clark County in 1990 was \$32,860 compared to \$48,900 in 1999, a 67% increase since 1990. The majority, or 65%, of the low-income households are renters. Elderly households constitute 29 % of the low-income households. The City of North Las Vegas has the greatest number of lower income households, at 53% of the total households.

Figure 5
Percent of Low/Mod* Households by Jurisdiction, 1990
HCP Consortium

Jurisdiction	Low/Mod Households	Total Households	Percent Low/Mod Households
Clark County**	55,475	149,937	37%
Las Vegas	38,173	99,944	38%
N. Las Vegas	7,717	14,450	53%
Consortium	101,365	264,331	38%

* Low/Mod is defined as the households with incomes at or below 80% of area median income.

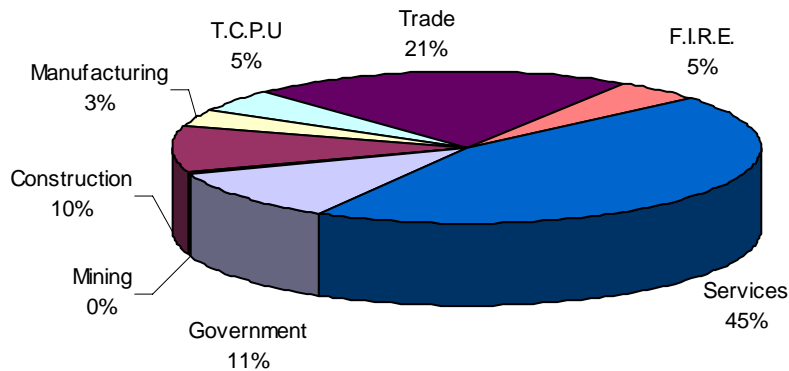
** Includes Mesquite and Boulder City

Source: CHAS Databook, 1994.

Employment Trends

The HCP Consortium's employment base is dominated by low-paying jobs in the service and hotel/gaming/recreation ("htl/gam/rec") arenas. In fact, the Service Industry, which encompasses htl/gam/rec, makes up 45% of all Las Vegas Metropolitan Statistical Area (MSA) jobs, according to the Nevada Labor Market Information prepared by the Research and Analysis Bureau of the Nevada Department of Employment, Training and Rehabilitation (see Figure 6). This industry offers low to moderate wages, with periods of lay-off and reductions in work hours in response to the fluctuations in tourism. The Service Sector offers an average monthly salary of slightly over \$2,200 – an inadequate amount to afford the average apartment rent of \$698. The Retail and Trade sector is the second-largest industry at 20.8% of all Las Vegas MSA jobs and offers an average monthly salary of slightly over \$1,800 an inadequate amount to afford a 2-bedroom apartment at Fair Market Rent (FMR).

Figure 6
Distribution of Employment Among Industries
Clark County (includes Henderson)
November 1999



*F.I.R.E = Finance, Insurance, and Real Estate

**T.C.P.U = Transportation, Communication, and Public Utilities

Source: State of Nevada Department of Employment, Training & Rehabilitation; Research & Analysis Division, 2000.

HOUSING PLAN

Introduction

Like a high stakes game of musical chairs, the number of poor renters increases and they must compete for a diminishing number of affordable places to live. Over 80,000 households are estimated to be paying for housing they cannot really afford. Over half of these households are very low-income renter households with “worst case” housing needs. Households with worst case needs are defined as renters who (1) do not receive federal housing assistance, (2) are very low income, that is, have incomes below 50% of the local area median, and (3) pay more than half of their income for housing or live in severely substandard housing. The social costs of not housing people properly include increased homelessness, family disintegration and joblessness in the face of housing instability, all of which affect the community as a whole. A house is where we nurture and create a safe place for our young to develop their sense of self-esteem. Affordable housing is not an abstract term, but a measure of how well a society provides for its citizens. People should not have to choose between feeding their children and paying their rent.

The four sections of the housing plan include the consultation and citizen participation that took place in the development of the housing plan, the housing needs assessment, the housing market analysis and the housing strategic plan.

Citizen Participation and Consultation

Clark County

Clark County brought together a Housing Policy Task Force to discuss housing issues as they relate to unincorporated Clark County. This task force was instrumental in the development and final manifestation of the policies that appear in the Clark County Housing Strategic Plan. This group included representation from non-profit and for-profit housing developers, banking, planning consultants and the Town Advisory Boards/Citizen Advisory Councils.

Housing Policy Task Force active members’ organizations:

Americana Group	Mendenhall Moreno and Associates
Castle Property Management	Nevada Fair Housing Center
Clark County Community Resources Management	Nevada Manufactured Housing Association
Clark County Comprehensive Planning	Norwest Bank
Clark County Housing Authority	Paradise Town Advisory Board Chair
Economic Opportunity Board Housing Division	Southern Nevada Home Builders Association
Enterprise Town Board Chair	Sunrise Manor Town Advisory Board Chair
Fannie Mae	Whitney Town Advisory Board Chair
Individual Housing Advocates	Winchester Town Advisory Board Chair
Lone Mountain Community Advisory Council Chair	Women’s Development Center

The Housing Policy Task Force met from October 1999 through April 2000. Initial input from the community was solicited through two workshops open to the public. Using the information gathered at those meetings, as well as research provided by staff, the Task Force discussed the variety of issues related to affordable housing including concerns about neighborhood quality, NIMBYism, and fair housing. Upon completion of a Draft Housing Policy Plan, the County held two workshops to present the policies and solicit comments. The comments received both orally and in writing were then reviewed by the Task Force and some changes were incorporated into the housing policies. Concerned citizens, housing organizations, homeless service agencies and other public service organizations were represented at the workshops, as is illustrated below.

Workshop attendees' organizations:

- | | |
|---|--|
| Business Bank of Nevada | Las Vegas Indian Center |
| Caminar | MASH Village & CIC |
| Citibank | Nevada Business Services |
| City of Las Vegas | Nevada Division for Aging Services |
| City of North Las Vegas | Nevada Fair Housing Center |
| Clark County Community Resources Mgmt. | Nevada HAND |
| Clark County Comprehensive Planning Dept. | Nevada Homes for Youth |
| Clark County Housing Authority | Nevada State Bank |
| Clark County School District | North Las Vegas Housing Authority |
| Clark County Social Services | On the Way Home, Inc. |
| Community Development Programs Center of NV | Southern Nevada Home Builders Association |
| Economic Opportunity Board | State Manufactured Housing |
| Fannie Mae | The Salvation Army |
| God Refuge | Urban Town Advisory Board Members and Chairs |
| Golden Rainbow | Wells Fargo Bank |
| Habitat for Humanity | Vietnam Veterans of America Chapter 17 |
| HUD | WestCare |
| Key Foundation (Homeless Veterans) | Women's Development Center |

Additional input was solicited from the Town Advisory Boards and Citizen Advisory Councils in the outlying unincorporated towns of Clark County. The final draft of the Consolidated Plan was made available for the required 30-day comment period during which an additional public hearing was held and final approval took place at the May 2, 2000 Board of County Commissioners meeting.

Las Vegas

To ensure citizen and non-profit participation in the Consolidated Plan process, the City of Las Vegas sponsored five "Community Needs and Priorities Review" public meetings in October 1999. An additional public hearing was held on April 5, 2000 while the draft document was available for public review and comment. Projects or programs which attempt to meet one or more of the community priorities discussed at those public meetings receive higher consideration by the Community Development Recommending Board (CDRB), the citizen board that makes recommendations for funding to the Las Vegas City Council.

The CDRB is a citizen's advisory group, appointed by the Las Vegas City Council. Its members are appointed to represent the concerns and opinions of the community in advising the City of Las

Vegas on the allocation of CDBG, HOME and HOPWA funds, including review and evaluation of proposed community development projects. CDRB members represent target neighborhoods and populations, including low-income, disabled, minorities, elderly and the community at large.

Through a series of open meetings and with the assistance of the Neighborhood Services Department staff, the CDRB reviews past projects, examines changes in community needs and explores trends as they affect community development as outlined in the Consolidated Plan, and subsequently evaluates and recommends projects to the City Council. To arrive at a sound recommendation, the CDRB uses a review process that includes a careful evaluation of each eligible proposal within the context of program design and against program criteria and current objectives, both national and those outlined in the Consolidated Plan. As part of their review, CDRB members consider the ability of the participating parties to carry out the requirements of a performance agreement.

North Las Vegas

The City of North Las Vegas Grants Administration Division held four workshops to solicit input on housing and community development issues. The meetings were held at four different locations throughout North Las Vegas including the North Las Vegas Library, the North Las Vegas Housing Authority, the Economic Opportunity Board MLK Senior Center and the North Las Vegas Recreation Center. Posters with meeting dates and times were placed throughout the community, notices of meetings were put into over 8,000 water bills and invitations were sent to non-profit organizations. Input from the meetings included concerns about the need for new senior and family rental housing, downpayment assistance for seniors and disabled, housing rehabilitation, infill housing development and the relocation of residents from the Windsor Park Subdivision. (Issues relating to community development are identified in the Community Development section of this plan.)

Boulder City

Boulder City held a public hearing at its February 16, 2000 Planning Commission meeting to solicit public input on proposed housing and community development policies. The Boulder City Council adopted the housing and community development goals outlined in the Consolidated Plan on February 22, 2000. Boulder City does not receive separate funding for housing specific activities.

Mesquite

The Mesquite City Council took action in March 1999 to approve using their allotment of CDBG funds toward building a new Senior Center. The final approval to use CDBG funds through FY 2004 for the new Senior Center development was approved at the March 7, 2000 City Council meeting. Mesquite does not have separate funding for housing specific activities.

Adjacent Governments

The Consortium Consolidated Plan is developed through a cooperative effort between all jurisdictions affected by the plan. Each jurisdiction is consulted and the two largest jurisdictions,

Clark County and Las Vegas, jointly research and write the plan. The separate meetings held by each jurisdiction are summarized for the Consolidated Plan team and many discussions are held regarding accuracy of data, proposed strategies, and plan implementation methods. The City of Henderson participates in monthly Consortium meetings where discussion of issues, including the Consolidated Plan, takes place. The Consortium reviewed the City of Henderson and State of Nevada Consolidated Plans as well as submitted the Consortium Consolidated Plan to both jurisdictions for their review and comment. The plans are consistent and outline similar goals for the five-year period.

Housing Authorities

Discussions were held between the local Housing Authorities and their respective jurisdictional governments regarding the development of the Consolidated Plan and the Housing Authorities' 5-year Plans. The Clark County Housing Authority (CCHA) Executive Director participated in the Clark County Housing Policy Task Force in order to ensure that the Clark County plans were compatible. The City of Las Vegas worked directly with the director of the Las Vegas Housing Authority (LVHA). The North Las Vegas Housing Authority (NLVHA) used data provided by Clark County to complete its plan and several meetings were held between the NLVHA and the Grants Administration Division for North Las Vegas. The CCHA and LVHA also used data provided by Clark County and the City of Las Vegas in the completion of their 5-Year Plan. See the Housing Plan for specific objectives regarding the Housing Authorities over the next five years.

Lead Based Paint

The State of Nevada Laboratory was consulted regarding the prevalence of lead-based paint poisoning in the Consortium area.

HIV/AIDS

The Clark County Health District, Public Nursing Division was consulted regarding the needs and issues facing persons with HIV/AIDS. The City of Las Vegas administers the Housing Opportunities for Persons with AIDS (HOPWA) funding for the Las Vegas Metropolitan Statistical Area, which includes all jurisdictions in Clark County as well as Nye County, Nevada and Mohave County, Arizona.

Housing Needs Assessment

Although many Southern Nevadans are familiar with the concepts presented here, this Plan is also written for an audience of federal officials and others who may not be as well acquainted with the county. Housing advocates, sponsors and local governments should find this material particularly useful in educating funders, partners and policymakers about Southern Nevada and the challenges encountered here in meeting the need for quality, affordable housing and viable, healthy communities.

Data Sources

Various sources of data were used to assess housing needs in the HCP Consortium Area. Primary sources included the U.S. Census of Population and Housing (1990), and the CHAS Databook for Nevada (Fiscal Year 1994).

The population of Clark County has nearly doubled since the 1990 Census but new census data is not available to reflect those increases. Therefore, the number of households in need indicated in the following tables may be considered severely under-reported. Information from the 1996 Affordable Housing Needs Assessment, completed for Clark County Affordable Housing Committee, is used to provide projections on housing needs near the end of this section. The numbers of substandard units remain the same as they are based on the age of housing.

Categories Of Persons Affected

The following is an analysis of HUD Census data indicating housing need as a function of various housing problems including cost burden, overcrowding and substandard housing conditions. The U.S. Department of Housing and Urban Development (HUD) has adopted definitions for income groups. The definitions of income groups applicable to the Consolidated Plan are listed below:

Extremely-Low-Income

Households whose income is between 0 and 30 % of the median family income for the area, as determined by HUD

Low Income

Households whose income does not exceed 50 % of the median family income for the area, as determined by HUD

Moderate Income

Households whose income does not exceed 80 % of the median family income for the area, as determined by HUD

Middle Income

Households whose income is between 81 and 95 % of the median family income for the area, as determined by HUD

Cost Burden, Overcrowding and Race/Ethnicity

As the next section will identify, a majority of extremely low- and low-income households' housing problems are related to excessive costs. It should be noted that cost burdened households may also be living in substandard housing as no further breakdown of housing problems was provided in the HUD cross tabulations. The following section is based on several defined categories as addressed below:

A household has a housing cost burden when gross housing costs, including utilities, exceed 30% of gross household income.

Cost Burden = 30% or more of income spent on housing expenses

A household that spends over 50 % of its gross income on housing and utility costs has a severe cost burden of housing.

Severe Cost Burden = 50% or more of income spent on housing expenses

Overcrowded housing conditions exist when there is more than one inhabitant per room.

The cost burden tables are broken down by housing problems, as described above, and by household size as follows:

Elderly households (1- and 2- persons)

Small-related households (2-4 persons)

Large related households (5+ persons)

Other households (generally non-elderly, 1-person households)

The following define the incomes specifically for the Las Vegas MSA in 1990. This information is useful to understanding the level of need as presented in the next section.

Extremely low-income households earned \$9,224 or less per year based upon income between 0 and 30% of the area median household income for the HCP Consortium, which was \$30,746 in 1990.

Low-income households earned \$15,373 or less per year based upon income between 31 and 50% of the area median household income for the HCP Consortium, which was \$30,746 in 1990.

Moderate-income households earned \$24,597 or less per year based upon income between 51 and 80% of the area median household income for the HCP Consortium, which was \$30,746 in 1990.

Middle-income households earned \$29,209 or less per year based upon income between 81 and 95% of the area median household income for the HCP Consortium, which was \$30,746 in 1990.

Race/Ethnicity

Any problem with housing (“Cost Burden”, “Severe Cost Burden”, “Overcrowding” and “Sub-Standard Condition”) by Race and Ethnicity is broken down by All, All Minority, Black, and Hispanic (all races) households. A difference of 10% or more (of housing problems) between All Owners or All Renters and the minority groups listed indicates a disproportionate need of a minority group. Additional information concerning the specific needs of Asian/Pacific Islander and Native American/Eskimo populations is covered in the section entitled “Disproportionate Needs of Racial/Ethnic Groups.

Special Needs

While no information is available for single, HIV/AIDS, or disabled households in the following tables, we can assume that many of these households are cost burdened based on the cost of medical care and medicines for those with HIV/AIDS and the inability of many disabled people to work. Both HIV/AIDS and disabled households needs are addressed in the section entitled “HCP Consortium Residents with Special Needs”.

Need Projections

At the end of this section, information from the “Affordable Housing Needs in Clark County 1996-2010” has been included to provide more current information on the extent of need. However, it is important to note that the information from this study is a projection of need.

Summary of Cost Burden, Overcrowding, and Race/Ethnicity

The following summary is provided to illustrate the primary issues facing the HCP Consortium concerning cost burden, overcrowding and race/ethnicity. A further breakdown by jurisdiction is also available in this section.

General

- As of 1990, approximately 20% of all households in the HCP Consortium Area were extremely low-income households. North Las Vegas had the highest proportion (33%) of extremely low-income households.
- Approximately 57% of households in the HCP Consortium Area having housing cost burden were located in Unincorporated Clark County. Of those, 23% (9,768 households) were extremely low-income (income at 30% or below MFI).
- Approximately 70% of all cost burdened, Elderly households in the HCP Consortium Area were located in Unincorporated Clark County.
- Approximately 37% of households in the HCP Consortium Area having housing cost burden were located in the City of Las Vegas. Of those, 29% (8,082 households) had incomes at 0-30% of MFI (extremely low-income).
- North Las Vegas experienced the highest percentage of overcrowded renter households in the HCP Consortium at 22.5% of all renter households.
- North Las Vegas has the highest percentage of low/moderate income households in the HCP Consortium at 53% of all households.

Renters

- A full 17% of all renters have a cost burden of 50% or more, meaning 21,529 households are severely cost burdened in the HCP Consortium at all income levels.
- Within each jurisdiction in the HCP Consortium Area, over two-thirds (between 66 and 69%) of those households with a housing cost burden and/or a severe housing cost burden were Renter households.
- Of all HCP Consortium income groups, Renter households in the 31-50% of MFI range are the most likely to be paying more than 30% of their incomes for rent (79%), with households in the 0-30% of MFI range having the highest incidence of severe cost burden (64% paying over 50% of their incomes for housing related costs).

- Of all household groups, Elderly Renter households are the most cost burdened, with 53% paying more than 30% of their incomes for rent. All Other households are also cost burdened, with 51% paying more than 30 of their incomes for rent.
- Small Related households represent the largest renter household category, 49,905 total households, with All Other households following closely with 44,702 households.
- Total owner households reported significantly less incidence of overcrowding at 5.7% than Total renter households at 14.7%. Therefore, Renter households were much more likely to experience problems of overcrowding than owner households.
- Over 18,000 renter households in the HCP Consortium Area were living in overcrowded conditions. Approximately 63% (11,367 households) of these households were categorized as having incomes at 80% or below MFI. The majority of overcrowded households are low-income (income between 31 and 50% of area median income).

Owners

- Of all HCP Consortium Owners, those within the extremely low-income category (0-50% of MFI) are most likely to be paying more than 30% of their income on housing related costs. As might be expected for homeowners, those in the lowest income category (0-30% of MFI) are most cost burdened with housing expenses (70%), although those in the 31-50% of MFI category are similarly cost burdened at 64%.
- Elderly Owner households are less cost burdened in all income categories than other households probably due to longer residency in the HCP Consortium, therefore a lower mortgage amount or no mortgage. The needs of Elderly Owner households tend more toward rehabilitation.

Race/Ethnicity

- Geographic areas with the highest concentration of Black and Hispanic households coincided with areas of high concentrations of households below the poverty level.
- Moderate-income Minority Owners were overall more likely to experience housing problems than All Owners.
- Compared to surrounding urban areas, North Las Vegas had the lowest proportion of middle-income minority households within its boundaries.

CONSORTIUM: Assessment of Cost Burden, Overcrowding, and Race/Ethnicity Needs

This section contains an analysis of the cost burden, overcrowding and race/ethnicity needs in the HCP Consortium for 1990.

Figure 7
Percent of Overcrowded Households, 1990
HCP Consortium

Income Groups	Renters		Owners	
	Total Households	Large Related Households	Total Households	Other Non-Elderly Households
Extremely Low Income (0-30% MFI)	15.9%	73.7%	6.4%	10.6%
Low Income (31-50% MFI)	17.8%	76.8%	4.8%	8.2%
Moderate Income (51-80% MFI)	18.2%	64.8%	7.5%	11.0%
Total of All Income Groups	14.7%	61.1%	5.7%	7.1%

Source: CHAS Databook 1994, Table 8

Figure 8
Housing Problems by Race and Ethnicity, 1990
HCP Consortium

Household Type	Housing Problem	Income Category		
		Ex. Low 0 - 30%	Low 31 - 50%	Mod. 51 - 80%
All Owner	Report Any Housing Problem	4,940 74.2%	5,584 64.0%	9,280 45.6%
All Minority Owner	Report Any Housing Problem	981 74.0%	1,126 74.0%	1,965 59.4%
Black Owner	Report Any Housing Problem	465 78.7%	448 71.0%	668 55.7%
Hispanic Owner	Report Any Housing Problem	205 67.9%	451 73.6%	802 64.2%
All Renter	Report Any Housing Problem	16,481 79.0%	18,012 87.2%	18,217 60.3%
All Minority Renter	Report Any Housing Problem	6,259 80.8%	5,680 88.1%	5,049 61.8%
Black Renter	Report Any Housing Problem	3,540 77.5%	2,391 82.8%	2,088 60.4%
Hispanic Renter	Report Any Housing Problem	1,989 88.8%	2,700 93.1%	2,138 63.6%

Note: Boulder City totals are included in the HCP Consortium Area totals.

Source: CHAS Databook, Table 6 (Parts 1-4).

Figure 9
 Cost Burden by Household Type, Income and Housing Problem, 1990
 HCP Consortium

Household by Type, Income & Housing Problem	Renters					Owners		
	Elderly	Small Families	Large Families	All Other	Total Renters	Elderly	All Other	Total Owners
Extremely Low Income (0-30% MFI)	5,321	5,941	1,387	6,342	18,991	3,512	3,518	7,030
# with any housing problem	3,860	4,898	1,299	5,072	15,129	2,399	2,596	4,995
% with any housing problem	73%	82%	94%	80%	80%	68%	74%	71%
# with cost burden > 30% < 50%	726	708	293	285	2,012	620	384	1,004
% with cost burden > 30% < 50%	14%	12%	21%	4%	11%	18%	11%	14%
# with cost burden > 50%	3,098	4,026	847	4,731	12,702	1,779	2,136	3,915
% with cost burden > 50%	58%	68%	61%	75%	67%	51%	61%	56%
Low Income (31-50% MFI)	4,195	6,666	1,994	6,076	18,931	4,586	4,297	8,883
# with any housing problem	3,525	5,976	1,888	5,654	17,043	2,459	3,392	5,851
% with any housing problem	84%	90%	95%	93%	90%	54%	79%	66%
# with cost burden > 30% < 50%	1,871	3,309	914	2,872	8,966	1,334	1,008	2,342
% with cost burden > 30% < 50%	45%	50%	46%	47%	47%	29%	23%	26%
# with cost burden > 50%	1,592	2,441	509	2,674	7,216	1,118	2,221	3,339
% with cost burden > 50%	38%	37%	26%	44%	38%	24%	52%	38%
Moderate Income (51-80% MFI)	4,142	11,606	3,108	10,025	28,881	7,441	11,206	18,647
# with any housing problem	2,473	7,150	2,561	6,767	18,951	2,204	7,261	9,465
% with any housing problem	60%	62%	82%	68%	66%	30%	65%	51%
# with cost burden > 30% < 50%	2,044	5,795	995	5,833	14,667	1,543	4,739	6,282
% with cost burden > 30% < 50%	49%	50%	32%	58%	51%	21%	42%	34%
# with cost burden > 50%	341	426	75	661	1,503	553	1,980	2,533
% with cost burden > 50%	8%	4%	2%	7%	5%	7%	18%	14%
Middle Income (81-95% MFI)	1,273	5,720	1,175	4,943	13,111	3,176	8,236	12,911
# with any housing problem	431	1,656	689	1,659	4,435	675	4,325	5,000
% with any housing problem	34%	29%	59%	34%	34%	21%	53%	39%
# with cost burden > 30% < 50%	387	1,133	129	1,433	3,082	558	3,732	4,290
% with cost burden > 30% < 50%	30%	20%	11%	29%	24%	18%	45%	33%
# with cost burden > 50%	22	24	0	62	108	108	422	530
% with cost burden > 50%	2%	0%	0%	1%	1%	3%	5%	4%
Total Lower Income Households	13,658	24,213	6,489	22,443	66,805	15,539	19,020	39,143
# with any housing problem	9,858	18,024	5,748	17,493	51,123	7,062	13,249	20,318
% with any housing problem	72%	74%	89%	78%	77%	45%	70%	59%
Total Households	19,092	49,905	11,359	44,702	126,058	33,601	104,672	138,273
# with any housing problem	10,289	19,680	6,437	19,152	55,558	8,880	28,445	37,325
% with any housing problem	54%	39%	57%	43%	44%	26%	27%	27%

Extremely Low-Income Households (0-30%)

Renters

Cost Burden: Approximately 59% (12,702 households) of all extremely low-income renter households experienced a severe cost burden (50% or more of income for housing expenses). All Other and Small Family renter households experienced the highest rates of severe cost burden at 61% and 68% respectively.

Overcrowding: Extremely low-income large family renter households experienced overcrowding at significantly higher rates (73.7%) than renter households overall (14.7%).

Owners

Cost Burden: All owner households report a high incidence of severe cost burden (61% for All Other households, 51% for Elderly Households). Approximately 38% (3,915 households) of all severely cost burdened owner households were extremely low-income.

Overcrowding: Extremely low-income households were not more likely to experience overcrowding than other low- to moderate-income groups.

Race/Ethnicity

Extremely low-income Hispanic Renters were almost 10% more likely to experience a housing problem.

Low-Income Households (31-50%)

Renters

Cost Burden: Low-income renter households experienced cost burden (47%) and severe cost burden (38%) at a higher rate than the total of all renter households (41% at 30% burden, 17% at 50% burden).

Overcrowding: Low-income large family renter households experienced overcrowding at higher rate (78.6%) than other low and moderate-income renter households.

Owners

Cost Burden: All Other low-income owner households, presumably small and large related families, reported a higher incidence of severe cost burden (52%) than the total of all owner households (8%). This group also had a higher incidence of other housing problems, either overcrowding and/or substandard conditions.

Overcrowding: Total low-income owner households reported significantly less incidence of overcrowding than Total low-income renter households at only 4.8% as compared to 17.8%.

Race/Ethnicity

Low-income Minority Owners were 10% more likely to experience housing problems than All Owners.

Moderate-Income Households (51-80%)

Renters

Cost Burden: Elderly, Small Family and All Other households had a higher percentage of cost burden than total renter households. Large family households experienced a lower cost burden than total renter households, but experienced a high rate of overcrowding.

Overcrowding: Moderate-income renter households experienced the highest percentage of overcrowding at 18.2%, as compared to 14.7% for all households. While 73.7% (1,002 households) of extremely low income and 76.8% (1,531 households) of low-income large-family households were overcrowded, as compared to 64.8% of moderate-income large family households, the total number of moderate-income households overcrowded was 2,013.

Owners

Cost Burden: All Other moderate-income owner households, presumably Small and Large Families, reported a higher incidence of 30% or more cost burden than all owner households. Elderly households reported the lowest incidence of cost burden.

Overcrowding: Total moderate owner households reported more incidence of overcrowding than other income groups. However, overall moderate owner households reported significantly less incidence of overcrowding than Total moderate renter households at only 5.7%

Race/Ethnicity

Moderate-income Minority Owners were 13.8% more likely to experience housing problems than All Owners.

Middle-Income Households (81-95%)

Renters

Cost Burden: All middle-income renter households experienced a lower cost burden than renter households overall. Therefore, it is likely that those middle-income renter households experiencing cost burden do so as a matter of lifestyle choice.

Overcrowding: While no Census data relative to overcrowding is available for middle-income households, 89% of the large family renter households reporting any housing problem were lower income. Therefore, presumably 11% of households are middle income or higher. It is likely that most Large Family households at this income level are able to afford to rent larger residences to accommodate their needs.

Owners

Cost Burden: All Other middle-income owners reported a higher incidence of cost burden, however, this is most likely a lifestyle choice.

Overcrowding: No Census data available.

CLARK COUNTY: Assessment of Cost Burden, Overcrowding, and Race/Ethnicity Needs

This section contains an analysis of the cost burden, overcrowding and race/ethnicity needs in the HCP Consortium for 1990.

Figure 10
Clark County
Percent of Overcrowded Households, 1990

Income Groups	Renters		Owners	
	Total Households	Large Related Households	Total Households	Other Non-Elderly Households
Extremely Low Income (0-30% MFI)	11.4%	67.3%	3.4%	6.8%
Low Income (31-50% MFI)	13.5%	70.3%	3.3%	6.7%
Moderate Income (51-80% MFI)	12.5%	62.1%	4.8%	7.7%
Total	9.9%	53.3%	3.3%	4.2%

Source: CHAS Databook 1994, Table 8

Figure 11
Clark County
Housing Problems by Race and Ethnicity, 1990

Household Type	Housing Problem	Income Category		
		Ex. Low 0 - 30%	Low 31 - 50%	Mod. 51 - 80%
All Owner	Report Any Housing Problem	2,782 70.7%	3,201 65.6%	5,278 50.8%
All Minority Owner	Report Any Housing Problem	370 70.8%	449 74.7%	844 61.7%
Black Owner	Report Any Housing Problem	113 78.3%	108 72.9%	185 59.4%
Hispanic Owner	Report Any Housing Problem	55 65.0%	216 71.3%	337 59.0%
All Renter	Report Any Housing Problem	8,447 79.6%	9,403 89.8%	10,625 66.0%
All Minority Renter	Report Any Housing Problem	2,499 81.7%	2,429 89.7%	2,305 64.8%
Black Renter	Report Any Housing Problem	1,171 78.2%	888 85.1%	868 63.7%
Hispanic Renter	Report Any Housing Problem	889 87.6%	1,222 93.5%	1,024 67.0%

Source: CHAS Databook, Table 6 (Parts 1-4).

Figure 12
Clark County
Cost Burden by Household Type, Income and Housing Problem, 1990

Household by Type, Income & Housing Problem	Renters					Owners		
	Elderly	Small Families	Large Families	All Other	Total Renters	Elderly	All Other	Total Owners
Extremely Low Income (0-30% MFI)	2,306	2,479	396	3,665	8,846	2,122	2,000	4,122
# with any housing problem	1,834	2,047	361	2,855	7,097	1,391	1,456	2,847
% with any housing problem	80%	83%	91%	78%	80%	66%	73%	69%
# with cost burden > 30% < 50%	119	280	45	89	533	298	212	510
% with cost burden > 30% < 50%	5%	11%	11%	2%	6%	14%	11%	12%
# with cost burden > 50%	1,715	1,703	264	2,750	6,432	1,093	1,200	2,293
% with cost burden > 50%	74%	69%	67%	75%	73%	52%	60%	56%
Low Income (31-50% MFI)	2,361	3,320	884	3,199	9,764	2,936	2,326	5,262
# with any housing problem	2,229	3,023	800	3,109	9,161	1,580	1,872	3,452
% with any housing problem	94%	91%	90%	97%	94%	54%	80%	66%
# with cost burden > 30% < 50%	959	1,505	398	1,443	4,305	807	603	1,410
% with cost burden > 30% < 50%	41%	45%	45%	45%	44%	27%	26%	27%
# with cost burden > 50%	1,224	1,426	293	1,636	4,579	773	1,187	1,960
% with cost burden > 50%	52%	43%	33%	51%	47%	26%	51%	37%
Moderate Income (51-80% MFI)	2,489	7,034	1,295	6,001	16,819	4,522	6,140	10,662
# with any housing problem	1,745	4,405	1,005	4,193	11,348	1,506	3,959	5,465
% with any housing problem	70%	63%	78%	70%	67%	33%	64%	51%
# with cost burden > 30% < 50%	1,454	3,708	440	3,674	9,276	1,103	2,547	3,650
% with cost burden > 30% < 50%	58%	53%	34%	61%	55%	24%	41%	34%
# with cost burden > 50%	264	233	24	419	940	312	1,187	1,499
% with cost burden > 50%	11%	3%	2%	7%	5%	7%	19%	14%
Middle Income (81-95% MFI)	849	3,326	492	3,066	7,733	1,990	4,444	7,933
# with any housing problem	292	972	248	1,126	2,638	397	2,375	2,772
% with any housing problem	34%	29%	50%	37%	34%	20%	53%	35%
# with cost burden > 30% < 50%	261	660	51	1,023	1,995	333	2,335	2,668
% with cost burden > 30% < 50%	31%	20%	10%	33%	26%	17%	53%	34%
# with cost burden > 50%	22	8	0	62	92	55	249	304
% with cost burden > 50%	3%	0%	0	2%	1%	3%	6%	4%
Total Lower Income Households	7,156	12,833	2,575	12,865	35,429	9,580	10,466	20,046
# with any housing problem	5,808	9,475	2,166	10,157	27,606	4,477	7,287	11,764
% with any housing problem	81%	74%	84%	79%	78%	47%	70%	59%
Total Households	10,892	28,378	5,079	26,884	71,233	20,708	57,996	78,704
# with any housing problem	6,357	11,683	3,138	12,057	33,235	5,567	15,846	21,413
% with any housing problem	58%	41%	62%	45%	47%	27%	27%	27%

Extremely Low-Income Households (0-30%)

Renters

Cost Burden: Approximately 73% (6,432 households) of all extremely low-income renter households experienced a severe cost burden (50% or more of income for housing expenses). All Other and Elderly renter households experienced the highest rates of severe cost burden at 75% and 74% respectively

Overcrowding: Extremely low-income large family renter households experienced overcrowding at significantly higher rates (67.3%) than renter households overall (9.9%).

Owners

Cost Burden: All owner households report a high incidence of severe cost burden (60% for All Other households, 52% for Elderly Households). Approximately 38% (2,893 households) of all severely cost burdened owner households were extremely low-income.

Overcrowding: Overcrowding does not appear to be a significant problem for owner households.

Race/Ethnicity

No disproportionate need exists by race or ethnicity in this income group.

Low-Income Households (31-50%)

Renters

Cost Burden: Clark County had the highest rate of households experiencing a cost burden or severe cost burden at 91% (8,884 households) of all low-income renter households. Elderly and All Other low-income renter households experienced a severe cost burden at 52% and 51% respectively.

Overcrowding: Low-income large family renter households experienced overcrowding at highest rate (70.3%) among other low and moderate-income renter households.

Owners

Cost Burden: All Other low-income owner households, presumably small and large related families, reported a higher incidence of severe cost burden (60%) than the total of all owner households (7%). Elderly owner households were only slightly less severely cost burdened at 52% or 1,093 households.

Overcrowding: Total low-income owner households reported significantly less incidence of overcrowding than Total low-income renter households at only 3.3% as compared to 13.5%.

Race/Ethnicity

No disproportionate need exists by race or ethnicity in this income group.

Moderate-Income Households (51-80%)

Renters

Cost Burden: Elderly, Small Family and All Other households had a higher percentage of cost burden than total renter households. Large family households experienced a lower cost burden than total renter households, but experienced a high rate of overcrowding.

Overcrowding: Moderate-income Large Family renter households experienced a high percentage of overcrowding at 62.1% as compared to 9.9% of total renter households.

Owners

Cost Burden: All Other moderate-income owner households, presumably Small and Large Families, reported a higher incidence of 30% or more cost burden than all owner households. Elderly households reported a lower incidence of cost burden.

Overcrowding: Moderate-income owner households were not more likely to experience overcrowding than other low- to moderate-income groups. Overcrowding does not appear to be a significant problem for owner households.

Race/Ethnicity

All moderate-income Minority Renters are 10.9% more likely to experience a housing problem than All Renters.

Middle-Income Households (81-95%)

Renters

Cost Burden: All middle-income renter households experienced a lower cost burden than renter households overall. Therefore, it is likely that those middle-income renter households experiencing cost burden do so as a matter of lifestyle choice.

Overcrowding: No Census data available.

Owners

Cost Burden: All Other middle-income owners reported a higher incidence of cost burden (53%), however, this is most likely a lifestyle choice.

Overcrowding: No Census data available.

LAS VEGAS: Assessment of Cost Burden, Overcrowding, and Race/Ethnicity Needs

This section contains an analysis of the cost burden, overcrowding and race/ethnicity needs in the City of Las Vegas for 1990.

Figure 13
Las Vegas
Percent of Overcrowded Households, 1990

Income Groups	Renters		Owners	
	Total Households	Large Related Households	Total Households	Other Non-Elderly Households
Extremely Low Income (0-30% MFI)	13.2%	66.7%	3.1%	6.5%
Low Income (31-50% MFI)	14.6%	73.9%	2.5%	4.8%
Moderate Income (51-80% MFI)	15.6%	60.8%	4.3%	6.8%
Total	11.8%	56.1%	3.1%	4.0%

Source: CHAS Databook 1994, Table 8

Figure 14
Las Vegas
Housing Problems by Race and Ethnicity, 1990

Household Type	Housing Problem	Income Category		
		Ex. Low 0 - 30%	Low 31 - 50%	Mod. 51 - 80%
All Owner	Report Any Housing Problem	1,619 72.1%	1,989 68.0%	3,449 52.4%
All Minority Owner	Report Any Housing Problem	316 61.1%	418 75.8%	786 67.3%
Black Owner	Report Any Housing Problem	155 66.1%	204 69.8%	287 64.6%
Hispanic Owner	Report Any Housing Problem	97 52.4%	121 76.4%	344 65.9%
All Renter	Report Any Housing Problem	6,666 79.4%	7,221 86.0%	6,791 65.0%
All Minority Renter	Report Any Housing Problem	2,836 82.6%	2,381 87.4%	2,142 62.9%
Black Renter	Report Any Housing Problem	1,653 79.6%	1,073 81.5%	864 59.7%
Hispanic Renter	Report Any Housing Problem	913 85.9%	1,093 93.6%	882 63.3%

Source: CHAS Databook, Table 6 (Parts 1-4).

Figure 15
Las Vegas

Cost Burden by Household Type, Income and Housing Problem, 1990

Household by Type, Income & Housing Problem	Renters					Owners		
	Elderly	Small Families	Large Families	All Other	Total Renters	Elderly	All Other	Total Owners
Extremely Low Income (0-30% MFI)	2,767	2,566	690	2,374	8,397	1,177	1,060	2,237
# with any housing problem	1,885	2,141	644	1,995	6,665	853	759	1,612
% with any housing problem	68%	83%	93%	84%	79%	73%	72%	72%
# with cost burden > 30% < 50%	565	344	173	185	1,267	283	116	399
% with cost burden > 30% < 50%	20%	13%	25%	8%	15%	24%	11%	18%
# with cost burden > 50%	1,292	1,728	422	1,770	5,212	570	634	1,204
% with cost burden > 50%	47%	67%	61%	75%	62%	48%	60%	54%
Low Income (31-50% MFI)	1,676	2,542	743	2,586	7,547	1,415	1,530	2,945
# with any housing problem	1,212	2,258	727	2,293	6,490	803	1,201	2,004
% with any housing problem	72%	88%	98%	89%	86%	57%	79%	68%
# with cost burden > 30% < 50%	860	1,300	353	1,251	3,764	478	277	755
% with cost burden > 30% < 50%	51%	51%	48%	48%	50%	34%	18%	26%
# with cost burden > 50%	336	864	159	964	2,323	318	883	1,201
% with cost burden > 50%	20%	34%	21%	37%	31%	23%	58%	41%
Moderate Income (51-80% MFI)	1,558	3,807	1,320	3,776	10,461	2,538	4,048	6,586
# with any housing problem	714	2,447	1,156	2,485	6,802	660	2,788	3,448
% with any housing problem	46%	64%	88%	66%	65%	26%	69%	52%
# with cost burden > 30% < 50%	585	1,845	474	2,076	4,980	411	1,917	2,328
% with cost burden > 30% < 50%	38%	49%	36%	55%	48%	16%	47%	68%
# with cost burden > 50%	68	193	37	236	534	232	722	954
% with cost burden > 50%	4%	5%	3%	6%	5%	9%	18%	27%
Middle Income (81-95% MFI)	410	2,024	475	1,752	4,661	1,024	3,125	4,149
# with any housing problem	139	634	319	528	1,620	271	1,672	1,943
% with any housing problem	34%	31%	67%	30%	35%	27%	54%	47%
# with cost burden > 30% < 50%	126	446	59	405	1,036	218	1,239	1,457
% with cost burden > 30% < 50%	31%	22%	12%	23%	22%	21%	40%	35%
# with cost burden > 50%	0	16	0	0	16	53	163	216
% with cost burden > 50%	0%	0%	0%	0%	0%	5%	5%	5%
Total Lower Income Households	6,001	8,915	2,753	8,736	26,405	5,130	6,637	11,768
# with any housing problem	3,811	6,846	2,527	6,773	19,957	2,316	4,748	7,064
% with any housing problem	64%	77%	92%	78%	76%	45%	72%	60%
Total Households	7,638	18,895	4,647	16,524	47,704	11,596	40,644	52,240
# with any housing problem	4,031	8,431	3,397	7,708	23,567	3,025	10,598	13,623
% with any housing problem	53%	45%	73%	47%	49%	26%	26%	26%

Extremely Low-Income Households (0-30%)

Renters

Cost Burden: Approximately 62% (5,212 households) of all extremely low-income renter households experienced a severe cost burden (50% or more of income for housing expenses). All Other and Small Family households experienced the highest percentage of severe cost burden at 75% and 67% respectively.

Overcrowding: Extremely low-income large family renter households experienced overcrowding at significantly higher rates (66.7%) than renter households overall (11.8%).

Owners

Cost Burden: All owner households report a high incidence of severe cost burden (60% for All Other households, 48% for Elderly Households). Approximately 34% (1,204 households) of all severely cost burdened owner households were extremely low-income.

Overcrowding: Extremely low-income owner households were not more likely to experience overcrowding than other income groups. Overcrowding does not appear to be a significant problem for owner households.

Race/Ethnicity

No disproportionate need exists by race or ethnicity in this income group.

Low-Income Households (31-50%)

Renters

Cost Burden: A high rate of 85% (6,087 households) of low-income renter households experienced a cost burden or severe cost burden.

Overcrowding: Low-income large family renter households experienced overcrowding at the highest rate (73.9%) among low and moderate-income renter households.

Owners

Cost Burden: All Other low-income owner households, presumably small and large related families, reported a higher incidence of severe cost burden (58%) than the total of all owner households (7%). Elderly owner households were much less severely cost burdened at 23% or 318 households.

Overcrowding: Total low-income owner households reported significantly less incidence of overcrowding than Total low-income renter households at only 3.1% as compared to 11.8%.

Race/Ethnicity

No disproportionate need exists by race or ethnicity in this income group.

Moderate-Income Households (51-80%)

Renters

Cost Burden: Small Family and All Other households had a higher percentage of cost burden (49% and 55% respectively) than total renter households (45%). Large family households experienced a lower cost burden than total renter households, but experienced a high rate of overcrowding.

Overcrowding: Moderate-income Large Family renter households experienced a high percentage of overcrowding at 60.8% as compared to 11.8% of total renter households.

Owners

Cost Burden: All Other moderate-income owner households, presumably Small and Large Families, reported a higher incidence of 30% or more cost burden than all owner households. Elderly households reported a lower incidence of cost burden.

Overcrowding: Moderate-income owner households experienced overcrowding at 6.8%, the highest for owners, but far less than moderate-income renters at 15.6% of total households.

Race/Ethnicity

All Minority, Black and Hispanic Owners were 12%+ more likely to experience housing problems than All Owner households.

Middle-Income Households (81-95%)

Renters

Cost Burden: All middle-income renter households experienced a lower cost burden than renter households overall. Therefore, it is likely that those middle-income renter households experiencing cost burden do so as a matter of lifestyle choice.

Overcrowding: No Census data available.

Owners

Cost Burden: All Other middle-income owners reported a higher incidence of cost burden (40%), however, this is most likely a lifestyle choice.

Overcrowding: No Census data available.

NORTH LAS VEGAS: Assessment of Cost Burden, Overcrowding, and Race/Ethnicity Needs

This section contains an analysis of the cost burden, overcrowding and race/ethnicity needs in the City of North Las Vegas for 1990.

Figure 16
North Las Vegas
Percent of Overcrowded Households, 1990

Income Groups	Renters		Owners	
	Total Households	Large Related Households	Total Households	Other Non-Elderly Households
Extremely Low Income (0-30% MFI)	23.0%	87.0%	12.7%	18.6%
Low Income (31-50% MFI)	25.2%	86.1%	8.6%	13.2%
Moderate Income (51-80% MFI)	26.5%	71.4%	13.4%	18.4%
Total	22.5%	73.8%	10.8%	13.1%

Source: CHAS Databook 1994, Table 8

Figure 17
North Las Vegas
Housing Problems by Race and Ethnicity, 1990

Household Type	Housing Problem	Income Category		
		Ex. Low 0 - 30%	Low 31 - 50%	Mod. 51 - 80%
All Owner	Report Any Housing Problem	539	394	553
		79.9%	58.4%	39.5%
All Minority Owner	Report Any Housing Problem	295	259	335
		90.2%	71.6%	49.1%
Black Owner	Report Any Housing Problem	197	136	196
		91.6%	71.2%	43.2%
Hispanic Owner	Report Any Housing Problem	53	114	121
		86.3%	73.2%	67.8%
All Renter	Report Any Housing Problem	1,368	1,388	801
		78.1%	85.9%	50.0%
All Minority Renter	Report Any Housing Problem	924	870	602
		78.0%	87.2%	57.8%
Black Renter	Report Any Housing Problem	716	430	356
		74.8%	81.9%	57.8%
Hispanic Renter	Report Any Housing Problem	187	385	232
		93.0%	92.1%	60.6%

Source: CHAS Databook, Table 6 (Parts 1-4).

Figure 18
North Las Vegas
Cost Burden by Household Type, Income and Housing Problem, 1990

Household by Type, Income & Housing Problem	Renters					Owners		
	Elderly	Small Families	Large Families	All Other	Total Renters	Elderly	All Other	Total Owners
Extremely Low Income (0-30% MFI)	248	898	301	303	1,750	213	458	671
# with any housing problem	141	710	294	222	1,367	155	381	536
% with any housing problem	57%	79%	98%	73%	78%	73%	83%	80%
# with cost burden > 30% < 50%	42	84	75	11	212	39	56	95
% with cost burden > 30% < 50%	17%	9%	25%	4%	12%	18%	12%	14%
# with cost burden > 50%	91	595	161	211	1,058	116	302	418
% with cost burden > 50%	37%	66%	54%	70%	61%	55%	66%	62%
Low Income (31-50% MFI)	158	804	367	291	1,620	235	441	676
# with any housing problem	84	695	361	252	1,392	76	319	395
% with any housing problem	53%	86%	98%	87%	86%	32%	72%	58%
# with cost burden > 30% < 50%	52	504	163	178	897	49	128	177
% with cost burden > 30% < 50%	33%	63%	44%	61%	55%	21%	29%	26%
# with cost burden > 50%	32	151	57	74	314	27	151	178
% with cost burden > 50%	20%	19%	16%	25%	19%	11%	34%	26%
Moderate Income (51-80% MFI)	95	765	493	248	1,601	381	1,018	1,399
# with any housing problem	14	298	400	89	801	38	514	552
% with any housing problem	15%	39%	81%	36%	50%	10%	51%	39%
# with cost burden > 30% < 50%	5	242	81	83	411	29	275	304
% with cost burden > 30% < 50%	5%	32%	16%	34%	26%	8%	27%	22%
# with cost burden > 50%	9	0	14	6	29	9	71	80
% with cost burden > 50%	10%	0	3%	2%	2%	2%	7%	6%
Middle Income (81-95% MFI)	14	370	208	125	717	162	667	829
# with any housing problem	0	50	122	5	177	7	278	285
% with any housing problem	0%	14%	59%	4%	25%	4%	42%	34%
# with cost burden > 30% < 50%	0	27	19	5	51	7	158	165
% with cost burden > 30% < 50%	0	7%	9%	4%	7%	4%	24%	20%
# with cost burden > 50%	0	0	0	0	0	0	10	10
% with cost burden > 50%	0	0	0	0	0	0	2%	1%
Total Lower Income Households	501	2,465	1,161	842	4,969	829	1,917	2,746
# with any housing problem	239	1,703	1,055	563	3,560	276	1,214	1,490
% with any housing problem	48%	69%	91%	67%	72%	33%	63%	54%
Total Households	562	3,632	1,633	1,294	7,121	1,297	6,032	7,329
# with any housing problem	239	1,824	1,349	594	4,006	288	2,001	2,289
% with any housing problem	43%	50%	83%	46%	56%	22%	33%	31%

Extremely Low-Income Households (0-30%)

Renters

Cost Burden: North Las Vegas had the highest rate in the HCP Consortium of extremely low-income renter households experienced a severe cost burden at 76% (1,058 households). All Other and Small Family households experienced the highest percentage of severe cost burden at 75% and 67% respectively.

Overcrowding: Extremely low-income large family renter households experienced overcrowding at significantly higher rates (87.0%) than renter households overall (22.5%) and at the highest rate among the income groups.

Owners

Cost Burden: All owner households report a high incidence of severe cost burden (66% for All Other households, 55% for Elderly Households). Approximately 61% (418 households) of all severely cost burdened owner households were extremely low-income.

Overcrowding: Extremely low-income owner households were more likely to experience overcrowding than other income groups.

Race/Ethnicity

Extremely low-income Hispanic Renters were 14.9% more likely to experience housing problems than All Renters. Extremely low-income Black Owners were 11.7% more likely to experience housing problems than All Owners.

Low-Income Households (31-50%)

Renters

Cost Burden: Approximately 74% (1,211 households) experienced a cost burden (either 30% or 50% or income for housing expenses) among low-income renter households.

Overcrowding: Low-income large family renter households experienced overcrowding at a high rate (86.1%) among low and moderate-income renter households.

Owners

Cost Burden: All Other low-income owner households, presumably small and large related families, reported a higher incidence of severe cost burden (34%) than the total of all owner households (9%).

Overcrowding: Total low-income owner households reported significantly less incidence of overcrowding than Total low-income renter households at 10.8% as compared to 22.5%.

Race/Ethnicity

All Minority, Black and Hispanic Owners were 12%+ more likely to experience housing problems than All Owner households.

Moderate-Income Households (51-80%)

Renters

Cost Burden: Small Family and All Other households had a lower percentage of cost burden (32% and 34% respectively) than total renter households (46%). This occurred due to the much larger percentage of extremely low- and low-income households in North Las Vegas. Large Family renters experienced a high percentage of housing problems other than cost burden, probably overcrowding

Overcrowding: Moderate-income Large Family renter households experienced a high percentage of overcrowding at 71.4% as compared to 22.5% of total renter households.

Owners

Cost Burden: All Other moderate-income owner households, presumably Small and Large Families, reported a higher incidence of 30% or more cost burden than all owner households. Elderly households reported the lowest incidence of cost burden.

Overcrowding: Moderate-income owner households experienced overcrowding at 13.4%, the highest for owners, but far less than moderate-income renters at 26.5% of total households.

Race/Ethnicity

Moderate-income Hispanic Owners were 28.3% more likely to experience housing problems. Moderate-income Hispanic Renters were 10.6% more likely to experience housing problems.

Middle-Income Households (81-95%)

Renters

Cost Burden: All middle-income renter households experienced a lower cost burden than renter households overall. Therefore, it is likely that those middle-income renter households experiencing cost burden do so as a matter of lifestyle choice.

Overcrowding: No Census data available.

Owners

Cost Burden: All Other middle-income owners reported a higher incidence of cost burden (24%), however, this is most likely a lifestyle choice.

Overcrowding: No Census data available.

Substandard Housing Units

According to HUD's definition, a substandard housing condition exists when a dwelling unit does not meet Section 8 Housing Quality Standards (HQS) and requires substantial corrective rehabilitation of structural components and building systems (e.g. electrical, plumbing, heating/cooling). Rehabilitation is considered financially unfeasible when improvement costs exceed 60 % or more of the property value after rehabilitation. Conversely, a dwelling unit in standard condition is defined as a unit that meets Section 8 Housing Quality Standards and requires no major rehabilitation (repairs are limited to cosmetic work, correction or minor maintenance work).

A strong indicator of the structural condition of a community's housing stock is the age of existing housing. Because most of the growth in the jurisdictions of the HCP Consortium Area has taken place since 1960, most of the housing stock has been constructed since that time. However, despite the relatively recent construction of housing, many lower-income households are living in substandard housing conditions. Most dwelling units in substandard condition are rental units. Despite these conditions, there are nearly 12,000 vacant renter units that are not in substandard condition.

The following three tables present 1990 U.S. Census of Population and Housing ("the Census") data regarding the age of occupied housing units in the HCP Consortium Area (the City of Las Vegas and the City of North Las Vegas). Data that is more recent is not available. The data is categorized by households with extremely low-incomes, low-incomes, and all other-income groups. As discussed in more detail below, most dwelling units built before 1940 were occupied by lower-income households. Both Las Vegas and North Las Vegas had greater proportions of their housing built before 1960 than other jurisdictions in the HCP Consortium Area.

Summary of Substandard Housing

- According to the 1990 Census, 83% of the housing stock (121,000 units) built before 1980 in the HCP Consortium Area was constructed after 1960. Approximately 1.4% (1,975 units) of the housing stock built before 1980 was constructed before 1940.
- The housing inventory in the Cities of Las Vegas and North Las Vegas was older than the inventory in the total HCP Consortium Area. While only 16% (22,534 units) of the HCP Consortium Area housing stock was built between 1940 and 1959, 24% (13,311 units) and 27% (3,252 units) of the housing in Las Vegas and North Las Vegas, respectively, was built during that period.
- Extremely low-income or low-income households in 1990 occupied 58% (1,100 units) of the 1,975 dwelling units in the HCP Consortium Area built before 1940.
- Extremely low-income or low-income households occupied 35% (42,400 units) of the existing housing stock in the HCP Consortium Area (in 1990), built between 1960 and 1979.

Figure 19
Age of Occupied Housing Units
Low and Moderate Income Groups

Jurisdiction/Income Level	Time Period Built			
	Pre-1940	1940 - 1959	1960 - 1979	Total
Las Vegas	909	13,311	40,336	54,556
Extremely Low (30% or below)	345	3,978	9,953	14,276
Low (50% or below)	201	2,341	5,087	7,629
All Other	363	6,992	25,296	32,651
North Las Vegas	159	3,252	8,588	11,999
Extremely Low (30% or below)	86	1,156	2,890	4,132
Low (50% or below)	33	719	1,442	2,194
All Other	40	1,377	4,256	5,673
Consortium Area	1,975	22,534	120,655	145,164
Extremely Low (30% or below)	747	7,006	28,558	36,311
Low (50% or below)	396	3,927	13,812	18,135
All Other	832	11,601	78,285	90,718

Note: Boulder City and Unincorporated Clark County totals are included in the Consortium Area totals.
Source: 1994 - 1998 CHAS Study, Table 30.

Figure 20
Housing Condition of Renter-Occupied Households, 1990
HCP Consortium

Jurisdiction	Standard Condition			Substandard Condition			Total Housing Units
	Occupied	Vacant	Total	Occupied	Vacant	Total	
Clark County	63,761	6,783	70,544	7,583	1,189	8,772	79,316
Las Vegas	44,092	4,938	49,030	5,397	413	5,810	54,840
North Las Vegas	5,813	121	5,934	1,468	512	1,980	7,914
Boulder City	1,069	26	1,095	228	55	283	1,378
Mesquite	281	29	310	29	0	29	339
Consortium Area	115,016	11,897	126,913	14,705	2,169	16,874	143,787

Source: 1994 - 1998 CHAS Study, Table 29.

Rental Units

- There were 16,900 substandard rental housing units within the HCP Consortium Area in 1990, of which approximately 13% (2,200 units) were vacant.
- On a percentage basis, North Las Vegas and Boulder City had almost twice as many occupied substandard rental housing units in 1990 than other cities in the HCP Consortium Area. For example, of all the households in North Las Vegas, approximately 19% (1,500 units) were occupied substandard rental dwelling units, compared to 10% (5,400 units) in Las Vegas.
- In 1990, North Las Vegas contained fewer vacant rental units meeting standard conditions and more vacant rental units that were of a substandard nature than the City of Las Vegas. Approximately 2% (100 units) of the rental units in North Las Vegas met standard conditions, while 9% (4,900 units) of the rental units in Las Vegas met standard conditions. Sixty-five percent of rental units in North Las Vegas were vacant and of a substandard nature, compared to only 1% (400 units) in Las Vegas.

Figure 21
Housing Condition Of Owner-Occupied Households: 1990
HCP Consortium

Jurisdiction	Standard Condition			Substandard Condition			Total Housing Units
	Occupied	Vacant	Total	Occupied	Vacant	Total	
Clark County	70,224	1,423	71,647	2,366	125	2,491	74,138
Las Vegas	8,764	1,383	50,147	1,482	0	1,482	51,629
North Las Vegas	5,070	109	5,179	2,174	62	2,236	7,415
Boulder City	2,907	20	2,927	794	52	846	3,773
Mesquite	194	0	194	92	5	97	291
Consortium Area	127,159	2,935	130,094	6,908	244	7,152	137,246

Source: 1994 - 1998 CHAS, Table 29.

Owner Units

- In 1990, approximately 6,900 substandard owner households in the HCP Consortium Area were occupied. This represents 5% of the total housing units.
- North Las Vegas and Mesquite have the highest proportion of substandard owner dwelling units in the HCP Consortium Area. In North Las Vegas, 30% (2,200 units) of all owner housing units were substandard in 1990. In Mesquite 33% (100 units), were substandard.
- Of the 6,900 substandard occupied housing units in the HCP Consortium Area,

approximately 34 % (2,400 units) and 31 % (2,200 units) were located in Clark County and North Las Vegas, respectively.

With a projected demand of approximately 2,000 dwelling units per year for extremely low-income renter households and approximately 1,500 dwelling units per year for low-income renter households, it would appear that there might be a reasonable balance between the amount of vacant standard renter units and the demand. However, it appears that the majority of these vacant units are not affordable to lower-income households.

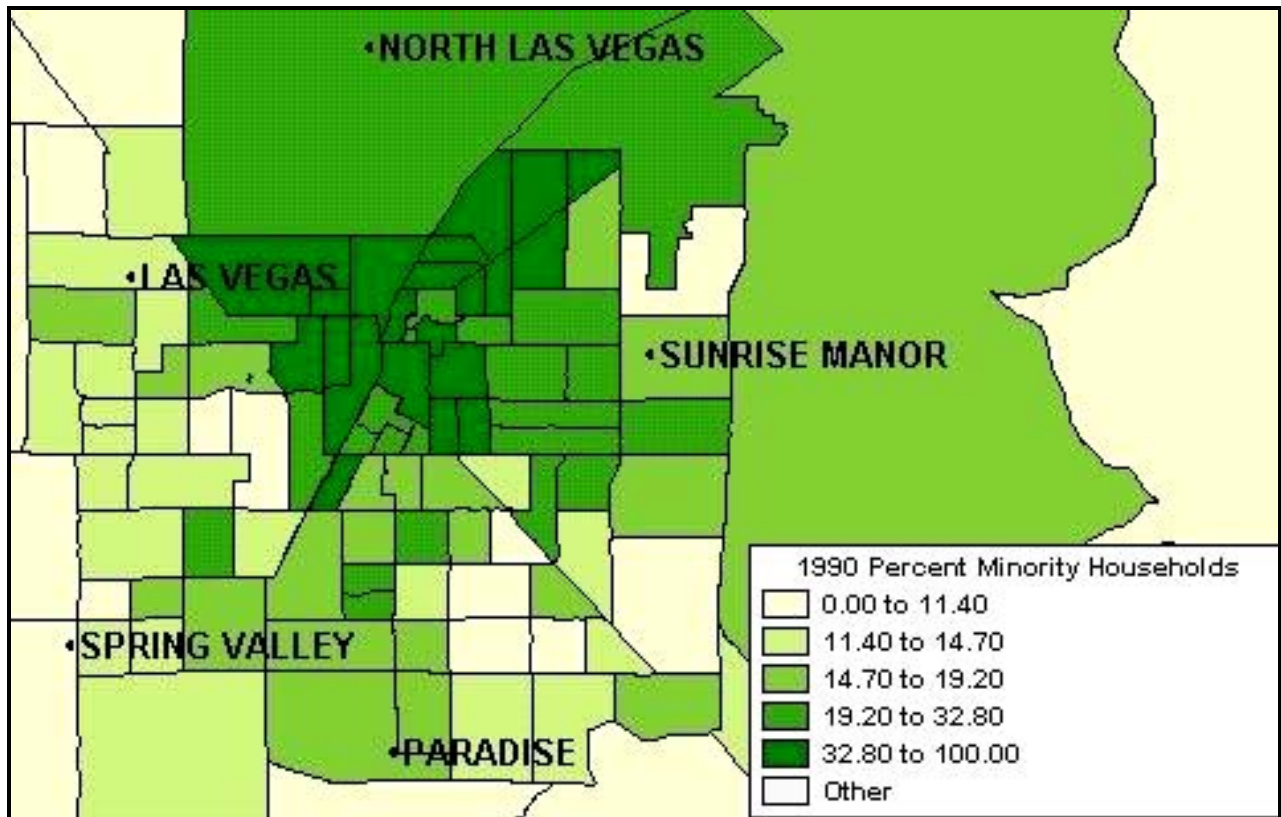
Disproportionate Needs of Racial and Ethnic Groups

Introduction

A difference of 10% or more of housing problems between the total HCP Consortium and minority groups indicates a disproportionate need of a minority group. The summary for the needs assessment found the following:

- Geographic areas with the highest concentration of Black and Hispanic households coincided with areas of high concentrations of households below the poverty level.
- Moderate-income Minority Owners were overall more likely to experience housing problems than All Owners.
- Compared to surrounding urban areas, North Las Vegas had the lowest proportion of middle-income minority households within its boundaries.

Map 2
Areas of Minority Concentration
Clark County



Geographic Distribution

According to the 1990 Census, minority groups have higher percentages of lower income households when compared to non-minority, lower income households as well as to all households in the Consortium Area. These minority group residents also tend to live in those parts of the Consortium Area that contain greater proportions of lower income households, namely North Las Vegas and portions of Las Vegas. There consistently have been greater proportions of extremely low- and low-income Black and Hispanic households in these areas, relative to extremely low- and low-income White or other minority group households.

All Minorities

Approximately 26% of the population in the Consortium Area was composed of minorities (Black, Hispanic, Native American, Asian/Pacific Islanders and Other minorities), as reported by the 1990 Census. North Las Vegas had the largest percentage share of minority residents. Black and Hispanic households represented 34% and 17%, respectively, of all North Las Vegas households, compared to 9% and 8%, respectively, of all households in the Consortium Area. The Asian-Islander population increased by 157% between 1980 and 1990 while the Black population remained constant at 10% of the total population of the Consortium Area.

The most significant demographic change in the racial composition of the HCP Consortium between 1980 and 2000 has been the increase in the Hispanic population. Between 1980 and 1990, the Hispanic population increased from 32,086 to 82,904, an increase of 136%. During the past eight years, Clark County has had the fastest-growing Hispanic population of any major metropolitan area in the country, according to Census Bureau statistics released in September 1999. It is estimated that the county had 198,473 Hispanic residents at the end of 1998, up 139% from the 1990 census count of 82,904. This means that Hispanics may now make up 17% of Clark County's population, the largest minority group.

Summary

The following is a summary of income information on the minority populations, which can also assist in identifying housing needs beyond the analysis presented by jurisdiction under "Cost Burden, Overcrowding, and Race/Ethnicity".

- Generally, minority groups within the Consortium Area had a disproportionate share of extremely low-income households. For example, in Las Vegas, 39% of Black households were considered extremely low-income, compared to 34% in the Consortium Area. In North Las Vegas, extremely low-income households comprised 36% of the City's Hispanic households, compared to approximately 28% of the households in the Consortium Area.
- Low-income households comprised approximately 21% of all Black households, while extremely low-income Black households comprised 34% of the Black households in the Consortium Area.

- Every minority group examined had a higher percentage of extremely low-income households within the Consortium Area than low-income households, except Native Americans. This group had 21% of total households in low-income and 21% of total households in the extremely low-income category.
- The percentage of moderate income Black households (9%) in the Consortium Area was less than that of the other moderate-income minority groups and of the total moderate-income households in the Consortium Area.
- Low-income Native American households were more likely to reside in North Las Vegas, while moderate-income Native American households were more likely to reside in Las Vegas and extremely low-income Native American households were more likely to reside in Clark County.
- For the Consortium Area, Black and Hispanic households had the lowest proportion of their household populations in the middle-income group in 1990 (36% and 40%, respectively, compared to White middle income households at 56%).
- For the HCP Consortium Area, moderate-income minority owners were more likely to experience a housing problem, especially Hispanic owners.

HCP Consortium Residents with Special Needs

Introduction

The special needs population includes elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents. Self-sufficiency is not a realistic goal for certain segments of the special needs population due to age and/or need for services. This sub-section estimates, to the extent feasible, the number of persons within each special needs group requiring supportive housing and describes their supportive housing needs. It also assesses the needs of low-income families in assisted housing for programs that promote economic independence and self-sufficiency

Frail Elderly

HUD defines the elderly as those persons 62 years of age or older. The distinction between elderly and frail elderly is based on the functional state of the individual. Frail elderly need assistance to perform routine activities of daily living, such as eating, bathing or toileting, using the telephone, shopping, or getting outside. Elderly persons 85 years of age or older have a higher probability of being classified as "frail elderly."

Clark County growth projections indicate seniors will continue to be the fastest growing group of new residents. The 1990 Census figures show seniors comprised 12% of the population. However, data from the UNLV Center for Business and Economic Research "1999 Las Vegas Perspective" estimates there are 188,036 people of retirement age in Clark County out of a total population of 1.2 million. This indicates that approximately 16% of the population is seniors. The forecast for 2000 indicates that another 20,000 seniors will be moving into Southern Nevada.

The Nevada Division on Aging Services estimates the percentage of frailty among the total elderly population at approximately 5% among those ages 60 to 85, and 25% of those over 85. Based upon the percentage of elderly from the 1990 Census data that were 60 to 85, and over 85 and the estimated senior population in 1999 (188,036), a total of 9,590 frail elderly can be calculated in Clark County.

According to the 1990 Census, there are 52,693 elderly households (1 or 2 persons) in the HCP Consortium Area. Total extremely low-income elderly households (17,614) represented 33% of all elderly households in the HCP Consortium Area, as illustrated in Figure 22. Assuming that in 1999, the same percentage of elderly households are extremely low-income, then approximately 3,165 frail elderly need assisted supportive housing.

Figure 22
Elderly Households by Income and Tenure
HCP Consortium Area, 1990

Tenure	Very Low-Income		Low-Income		Other		Total	
Renter	9,516	54%	4,142	36%	5,434	23%	19,092	36%
Owner	8,098	46%	7,441	64%	18,062	77%	33,601	64%
Totals	17,614	100%	11,583	100%	23,496	100%	52,693	100%
Percent	33%		22%		45%		100%	

Source: 1990 Census; CHAS 1994.

The State Division for Aging Services and local officials have identified a need for supportive housing alternatives to allow seniors to remain in their communities for as long as possible. This need has been cited throughout the state, but is most pronounced in Nevada's rural communities, where when an elder's health deteriorates beyond the point where the family and local medical resources can provide adequate care, the elder must be removed from the rural setting and placed in an institutional setting. The institutional care facility is usually far removed from the small town both culturally and geographically, and severs the familial support that is a central part of rural life.

Southern Nevada has little alternative housing in place to bridge the gap between fully independent living and nursing homes. While many assisted living facilities are being built in Southern Nevada, they are not generally affordable to low-income seniors and there is no state program that will bridge the cost between the elder's income and the cost of an assisted living facility.

Supportive services needed by the frail elderly range widely, from assistance with activities of everyday living such as bathing, shopping and eating, to professional services such as physical therapy and medication. In-home care has become increasingly important to the frail elderly, as the cost of nursing home care has risen. The Nevada Division for Aging Services indicates the most frequent in-home service utilized is an attendant to assist with personal care and homemaker services. The current frail elderly population requires increases in both institutional and community-based care services; as Clark County's elderly population continues to grow, and as the elderly live longer and disability rates rise at advanced ages, future care needs will rise accordingly.

Supportive services needed by the *non-frail* elderly also range widely, from transportation and homemaking services to medical care. With a growing elderly population in general, many thousands more non-frail elderly in the HCP Consortium Area could be in need of assisted supportive living. Options to provide this housing include shared housing arrangements, accessory units within single-family homes, and construction or rehabilitation of multi-family assisted living units. Case managers should also be used to link existing housing and services, thus making more efficient use of current resources.

Severely Mentally Ill

The Severely Mentally Ill (SMI) persons are defined as people with a serious and persistent mental or emotional impairment that significantly limits their ability to live independently. The State Division of Mental Health and Developmental Services (MHDS) estimates that 7.2% of the population in Nevada will suffer from a severe mental illness during their lifetime. A recent study ranked Nevada as the number one state in the Western United States for the prevalence of mental illness, estimating that as much as 23.7% of the population in Nevada will have some form of diagnosable mental disorder during their life. It is also estimated that approximately 1.8% of Nevadans are currently dysfunctional because of a severe mental illness. This would equate to approximately 21,752 individuals. Southern Nevada, with 67% of the state population, can therefore claim 14,573 individuals with a severe mental illness.

Southern Nevada Adult Mental Health estimates that at least half of the SMI rely on Social Security Supplemental Security Income (SSI) as their only source of income. Since the average SSI received is less than \$500 per month, we can estimate that at least 7,287 SMI persons are extremely low-income and may need assisted supportive housing.

While some SMI will be able to successfully move back to independent living with the help of transitional housing (SRO's, group homes and apartments) and case management services, others will need permanent assisted housing with on-site support services such as medication and psychiatric supervision.

Developmentally Disabled

National estimates indicate that developmental disabilities occur in the general population at a rate of between one and three percent. Using a two percent rate results in a calculation of approximately 9,750 developmentally disabled adults in Clark County in 1990. Population figures for Clark County in 1999 result in an estimate of 22,361 persons.

While some developmentally disabled are only mildly retarded and can function independently, others require ongoing training and care by service providers. This latter group requires supportive services. The most severely retarded require an intensive care facility, but most can live in semi-independent supportive living arrangements such as foster family care, group homes or with other family members. Social Security SSI is the only source of income for a majority of those able to live in semi-independent living arrangements. Since SSI pays less than \$500 per month, these persons would be considered extremely low-income and thus in need of assisted housing.

The primary provider of services to the developmentally disabled is Desert Regional Center (DRC), which currently assists 37 clients in developmental homes, 46 in group homes and 196 in supportive housing for a total of 367 persons. The DRC plans to increase the number of people served with housing to 440 by June 2000. Additionally, there is always a waiting list for the supportive housing. The Center estimates that it serves only ten percent of those needing supportive housing. Using this estimate, approximately 3,960 developmentally disabled individuals in Clark County need

supportive housing. While there are no firm statistics on the percentage of extremely low-income developmentally disabled, Desert Regional Center's experience indicates that the majority of persons in supportive living arrangements receive Social Security as their only source of income. A conservative estimate of 65% of the 3,960 developmentally disabled persons would indicate a need for 2,574 supportive housing units for this population.

Physically Disabled

The physically disabled have an illness or impairment that impedes their ability to function independently. The 1990 Census identified 15,452 individuals' ages 16 to 64 with self-care limitations, but this figure includes some SMI and developmentally-disabled. The Nevada Department of Rehabilitation reports that in FY 1999 (October 1998 to September 1999) it served 3,147 disabled persons in Southern Nevada, a 36% increase from 1994. However, this figure includes a small number from Henderson and Pahrump, which are not in the HCP Consortium Area.

The physically disabled require accessible housing adapted to accommodate their particular disability. Physical requirements include roll-in showers, wheelchair ramps, lower toilets and counters, handrails and widened doors. The housing authorities within Clark County have 179 units of accessible housing for the handicapped. As of March 2000, there were 1,031 disabled persons on the waiting lists for these public housing facilities, a 348% increase from the 230 persons on the list in 1995.

Persons with Alcohol/other Drug Addictions (AODA)

A *USA TODAY* article ranked Nevada as second highest among the 50 states in per capita hard-core cocaine addicts, and first in per capita alcohol consumption. National epidemiology studies estimate ten percent of Americans over the age of 18 are alcoholics or alcohol abusers, while three to five percent are drug abusers. Based on these national figures, approximately 97,000 Nevadans are alcohol abusers or alcohol dependant, and up to 48,500 are drug abusers.

Statistics from WestCare, one of the largest BADA-funded programs in Clark County, indicate 6,851 clients assisted in FY 1999 in detoxification, short- and long-term treatment for both alcohol and drug addictions and outpatient treatment program. An estimated 624 people are turned away from WestCare annually due to limited space in treatment programs. While WestCare is only one of the many organizations providing services in Clark County for AODA, BADA estimates that only one in six people will seek treatment. Therefore, it is estimated that the 6,851 figure represents Clark County AODA residents who may be in need of housing with supportive services. There are only 331 beds available for in-patient treatment.

Research indicates that substance abusers achieve better results from treatment and prevention services that meet the specific needs of the client in terms of sex, age, race and approximate treatment modality. Treatment facilities, as well as transitional housing (SRO and low-rent apartments), are needed to accommodate these specific needs.

HIV/AIDS

The “Nevada Comprehensive HIV Prevention Plan 1999-2001” indicates that after calculating the HIV prevalence rate for 1992, using one of the CDC’s “recommended” methodologies; add new infections; subtract deaths; and adjust for population increases, it is estimated that at the end of 1997 approximately 5,000 individuals were living with HIV infection in Nevada. Of these, 77% resided in Clark County for a total of 3,850 HIV infected individuals. Based on a recent survey, there are over 2,000 active AIDS cases among that population.

The Clark County Health District *1998-1999 Annual Report* indicates that as of April 1999 the total number of AIDS cases in Clark County reached 3,086, with 1,492 deaths. Current HIV infections number 2,104. These figures, however, give a misleading impression that there are approximately 1,600 active AIDS cases in Clark County. Obtaining an accurate count of AIDS cases in the County is complicated by the mobility of the population. Approximately 35% of new investigations for AIDS identification are from out of state.

Based on both studies described above, it can be reasonably assumed that there are between 1600 and 2000 individuals with AIDS in Clark County. Furthermore, there are an additional 2,000 individuals infected with the HIV virus.

As in other municipalities across the United States, Clark County HIV/AIDS cases have been identified primarily among gay males and IV drug users; however, the largest increase is noted in the number of cases for women with HIV/AIDS. No new pediatric cases of AIDS have been documented in the last three years as methods for avoiding transmission of the disease from mother to child have improved.

According to the “1999 Needs Assessment” of the Las Vegas EMA Ryan White Title I Planning Council, an average of 25% of persons with HIV/AIDS had been homeless in the last two years. This occurs because over 40% of the persons living with HIV/AIDS have income at the poverty level, or less than \$500 per month. The disability support AIDS victims receive from Social Security and Clark County Social Services is inadequate to pay current rents in Clark County. Homeless HIV/AIDS victims in shelters or on the streets are exposed to conditions that increase their susceptibility to opportunistic infections.

A new program is under development to provide HIV/AIDS prevention to the Black community, which is experiencing a disproportionate number of AIDS cases as compared to the general population. The Black percentage of the population of Clark County is at 9.5% while Blacks make up 25% of the AIDS cases. Further, the ratio of male to female AIDS cases in the Black community is 1:1, meaning as many women as men are becoming infected with the virus. Further, 40% of Blacks reported they had been homeless in the last two years, substantially higher than other racial/ethnic groups.

The services most needed by persons living with AIDS are drug reimbursement, outpatient care, rental assistance, transportation, food assistance and dental care. Currently, housing that is set-aside for AIDS clients is not well coordinated between agencies. The AIDS service community needs to work on consolidating services and housing to avoid duplication of services and to provide a more efficient use of scarce resources.

Public Housing Residents

In an effort to move public housing residents up the economic scale, all three housing authorities (Clark County, Las Vegas and North Las Vegas) are participating in the Family Self Sufficiency Program. Under this program, public housing and Section 8 rental assistance tenants are provided the means, through the coordination of public and private resources and supportive services, to becoming economically independent and self-sufficient. Supportive services required to achieve self-sufficiency are based on individual family needs and may include child care, transportation, education, job training, preparation, and counseling, substance/alcohol abuse treatment and counseling, life skills training and homeownership counseling

Ten-Year Projections of HCP Consortium Area Housing Needs

Clark County and the municipalities that comprise it, is presently the fastest growing metropolitan area in the nation. The area encompassed within the HCP Consortium Area is expected to continue its rapid rate of growth with the number of households increasing by approximately five to six percent annually into the next decade. At this projected rate, the population of HCP Consortium Area will be almost 2 million by 2010.

Projections for 2005 and 2010, which are based on 1990 US Census figures and actual population growth rates for Clark County from 1990 through 1994, are shown in the Housing Need Projections in Figure 23. These projections assume that the proportion of lower-income renter households relative to total renter households remains constant from 1990 through 2000. A population growth rate of 4.0% is assumed, somewhat less than the actual average growth rate of 4.8% that occurred from 1990 through 1994. Extremely low-income renter households are expected to occupy approximately 47,600 housing units by in 1995 ("extremely low" includes households earning less than 30 percent of median family income). This is an increase of 9,143 extremely low-income renter units, which need either to be acquired or constructed. From 1995 through 2000, an average of approximately 2,000 extremely low-income units will be required each year.

A portion of the need for extremely low-income renter units will be met by existing low-income households becoming first-time homebuyers, which will free up new renter housing. However, there will be approximately 1,600 new low-income households each year between 1995 and 2000. Many of these households will be competing for renter housing with extremely low-income households.

The projection scenario that follows is slightly conservative in that it assumes an annual growth rate below that experienced in Southern Nevada in the 1990's.

Figure 23
Housing Need Projections, 2000-2010
(Slightly Conservative Scenario)

	Projected Demand			Projected Need		
	2000	2005	2010	2000	2005	2010
Renter	230,174	268,435	308,165	29,914	68,175	107,905
Owner	260,705	304,367	349,708	32,143	75,805	121,146
Total	490,879	572,802	657,873	62,057	143,980	229,051

Source: Affordable Housing Needs in Clark County, 1996-2010.

- Using the slightly conservative estimate, we forecast 229,051 additional housing units to 2010, a 53.4% increase over the 1996 level of 428,822.
- Slightly more than 128,000 low-income households will face a housing cost burden in 2010, up from 79,669 low-income households in 1996 (using a norm measure of 30% burden for renters and a 2.11 ratio of price to household income for owner occupied units for households earning less than 80% of median household income.)
- Not surprisingly, seniors will represent the greatest number of households with a housing cost burden in the year 2010. The number of senior households with 50% or less of the median household income that will experience a 30% or more housing cost burden will be 19,612 of which 13,988 will be extremely low-income households and 5,624 will be low income households.
- Finally, with a future affordable housing cost burden gap of 128,054 housing units in 2010, and only 13,718 assisted units in 1996 and few additional assisted units expected, a private supply increase of affordable housing remains a critical issue.

Market Analysis

Introduction

This section provides a summary of the Consortium's housing market characteristics such as housing supply, age, condition and cost including public and assisted housing to identify gaps in the market that indicate an unmet need. This analysis will also indicate the facilities and services available to serve non-homeless special needs groups.

General Market Characteristics

In the HCP Consortium, housing programs are handled by many different entities. There are three housing authorities, the Clark County Housing Authority, the Las Vegas Housing Authority and the North Las Vegas Housing Authority. Each housing authority provides affordable housing for thousands of low-income households. The Community Resources Management Division of the Department of Finance manages the federal grants funding covered in this plan for Clark County. The Neighborhood Services Department at the City of Las Vegas is responsible for their federal grants management. The Grants Administration Division of the Community Development Department at the City of North Las Vegas administers the federal funds for that city. Another important entity in the delivery of housing is the State Housing Division. The Division is responsible for managing the State Low-Income Housing Trust Fund (LIHTF), the federal Low-Income Housing Tax Credits (LIHTC), and the single family and multifamily mortgage bond programs. The largest provider of housing is the private sector. Homebuilders and non-profit organizations provide a wide variety of housing products throughout all areas of the HCP Consortium.

Housing Supply

Owner Units

The number of housing units by bedroom size and tenure for 1990 is shown in Figure 24. According to this HUD Census data, Owner-occupied units of three or more bedrooms represented 32% (92,659 units) of the total housing, units in the Consortium Area while in the County, Las Vegas and North Las Vegas they accounted for 30%, 34% and 33% respectively of each jurisdiction's total housing units. In all jurisdictions, three or more bedroom owner occupied units represented the majority of owner units at 65%, 75% and 73% for the County, Las Vegas and North Las Vegas respectively. Owner vacancy rates ranged between 2% and 3%, which indicated a limited supply of owner housing units in 1990.

Renter Units

Rental-occupied units of one and two bedrooms each represented 18% of the total housing units in the Consortium. As noted in Figure 24, rental occupied units with two bedrooms accounted for the majority of rental units for both the County (44%) and North Las Vegas (47%); however, in Las

Vegas 0 and 1 bedroom rental units accounted for the majority (44%). The rental vacancy rates ranged between 8% and 10%, which indicated a sufficient supply of rental units in 1990.

Figure 24
Housing Units by Bedroom Size, Tenure and Occupancy 1990
HCP Consortium

Jurisdiction	0- and 1- Bedroom Units	2-Bedroom Units	3- or More Bedroom Units	Total Units
Clark County				
Owner-Occupied	5,866 [8%]	20,932 [27%]	49,779 [65%]	76,577 [46%]
Owner-Vacant	1790	546	825	1,550 [2%]
Total Owner Occupied & Vacant	7,656	21,478	50,604	79,738 [47%]
Rental-Occupied	28,745 [39%]	32,084 [44%]	12,122 [17%]	72,951 [44%]
Rental-Vacant For Rent	3,477	3,862	834	8,173 [10%]
Total Renter Occupied & Vacant	32,222	35,946	12,956	81,124 [48%]
Other Vacant	2,183	2,817	2,030	7,030 [4%]
Total Units Clark County	42,061	60,241	65,590	167,892
City of Las Vegas				
Owner-Occupied	1,835 [4%]	10,807 [22%]	37,604 [75%]	50,246 [46%]
Owner-Vacant	51	459	873	1,383 [3%]
Total Owner Occupied & Vacant	1,886	11,266	38,477	51,629 [47%]
Rental-Occupied	22,014 [44%]	18,470 [37%]	9,005 [18%]	49,489 [45%]
Rental-Vacant For Rent	2,458	2,062	831	5,351 [10%]
Total Renter Occupied & Vacant	24,472	20,532	9,836	54,840 [50%]
Other Vacant	568	1,153	1,480	3,201 [3%]
Total Units Las Vegas	26,926	32,951	49,793	109,670
City of North Las Vegas				
Owner-Occupied	506 [7%]	1,462 [20%]	5,276 [73%]	7,244 [46%]
Owner-Vacant	20	75	76	171 [2%]
Total Owner Occupied & Vacant	526	1,537	5,352	7,415 [47%]
Rental-Occupied	1,811 [25%]	3,444 [47%]	2,026 [28%]	7,281 [46%]
Rental-Vacant For Rent	90	390	153	633 [8%]
Total Renter Occupied & Vacant	1,901	3,834	2,179	7,914 [50%]
Other Vacant	90	204	214	508 [3%]
Total Units North Las Vegas	2,517	5,575	7,745	15,837
Total Consortium Units	[24%] 71,504	[34%] 98,767	[42%] 123,128	293,399

Note: HCP Consortium Area does not include the City of Henderson.
Source: 1990 Census and CHAS Databook, Table 3, 1993.

Figure 25 indicates the number of housing units by tenure and occupancy in the Consortium and the jurisdictions therein for 1990 and 1999. Between 1990 and 1999, the total number of housing units

in the Consortium increased from 180,992 to 460,410, an increase of 154 %. Owner occupied housing units increased from 58% to 61.5% while renter occupied housing units decreased from 42% to 38.5%. The majority of the housing supply has been developed to accommodate the owner market by a ratio of more than 1.5 to 1. The average vacancy rate for the Consortium in 1999 was 6% including owner and renter units for all types; however, the rate does vary from 2% to 10% by area. The Consortium averages 2.6 persons per household with only 31% of households reporting children less than 18 years of age.

The Consortium will discuss the feasibility of creating and maintaining a tracking system to tabulate the number of units by tenure, occupancy and bedroom size in each of the Consortium’s jurisdictions on an annual basis to remain current even between Census years. Such a system would first require the 2000 Census data as a base prior to implementation and costs of creating and maintaining a system must be analyzed to determine its ultimate feasibility.

Figure 25
Housing Units by Tenure and Occupancy 1990 – 1999
HCP Consortium

1990				
Jurisdiction	Total Year Round Housing Units	Owner Occupied Housing Units	Renter Occupied Housing Units	Total Vacant Units
Clark County	95,567	50,649	36,082	8,836
Las Vegas	67,041	35,035	27,109	4,897
North Las Vegas	14,099	7,766	5,320	1,013
Boulder City	3,983	2,823	811	349
Mesquite	302	214	81	7
Total Consortium	180,992	96,487	69,403	15,102
1999				
Jurisdiction	Total Year Round Housing Units	Owner Occupied Housing Units ¹	Renter Occupied Housing Units ²	Total vacant Units ³
Clark County	231,985 [+143%]	134,110	83,955	13,919
Las Vegas	183,481 [+174%]	106,070	66,402	11,008
North Las Vegas	34,844 [+147%]	20,143	12,610	2,090
Boulder City	6,450 [+62%]	3,728	2,334	387
Mesquite	3,650 [+1,109%]	2,110	1,321	219
Total Consortium	460,410 [+154%]	266,163	166,622	27,624

1. Average Owner Occupancy for the Consortium equals 61.5% (Las Vegas Perspective 1999).
 2. Average Renter Occupancy for the Consortium equals 38.5% (Las Vegas Perspective 1999).
 3. Average Vacancy Rate for Owner and Renter housing units equals 6% for all types (Las Vegas Perspective 1999).
 Source: 1990 Census and Las Vegas Perspective 1999.

Housing Age and Condition

Figure 26 indicates the age of housing stock within the Consortium by each jurisdiction. The majority of the housing stock has been constructed since 1980. The housing stock is relatively new since rapid population growth did not occur until the 1980's and has continued to date.

Figure 26
Age Distribution of Housing Stock
HCP Consortium

Jurisdiction	Year Built						
	Housing Units						
	Pre – 1939	1940 – 1949	1950 – 1959	1960 – 1969	1970 – 1979	1980 – 1989	1990 – 1999
County	300	502	4,195	22,606	145,111	65,688	55,404
Las Vegas	901	3,389	11,731	21,200	23,870	48,579	78,327
N. Las Vegas	178	475	3,064	6,040	3,970	2,110	10,499
Boulder City	535	344	397	436	2,049	1,629	1,113
Consortium	1,914	4,710	19,387	50,282	175,000	118,006	145,343

Source: Clark County and City of Las Vegas Comprehensive Planning Departments, City of North Las Vegas.

HUD Census data regarding substandard housing conditions as related to the “Categories of Persons Affected” does not exist. Furthermore, no housing condition surveys have been conducted since the 1990 Census. The Consortium will consider conducting housing condition surveys midway between Census years in order to maintain a reasonably current base of data. Annual surveys are not being considered due to the costs involved; however, focused surveys in Community Development Block Grant Target Areas may be conducted as part of neighborhood revitalization projects.

HUD Census data was used to estimate substandard housing conditions for the Consortium and its jurisdictions. The estimate assumes that housing units constructed before 1960, which are affordable to low income households (50% or less of area median income) have a higher probability of exhibiting substandard housing conditions. The information in Figure 19, entitled “Age of Occupied Housing Units” in the Housing Needs Assessment section is summarized below:

- The Consortium contains 7,753 housing units constructed before 1960, which are affordable to low income households.
- The City of Las Vegas contains 4,323 housing units constructed before 1960, which are affordable to low income households.
- The City of North Las Vegas contains 242 housing units constructed before 1960, which are affordable to low income households.

Cost of Housing

Owner Occupied Households

According to 1990 HUD Census data, all extremely-Low income owner households within the Consortium reported a high percentage of Severe Cost Burden (housing costs exceeding 50% of household income), with the exception of Elderly households in Las Vegas and North Las Vegas. The report of cost burden for Low Income “All Other” owner households is significantly greater than that for the total owner households, while all cost burden drops significantly for Moderate and Middle income owner households.

Figure 27 indicates the number of Owner and Rental units affordable to households by income level and bedroom size for the Consortium and its jurisdictions in 1990. This data will be compared to the “Cost Burden” (30%), “Severe Cost Burden” (50%) and “Overcrowded” housing problems as listed within the Housing Needs Assessment section as one criteria for determining under-served housing needs or “gaps” identified within the Housing Strategic Plan.

Figure 27
Owner and Renter Units
Affordable to Households with Incomes Below 30%, 50% and 80%
HCP Consortium

Jurisdiction	0 and 1 bedroom Units			2 bedroom Units			3 or more Bedroom Units		
	0-30%	31-50%	51-80%	0-30%	31-50%	51-80%	0-30%	31-50%	51-80%
Owner Units Affordable to Households with Incomes Below 30%, 50% and 80%									
County	2,845	693	757	4,766	1,867	4,339	1,718	1,164	7,526
Las Vegas	326	123	359	1,182	648	2,923	446	517	9,153
N. Las Vegas	250	30	122	235	242	747	121	679	3,437
Consortium	3,421	846	1,238	6,183	2,757	8,009	2,285	2,360	20,116
Renter Units Affordable to Households with Incomes Below 30%, 50% and 80%									
County	172	3,328	19,158	1,139	2,183	20,894	1,069	813	4,841
Las Vegas	2,038	4,707	12,005	1,101	1,859	11,405	696	386	3,782
N. Las Vegas	313	510	867	428	934	1,940	207	287	1,202
Consortium	2,523	8,545	32,030	2,668	4,976	34,239	1,972	1,486	9,825

Source: 1990 Census.

Figure 28 indicates the maximum affordable home purchase price for Extremely-low, Low, Moderate and Middle income four member households based upon 1999 median family income limits for Clark County and mortgage interest rates.

Figure 28
Maximum Affordable Home Purchase Price by Income
HCP Consortium

Income Level	7.0 % Interest	7.5% Interest	8.0 % Interest	8.75% Interest ¹	9.0% Interest
Extremely Low (0-30%)	\$40,524	\$39,088	\$37,726	\$35,814	\$35,210
Low (31-50%)	\$67,628	\$65,231	\$62,958	\$59,767	\$58,759
Moderate (51-80%)	\$108,152	\$104,319	\$100,684	\$95,581	\$93,968
Middle (81-95%)	\$121,052	\$116,762	\$112,693	\$106,982	\$105,177
	Annual Income	Monthly Income	Affordable Monthly Payment (28% of Income)		
Extremely-Low	\$15,550	\$1,296.00	\$362.88		
Low	\$25,950	\$2,163.00	\$605.64		
Moderate	\$41,500	\$3,458.00	\$968.24		
Middle	\$46,450	\$3,871.00	\$1,083.88		

Income levels based upon Clark County Median Family Income for 1999 for a four-person household. Mortgage rates are based upon 30-year mortgages accounting for Principal, Interest, Taxes and Insurances. Maximum home price assumes a 3% down payment, 3% Closing Costs, no Debt and Good Credit.

¹ Current FHA Interest Rate February 2000

Source: HUD FY 1999 Income Limits.

Figure 29
Mean Sales Price of Single Family Dwellings
HCP Consortium

Jurisdiction	1990 Mean Sale Price	1999 Mean Sale Price	% Change
Clark County	\$93,300	\$134,062	44%
Las Vegas	\$114,458	\$166,513	45%
North Las Vegas	\$89,200	\$127,500	43%
Consortium	\$98,986	\$142,859	44%

Source: Clark County, City of Las Vegas Comprehensive Planning Departments, City of North Las Vegas, Nevada Housing Market Assessment March 1997.

As noted in tables E and F, Extremely-Low, Low, Moderate and Middle income families are able to afford to purchase homes at a maximum price of \$35,814, \$59,767, \$95,581, and \$106,982 (8.75% interest rate) respectively while the Mean price of a home is \$142,692. A household would have to earn 115% of AMI to afford the purchase of a Mean sales priced home. Mortgage lending institutions will approve home loans equivalent to as much as 38 - 40% of the household income depending upon factors such as employment stability, outstanding debt and assets. By strict definition, this ratio equates to cost burden wherein housing costs exceed 30% of the household income.

However, households in the upper end of the Moderate-income category and those in the Middle-income category have a greater amount of discretionary income than lower income households. As a result, some Moderate and Middle Income households may choose to pay more for housing, but still have sufficient income left over to pay for food, clothing, medical expenses, utilities, and auto payments as well as discretionary costs such as entertainment. Lower income households who pay just 30% of their income for housing are still hard pressed to cover many of the basic costs, which are relatively the same based on household size, let alone even consider the purchase and upkeep of an automobile or the luxury of entertainment. Therefore, while cost burden is potentially present even for Middle-income households, it is the Lower income households which are most burdened as noted within the Housing Needs Assessment section.

Renter Occupied Households

According to 1990 HUD Census data all Extremely Low and Low income renter households reported a high percentage of Severe Cost Burden (housing costs exceeding 50% of household income) with the exception of Low income Large related families. Affordability is defined as rent, which does not cost more than 30% of a household's income. The average monthly apartment rental rate for the Valley in 1990 was \$461.00, while in 1998 it had increased to \$664. A 1999 survey of apartment rental rates within the City of Las Vegas indicates an average monthly rate of \$698 (ranges from studio to 3-bedroom apartments). The rental rate increased by 44% according to the 1998 figure, and by 51% according to the 1999 Las Vegas figure.

A comparison of Tables 31 and 32 shows that Extremely-Low income households cannot afford to rent even a Studio apartment at the "Average" market rate. For example, the "Average" Studio apartment in Las Vegas rents for \$435.00, yet this is only considered marginally affordable to a household of 6 persons. One, two and three bedroom apartments are well outside the affordable range of Extremely-Low income households regardless of family size.

Low-income households can afford the average market rate for a 1-bedroom apartment, while 2- and 3- bedroom apartments remain outside the affordable range. A comparison of Moderate-income households by family size with market rate rents shows that only the upper end of this income category is relatively well served by the market. Moderate-income households earning 70% of the Area Median Income are able to afford a monthly payment of \$908.00, which falls between the average 2- and 3-bedroom apartment rental rate. Therefore, only households within the Middle income and the upper end of the Moderate-income categories are able to afford market rental rates.

Figure 30
Maximum Affordable Rent by Income and Family Size
HCP Consortium

Income Level	1 Person Household	2 person Household	3 Person Household	4 Person Household	5 Person Household	6 Person Household	7 Person Household	8 Person Household
Ex. Low (0-30%)	\$272.40	\$311.40	350.10	388.80	420.00	451.20	482.40	513.90
Low (31-50%)	\$453.90	\$518.70	\$583.80	\$648.90	\$701.40	\$752.40	\$804.90	\$856.20
Moderate (51-80%)	\$726.30	\$830.10	\$933.90	\$1,037.40	\$1,121.40	\$1,203.90	\$1,287.60	\$1,370.10
Middle (81-95%)	\$812.40	\$930.00	\$1,046.40	\$1,161.30	\$1,254.90	\$1,344.90	1,440.00	\$1,524.90
4 Person Household	Annual Income		Monthly Income		Affordable Monthly Payment			
• Extremely-Low	\$15,550		\$1,296.00		\$388.80			
• Low	\$25,950		\$2,163.00		\$648.90			
• Moderate	\$41,500		\$3,458.00		\$1,037.40			
• Middle	\$46,450		\$3,871.00		\$1,161.30			
Affordable rents are based upon 30% of household income								
Source: HUD FY 1999 Income Limits.								

Figure 31
Las Vegas Apartment Rental Rate Survey – Average Monthly Rental Rates 1999
HCP Consortium

Rental Range	Studio Apartments	1 – Bedroom	2 – Bedroom	3 - Bedroom
Low	\$300.00	\$340.00	\$500.00	\$625.00
High	\$570.00	\$800.00	\$1,175.00	\$1,275.00
Average	\$435.00	\$570.00	\$837.50	\$950.00

Source: Apartments For Rent Magazine; Las Vegas phone book - telephone survey.

Inventory of Facilities and Services for Persons with Special Needs

The Inventory of Facilities and Services for Non-Homeless Persons with Special Needs describes the facilities and services currently available to assist persons who are not homeless, but who require supportive housing, as well as programs ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing. The special needs population includes elderly and frail elderly, persons with disabilities (physical, developmental and mental), persons with alcohol or other drug addictions, and persons with AIDS/HIV and their families.

Elderly/Frail Elderly

HUD section 202 and HOME funded housing developments; Group homes and Skilled nursing facilities serve the supportive housing needs of the frail elderly. There are a total of 507 federal grant supported housing units as well as 5,037 Group home and Skilled nursing beds available in the HCP Consortium Area.

Non-medical care for the frail elderly is provided by group homes. Group home facilities with three or more beds must be licensed by the state. There are 2,340 group home beds available to the elderly in the HCP Consortium Area with 1,040 beds in metropolitan Clark County, 922 in Las Vegas, 84 in North Las Vegas, and 68 in Boulder City.

Licensed skilled nursing facilities, or nursing homes, provide 24-hour nursing care under the supervision of a registered nurse. There are 2,190 beds available in 19 facilities within the HCP Consortium Area with 275 beds in metropolitan Clark County, 1,397 in Las Vegas, 300 in North Las Vegas, 134 in Boulder City and 84 in Mesquite.

There are programs, which allow the frail elderly to remain in their homes such as Adult Day Care and Respite services offered by the Economic Opportunity Board. These programs serve 90 persons in day care and 70 persons in respite care. The Clark County Social Services Department and State Division for Aging, also offer independent living services to low income frail elderly and disabled persons to assist them in returning to the community after institutionalization.

Physically Disabled

Physically disabled persons are those with an illness or impairment that limits their ability to function independently. The Housing Authorities provide units for the physically disabled as noted in Figure 32 in addition to other publicly funded multiple family developments.

The Clark County, Las Vegas, and North Las Vegas Housing Authorities provide accessible units for the physically disabled who are impeded in their ability to function independently. In total, there are 179 handicapped accessible units available throughout the three public housing jurisdictions. There are an additional 1,014 multiple family housing units accessible to the physically disabled within the Consortium. However, these units are offered at market rate rents unlike those provided by the Housing Authorities, which are rented at affordable rates.

Figure 32
Special Needs Housing Inventory
HCP Consortium

Jurisdiction	Facility Type	Population Served	# Units
<u>Elderly/Frail</u>			
	HUD Section 202	Elderly/Frail Elderly	507
	Adult Group Care	Elderly/Frail Elderly	2,096
	Adult Group Care	Alzheimer's	244
	Skilled Nursing	Elderly/Frail Elderly	2,190
Consortium			5,037
<u>Physically Disabled</u>		<u>Housing Authority Projects</u>	
County	Multiple Family	Accessible Units	102
Las Vegas	Multiple Family	Accessible Units	68
N. Las Vegas	Multiple Family	Accessible Units	9
Consortium			179
<u>Physically Disabled</u>		<u>Non-Housing Authority Projects Publicly Funded*</u>	
County	Multiple Family	Accessible Units	103
Las Vegas	Multiple Family	Accessible Units	820
N. Las Vegas	Multiple Family	Accessible Units	91
Consortium			1,014
<u>Developmentally Disabled</u>		<u>Non-Housing Authority Projects Publicly Funded</u>	
	Intermediate Care	Beds for developmentally Disabled	88
	Community Care	Beds for developmentally Disabled	60
	Group Home	Beds for developmentally Disabled	269
	Supportive Living	Beds for developmentally Disabled	284
Consortium			701
<u>Mentally Ill</u>			
	Emergency Beds	Individuals with mental illness & substance abuse	26
	Residential Treatment	Mentally ill with repeated hospitalizations	10
	Adult Group Home	24 hour care, transportation, independent living	265
	Supervised Apartments	Landlord is familiar with symptoms and needs	24
	Supported Living	Independent skills training in client leased units	175
	Shelter Plus Care	Housing assistance, Independent skills training, daily living assistance, support services, psychiatric care	104
Consortium			604
<u>Persons with HIV/AIDS</u>			
	Scattered Site Condo's	Persons with HIV/AIDS	15
	Single family detached	Persons with HIV/AIDS	3
	Apartments	Persons with HIV/AIDS	16
	Scattered Site	Persons with HIV/AIDS	22
	Apartment Leases		
	Communal Living	Persons with HIV/AIDS	12
Consortium			68

*Includes HUD Section 811 funded projects.

Source: The Meyers Group; City of Las Vegas Neighborhood Services Department, State Health Division.

The Center for Independent Living provides lists of affordable and accessible housing units within the County as well as informs its clients of any grants available to provide accessibility improvements to existing housing. In addition to the services it offers, the Center assists its clients in obtaining social services and works with the public housing authorities as well as private landlords to locate housing units.

Developmentally Disabled

The State of Nevada Department of Human Resources operates the Desert Regional Center -an organization, which provides 701 beds for the developmentally disabled in Clark County. In addition, New Vista Ranch provides between 6 and 18 beds for the developmentally disabled. Services for the developmentally disabled are coordinated by the Desert Regional Center in Clark County for the State of Nevada. Due to funding limitations and a lengthy waiting list for supportive living arrangements, only emergency cases are being accepted by the Center.

Severely Mentally Ill

Individuals with severe and persistent mental illness have symptoms that significantly impede their ability to live independently in the community and be afforded the opportunities and choices that most individuals take for granted. Southern Nevada Adult Mental Health Services (SNAMHS) provides housing, training in areas of independent living, psycho-social rehabilitation, support services and psychiatric care for individuals with mental illness in Clark County as noted in Figure 32.

In addition to Residential programs, SNAMHS is a community base psychiatric center with the mission to help adults with mental illness, through provision of inpatient and community based services, empowering them to live safely and participate in the community, and maximizing their quality of life. SNAMHS serves approximately 11,000 individuals per year, with a monthly caseload of 7000, of which 4,300 meet criteria for severe and persistent mental illness. SNAMHS operates a psychiatric emergency service with 86 in patient hospital beds in addition to four outpatient sites. Outpatient statistics indicate 4,360 receiving medication, 770 counseling, 175 psychosocial rehabilitation and 559 case management each month.

Persons with Alcohol/Other Drug Abuse

The Nevada Bureau of Alcohol and Drug Abuse (BADA) provides funding for 11 treatment and 28 prevention programs in Clark County. Services funded by BADA for prevention and treatment of alcohol and drug abuse include detoxification programs, inpatient and outpatient treatment, counseling for individuals, families and groups, and education on self-esteem and other harm reduction issues. BADA also targets its client population for testing and early intervention for tuberculosis and HIV. Figure 33 indicates those BADA funded facilities offering inpatient services including the number of beds and/or transitional housing units available.

Figure 33
Alcohol & Drug Abuse Treatment Facilities
HCP Consortium

Facility	Beds	Description
WestCare	164	56 beds long term Adult Treatment/Rehab 25 beds short term Adult Treatment/Rehab 25 beds Adult Detoxification 18 beds Youth emergency shelter 11 beds Youth Detoxification 29 beds Youth long term Treatment/Rehab
LV Salvation Army	111	56 beds Long Term Treatment/Rehab [Men] 22 beds Long Term Treatment/Rehab [Women] 16 beds Short Term Treatment/Rehab [Men] 8 beds Short Term Treatment/Rehab [Women] 9 beds Transitional/Re-Entry [Men]
Healthy Families	20	8 beds Long Term Treatment/Rehab * 12 beds Transitional Housing ** * Serve up to 16 Women & their Children ** 6 units with 2 clients & children per unit
Economic Opportunity Board	36	18 beds Long Term Treatment/Rehab [Men] 18 beds Long Term Treatment/Rehab [Women]
Total Beds	331	

Source: Bureau of Alcohol and Drug Abuse, Treatment Agencies, 2000.

HIV/AIDS Housing

The Las Vegas HOPWA grant, administered by the City of Las Vegas, Neighborhood Services Department, encompasses a three county Metropolitan Statistical Area--Clark and Nye Counties, Nevada and Mohave County in Northern Arizona.

The HIV/AIDS community is also assisted through the other HUD grants administered by the Cities and County. Although not specifically for HIV/AIDS clients, the respective CDBG grants from each entity are contributing to the construction of a new women's homeless shelter, which any HIV/AIDS infected woman who needs shelter can access. The ESG grant assists these women by funding bus tokens for transportation to medical appointments.

The HOME grant has funded an HIV/AIDS service provider for acquisition of three townhouses. The HOPWA grant has funded the same service provider for seven scattered site condominium units. The HOPWA grant has also funded rehabilitation of an older eight-plex owned by another service provider. Some non-profit agencies purchase their housing units through donations and fundraisers, and do not access federal funds. As noted in Figure 32, a total of 68 units are available specifically to serve HIV/AIDS clients in Clark County including condominiums, townhouses, and apartments, communal living and single family detached housing units.

Assisted Housing Inventory

Assisted housing is housing that receives some form of federal, state or local financial assistance. This includes grants, loans, low-income housing tax credits, and industrial development revenue bonds. Assisted housing can be project based, where the housing unit itself is subsidized, or tenant based, where the assistance is given directly to the tenant who is then responsible for finding housing in the private market. Assisted housing includes the traditional public housing units that are funded by HUD as well as housing units that are managed by non-profit groups. The Housing Authorities serve low- and moderate-income families and seniors, usually those with incomes below 30% of the median income.

Assisted Public Housing Inventory

The Consortium consists of three public housing authorities: the Clark County Housing Authority (CCHA), the Las Vegas Housing Authority (LVHA), and the North Las Vegas Housing Authority (NLVHA). There are currently 3,401 public Housing units and 7,469 publicly assisted housing units in the Consortium. Figure 34 indicates the number and type of “Public Housing” units by PHA, while Figure 35 indicates the number and type of “Other Publicly Assisted” housing units by PHA.

Figure 34
Conventional Low Rent Public Housing Units – 2000
HCP Consortium

Public Housing Authority	Number of Elderly Units	Number of Family Units	Number of Scattered Sites	Total Public Housing Units
Clark County ¹	75	338	141	554
Las Vegas	1,078	1,266	238	2,582
North Las Vegas	120	101	44	265
Total Units by Type	1,273	1,705	423	3,401

¹ Clark County PHA owns an additional 130 Elderly units, 170 Family units and 45 Scattered Sites units in the City of Henderson, which is not a part of the Consortium.

Sources: Clark County, Las Vegas and North Las Vegas Housing Authorities - 2000

Conventional Low Rent Public Housing

These public housing units are constructed with Federal funds, owned and managed by Housing Authorities. The housing developments are operated from funds paid as rent by residents in addition to subsidies provided through HUD. Residents of Conventional Low Rent units pay 30% of their household adjusted income as rent.

Figure 35
Other Publicly Assisted Housing Units – 2000*
HCP Consortium

Public Housing Authority	Section 8 Rental Voucher ¹	Section 8 Mod. Rehab.	Section 8 New Const.	Tenant Based Rental Assistance (TBRA) ¹	Other Non-Federally Assisted Housing ²	Total Housing Units
Clark County	2,216	160	120 ³	50	926	3,512
Las Vegas	2,672	217	0	0	0	2,889
North Las Vegas	1,042	0	0	26	0	1,068
Total Units by Type	5,930	377	120	76	926	7,469

*The housing authorities also manage Section 202 units, which are identified in Figure 32.

1 Vouchers and TBA allow residents to rent from the private market at a cost equal to 30% of the household income.

2 Includes housing units or mobile home spaces acquired with indirect Federal assistance or through local initiative in which both have no operating subsidies.

Sources: Clark County, Las Vegas and North Las Vegas Housing Authorities - 2000

Section 8 Rental Vouchers

Vouchers allow low-income households to lease units from private sector owners. The program requires that 75% of the households have incomes less than 30% of the Area Median Family Income. Households using vouchers must pay at least 30% of their income as rent with the Housing Authority paying the balance of an agreed upon Fair Market Rent using HUD funds.

Section 8 Moderate Rehabilitation Program

This program provides assistance over a 15-year period to private sector owners who modernize units, which are sound but need certain improvements such as new roofs, new air conditioning, and bathroom or kitchen equipment. The owner must agree to reserve the units for low-income families at an agreed upon rent. The family pays 30% of their household income with the Housing Authority paying the balance.

Section 8 New Construction

This program, which has been discontinued, reduced the interest rate through issuance of bonds making development by private owners economically feasible. The units are then rented to qualified low-income families who pay 30% of their household income as rent. While the Housing Authorities administer and pay the subsidy, they do not manage the housing units.

Tenant Based Rental Assistance Program

This program is allocated funds through the Nevada Housing Division and is monitored by the Clark County HOME Consortium. The program is modeled after the Section 8 Voucher program in which families pay 30% of their household income as rent.

Section 202 New Construction

This HUD program provides a reduced interest rate loan making private non-profit group development economically feasible. This program assists the elderly and handicapped through subsidized operating costs allowing households to pay 30% of their income as rent.

Physical Condition of Public Housing Units

Clark County Housing Authority

The housing stock managed by Clark County Housing Authority (CCHA) is in excellent condition. The oldest units have been restored through comprehensive modernization of roofs, appliances, mechanical systems, and energy efficiency improvements.

Las Vegas Housing Authority

The Las Vegas Housing Authority (LVHA) has the oldest and most extensive inventory of public housing units. Of 18 public housing complexes managed by LVHA, 7 are located in West Las Vegas. Of these seven, five are located in census tract 3.02. All family complexes and one senior complex have been modernized. Public housing stock is in excellent condition on the West side. One West side complex has been demolished and the Housing Authority is replacing it with Granny Housing. Additionally, the Authority has 275 Scattered Site units.

North Las Vegas Housing Authority

The North Las Vegas Housing Authority's (NLVHA) two complexes and scattered sites are in good shape. All units are safe and in good structural repair.

Restoration and Revitalization Needs

Clark County Housing Authority

There are no immediate restoration needs for the CCHA, and funding of the Comprehensive Grant Program should be adequate at current levels to keep pace with deferred maintenance and cyclical replacements. The CCHA is in full compliance with lead-based paint testing and abatement, and energy consumption requirements.

Las Vegas Housing Authority

Public housing restoration and revitalization needs identified by the LVHA for the East side include roofs, air conditioning/heating units, energy conservation items, cabinets, plumbing fixtures, water and sewer lines and floor tiles. Plans include reconfiguring interior space for greater utility, upgrading existing community centers and adding or replacing playgrounds in family developments. Improvements will be designed to enhance the safety of residents.

North Las Vegas Housing Authority

Rehabilitation and revitalization priorities for NLVHA include upkeep of air conditioning units, replacing flooring, kitchen and bath fixtures in some older units, and improving the exterior courtyards to improve residents' quality of life. Residents are working with staff to design exterior improvements.

Section 504 Needs Assessment

Clark County Housing Authority

The CCHA has 36 physically disabled units in its conventional public housing developments. This includes units originally designed and constructed for the purpose, and units in older developments, which have been converted to such use under CIAP and CGP. The total number meets HUD's Section 504 requirements. There are 438 applicants currently on the waiting list for handicapped accessible units.

Las Vegas Housing Authority

The LVHA's current inventory of housing converted to meet Section 504 handicapped requirements is 65 units. All of the units are in Public Housing; 36 are in family units and 29 are in elderly developments. The Authority lost some 504 units in 1999 with the sale and demolition of three developments; however, additional units will be converted during the scheduled FY 2000 Rehabilitation. There are 587 applicants currently on the waiting list for handicapped accessible units.

North Las Vegas Housing Authority

Advertising for the 12 handicapped-accessible/adaptable (Section 504) units managed by NLVHA has been extensive. Working with the Nevada Association of the Handicapped, NLVHA has made a concerted effort to inform the public about these units. Three of the 44 scattered sites managed by NLVHA have been converted to provide handicap accessibility thus meeting Section 504 requirements. Only six applicants are currently on the waiting list for handicapped accessible units.

Agency Strategy for Improvement

All the public housing authorities in the HCP Consortium Area all have regular programs for improving management and operation as well as the living environment for residents.

Clark County Housing Authority

The CCHA has its own fully trained and equipped maintenance staff. A central work-order system ensures prompt response to resident requests. Residents are involved in the prioritization of work-items for grounds and building maintenance as well as modernization. At the scattered site units,

residents receive training to ensure that the yards are properly maintained. CCHA staff performs building maintenance.

Las Vegas Housing Authority

LVHA has a fully trained and equipped maintenance staff, which utilizes a central work order system to ensure prompt response to resident requests. Residents are involved in the five-year modernization plan to determine priorities and increase resident satisfaction. Preventative maintenance has been implemented to ensure that each unit is maintained, and to identify maintenance areas that require improvement.

The expansion of contracted security at several family sites has improved the quality of life and reduced criminal activity. Prevention programs, and programs directed at youth to enhance education goals are a priority. Plans to open Community centers on sites adjacent to Elementary Schools for tutorial and after school programs are being developed which will provide a safe and productive environment for youth during the critical time period after school. Updated policies, including more stringent screening and eviction criteria have been implemented to assist in developing safe communities.

Self-sufficiency efforts are ongoing to assist residents affected by Welfare to Work and to increase the educational and earning potential of residents. On site service providers, and the location of the Family Self Sufficiency office to the Family Resource Center at the A.D. Guy Center provides a one-stop shop for residents to obtain services, including classes from the Clark County Community College.

A Resident Advisory Board has been appointed by the Board of Commissioners to review policy and obtain resident perspective. Major policy changes will include that new residents of Scattered Sites will be required to have a history of good tenancy, training in basic maintenance, life skills and conflict resolution to enable them to be neighbors in non-traditional public housing communities.

North Las Vegas Housing Authority

Management and operation improvements at the NLVHA are budget driven. The NLVHA recently completed a personnel classification compensation plan. Compensation benchmarks have been raised to attract and keep top quality staff. The NLVHA has also implemented a records retention plan to reduce paperwork. Tenant involvement in management initiatives has improved in the last year. Pre-screening of applicants has reduced many problems in the housing complex.

Living environment enhancements highlighted in the NLVHA strategy for improvement include security, maintenance, youth and senior programs, and revamping exterior courtyards. Maintenance improvements are also needed. Lighting at the Casa Rosa Apartments has been upgraded to reduce crime and the complexes are a targeted neighborhood for neighborhood policing, a new cooperative arrangement with local police. The NLVHA runs programs for seniors and youth, and hosts YMCA

programs. Counseling is available for individuals in need. Courtyards are being redesigned by staff to be child-friendly, more shady and easier to maintain.

Comprehensive Grant Program

Comprehensive Grant Program (CGP) funding for all participating Public Housing Authorities totaled \$7,086,398. The bulk of these CGP funds, 73% (\$5,200,000) in FY 2000, are required for units owned and managed by the LVHA. The CCHA received 21% of CGP funding (\$1,459,398). The NLVHA, the smallest of the three in the HCP area, received 6% (\$427,446).

Clark County Housing Authority

The CGP funding covers all of the CCHA's public housing projects in the HCP Consortium area. Among the improvements under CGP are water efficient fixtures, basic building maintenance, and security features requested by the resident councils. The CCHA's public housing developments are located in stable residential areas, and participation in neighborhood revitalization efforts or similar programs as are found in more urbanized settings is not needed at this time.

For several years, the CCHA has received CDBG funding to replace obsolete playground equipment and add tot-lots in its family developments. These improvements meet childcare licensing standards, and are used by the Head Start program as well as the other children residing in the complexes.

Las Vegas Housing Authority

The LVHA's rehabilitation strategies include additional Section 504 accessibility retrofits, replacement of roofs and water lines, and comprehensive modernization to the remaining East side developments. Two developments that were recently demolished will be redeveloped for home ownership and Granny housing to assist elderly residents who are raising grandchildren.

The LVHA received two grants, Family Investment Centers (FIC) and Drug Elimination, which provide programs for residents that promote a sense of community pride and self-sufficiency.

North Las Vegas Housing Authority

In an effort to reclaim public housing communities for families, the NLVHA is currently instituting a Drug Elimination Plan, which focuses on capacity building efforts in drug prevention and treatment, as well as creating viable alternatives through recreation, job training and education.

The NLVHA is working in concert with a nonprofit agency to revitalize the neighborhood and to construct 100 units in an adjacent lot. The City is using HOME Program funds to purchase land in the neighborhood and rehabilitate property to upgrade the neighborhood in target neighborhoods chosen by the City of North Las Vegas. Resident life skills training such as housekeeping and parenting are offered by the NLVHA.

The NLVHA complexes are located in one of the highest crime areas in the HCP Consortium area. Focus on Drug Elimination Program is a central concern and includes watch programs, increased lighting, and pre-screening of housing complex residents.

Income Limits for Assisted Housing

Income limits for Federally assisted public housing programs are set at 50 % of the area median family income, as determined annually by HUD, and apply to all of Clark County. The eligibility level for any of the above Federally assisted programs ranges from an annual income of \$18,150 for one person to \$34,250 for a family of eight.

Inventory of Assisted Units Subject to Termination

There are three methods in which existing assisted units can lose their affordability designation: Prepayment/Cancellation and Expiration. Assisted housing developments may receive low interest loans to make the project economically feasible through an underlying subsidized mortgage. This subsidized mortgage requires the development to remain affordable for a period of 40 years; however, the owner may prepay the loan and cancel the affordability requirement after 20 years. This applies to Section 8 New Construction and Section 202 New Construction programs. The Section 8 Moderate Rehabilitation program provides private sector owners a guaranteed rent, which requires the housing unit/s to remain affordable for a period of 15 years. This affordability period may also be cancelled through prepayment. With both new construction and rehabilitation programs the affordability period eventually expires, 40 years in the case of new construction and 15 years with rehabilitation. Figure 36 indicates those projects in the Consortium area subject to expiration, which total 1,598 by FY 2004.

Figure 36
 Federally Assisted Projects at Risk of Conversion – 1999-2004
 Clark County

Project Name	# Units	Expiration	Handicapped Only ¹	Elderly Only ²
Walnut Gardens	44	2001		
Morrell Park Apartments	32	2001		
Church Village Apartments	20	2001		
Paradise Square (opting out)	29	2001	X	
Panos Manor Apartments	62	2001		
Clark Terrace Mutual	10	2001		
Clark Towers	116	2001		X
Centennial Park Arms, Phase 2	78	2001		
Walker House Apartments	77	2001		
M & M Apartments Phase II	12	2001		
Grand View Terrace Apartments	40	2001		
Country Hills	42	2001		
Arthur McCants Manor	115	2001		X
The Thunderbird	60	2001		
Regatta	26	2001		
Villas De Mission	46	2001		
Sunrise Gardens	141	2001	X	
Stella Fleming	115	2001		X
Casa Tiempo	73	2001		
Centennial Park Arms I	78	2001		
Rose Garden Townhouses	115	2001		
Grand View Terrace II	51	2002		
Wagon Trails	45	2002	X	
Lake Mead Villa	15	2003	X	
Escondido	62	2003	X	
Caminar Group Home	12	2004		
Villa De Mission East	32	2004		
MSGR Ct Shallow	50	2005		X
Total	1,598			

1 All units for physically handicapped only

2 Elderly only is for families whose head, spouse, or sole member is at least age 62 or mobility impaired.

Barriers to the Production of Affordable Housing

Rapidly rising prices and a predominance of low- to medium-density, single-family units in the HCP Consortium Area, have made the production of affordable housing difficult. In addition to these challenges, public agency regulatory policies related to residential development in the HCP Consortium Area are not flexible with respect to their implementation. While some of the public policies outlined below are generally not considered excessive, flexibility in the implementation of such policies would encourage further investment in affordable housing. The issues of water fees, federal environmental regulations and Boulder City growth controls will be difficult to address since they are not controlled by the local jurisdictions but by an independent governmental agency (Las Vegas Valley Water District), the federal government (environmental laws), and by the voters (Boulder City).

1. **Permit Processing Fees:** Clark County and local jurisdictions have full cost recovery policy for processing development applications. Typical fees in 1999 range from approximately \$4,500 in Mesquite to \$8,000 in Las Vegas. These processing fees are added to the cost of the housing and thus passed on to the purchaser. Currently, there is only a little flexibility in the imposition of these fees for affordable housing projects, such as an exemption of zoning fees for non-profit agencies through the Clark County Comprehensive Planning Department. However, the amounts of those fees are minimal. The more expensive building department and public works fees are imposed on all development.
2. **Plans Review Time:** The review process itself can increase costs by virtue of the amount of time and money it takes for a developer to receive approval. This results from staff review of a development proposal in addition to any required public hearings. Currently, due to the tremendous volume of development taking place in Clark County, an average plans review will take a minimum of eight weeks, assuming all required information has been included. For any conforming zone change, a developer must assume an average of six to eight weeks. Clark County does have an Affordable Housing Plans Check process, which moves affordable housing projects to the front of the line for the initial plans check. This reduces costs a little by reducing the amount of time the developer must wait to begin construction.
3. **Water Fees:** The Las Vegas Valley Water District imposed a regional connection fee for new water hook-ups in 1996. Phased in over two years, the single-family fee went from \$1,000 in 1996 to \$3,400 in 1998 and the multi-family fee went from \$6,290 in 1996 to \$21,380 in 1998. Then in 2000, the water fees were again increased and will be phased in over four years. The fee per apartment unit in 2000 is \$1,288 and will be increased to match the residential fee of \$2,136 per unit, by 2004. This has placed a substantial cost increase on the development of affordable housing, which is generally multi-family. In 1996, the water fees for a 216-unit apartment development were slightly under \$25,000. In 2000, the same apartment complex would pay \$278,208 in water fees. By 2004, the connection fees for the same 216-unit development will be \$461,376.

4. **Legislature:** The Nevada State Legislature only meets once every two years and has a voter - approved limited session of 120 days. In that time, a limited number of bills can be introduced and acted upon. County governments are “legal creatures of the State”. Lacking the charter powers of incorporated cities, the County has only those powers specifically authorized in the Nevada Revised Statutes (“Dillon’s Rule”). As such there is some confusion whether the County is always legally authorized to provide a variety of services to non-profit organizations, simply because those powers may not have been clearly delineated or specified in the statutes. This limits the County’s ability to react quickly when new and innovative ideas for the production of affordable housing emerge. To foster a spirit of experimentation and creativity, we need a more expansive process that allows county government to innovate and find new ways to assist our non-profit housing development partners.
5. **Federal and State Environmental Protection Regulations:** Environmental mitigation fees, fees charged by local government and private firms for performing environmental analysis and reviews and delays caused by mandated public review periods also add to the cost of housing and are passed on to the purchaser. No exemptions are provided for affordable housing developments.
6. **Development Taxes:** Taxes for the construction of public facilities, such as transportation, infrastructure, and parks, must be paid by developers and are passed on to home purchasers or renters, regardless of the type of residential development.
7. **Development Standards and Zoning:** Restrictions on development, such as minimum lot zoning, required subdivision standards, upward zoning, and limiting the expansions of local capital improvement programs in order to slow growth, all contribute to the difficulty in building affordable housing. Clark County is currently working on a revision of its development code, which includes new zoning designations and other development code changes that could positively impact the ability to develop more affordable single-family housing.
8. **Citizen Review:** Required public hearings before public entities such as Planning and Zoning Commissions and City Councils to allow public comment on proposed affordable housing projects add to the processing time and ultimately to the project's final cost. Affordable and special needs housing development goes through the standard development review process. Sometimes during this process citizen concerns arise that are often based on fears regarding the believed characteristics of potential residents or the housing’s characteristics or perceived impact (e.g. housing density or impact on neighboring housing). These concerns on the part of citizens often result in a delay of action by the local decision making body.
9. **Reliance on industries with a low-wage base:** The tourism industry is dominant in the HCP Consortium Area. According to the Nevada Department of Employment, Training and

Rehabilitation, the average income for this industry in 1999 was \$26,400. This income is not enough to afford an average apartment rent of \$698 without incurring a cost burden of 30% or more. This illustrates the difficulty many households face in purchasing or renting a home in the HCP Consortium Area.

10. Limited land availability and land costs: The urban areas of the HCP Consortium Area are surrounded by land currently under the supervision of the Bureau of Land Management (BLM). The BLM oversees these lands under the Recreation and Public Purpose Act, which through the Southern Nevada Public Lands Act of 1998 now includes affordable housing as a “public purpose.” Therefore, these lands should be available to developers of affordable housing. However, there is currently no mechanism to make the land available below fair market value for development as affordable housing. The price of the land would have to be reduced to be economically viable for affordable housing. The price of non-BLM land continues to increase, making the production of affordable housing more difficult. Local jurisdictions will continue to donate land for the production of affordable housing.
11. Community Support: There has traditionally been minimal support for affordable housing development in Southern Nevada. There have been problems with the “Not In My Backyard” or NIMBYism among residents of established neighborhoods who fear affordable housing. Housing advocacy groups, non-profit organizations and the jurisdictions themselves are involved in raising public awareness regarding the shortage of affordable housing and the reality of affordable housing in an effort to reduce fear. The local business community, assisted by various banks seeking to achieve Community Reinvestment Act (CRA) goals, has taken a more active role in creating affordable housing than in the past.
12. Boulder City Voter-Adopted Growth Controls: A number of factors not under Boulder City’s control affect whether their housing and community development goals will be reached. The vast majority of vacant land within the city limits is owned by the city. However, the city does not have unlimited control over the land it owns. One factor is a voter-adopted ordinance that requires voter approval of any sales of land over one acre in size. Another factor is a voter-adopted controlled growth ordinance, which sets limits on the total number of dwelling units that can be built per year. Since the city cannot readily make available land for purchase to organizations that might wish to build affordable housing, the City continues to support other housing goals to further this purpose.

Fair Housing

The Nevada Fair Housing Center conducted an Analysis of Impediments to Fair Housing Choice (AI) Study in July 1998 for Clark County, in August 1996 for Las Vegas, and in July 1998 for North Las Vegas. Each AI identified barriers to the furthering of fair housing as well as goals to alleviate such barriers.

The HCP Consortium has been proactive in developing and implementing strategies to attain such goals. Utilizing the expertise of fair housing specialists, the HCP Consortium will continue to receive technical training on fair housing issues, specifically issues related to zoning, planning and housing accessibility for the disabled. Further, the HCP Consortium will continue to participate on the Community Housing Resource Board (CHRB), a coalition of representatives from local government, lending institutions, and housing industry organizations dedicated to affirmatively furthering fair housing through community education. Fair housing education will remain an integral facet of the training of City of Las Vegas registered Neighborhood Associations, which are formed to empower neighborhood groups to preserve and enhance their existing neighborhoods. Further, the Neighborhood Services Department facilitates the development of neighborhood plans, which identify community issues and develop strategies for future improvements.

In order to improve the housing choice available in minority and low-income neighborhoods, the HCP Consortium has developed specific revitalization strategies. West Las Vegas, a predominantly African American community, is being positively impacted by the Las Vegas “Vegas Heights Revitalization Strategy”, which provides for single family housing rehabilitation, street and sidewalk improvements, and expanded homeownership opportunities for low to moderate income households. In addition, the City of Las Vegas has planned a similar strategy for East Las Vegas, a predominantly Hispanic community. North Las Vegas offers similar programs and improvements in its CDBG eligible neighborhoods. Clark County pursues policies that integrate housing choice into the development code and through State statute.

The City of Las Vegas has also committed funds to the revitalization of a Downtown neighborhood where over 80% of the homes are owner-occupied. This project will include sidewalk improvements to accommodate the existing pedestrian activity between residential and commercial areas as well as a housing rehabilitation component to assist existing homeowners maintain their affordable housing. The housing rehabilitation program funds planned for use in the revitalization projects may also be used to improve accessibility for disabled individuals. In addition, Las Vegas will continue to pursue its commitment to bring mixed income/use housing to the Downtown.

HCP Consortium sponsored homebuyer programs that enable low to moderate-income households to achieve homeownership complement these revitalization strategies. The success of the revitalization and homebuyer programs augments housing choice for persons of all socioeconomic and ethnic backgrounds, thereby alleviating racial segregation in areas of high minority concentration.

Accessibility

The Nevada Fair Housing Center (NFHC) completed an Accessibility update to the City of Las Vegas Analysis of Impediments study in May of 1999. An analysis of accessibility in Clark County and North Las Vegas will be completed in FY 2000.

Several deficiencies were identified in the Las Vegas study and it is assumed that all other jurisdictions in the HCP Consortium will have similar issues. The most notable deficiencies occurred with the Accessible Common Area Routes (31% not fully accessible) and Overall Handicap Parking (69% not fully accessible) in multifamily rental developments. Furthermore, the Accessibility update makes the following recommendations:

1. Initiate, build and advance a program of education for all internal building and planning department staff, which explains both accessibility requirement standards and relative involvement and responsibility of the particular department to review, identify, and address issues concerning accessibility design and construction.
2. Adopt a "Plans Check" accessibility checklist to ensure compliance with federally mandated design and construction requirements. Such checklist shall be applied at the time of proposed construction plan approval, and at all site plans checks as a balanced process of review.
3. Develop a "Renovation Compliance Plan", that entails measurable goals and have it approved by the governing body of the jurisdiction to address currently identified barriers at existing properties built after March 13, 1991.

The HCP Consortium will continue to work closely with the Nevada Fair Housing Center to develop building and housing codes to provide accessibility guidelines followed by sufficient enforcement to ensure that newly constructed housing developments are accessible to persons with disabilities.

Affordable Housing

The AI studies concluded that both the abundance of affordable housing in high minority neighborhoods, and the lack of affordable housing in low minority neighborhoods corresponded with high housing segregation by race.

To this end, the HCP Consortium will focus on the attainment of two goals: mixed-income revitalization strategies in distressed areas; and the promotion of scattered site housing strategies. For example, the City of Las Vegas has implemented a marketing plan to attract mixed-income residential development in distressed, high minority neighborhoods through its Vegas Heights Revitalization Strategy. Currently four single family homes serving "mixed-income" households (50% - 80% of area median income) are being developed in Vegas Heights. Single-family housing rehabilitation has also been completed in Vegas Heights. A second neighborhood revitalization strategy is being developed for the "Church Noblitt" community, a predominantly Hispanic

neighborhood in East Las Vegas. The HCP Consortium will continue to work to disperse affordable housing developments throughout the Valley. Many of the new projects being developed will meet this goal, particularly Apache Pines, McFarland Senior Apartments, Tropical Pines, and the Vintage Desert Rose Senior Apartments, all projects funded with FY 2000 HOME funds.

Clark County has included the promotion of housing choice in its strategic plan for 2000-2004. Specifically the County will work to facilitate the development of housing for low and moderate income households by offering developers' incentives. This may include low interest or tax exempt financing, county participation in on- and off-site public improvements, land write-downs or financial assistance to offset development fees. The County will also work to give preferential consideration through County programs for funding to affordable housing developments that wish to locate in non-traditional areas. The Comprehensive Planning Department will continue to examine the mix of housing options available in its land use plans. The County will continue its neighborhood revitalization efforts in the Whitney area to preserve existing affordable housing stock and will seek additional funding to expand the Housing Rehabilitation Program.

The City of North Las Vegas has a concentration of affordable and low-income housing within its boundaries. In an effort to attract a more diverse population, the city has focused on rehabilitation of its current housing stock instead of the development of any new affordable housing developments. This has had the affect of perpetuating the clustering of low-income and ethnic minorities. The Grants Administration Division will focus on educating political and community leaders on the affects of the current affordable housing policies since the City does not want to perpetuate the continued concentration of low-income people.

Zoning

Clark County's Comprehensive Planning Department is currently revising the County's zoning code and other related land development regulations. The new regulation will be known as the Unified Development Code and will be a consolidation of the former Zoning; Subdivision; Development Standards; and Land Development Regulations components of the Clark County Code.

As a whole, the proposed new Unified Development Code is more flexible, performance oriented, and will allow for the more affordable development of housing. For example, lot width and depth requirements will be eliminated for all residential districts. In addition, minor deviations will be allowed through an administrative process. Further, a new zoning category, Residential Urban Density, a mixed use category (residential and commercial uses developed together) will allow for higher density development which provides residential options together with employment options.

Multi-family residential zoning, a vital precursor to affordable rental housing, was identified by the Las Vegas AI Study as insufficient in areas outside of the predominantly minority neighborhoods (portions of West Las Vegas, East Las Vegas, Meadows Village, and the Downtown Corridor) to provide for affordable housing opportunities in low minority neighborhoods, such as Northwest Las Vegas. The AI study also indicated the need for a new Affordable Housing Plan within the Housing Element of the City's General Plan. The most recent Housing Element draft incorporates three

zoning strategies for augmenting fair housing choice, which expand the areas outside predominantly minority neighborhoods for multifamily residential zoning.

The North Las Vegas AI recognized that neighborhoods in the downtown area have been targeted for revitalization and the city has worked to attract a diversified economic base to the downtown area. North Las Vegas will continue to develop accessibility guidelines and ensure that all multifamily housing meets current FHA guidelines. The city may also develop a local building ordinance that addresses occupancy issues.

Lending

The AI Studies contend that a lack of lending opportunities in minority neighborhoods impede homeownership opportunities. Cognizant of the need for commercial lending in minority, low-income neighborhoods, the HCP Consortium will continue to fund downpayment and closing cost assistance programs through several agencies. These programs have been instrumental in enabling low-income renters (many of whom are minority households) to buy their homes.

The North Las Vegas AI identified that financial institutions have not readily invested in North Las Vegas. This may have been due to a lack of publicity for the benefits flowing from these activities. North Las Vegas will work on publicizing its activities in the downtown revitalization area in an effort to attract more private investment.

Lead-Based Paint

The age of housing is the major variable for estimating the number of potential lead-based paint housing units in a given geographical area. This is based on the fact that the lead-based paint (now banned) was used on older housing stock built before 1978. Consequently, the older the home the greater is the potential for encountering lead-based paint. Figure 37 presents an overview of the potential for encountering lead-based paint in housing units, particularly those occupied by low- and extremely low-income households within the HCP Consortium Area.

There are an estimated 94,611 occupied housing units potentially containing lead-based paint within the HCP Consortium Area. Fifty-five percent are owner, and 45% are renter occupied. Of the units with the potential for containing lead-based paint, approximately 22% (11,268 units) of the owner units, and approximately 56% (23,784 units) of the renter units are occupied by low- and extremely low-income households. Many of these units are most likely located in Boulder City due to the older housing stock in the city. Unfortunately, separate information for Boulder City is not available.

There are an estimated 36,475 occupied housing units potentially containing lead-based paint within The City of Las Vegas. Fifty-four percent are owner and 46% are renter occupied. Of the units with the potential for containing lead-based paint approximately 21% (4,037 units) of the owner units, and approximately 64% (10,835 units) of the renter units are occupied by low- and extremely low-income households.

There are an estimated 8,460 occupied housing units potentially containing lead-based paint within the City of North Las Vegas. Fifty-two percent are owner, and 48% are renter occupied units. Of the units with the potential for containing lead-based paint approximately 32% (1,410 units) of the owner units, and approximately 70% (2,866 units) of the renter units are occupied by low- and extremely low-income households.

The Nevada State Laboratory compiles lead poisoning statistics. The State Laboratory is responsible for lead testing of children aged six months to six years of age received from Medicaid providers in Clark County. This Blood Lead Testing Program was initiated in December 1991.

The State Laboratory Blood Lead Testing Program does not determine the source of lead contamination, only that lead is present in those patients who test positive. Therefore, it is not possible to determine which patients were contaminated from lead-based paint or some other sources of lead. Calendar Year 194 results from blood testing in Clark County are presented in the Figure 38, *Children Tested for Lead Poisoning in Clark County, January 1, 1994 to December 31, 1994*. As indicated in this figure, more than 94% of all children tested during this period were not considered lead poisoned.

Figure 37
Housing Units by Age, Tenure, Income Group and Potential for Encountering Lead-based Paint;
HCP Consortium Area

Pre-1940	Total	1,975 X 90%=	1,778	909 X 90%=	818	131 X 90%=	118
	Renter						
	-Total	1,006 X 90% =	905	589 X 90%=	530	46 X 90%=	41
	-Very Low	438 X 90% =	394	270 X 90%=	243	32 X 90%=	29
	-Low	277 X 90%=	249	160 X 90%=	144	14 X 90%=	13
	Owner						
	-Total	969 X 90% =	872	320 X 90%=	288	85 X 90%=	77
	-Very Low	309 X 90% =	278	72 X 90%=	65	44 X 90%=	40
	-Low	169 X 90%=	152	41 X 90%=	37	10 X 90%=	9
1940-1959	Total	22,534 X 80%=	18,027	13,311 X 80%=	10,649	3,278 X 80%=	2,622
	Renter						
	-Total	11,219 X 80%=	8,975	6,050 X 80%=	4,840	1,386 X 80%=	1,109
	-Very Low	4,651 X 80%=	3,721	2,569 X 80%=	2,055	723 X 80%=	578
	-Low	2,377 X 80%=	1,902	1,432 X 80%=	1,146	380 X 80%=	304
	Owner						
	-Total	11,315 X 80%=	9,052	7,261 X 80%=	5,809	1,892 X 80%=	1,514
	-Very Low	2,355 X 80%=	1,884	1,409 X 80%=	1,127	433 X 80%=	346
	-Low	1,550 X 80%=	1,240	909 X 80%=	727	339 X 80%=	271
1960-1979	Total	120,655 X 62%=	74,806	40,336 X 62%=	25,008	9,225 X 62%=	5,720
	Renter						
	-Total	52,645 X 62%=	32,640	18,705 X 62%=	11,597	4,714 X 62%=	2,923
	-Very Low	19,262 X 62%=	11,942	7,582 X 62%=	4,701	2,088 X 62%=	1,295
	-Low	9,701 X 62%=	6,015	4,102 X 62%=	2,543	1,044 X 62%=	647
	Owner						
	-Total	68,010 X 62%=	42,166	21,631 X 62%=	13,411	4,511 X 62%=	2,797
	-Very Low	9,269 X 62%=	5,764	2,371 X 62%=	1,470	802 X 62%=	497
	-Low	4,111 X 62%=	2,549	985 X 62%=	611	398 X 62%=	247

Note: Total units based on a cross tabulation of 1990 Census data regarding age of housing and income of population as identified in Summary Tape File 3 of the 1990 Census.

Source: 1990 Census, CHAS Databook Table 12, 1993; CHAS 1994

Figure 38
 Children Tested for Lead Poisoning in Clark County
 January 1, 1994-December 31, 1994

Number of Children Tested	% of Total	Results in Micrograms/Deciliter (ug/dL)
1,886	94.1 %	<10
78	3.9%	10-14
23	1.1%	15-19
9	0.4%	20-29
8	0.4%	>30
2,004	99.90%	

Notes:

1. Results of testing do not include the source of lead (e.g.-lead-based paint, drinking water, ceramics, etc.)
2. Test results may include cases of 'false positive'. Specimens were collected using a fingerstick capillary technique, which is known to be prone to contamination by environmental lead. The data has not been screened for false positives.
3. Children tested are generally between the ages of six months and six years.
4. The Centers for Disease Control (CDC) defined blood concentration levels as follows:

I	<10	A Child in Class I is not considered to be lead-poisoned.
IIA	10-14	Many children (or a large portion of children) with blood levels in this range should trigger community-wide childhood lead prevention activities. Children in this range may need to be rescreened more frequently.
IIB	15-19	A child in Class IIB should receive nutritional and educational interventions and more frequent screening. If blood level persists in this range, environmental investigation and intervention should be done.
III	20-44	A child in Class III should receive environmental evaluation, remediation and a medical evaluation. Such a child may need pharmacological treatment of lead poisoning.
IV	45-69	A child in Class IV will need both medical and environmental interventions, including chelation therapy.
V	>69	A child with Class V lead poisoning is a medical emergency. Medical and environmental management must begin immediately.

Source: Nevada State Laboratory, January 30, 1995

Housing Strategic Plan

Summary of Housing Priorities for HCP Consortium

This summary discusses the general priorities developed for the Strategic Plan and the basis for their selection.

The HCP Consortium's priorities were established based on the analysis of current housing needs, the characteristics of the overall housing market, the ability of low-income households to afford, locate and maintain housing, and the availability of resources to address the identified needs.

Income groups defined as follows:

Extremely low-income	30% or less of area median income
Low-income	50% or less of area median income
Moderate income	80% or less of area median income
Middle income	80 to 95% of area median income

The HCP Consortium has based its strategic plan on the HUD 1990 Census Data, updated reports and surveys regarding housing sales and development, comments from citizen participation meetings, and interviews with housing providers. Areas of need are assigned one of four priority designations based upon the percentage of need as indicated by the HUD Census data. Those households' types showing a need equal to or greater than 50%, 20% or less than 20% are designated High, Medium, and Low respectively. Those household types showing 0% need are designated "None". In some cases, updated reports and/or studies affected the priority designation due to changes, for example in housing market conditions since the 1990 Census.

*High Priority: Activities to address this need will be funded by the HCP Consortium during the five-year period of this plan.

*Medium Priority: If funds are available, activities to address this need may be funded during the five-year period of this plan.

Low Priority: The HCP Consortium will not fund activities to address this need during the five-year period of this plan.

No Such Need: It has been found that there is no need or the HCP Consortium shows that this need is already substantially addressed.

*Please note that the citizen committees that make recommendations to the governing bodies of the HCP Consortium will judge specific projects on their individual merit. Therefore, while a particular project may address the needs of a High Priority group, it may or may not be funded at the discretion of the governing bodies based upon the recommendations of the citizen committees.

Figure 39
 HUD Table 2A
 Priority Housing Needs
 HCP Consortium

PRIORITY HOUSING NEEDS (Households)	Income Level	Priority Need Level: High, Medium, Low	Unmet Need	Goals	
Renter	Small Related	0-30%	H	2,416	1,015
		31-50%	H	3,124	1,198
		51-80%	M	4,056	835
	Large Related	0-30%	H	604	50
		31-50%	H	781	300
		51-80%	M	747	0
	Elderly	0-30%	H	1,964	140
		31-50%	H	1,823	470
		51-80%	M	1,601	340
	All Other	0-30%	H	2,567	1,015
		31-50%	H	2,951	1,197
		51-80%	M	4,269	835
Owner	0-30%	H	1,788	95	
	31-50%	H	858	265	
	51-80%	H	4,506	230	
Special Populations	0-80%	H	18,407	925	
Total Goals				8,910	
Total 215 Goals				8,910	

“Underserved Need” as noted within the following Tables 41 and 42, indicate the difference between the number of households affected by cost burden and the number of affordable housing units available to each income category. The total number of affordable units exceeds the number of households affected by cost burden in some income categories. The assumption is that while the units are available, the target income group does not occupy them. Therefore, in order to ensure that the appropriate target income group occupies affordable housing units, new and existing units receiving assistance will only be available to the intended target income group.

Figure 40
Total Needs for Renter Households
HCP Consortium

Renter Households			
Income categories all family types			
Housing Problem	Ex. Low 0-30%	Low 31-50%	Mod 51-80%
Cost Burden >30%<50%	2,012	8,966	14,667
Cost Burden >50%	12,702	7,216	1,503
Total Cost Burden	14,714	16,082	16,170
Affordable units	7,163	15,007	76,094
Underserved Need	7,551	1,175	-59,924
Total Overcrowded	3,020	2,880	2,942
3-bedroom Units	1,972	1,486	9,825
Underserved Need	1,048	1,394	-6,883

Source: 1990 Census

Figure 41
Total Needs for Owner Households
HCP Consortium

Owner Households			
Income categories all family types			
Housing Problem	Ex. Low 0-30%	Low 31-50%	Mod 51-80%
Cost Burden >30%<50%	1,004	2,342	6,282
Cost Burden >50%	3,915	3,339	2,533
Total Cost Burden	4,919	5,681	8,815
Affordable units	11,889	5,963	29,363
Underserved Need	-6,970	-282	-20,548
Total Overcrowded	450	426	1,398
3-bedroom Units	2,285	2,360	20,116
Underserved Need	-1,835	-1,934	-18,718

Source: 1990 Census

High priority is established under the Strategic Plan for the following household groups and applies to all jurisdictions in the HCP Consortium:

- High Priority:**
1. Extremely low-income and low-income renter households
 2. Extremely low-income and low-income existing owner households
 3. Persons with special needs
 4. All first-time homebuyers

H-1: There were 14,714 extremely low-income households that experienced a cost burden in 1990 with only 7,163 units affordable to this income level. This leaves 48% of this population with a housing cost burden. Overcrowding was also an issue for 1,048 families. While Figure 40 indicates that low-income renters have far more affordable units to choose from, with a need for only 1,175 more units, this is probably understated. Not all units affordable to people at this income are occupied by people at this income level. Assuming that persons at a higher income occupy 50% of the units, 8,679 additional units are needed. Further, based on the size of units, there are plenty of affordable 1-bedroom units, but 2- and 3-bedroom units are not affordable to this group in the current market.

H-2: A majority (53%) of the severely cost-burdened households in the HCP Consortium Area were considered to have extremely low-incomes in 1990. Within this subgroup of extremely low-income households, 56% of existing homeowners are severely cost-burdened. Assisting this group in maintaining their homes will reduce the threat of homelessness for these families. Almost 6,000 low-income families experienced a severe housing cost burden in 1990 and over 36,000 low-income households were cost-burdened. The HCP Consortium's jurisdictions want to maintain those households that currently own their own home whenever possible.

H-3: Persons with special needs include the elderly, frail elderly, persons living with HIV/AIDS, and the developmentally, physically and mentally disabled. The need for supportive housing units for this population is enormous. With only 7,603 units to assist these groups, an additional 18,407 units would be required to meet all of the need. The impediments to construction of special needs housing are many, including the need to subsidize the rents, the cost of supportive services or on-site assistance, and all the other development costs faced by private market developers.

H-4: A high priority was also assigned to low- and moderate-income households that are within reach of purchasing their first home. While this is an important segment of the population to assist, the needs are not as desperate as those of the extremely low-income. Providing first-time home buying assistance to low- and moderate-income homebuyers consequently eases the demand for renter housing and makes it more available for use by extremely low-income households. The HCP Consortium is concerned that promoting homeownership for people between 0 and 30% of AMI is not an efficient use of funds. However, the HCP Consortium recognizes that programs like Habitat for Humanity, which provide newly constructed housing to low-income households in a very structured and supportive program, are successful and will continue to support those types of activities.

Medium priority is assigned to the following groups for the HCP Consortium:

- Medium Priority:**
1. Moderate-income renter households
 2. Moderate-income existing owner households

M-1: Due to the large number of extremely low- and low-income households with severe housing cost burdens in the HCP Consortium Area, the HCP places more of an emphasis on lower-income groups than specifically on moderate-income renter households. Further, Figure 40 indicates that there is a plentiful supply of housing for the moderate-income. However, even moderate-income renter households face a challenge in finding affordable housing, especially those at 70% of AMI and below. A comparison of moderate-income households by family size with market rate rents shows that only the upper end of this income category is relatively well served by the market. Moderate-income households earning 70% of the Area Median Income are able to afford a monthly payment of \$908.00, which falls between the average 2- and 3-bedroom apartment rental rates. Therefore, the HCP Consortium will focus its funding on projects that provide housing for moderate-income persons from 60% of AMI and below.

M-2: While housing rehabilitation for moderate-income households is not as high a priority as for extremely low- and low-income households, it is still an important aspect of maintaining viable neighborhoods and reducing blight. Therefore, the HCP Consortium will also provide housing rehabilitation to moderate-income existing owner households.

Strategies to Remove Barriers to Affordable Housing

Strategies for the removal of barriers to affordable housing include addressing internal policies and procedures for each jurisdiction. These strategies have a higher priority than strategies that depend upon cooperation with other entities since jurisdictions cannot control the actions of other organizations or groups.

Fair Housing

Strategies to address fair housing issues concerning persons with disabilities are a high priority given that persons with special needs have previously been identified as a high priority in this plan. Zoning issues and internal policies also have a higher priority because jurisdictions may have more impact on these issues than on specific problem landlords. Individuals with fair housing complaints will continue to be served by programs that specifically negotiate these issues.

Lead Based Paint Hazard Reduction

While the reduction of lead based paint in housing is important, it is considered a medium priority when compared with the need to provide substantially more affordable housing in Southern Nevada.

Housing Strategies

The following figure outlines the strategies the HCP Consortium will be pursuing for the next five years to provide for affordable housing including rental housing, homeownership, and housing for the homeless or formerly homeless.

Figure 42
 HCP Consortium
 Housing Strategic Plan
 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
CLARK COUNTY									
Increase the supply of affordable rental housing for low and moderate income households									
H-1 M-1	Support construction of affordable housing for renters at 60% of median income and below and maintain such stock for long-term use by low-income renters.	Support funding to assist in construction of 800 units of new affordable rental housing					∅	Non-Profit Housing Developers	\$ HOME, Bonds, LIHTC, LIHTF
		Support funding for operations costs of rental housing					∅	Non-Profit Housing Developers	\$ HOME CHDO
H-1	Work with non-profit and public housing organizations to acquire, rehabilitate and manage rental properties.	Support the acquisition and rehabilitation of 100 units to increase affordable housing stock					∅	CRM	\$ HOME, Bonds
Increase the supply of affordable housing for formerly homeless and extremely low-income households									
H-1	Promote the new construction or substantial rehabilitation of single room occupancy housing units by non-profits	Support the acquisition or construction of 100 units of single room occupancy housing					∅	Non-Profit Housing Developers	\$ SRO Mod. Rehab, Bonds, LIHTC, HOME

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H-1	Promote the new construction or rehabilitation of permanent housing for people at 40% of median income or below, especially for seniors and disabled	Support the acquisition or construction of 100 units of very low-income housing					∅	Non-Profit Housing Developers	\$ Section 202 & 811, Bonds, LIHTC, HOME
		Support funding for operations costs of rental housing					∅	Non-Profit Housing Developers	\$ HOME CHDO
H-1	Continue to support transitional housing efforts	Support the acquisition or construction of 200 units of transitional housing					∅	Non-Profit Housing Developers	\$ HOME, CDBG
Preserve and increase the supply of assisted housing within Clark County									
H-1	Apply for additional federally subsidized housing including Section 8 rental assistance	Support Housing Authority efforts to obtain 500 units of Section 8 assisted housing					∅	Clark County Housing Authority	\$ Section 8
H-1	Support funding applications for operations subsidies which target the very low-income and homeless	Provide letters of support for applications for operations subsidies					∅	CRM	
H-1	Continue to support rental assistance programs	Support tenant based rental assistance to 100 families					∅	Clark County Housing Authority	\$ LIHTF
H-1	Support efforts to preserve and augment current supply of assisted and affordable housing	Support preservation of HUD Section 221(d)(3), 236, Section 8 New Construction and Mod/Rehab units					∅	HUD	η CRM
		Support development of infill parcels with affordable housing					∅	CRM	\$ HOME, LIHTF

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Preserve and enhance housing conditions in Clark County									
H-2 M-2	Continue, expand and amend the Clark County Housing Rehabilitation Program, especially for seniors and disabled	Rehabilitate 125 homes, investigate ways to grant funds or partially forgive loans to seniors for housing rehab					∅	CRM	\$ HOME, CDBG
H-2	Provide financial and technical assistance for rehabilitation activities	Provide funding to non-profit organizations to provide rehabilitation services to 160 low income households					∅	CRM	\$ HOME, CDBG
H-2	Explore development of a program to cover minor and/or emergency home repairs for seniors and disabled households	Seek funding source to implement program and assist 100 households					∅	CRM	\$ HOME, CDBG,
Increase homeownership opportunities for low and moderate income households									
H-4	Support homeownership programs through non-profit organizations for people at or below 80% of AMI	Provide down payment assistance for 300 units					∅	CRM	\$ HOME, CDBG, General Funds, Banks
H-4	Pursue additional funds for mortgage assistance through the creation of a revolving mortgage pool and actively market available program in cooperation with participating lenders	Encourage lenders to set up a revolving mortgage pool for homeownership downpayment assistance for people at or below 80% of AMI					∅	CRM	\$ Banks
H-4	Pursue regulatory standardization across jurisdictional boundaries to make homeownership programs user friendly	Work with other jurisdictions to streamline program requirements for each homeownership program so that rules are the same for all programs and jurisdictions		∅				CRM	η Local Jurisdictions
H-4	Support Employer Assisted Housing programs	Continue to refine current County funded employer assisted housing program					∅	CRM	\$HOME, η Fannie Mae, EOB

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H-4	Work with housing organizations to acquire and rehabilitate low- and moderate-income homes for resale to low- and moderate income homebuyers	Support provision of 20 units					∅	CRM	\$ HOME, CDBG
H-4	Support non-profits to build single family housing	Support provision of 50 units					∅	CRM	\$ HOME, CDBG, Donated Land
LAS VEGAS									
Use existing and create new rental housing stock to reduce cost burden for extremely low- and low-income renter households									
H-1	Acquisition and rehabilitation of existing rental housing units by non-profit and for profit developers	Acquire and rehabilitate 200 existing rental units					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
H-1	Las Vegas Housing Authority Section 8 Moderate Rehabilitation program provides affordable housing through incentives to private sector owners who modernize existing units and make them available at an affordable rate	Provide 100 rental units affordable to extremely low- and low-income households through the Section 8 Moderate Rehabilitation program					∅	LVHA	\$ Section 8
H-1	Las Vegas Housing Authority Section 8 Rental Voucher program allows households to lease existing rental units within the private market at an affordable rate based upon 30% of the household's income	Provide 1,500 Section 8 Rental Vouchers					∅	LVHA	\$ Section 8
H-1	Las Vegas Housing Authority Scattered Site program provides existing single-family homes at an affordable rate based upon 30% of the household's income. The City is working with the LVHA to develop site selection criteria to ensure equitable distribution and property maintenance education for prospective clients	Provide 20 scattered site, affordable single-family homes based upon a site selection criteria, which avoids over concentration and includes property maintenance education for prospective clients.					∅	LVHA	\$ Section 8

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H-1	Construction of new affordable rental housing units by non-profit or for profit developers	Construct 500 new affordable rental housing units.					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
H-1	Construction of new affordable Single Room Occupancy housing units to serve low wage earning, single person households near employment sectors such as the Downtown	Construct 200 Single Room Occupancy housing units within the Downtown Planning Area <i>[Downtown Neighborhood 2000 Plan]</i>					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
H-1	Construction of new Mixed Income/Use developments in the Downtown area, reserving a portion of the housing units at affordable rates serving households earning less than 50% of AMI	Construct Mixed Income/Use developments containing 50 units affordable to households earning less than 50% of AMI <i>[Downtown Neighborhood 2000 Plan]</i>					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
H-1	Construction of new affordable rental housing units by Las Vegas Housing Authority through various federal grants	Construct 120 new affordable rental housing units					∅	LVHA	\$ Tax Credits, Bonds, Section 811 & 202
Use existing owner housing stock to reduce cost burden for extremely low- and low-income owner households									
H-2	Rehabilitate existing owner housing stock in sub-standard condition to retain affordable housing	Rehabilitate 100 existing owner housing					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Use existing and new housing stock to reduce overcrowding for extremely low- and low-income large related family renter households									
H-3	Programs under High Priority H-1 and H-2 include provision of rental units affordable to large related family households	Construct or rehabilitate 350 affordable rental units as noted in High Priority H-1 and H-2, specifically serving large related family households					∅	NSD, Non-Profit or For-Profit, LVHA	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
Use existing and new housing stock to provide homeownership opportunities for moderate income households									
H-4	Provide affordable home ownership opportunities to moderate-income households through assistance with down payment and closing costs on the purchase of existing and new homes	Provide down payment and/or closing cost assistance to 100 qualified moderate-income households					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
Use existing and new housing stock to provide home ownership opportunities for extremely low- and low-income households									
M-1	Provide affordable home ownership opportunities to extremely low- and low-income households through assistance with down payment and closing costs on the purchase of existing homes [Note: Due to the lack of financial stability in extremely low- and low-income households, home ownership is not as a high a priority as providing affordable rental units. Education and job training to stabilize household employment and increase income are considered to be more effective than promoting ownership except under very structured programs such as Habitat for Humanity]	Provide down payment and/or closing cost assistance to 50 qualified extremely low- and low-income households					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
M-1	Construction of new affordable owner housing units	Construct 100 new affordable owner units					∅	NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds, CDBG
Use existing and new housing stock to reduce cost burden for moderate income renter households									
M-1	Acquisition and rehabilitation of existing rental housing units by non-profit and for profit developers	Acquire and rehabilitate 75 existing rental housing units to serve moderate income renter households		∅				Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds
M-1	Construction of new affordable rental housing units by non-profit and for profit developers	Construct 250 new affordable rental units					∅	Non-Profit or For-Profit	\$ HOME, LIHTF, 15% Set-Aside, Bonds
M-1	Construction of Mixed Income/Use developments in the Downtown area, reserving a portion of the housing units at affordable rates	Construct Mixed Income/Use developments containing 100 units affordable to households earning between 51% and 80% of AMI <i>[Downtown Neighborhood 2000 Plan]</i>		∅				Non-Profit or For-Profit	\$ Bonds
Use existing housing stock to reduce cost burden for moderate income owner households									
M-2	Rehabilitate existing owner housing stock in sub-standard condition to retain affordable housing.	Rehabilitate 75 existing owner housing units			∅			Non-Profit or For-Profit, NSD	\$ HOME, LIHTF, CDBG
NORTH LAS VEGAS									
Increase the supply of affordable rental housing for low and moderate households									
H-1	Work with non-profit and public housing providers to acquire, rehabilitate and manage rental properties	Support the acquisition and rehabilitation of 100 units to increase affordable housing stock					∅	NLV Grants Administration, Non-Profits	\$ HOME, LIHTF, LIHTC

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H-1	Support construction of senior affordable housing for renters at 60% of median income and below and maintain such stock for long-term use by low income senior renters	Support funding to assist in construction of 200 units of new senior affordable rental housing						Community Development, Housing Providers	\$ HOME, Section 202, LIHTC, Bonds
Preserve and enhance housing conditions in North Las Vegas									
H-2	Continue and expand the North Las Vegas Housing Rehabilitation Assistance Program, especially for seniors and disabled	Rehabilitate 65 homes						NLV Grants Administration	\$ HOME
H-2	Provide financial and technical assistance for rehabilitation activities	Provide funding to non-profit organizations to acquire and rehabilitate units for 100 low income households						NLV Grants Administration	\$ HOME
H-2	Continue to cover minor and/or emergency home repairs for families below area median income	Provide emergency funding to assist 50 households						NLV Grants Administration	\$ CDBG
H-2 H-4	Assist households to relocate from Windsor Park Subdivision	Due to subsidence, North Las Vegas will continue to relocate residents of Windsor Park						NLV Grants Administration	\$ CDBG pre-award
Increase home ownership opportunities for low and moderate income households									
H-4	Support home ownership programs through non-profit organizations for people at or below 80% of AMI	Provide down payment assistance for 125 units						NLV Grants Administration	\$ HOME, Banks
H-4	Pursue additional funds for mortgage assistance through the creation of a revolving mortgage pool and actively market available program in cooperation with participating lenders	Encourage lenders to set up a revolving mortgage pool for home ownership down payment assistance for families being relocated from Windsor Park						NLV Grants Administration	\$ Banks, CDBG, General Fund

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H-4	Pursue regulatory standardization across jurisdictional boundaries to make home ownership programs user friendly	Work with other jurisdictions to streamline program requirements for each home ownership program so that rules are the same for all programs and jurisdictions		∅				NLV Grants Administration	η Local jurisdictions
H-4	Work with housing organizations to acquire and rehabilitate low and moderate income homes for resale to low and moderate income home buyers	Support provision of 20 units					∅	NLV Grants Administration	\$ HOME, CDBG
H-4	Support non-profit organizations in building single family housing in designated beautification areas	Support provision of 15 units			∅			Housing Providers, NLV Grants Administration	\$ HOME, Banks, Non-profits
BOULDER CITY									
Preserve and enhance housing conditions in Boulder City									
H-2	Explore the development of a housing rehabilitation program for owner-occupants	Work with non-profit organizations such as Christmas in April for housing rehabilitation of 15 homes					∅	Service Providers	\$ CDBG
H-2	Continue Weatherization assistance to low-income homeowners.	Complete energy efficient measures for at least 35 qualified households					∅	BC Planning Department	\$ CDBG
MESQUITE									
Expand the supply of assisted rental housing for low- and moderate-income families and elderly in Mesquite									
H-1	Support and encourage non-profit applications for assisted or affordable federal housing programs	Support development of 100 units of assisted or affordable housing					∅	City of Mesquite	\$ USDA-RD

Special Needs Housing Strategy

The Special Needs assessment and inventory sections show that there is continued demand for supportive housing. Affordable housing is a priority since a large percentage of the special needs populations are on a fixed income. The demand for affordable, assisted housing is growing with the HCP Consortiums general population. The Washoe County Senior Law Project is working on introducing legislation at the next legislative session to create a new Medicaid waiver program which would leverage Medicaid funds with the State’s existing affordable housing dollars to foster the development of affordable “assisted” living for lower income frail seniors. The only available supportive housing for lower income frail elderly persons are nursing homes, which are much more costly than assisted living, on a per bed basis. The HCP Consortium’s housing strategies include support for the development of housing for all special needs groups.

Figure 43
 HCP Consortium
 Special Needs Strategic Plan
 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
CLARK COUNTY									
Increase the supply of housing for those with special needs									
H-3	Encourage the development of housing for persons with physical disabilities and the elderly	Support funding to assist in the development of 800 units of housing for the disabled and/or elderly					∅	Non-Profit Housing Developers	\$ HOME, Section 202 & 811, Bonds, LIHTC
H-3	Encourage the development of supportive living opportunities for persons with developmental disabilities or HIV/AIDS	Support funding to assist in the development of 40 units of housing for persons with developmental disabilities or HIV/AIDS					∅	Non-Profit Housing Developers	\$ Section 811, Bonds, LIHTC, HOPWA, HOME
H-3	Support homeownership programs for the disabled through non-profit organizations	Support down payment assistance for 20 disabled households					∅	CRM	\$ HOME, CDBG, Banks

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
H-3	Explore development of a program to cover minor and/or emergency home repairs for seniors and disabled households	Seek funding source to implement program and assist 100 households						CRM	\$ HOME, CDBG,
LAS VEGAS									
Use existing and new housing stock to provide permanent affordable rental housing units to extremely low-and low-income persons with special needs									
H-3	Construction of permanent affordable housing to serve persons with severe developmental, physical and mental disabilities	Construct 100 permanent affordable housing units						NSD, Non-Profit or For-Profit	\$ Section 811, HOME, LIHTF, CDBG, Bonds
H-3	Construction of permanent affordable housing to serve the frail/elderly	Construct 250 permanent affordable housing units						NSD, Non-Profit or For-Profit	\$ Bonds, Section 202, HOME, LIHTF, CDBG
H-3	Retain affordability and accessibility through Rehabilitation of existing housing units occupied by the frail/elderly	Rehabilitate 75 existing housing units occupied by frail/elderly households						NSD, Non-Profit or For-Profit	\$ HOME, LIHTF, CDBG
H-3	Acquisition and rehabilitation of existing housing units to serve persons with HIV/AIDS	Acquire and Rehabilitate 40 existing housing units to serve persons with HIV/AIDS						NSD, Non-Profit or For-Profit	\$ HOME, CDBG, HOPWA, LIHTF
NORTH LAS VEGAS									
Increase the supply of housing for those with special needs									
H-3	Encourage the development of housing for persons with physical disabilities and the frail elderly	Support funding to assist in the development of 200 units of housing for the disabled and/or frail elderly						Housing Developers	\$ HOME, Section 202, Section 811, LIHTC, Bonds
H-4	Support home ownership programs for the disabled through non-profit organizations	Support down payment assistance for 15 disabled households						NLV Grants Administration	\$ HOME, Banks

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
BOULDER CITY									
Increase the supply of housing for those with special needs									
H-3	Work with local and national non-profit and Joint Ventures organizations to promote development of elderly housing.	Work with the Sate of Nevada towards its construction of a veteran's home, including future phases, in Boulder City			∅			BC Planning Department	\$ State of Nevada

Strategy To Remove Barriers To Affordable Housing

The following figure outlines the HCP Consortium’s strategies for removing barriers to affordable housing. The primary strategies are to remove governmental constraints that impede the cost effective development of affordable housing, to educate both the political and community leaders on the need for affordable housing and what affordable housing looks like in the new century, and to work on developing new resources for affordable housing production.

Figure 44
 HCP Consortium
 Strategy To Remove Barriers To Affordable Housing
 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
CLARK COUNTY									
Remove excessive governmental constraints on housing development									
H	Encourage legislative changes to remove barriers to affordable housing	Expand definition of NRS 361.082 to provide tax exemption for affordable housing through the State HOME and LIHTF programs, and Tax Credits, etc.		☐				CRM	η Legislators
		Change NRS to permit County to make loans to non-profit developers and to otherwise cooperative with financial institutions to provide creative financing		☐				CRM	η Legislators
		Support revisions to NRS to allow Housing Authorities to participate in mixed use/mixed income projects		☐				CCHA	η Legislators

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
H	Periodically review County regulations, ordinances, departmental processing procedures and fees related to the construction and/or rehabilitation of dwelling units	Specifically evaluate the impact of energy codes on the affordability of housing rehabilitation projects; Assess the impact of changes to the fire code (e.g. automatic sprinklers; Review regulations and definitions that affect development of special needs housing; Investigate the Development Code for requirements that excessively constrict the creation of single room occupancy developments (e.g. parking spaces); evaluate impact of park district boundaries. Not limited to above list.					∅	CRM	η Comp. Planning, Public Works, Building, Fire
		Continue to refine Affordable housing Plans Check Program and examine ways to streamline the permitting process					∅	CRM, Building Department	η Prior Plans Check Program Participants
Increase awareness of housing needs in Clark County									
M	Support efforts to increase awareness and understanding of housing issues through television, video, radio, and printed materials	Support development of campaigns for “work force” housing through all media types					∅	Private Sector	η Banks, Local Jurisdictions
		Support education for political candidates and community leaders on affordable housing needs					∅	CRM	η Private Sector, Banks
H	Continue to provide technical assistance and an awareness of the need for affordable housing in all areas	Hold workshops on Fair Housing, ADA, and Section 504 requirements, and other relevant issues					∅	CRM	\$η HUD, Banks, LISC
H	Support efforts to document housing needs in Clark County	Work to get American Housing Survey to include Clark County		∅				CRM, Comp. Planning	η HUD
M	Support efforts to provide public with information on affordable housing	Support development of a clearinghouse on affordable housing information to assist public in finding affordable housing			∅			CRM	η HUD, Local Jurisdictions, AHRC
H	Monitor affordable housing inventory	Develop a database of existing affordable housing		∅				CRM	η State of Nevada

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
H	Develop affordable housing expertise at local government level	Work to increase staff expertise in affordable housing issues related to planning (e.g. fair housing, accessibility, etc.)					∅	CRM	\$ General Funds η Comp. Planning, Building, Public Works
Develop new resources for affordable housing									
H	Periodically assess available County/BLM/Flood Control lands suitable for donation for use as affordable housing	Develop a pilot program to provide surplus parcels for the development of demonstration affordable housing projects					∅	CRM	\$ Donated land
M	Explore the creation of a local affordable housing trust fund	Work to make legislative changes to create trust fund		∅				All local jurisdictions	\$ General funds, State Funds
H	Participate in development of process to allow use of Bureau of Land Management parcels for affordable housing purposes	Continue to lobby BLM and HUD to create implementing regulations for the below market sale of BLM land for affordable housing development			∅			All local jurisdictions	η Legislators
M	Support construction of mixed-income and/or mixed use developments that include affordable units	Support funding to assist in the construction of 10 units					∅	CRM	\$ HOME, CDBG
H	Seek to develop links to unions, vocational schools, community service workers, etc., to provide job training and free labor for housing rehabilitation and construction	Develop use of volunteer labor groups on housing rehabilitation and construction of homes.		∅				CRM	η School District, Unions, Justice System, Community Groups

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
LAS VEGAS									
Reduce governmental and non-governmental barriers to the production of affordable housing									
H	The City will make efforts to ensure that development review processes are efficient, fees reasonable and that the development industry is consulted regarding the formulation of City policies for development review processes and fees	The City will continue to evaluate the residential development review process to improve efficiency where possible					☒	City of Las Vegas	
		The City will continue to monitor the residential development review fee schedule in comparison to staff time to ensure equity.					☒	City of Las Vegas	
		The City will consult with the Southern Nevada Home Builders Association to assist in the formulation and/or amendment of policies to better support the production of affordable housing in the City						☒	City of Las Vegas
H	Increase awareness of housing needs in the City of Las Vegas in cooperation with the County Consortium	Coordinate efforts with the County Consortium to increase awareness and understanding of affordable housing issues through various forms of media.					☒	NSD	
		Coordinate efforts with the County Consortium to conduct workshops on Fair Housing, ADA and Section 504 compliance					☒	NSD	
		Coordinate efforts with the County Consortium to develop an efficient, and cost effective inventory of affordable housing within all the jurisdictions throughout the Consortium.		☒				NSD	

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
H	Develop new resources for affordable housing in the City of Las Vegas in cooperation with the County Consortium	Work cooperatively with the jurisdictions within the County Consortium to lobby the BLM and HUD to develop implementing regulations for the below market sale of BLM land for affordable housing development to non-profit developers without requiring the applicable jurisdiction to take ownership of the property			☐			City of Las Vegas	
NORTH LAS VEGAS									
Remove excessive governmental constraints on housing development									
H	Promote legislative changes to remove barriers to affordable housing	Expand definition of NRS 361.082 to provide tax exemption for senior affordable housing through the State HOME and LIHTF programs and Tax Credits					☐	CRM, NLV Grants Administration	η Legislators
Increase awareness of housing needs in North Las Vegas									
H	Monitor affordable housing inventory	Develop a database of existing affordable housing		☐				CRM, NLV Grants Administration	η County, State of Nevada
Develop new resources for affordable housing									
H	Seek to develop links to unions, vocational schools, community service workers, etc., to provide job training and free labor for housing rehabilitation and construction	Develop use of volunteer labor groups on housing rehabilitation and construction of homes					☐	NLV Grants Administration	\$ Juvenile Support Grants, School Districts, Justice System

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
BOULDER CITY									
Remove excessive governmental constraints on housing development									
H	Identify and implement effective development standards that contribute to quality affordable housing developments	Review Zoning Ordinance and Subdivision Code and modify, as appropriate, to promote quality affordable housing development					∅	Boulder City Planning Department	
H	Reduce the cost of affordable housing development through the reductions in development related fees	Consider exempting quality affordable housing projects from certain development fees					∅	Boulder City Planning Department	
H	Enhance affordability by allowing higher density quality affordable housing development compatible with its surroundings	Consider providing maximum allowable densities for development of quality affordable housing projects					∅	Boulder City Planning Department	
H	Stimulate high quality affordable housing development for senior citizens within Boulder City	Provide technical assistance to non-profit developers of senior citizen housing in project planning, design, reviews, and approvals					∅	Boulder City Planning Department	
MESQUITE									
Remove excessive governmental constraints on housing development									
H	Plan for growth and the development of affordable housing in a comprehensive and coordinated manner	Update the Mesquite Comprehensive Plan and Housing Element					∅	Mesquite Planning Department	
H	Identify and implement effective development standards that contribute to quality affordable housing developments	Review Zoning Ordinance and Subdivision Code and modify, as appropriate, to promote quality affordable housing development					∅	Mesquite Planning Department	
H	Minimize development review and approval in order to maintain housing affordability	Provide "Fast Track" development review and approvals for quality affordable housing projects					∅	Mesquite Planning Department	

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
H	Reduce the cost of affordable housing development through the reductions in development related fees	Consider exempting quality affordable housing projects from certain development fees					∅	Mesquite Planning Department	
H	Enhance affordability by allowing higher density quality affordable housing development compatible with its surroundings	Consider providing maximum allowable densities under the Mesquite Comprehensive Plan for development of quality affordable housing projects					∅	Mesquite Planning Department	
H	Assist in the planning, design, and construction of high quality affordable housing projects that demonstrate flexible design standards and state of the art techniques to achieve affordability, in concert with the land use and development guidelines includes in the Mesquite Comprehensive Plan	Provide technical assistance to developers of quality affordable housing consistent with the Mesquite Comprehensive Plan					∅	Mesquite Planning Department	

Fair Housing Strategy

Utilizing the expertise of the Nevada Fair Housing Center, the HCP Consortium will continue to receive technical training on fair housing issues, specifically issues related to zoning, planning and housing accessibility for the disabled. Further, the HCP Consortium will continue to participate on the Community Housing Resource Board (CHRB), a coalition of representatives from local government, lending institutions, and housing industry organizations dedicated to affirmatively furthering fair housing through community education.

Figure 45
 HCP Consortium
 Fair Housing Strategic Plan
 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
CLARK COUNTY									
Promote Housing Choice									
H	Facilitate the development of housing for low and moderate income households by offering developers' incentives	Work to create incentives program for affordable housing including, but not limited to, low interest or tax exempt financing; county participation in on- and off-site public improvements; land write downs and/or financial assistance to affordable housing projects to offset development fees					∅	CRM	\$ HOME, CDBG
H	Ensure that Clark County policies and codes affirmatively further fair housing	Encourage giving preferential consideration to affordable housing development in non-traditional areas through the HOME program, Bond Cap allocation and other County programs					∅	CRM	η Citizen Committees
		Continue to examine the mix of housing options in its land use plans					∅	Comp. Planning, CRM	η Town Advisory Boards

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
M	Survey landlord refusal to rent to Section 8 voucher holders	Work with housing authorities to offer incentives to landlords to rent to Section 8 in non-traditional areas and continue renter education on how to be a good tenant. Discuss raising HQS Standards.		☑				Clark County Housing Authority	η CRM
LAS VEGAS									
Strategies to affirmatively further fair housing resulting from analysis of impediments to fair housing study									
M	<p><i>[As noted within High Priority –1, Scattered Site Housing is supported to provide affordable housing choices outside of high minority neighborhoods]</i></p> <p>Las Vegas Housing Authority Scattered Site program provides existing single-family homes at an affordable rate based upon 30% of the household’s income. The City is working with the Housing Authority to develop site selection criteria to ensure equitable distribution and property maintenance education for prospective clients.</p>	Provide 20 scattered site affordable single family homes based upon a site selection criteria which avoids over concentration and includes property maintenance education for prospective clients					☑	LVHA	\$ Section 8
M	<p><i>[As noted within High Priority –1, The City supports the Construction of Mixed Income/Mixed use developments]</i></p> <p>Construction of new Mixed Income/Use developments in the Downtown area, reserving a portion of the housing units at affordable rates serving households earning less than 50% of AMI.</p>	<p>Develop 50 units within mixed income/use developments that are affordable to households earning less than 50% of AMI</p> <p><i>[Downtown Neighborhood 2000 Plan]</i></p>					☑	NSD, Non-Profit or For-Profit	\$ CDBG, 15% Set-Aside, Bonds

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
H	Continue to support ordinance amendments and require Planned Community Developments to facilitate multiple family and mixed income housing development to increase affordable housing choice outside of high minority neighborhoods	Continue to support amendments to the Zoning Ordinance such as the March 1997 amendment which reduced multiple family residential development setback requirements, allowed for unlimited density for the R-5 district and eased review requirements						City of Las Vegas	\$ CDBG, General Funds
H	Continue to update data within the General Plan in coordination with the Consolidated Plan with regard to the Needs, Supply and Gaps in the City's Affordable Housing as well as Barriers to production of affordable housing and Fair Housing issues	<i>[As noted within the Non-Housing Strategic Plan, the City will continue to update elements within the General Plan]</i> Continue to update the Housing Element and Parks Element as the population continues to grow and evaluate the implementation of objectives toward the accomplishment of Neighborhood plan and City wide						City of Las Vegas	\$ CDBG
H	Encourage the Neighborhood Planning Process through development of new Neighborhood plans and the implementation of existing Neighborhood plans. These plans include direct Neighborhood input with respect to the Needs for Affordable Housing	Support the efforts of the Neighborhood Services Department in developing additional Neighborhood plans to achieve the greatest level of citizen participation in identifying community needs [including Affordable Housing issues] as well as implementing the goals of the Downtown Neighborhood 2000 Plan and the West Las Vegas Neighborhood Plan						Neighborhoods (NSD provides technical assistance to neighborhood planning efforts)	\$ CDBG, General Funds
H	<i>[The Analysis of Impediments Study indicated that less than 2% of the multifamily housing developments comply with Fair Housing Accessibility guidelines].</i> Support the correction of deficiencies in multiple family developments with respect to accessibility	The City will continue to ensure that accessibility standards are in accordance with the 1997 Uniform Building Code through the plan check review process including the distribution of checklists, brochures and handouts emphasizing accessibility						City of Las Vegas	\$ CDBG, General Funds

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
M	<p><i>[The Analysis of Impediments Study identified a lack of lending opportunities in minority neighborhoods. The City supports the use of existing and new housing stock to provide home ownership opportunities in minority neighborhoods]</i></p> <p>Provide affordable home ownership opportunities to Moderate income households through assistance with down payment and closing costs on the purchase of existing and new homes</p>	Provide down payment and/or closing cost assistance to 100 qualified moderate-income households					∅	Non-Profit	\$ HOME/LIHTF
NORTH LAS VEGAS									
Promote housing choice in North Las Vegas									
H	Ensure North Las Vegas policies and codes affirmatively further fair housing	Encourage giving preferential consideration to senior affordable housing development in non-traditional areas through the HOME program, Bond Cap allocation and other City programs					∅	NLV Community Development	
H	Address needs established in current and upcoming Accessibility Study	Provide training and education for Building and Safety, Planning and Zoning					∅	NLV Grant Administration	\$ HOME, Bonds

Lead-Based Paint Hazard Reduction

The potential for lead-based paint poisoning is not a major issue in the HCP Consortium Area, based on the relative age of housing and the low incidence of lead poisoning in children reported by the Nevada State Laboratory. However, lead-based paint poisoning, especially in young children, is so devastating that the HCP Consortium is concerned that it implement the new Lead Based Paint Rule in its housing rehabilitation programs.

Figure 46
 HCP Consortium
 Strategies to Remove Lead-Based Paint
 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources and Other Resources
			2000	2001	2002	2003	2004		
HCP CONSORTIUM									
Reduce Lead-Based Paint Hazards									
M	Work on implementation of the four approaches to lead hazard evaluation reduction for all HUD-CPD programs as outlined in the Figure 47	Work with the Clark County Health District to test all children under the age of 6 who are occupants of qualified HUD-CPD Housing programs at no cost to the participants		☐				Local Jurisdictions	\$ CCHD
		Implement the lead-based paint requirements by activity				☐		Local Jurisdictions	η Federal
		Attempt to acquire an XRF Analyzer for the purposes of identifying lead paint, its locations and the extent to which it affects housing rehabilitation activities		☐					Local Jurisdictions

Figure 47
Four Approaches to Implementing Lead Hazard Evaluation and Reduction

APPROACH 1. DO NO HARM

- | <u>Lead Hazard Evaluation</u> | <u>Lead Hazard Reduction</u> | <u>Options</u> |
|--|--|--|
| ⇒ Paint Testing performed on surfaces to be disturbed | ⇒ Paint Stabilization of identified deteriorated paint. | ⇒ Presume lead-based paint is present and use safe work practices on all surfaces being disturbed |
| | ⇒ Safe work practices used. | |
| | ⇒ Clearance performed unit-wide | |

APPROACH 2. IDENTIFY AND STABILIZE DETERIORATED PAINT

- | <u>Lead Hazard Evaluation</u> | <u>Lead Hazard Reduction</u> | <u>Options</u> |
|---|--|--|
| ⇒ Visual assessment performed to identify deteriorated paint | ⇒ Paint Stabilization of identified deteriorated paint. | ⇒ Perform paint testing on deteriorated paint. Safe work practice requirements only apply to lead-based paint |
| | ⇒ Safe work practices used. | |
| | ⇒ Clearance performed unit-wide | |

APPROACH 3. IDENTIFY AND CONTROL LEAD HAZARDS

- | <u>Lead Hazard Evaluation</u> | <u>Lead Hazard Reduction</u> | <u>Options</u> |
|--|--|---|
| ⇒ Paint Testing performed on surfaces to be disturbed | ⇒ Abatement performed on identified hazards | ⇒ Presume lead based paint and/or lead based paint hazards are present and perform standard treatments |
| ⇒ Risk assessment performed on entire dwelling | ⇒ Interim controls performed on identified hazards on the exterior that are not disturbed by rehabilitation | |
| | ⇒ Safe work practices used. | |
| | ⇒ Clearance performed unit-wide | |

APPROACH 4. IDENTIFY AND ABATE LEAD HAZARDS

- | <u>Lead Hazard Evaluation</u> | <u>Lead Hazard Reduction</u> | <u>Options</u> |
|---|---|---|
| ⇒ Paint Testing performed on surfaces to be disturbed. | ⇒ Abatement performed on identified hazards. | ⇒ Presume lead-based paint and/or lead-based paint hazards are present and perform abatement on all applicable surfaces deteriorated, impact, friction, chewable surfaces, and surfaces to be disturbed. |
| ⇒ Risk assessment performed on entire dwelling | ⇒ Interim controls performed on identified hazards on the exterior that are not disturbed by rehabilitation. | |
| | ⇒ Safe work practices used. | |
| | ⇒ Clearance performed unit-wide. | |
-

Obstacles to Meeting Underserved Needs

There are a number of barriers to accomplishing the production of affordable housing, which the HCP Consortium has created strategies to overcome. However, there are some barriers or obstacles to implementing these strategies including public perceptions and governmental regulations.

There has traditionally been minimal support for affordable housing development in Southern Nevada. There have been problems with the “Not In My Backyard” or NIMBYism among residents of established neighborhoods who fear affordable housing. Housing advocacy groups, non-profit organizations and the jurisdictions themselves are involved in raising public awareness regarding the shortage of affordable housing and the reality of affordable housing in an effort to reduce fear. The local business community, assisted by various banks seeking to achieve Community Reinvestment Act (CRA) goals, has taken a more active role in creating affordable housing than in the past.

Rapid population growth, particularly over the past ten years averaging 8.5% per year has increased the demand for housing and land upon which to build. As vacancy rates drop with this demand, the cost of housing and land has risen to the point that a family must earn 115% of the area median income to afford the average home purchase price. The Las Vegas valley contains land currently under the supervision of the Bureau of Land Management (BLM). The BLM oversees these lands under the Recreation and Public Purpose Act, which through the Southern Nevada Public Lands Act of 1998 now includes affordable housing as a “public purpose.” Therefore, these lands should be available to developers of affordable housing. However, there is currently no mechanism to make the land available below fair market value for development as affordable housing. The price of the land would have to be reduced to be economically viable for affordable housing. The HCP Consortium will continue to attend BLM meetings and work with other local jurisdictions to lobby both the BLM and HUD to develop implementing regulations for the below market sale of BLM land for affordable housing development to non-profit developers.

Institutional Structure

This section of the Strategy identifies the institutional structures through which the HCP Consortium jurisdictions will carry out the HCP affordable and supportive housing strategy, and describes the measures that will be undertaken to overcome gaps in the institutional structure to carry out the strategies for addressing priority needs.

Private Industry

Private industry has the expertise to develop large scale, master planned communities and to integrate affordable housing within these developments. The Southern Nevada Homebuilder's Association is actively involved in assisting communities in the development of growth management ordinances and in identifying opportunities to reduce housing development costs.

Nevada financial institutions established the Nevada Community Reinvestment Corporation (NCRC) to provide a \$20 million loan pool for the new construction and rehabilitation of multi-family

affordable housing. This was done in an effort to provide financing for affordable housing projects to inexperienced affordable housing developers while spreading the risk. The funds were loaned to a variety of affordable housing organizations and are being repaid over time. As the capacity and experience of the affordable housing developers has grown since the inception of NCRC, developers can now obtain financing through financial institutions. The Community Reinvestment Corporation is currently redefining its role in the development of affordable housing.

The involvement of the local banking community has been somewhat supplemented by the involvement of business, foundations and educational institutions in Clark County. These entities help to meet the need for financial resources, technical assistance and volunteers for the production of affordable housing. Clark County and the City of Las Vegas will work to encourage private involvement in the development of low-income housing projects, either as joint sponsors with non-profit organizations or through limited partnership arrangements with the private sector.

Clark County initiated a pilot Employer Assisted Housing Program with the assistance of the local Fannie Mae Partnership office. The program provides matching funds to employers who wish to participate in the program. Clark County participates in this program by matching each \$1.00 of employer assistance with \$1.00 in County funds. These matching funds are only available for employees earning 80% or below of the area HUD median income. A pool of County General Funds totaling \$70,000 was made available to a local construction company, which was chosen as the first employer to participate in the program. While the pilot program ran into difficulties and will be revamped over the next year, the partnerships developed are an example of the leveraging power available when the public and private sector work together.

Non-Profit Organizations

Local non-profit organizations are essential participants in the production of affordable housing, as well as in the provision of facilities and services in the HCP Consortium Area. A number of non-profit organizations are either participating or proposing to be involved in the development of transitional housing and affordable housing. These organizations include:

Accessible Space Inc.	Las Vegas Indian Center
Catholic Charities of Southern Nevada	Local Initiatives Support Corporations (LISC)
Community Services Agency (CSA)	Nevada HAND
Community Development Programs Center of Nevada (CDPCN)	North Las Vegas Neighborhood Housing Services, Inc. (NHS)
Economic Opportunity Board (EOB)	Nevada Homes for Youth
Golden Rainbow	Salvation Army
Habitat for Humanity	Women's Development Center (WDC)
Help of Las Vegas	US Vets

Over the last five years, most of these organizations have developed the capacity and sophistication required to develop and manage affordable housing. The goal for the next five years is to increase the capacity of the newer, neighborhood-based organizations, and to continue to support the activities of the organizations with a successful development record.

<A note on LISC:

LISC is a national non-profit financial intermediary dedicated to promoting the growth of community-based development corporations. Local backers and Nevada Legal Services helped raise \$1 million to provide the necessary local match to establish a LISC in the City of Las Vegas. LISC has been successful in helping to establish the following community-based development corporations:

- East Las Vegas Community Outreach Corporation (ELVCOC)
- Downtown Community Development Corporation (DCDC)
- Westside New Pioneers
- West Las Vegas Pride

Public Institutions

Clark County

The Community Resources Management Division serves as the lead agency in administering the County's CDBG, HOME and ESG funds. Under the CDBG Entitlement program, Clark County receives funds from HUD, and then allocates them to the cities of North Las Vegas, Boulder City and Mesquite based on an Interlocal Agreement. These jurisdictions then utilize these funds for planning and implementation activities. The Division also administers unincorporated Clark County's allocation of CDBG funds. Under the HOME Consortium Agreement, it is also responsible for distributing HOME Program funds for unincorporated Clark County and the cities of Las Vegas and North Las Vegas, and in monitoring their use. The Division is also responsible for the implementation of the County's Homeowner Rehabilitation Program.

The Comprehensive Planning Department is responsible for maintaining the County's Comprehensive Plan. The Comprehensive Plan is a compilation of long-range plans that are specific to a topic (examples include transit, and growth forecast and impacts) or geographic area (land use plans). In combining these more specific plans into a "comprehensive" document, the County aims to have policies and plans complement each other. The Comprehensive Plan is not a static document. As the community changes, its goals and needs change and in turn components of the Comprehensive Plan are updated to reflect those changes. The Department also administers many of the County's land use regulations to implement the Comprehensive Plan's goals.

The Social Service Department, in conjunction with the University Medical Center, provides at-risk County residents with a wide range of social services, including direct financial assistance, medical assistance, senior citizen protective services, homemaker and home health aide services, long-term care placement, and outreach services for the homeless, persons with AIDS and residents outside of the Las Vegas Metropolitan Area.

The Economic Opportunity Board (EOB) of Clark County is the designated community action agency for Clark County, and receives Federal, State and County funds for the implementation of social service programs such as substance abuse treatment, senior citizen day care facilities and health clinics. EOB operates Project HOME Program, which provides permanent and transitional housing for homeless families and homeless prevention assistance to families in crisis.

City of Las Vegas

The Neighborhood Services Department serves as the lead participant in the development and preservation of affordable housing and community economic development activities for the City. The Neighborhood Services Department administers the City's CDBG funds, HOME Program funds, ESG funds and the region's HOPWA funds. The Department is also responsible for the implementation of the City's Housing Rehabilitation Program.

The Neighborhood Services Department has developed neighborhood associations, particularly in lower income areas, to empower residents to participate in both the preservation and revitalization of their neighborhoods. These associations have assisted in identifying needs leading to the identification and implementation of programs that increase the livability, viability, and vitality of their neighborhoods.

The Planning and Development Department is responsible for establishing and updating the City's General Plan, which is the City's primary policy document and tool for growth management. The Planning and Zoning Commission acts in an advisory capacity to the Las Vegas City Council on various revitalization and preservation activities relevant to the Department.

City of North Las Vegas

North Las Vegas utilizes its Community Planning and Development Department, Grant Administration Division to carry out its CDBG program, HOME program and Housing Rehabilitation Deferred Loan Program. The Planning Department is also responsible for administering the City's Master Plan, its policy framework for community growth and revitalization. The City's Economic Development Department is responsible for downtown redevelopment activities, economic development marketing, business retention and expansion, and negotiating large area land purchases from the BLM in the City's Northern Development Area. The Economic Development Department is also working with local financial institutions to ensure mortgage and rehabilitation financing is made available to all areas of North Las Vegas.

Boulder City

Boulder City currently utilizes its Community Development Department to implement its Weatherization Program and to administer a short-term emergency welfare assistance program. Boulder City administers CDBG action plan projects per the Interlocal Agreement for a CDBG Consortium.

Mesquite

The Mesquite City Manager's Department oversees housing and community economic development activities for the City of Mesquite. Mesquite also administers CDBG action plan projects per the Interlocal Agreement for a CDBG Consortium. Currently, their Department of Leisure Services is planning the development of a new senior center.

State of Nevada

The State of Nevada Department of Business and Industry Housing Division administers the Single-Family, Mobile Home and Multi-Family Mortgage Programs, the State Low-Income Housing Tax Credit (LIHTC) Program and the State's Low-Income Housing Trust Fund (LIHTF). The Housing Division also distributes the State's allocation of HOME funds and monitors its use. The Division also manages the sale of Private Activity Bonds for each jurisdiction. These bonds and tax credits have been responsible for the development of thousands of units of affordable housing in Southern Nevada.

Relationship Between Public Housing Authorities And Jurisdictions

Clark County Housing Authority (CCHA)

The CCHA utilizes federal assistance to construct, purchase, rehabilitate and manage public housing units in Clark County. The CCHA administers housing rental assistance through the Section 8 Certificate and Voucher Programs, and the Section 8 Moderate Rehabilitation Program. It also assists in the management of assisted rental units owned by non-profit organizations and in administering a Tenant Based Rental Assistance Program under the County's HOME Program. The CCHA also owns and operates non-federally assisted housing. The Board of Clark County Commissioners appoints the CCHA Board Members.

Las Vegas Housing Authority

The LVHA is the largest Public Housing Authority within the HCP Consortium area. The LVHA administers the Section 8 Rental Assistance Programs, and owns and manages federally assisted public housing. The LVHA also manages Section 202 elderly rental units owned by non-profit organizations, Section 8 Moderate Rehabilitation units and owns and operates non-federally assisted housing. Under State law the Mayor of the City of Las Vegas appoints the LVHA Board Members.

North Las Vegas Housing Authority

The NLVHA utilizes federal assistance to construct, purchase, rehabilitate and manage public housing units in the City of North Las Vegas. The NLVHA also administers rental assistance through the Section 8 Certificate and Voucher Programs and the Section 8 Moderate Rehabilitation Program.

Although the NLVHA is a separate agency from the City, it works closely with City departments to coordinate activities of mutual interest. The NLVHA Board of Commissioners is composed of the North Las Vegas City Council.

Gaps In Institutional Structure

Clark County and the jurisdictions and townships within the County seek to enhance their abilities to respond to affordable housing needs within their respective jurisdictions. Each jurisdiction differs in its capacity to conduct housing rehabilitation and development programs because of disparities in financial resources for housing development, qualified staff, current program development and matching fund capabilities. The administrative capacity to develop and implement affordable housing programs must be strengthened to implement the affordable housing strategies identified in the HCP. Further, increased support for non-profit, neighborhood-based organizations is needed to more effectively empower the local residents.

Emphasis to date has been informal community and interlocal agreements between jurisdictions. Now the goal is to include Henderson in Consortium efforts and eventually consider a countywide rehab program.

Southern Nevada does not have a long tradition in philanthropic support for community-based revitalization efforts and affordable housing development. Local foundations and private institutions need to be made aware of the affordable housing and neighborhood revitalization needs within the community and how they can become active participants in the ongoing efforts to address these needs.

Non-profit organizations with the ability to develop housing for special needs groups are in short supply. Capacity building is a key requirement for these non-profit organizations to participate in housing development activities.

Non-profit organizations that provide support services to low-income households are being utilized at their maximum capacity. The difficulty in providing services is not the lack of agencies and organizations to implement service programs, but the lack of resources to provide services to all those in need. If supportive housing is to be provided to special needs groups then greater efforts have to be made to obtain necessary resources.

The lack of information concerning the housing needs of special needs groups within the HCP Consortium Area has been somewhat rectified through a study conducted at the behest of Fannie Mae and Opportunity Village. The “Special Needs Housing Assessment for the State of Nevada” was completed in 1998 and provides the first broad based assessment of housing needs for those with a range of disabilities. The study identifies a large need for special needs housing in Nevada. Unfortunately, the deep subsidies needed to support the construction or rehabilitation of housing for people with special needs, makes these types of projects less attractive to developers and more difficult to finance. Again, non-profit organizations with the ability to develop housing for special needs groups need more support from all local jurisdictions.

Coordination

The implementation of the strategies and objectives presented in the Strategic Plan section of the HCP requires coordination between governmental agencies, as well as coordination between the public and private sector. The local HUD Community Builders frequently comment that our community is known for fostering communication among and between the public and private sector partners.

Lead Agency

Clark County acts as the lead agency for the CDBG and HOME Consortia described below and is responsible for overseeing the development of the plan in conjunction with representatives of each of the jurisdictions. However, each jurisdiction is responsible for implementing its specific strategic plan. Using interlocal agreements, the governmental entities work together on the ESG program and numerous joint capital construction projects.

Intergovernmental Coordination

Due to the close geographical proximity of the various governmental jurisdictions in the HCP Consortium Area and the need for joint support and funding of housing and community development projects to ensure feasibility, intergovernmental coordination is vital.

Clark County, North Las Vegas, Boulder City and Mesquite participate in the Urban County Interlocal Cooperation Agreement for Housing and Community Development. Under this agreement, Clark County applies to HUD for CDBG entitlement funds and, pursuant to the agreement, disburses a portion of these funds to the participating jurisdictions on a percentage basis. Clark County assumes final responsibility for CDBG Program administration for all of the participating jurisdictions. Consolidating program administration allows a coordinated approach to funding housing and other CDBG eligible activities. The City of Henderson has elected not to participate in this agreement for FY 1999 through FY 2002, and the City of Las Vegas continues to act as its own administrator of CDBG entitlement funds.

Additionally, Clark County and the cities of Las Vegas, North Las Vegas, Mesquite, and Boulder City have formed a HOME Consortium to participate in housing assistance activities through the HOME Investment Partnership Program. The County, as the sponsoring agency, is responsible for reporting requirements and ensuring program funds are used in accordance with Federal program requirements. This agreement allows coordination in the design and delivery of housing programs utilizing Home Program funds. Under the agreement, the cities of Las Vegas and North Las Vegas are assured a percentage of HOME Program funds, but may request additional funds from the County to carry out their housing programs. The City of Henderson did not elect to join the HOME Consortium and receives its funds from the State of Nevada.

The State of Nevada Department of Business and Industry's Housing Division designates a

percentage of its HOME Program funds for disbursement within Clark County and allows the County to administer those funds. Such an arrangement allows for the coordinated disbursement of State and County HCP Consortium HOME Program funds with other federal housing resources within the County to carry out the HCP's strategies.

The City of Las Vegas and Clark County also have an interlocal agreement to co-mingle their Emergency Shelter Grant funds in an effort to coordinate disbursement of those monies to non-profit homeless providers. This agreement will continue into the next five years.

The integration of funds from ESG, CDBG, and HOME entitlement programs is often required to achieve the strategies in the HCP Consortium Area. Homeless assistance and prevention projects are among those most in need of cooperative efforts. The City of Las Vegas and Clark County have worked together in the past to fund such projects as the MASH Crisis Intervention Center, MASH Village, Catholic Charities Transitional Housing and the new Shade Tree Shelter. Both jurisdictions anticipate further joint efforts in the years to come.

Clark County, Las Vegas and North Las Vegas also work together on the Continuum of Care (CoC) planning and application each year. Local jurisdictions coordinate the application for homeless funding through the Homeless Assistance Team (HAT Team). The HAT Team was originally established in 1996 by the City of Las Vegas and Clark County to implement an objective method of ranking the priority projects to be submitted for the Supportive Housing Grants. This body is comprised of non-applicants from all sectors of the community, including formerly homeless individuals, members of other citizen advisory councils, and agencies and groups serving the homeless. The HAT Team has the responsibility of developing a balanced, well-planned CoC application and prioritizing the projects with respect to the community's needs. The HAT Team also gathers information, holds public meetings, conducts community forums and meets with businesses, government agencies, and homeless clients in developing each year's application. Clark County and the Cities of Las Vegas and North Las Vegas provide administrative support to the HAT Team and represent their jurisdictions needs to the team.

Clark County and the cities of Las Vegas, North Las Vegas, Boulder City and Mesquite meet on a monthly basis to discuss issues relating to HOME, CDBG and ESG. The discussions range from questions relating to joint projects, to coordination of grant application cycles. The City of Henderson started participating in these Consortium meetings in 1999 and will continue to attend the meetings. Although Henderson is not part of either the HOME or CDBG Consortia, their activities affect the region and the Consortia's activities may affect their community. Their participation in the monthly Consortium meetings allows for an assessment of the regional impact of housing and community development policies. Discussions regarding the development and content of the Consolidated Plan took place at all of the Consortium meetings for FY 1999 and early FY 2000.

The housing authorities of Clark County, the City of Las Vegas and the City of North Las Vegas work together on regional housing issues to ensure the efficient and effective delivery of housing authority services. The housing authorities have combined efforts in developing their Family Self-Sufficiency (FSS) Programs, in acquiring and installing computer systems, and in administering

their Section 8 Voucher and Certificate Programs. Through a Memorandum of Understanding (MOU), the housing authorities have established administrative procedures for the issuance of Section 8 Rental Assistance across jurisdictional boundaries, thereby eliminating paperwork and administrative requirements brought about by the portability regulations of the program. The housing authorities' Executive Directors meet on a quarterly basis to discuss common issues and determine new ways in which they can effectively work together in the provisions of affordable housing. Clark County and the City of Las Vegas worked with the directors of the housing authorities to coordinate the development of the Consolidated Plan and the Housing Authority Five Year Plan.

A number of affordable housing development planning groups provide opportunities for the various jurisdictions' governments to work together in the promotion, production and planning of affordable housing and homeless assistance. Development of the Consolidated Plan included input from these committees:

- The Southern Nevada Reinvestment and Accountable Banking Committee (SNRABC), with representatives from Las Vegas, North Las Vegas, Clark County, Nevada Legal Services and non-profit housing and community development organizations, has been instrumental in encouraging the local banking community to comply with the lending requirements under the Community Reinvestment Act (CRA), particularly in their efforts to expand credit to "non-traditional" customers. SNRABC will continue monitoring the banking communities activities to ensure CRA requirements are being met, and to assist the banking community in identifying ways to address the financial needs of low-income households.
- The Community Housing Resource Board (CHRB) is a community volunteer group established to promote the goals of Fair Housing. Working with local real estate boards and homebuilder groups, the CHRB monitors programs of voluntary compliance and assesses the progress and effectiveness of these efforts. The organization is also involved in a program of education to expand public awareness of the necessary and desirability of Fair Housing practices. Clark County, City of Las Vegas and North Las Vegas are active members of CHRB.
- Southern Nevada Homeless Coalition (SNHC) is a regional volunteer group established to address issues related to the homeless and to affordable housing. Consisting of individuals, businesses and agencies serving the homeless, the SNHC meets monthly to discuss trends, gaps in services, policy development and public awareness of homelessness. Clark County and the Cities of Las Vegas and North Las Vegas are active members of the SNHC.

Public And Private Coordination

In addition to the assistance of governmental agencies and non-profit organizations, support and assistance from private sector institutions and foundations are needed to provide financial resources, technical assistance, and volunteers for the production of affordable housing and to meet community development goals. This assistance is received from local lending institutions, businesses,

membership organizations, foundations, and educational institutions.

In recent years, the Donald W. Reynolds Foundation has provided grant funding to Catholic Charities of Southern Nevada for a new homeless shelter for men and to The Shade Tree to construct a new shelter facility for women and children. It is expected that this foundation will continue to provide future funds to various non-profit agencies for a variety of important capital projects.

Local lending institutions continue to participate in housing and community development activities. Lenders have helped to fund a “special needs” housing needs assessment, affordable housing training workshops, and homebuyer fairs for lower income borrowers. While the future is uncertain due to the number of bank mergers that have taken place in the past five years, it is hoped that these larger lending institutions will have greater resources to invest into affordable housing activities. For example, the potential exists for the Bank of America Community Development Corporation to undertake activities in Southern Nevada with local non-profit housing providers.

Other types of private investment into the local community include donations of funds and materials by local businesses for housing rehabilitation, housing construction, and social services. Most local businesses support the solicitation of funds in the work place for the United Way. The University of Nevada, Las Vegas provides valuable research data on housing and community development issues through their Center for Business and Economic Research and the Lied Institute for Real Estate Studies. The Clark County Housing Rehabilitation Program is provided free dumpsters by Silver State Disposal at housing rehab sites and the Boys Scouts provide volunteer labor for landscaping. Many more organizations and businesses provide a variety of other in-kind services and donations.

The jurisdictions in the HCP Consortium Area will continue to work together to encourage private involvement in the development of low-income housing and community development projects, either as joint sponsors with non-profit organizations, or directly through limited partnership arrangements with the private sector.

Jurisdictions within the HCP Consortium Area have been actively involved in the establishment and maintenance of the Southern Nevada Enterprise Community (SNEC) to enhance the coordination and delivery of affordable housing units within the poorest neighborhoods in the HCP Consortium Area. The SNEC program includes strategies designed to create homeownership as an investment and stabilizing force in these neighborhoods. It is intended to preserve and rehabilitate the existing housing stock (both owner and rental), as well as construct new units on vacant infill parcels, and provide special needs housing for seniors, the homeless, and individuals and families transitioning from homelessness. Additionally, it is intended to empower neighborhoods through community organizing techniques and capacity building through the establishment of non-profit community development corporations.

Enhancing non-profit organizational capacity and community capacity to develop affordable housing and undertake neighborhood revitalization projects is an ongoing process that must be instituted if the HCP strategies are to be implemented. The efforts of the Local Initiatives Support Corporation (LISC) to provide a permanent technical assistance resource to area non-profit development

organizations is supported by the jurisdictions within the HCP Consortium Area. These efforts will ensure the technical assistance required to develop and package viable housing proposals is made available to existing and developing local non-profit organizations. The local governments also conduct training seminars to provide technical assistance in applying for federal grant funds.

Public Housing Authorities

The housing authorities of Clark County, the City of Las Vegas and the City of North Las Vegas work together on regional housing issues to ensure the efficient and effective delivery of housing authority services. The housing authorities received a National Association of Housing and Redevelopment Officials (NAHRO) Award of Merit for interjurisdictional administration of the Section 8 Voucher and Certificate Program. Through a Memorandum of Understanding (MOU), the housing authorities have established administrative procedures for the issuance of Section 8 Rental Assistance across jurisdictional boundaries, thereby eliminating paperwork and administrative requirements brought about by the portability regulations of the program. The housing authorities' Executive Directors will continue to meet on a quarterly basis to discuss common issues and determine new ways in which they can effectively work together in the provisions of affordable housing. For more information on housing authority activities, please refer to each local housing authority's five-year plan.

Management Initiatives

All public housing authorities within Clark County have residents initiatives programs in various stages of development. Resident initiatives involve public housing residents in the management of their units by establishing a resident council in each housing development to identify their needs and concerns and to assist in CGP planning activities. The CCHA has six resident councils in operation (including two at the non-federally funded mobile home parks) and has an Occupation Coordinator to assist in organizing the remaining CCHA public housing development's resident councils over the next five years.

Currently there are six Senior Resident Council and four Family resident councils active at LVHA. The LVHA's Residential Initiatives Department will be working to establish/re-establish councils in its remaining five housing developments over the next five years.

The NLVHA currently has two active residents councils in its public housing developments, one representing public housing residents and the other representing Section 8 participants. NLVHA will continue to provide staff and assistance to these councils to promote resident involvement in the management and operation of their units.

Homeownership Initiatives

The CCHA currently provides homeownership education for first-time homebuyers through seminars offered by First Interstate Bank and the Federal National Mortgage Association (Fannie Mae), as well as financial education training offered by Consumer Credit Counseling. The CCHA will study the feasibility of developing homeownership opportunities utilizing HOPE and HOME Program funds for its residents.

It is the goal of the LVHA to begin a Homeownership Program by utilizing the vacant land that was once Ernie Cragin Public Housing. The LVHA has undertaken a joint venture with the Community Development Programs Center of Nevada (CDPCN), which will serve as the developer. CDPCN will prepare applications for all financing, construction, permits, etc. The vacant land will accommodate 32 duplex units consisting of 3 and 4 bedroom units. The construction of the units will be accomplished in a manner that will allow occupancy upon receipt of a Certificate of Occupancy (as opposed to waiting until the entire project is complete). Residents of LVHA who have successfully completed the Family Self Sufficiency Program (FSS) will be given priority access to purchase a unit. The LVHA will work with the potential homeowners to arrange financing through a local bank or financial institution. Each potential homeowner will receive training through local service providers on homeownership.

The NLVHA is planning to implement a Public Housing Homeownership Program and a Section 8 Homeownership Program in the next five years. The NLVHA plans to apply to HUD to sell public housing scattered site units through a homeownership program. This will not only provide decent, affordable ownership opportunities for public housing residents, but will also provide a revenue stream to the housing authority to undertake other kinds of projects, such as tax credit projects. The NLVHA also has plans to submit an application to HUD for a Section 8 Homeownership Program. Both programs will require homeownership counseling and home maintenance training.

Currently the CCHA, LVHA and NLVHA have Family Self Sufficiency Programs in operation. These programs provide interested residents the opportunity to increase their employment skills and gain employment through education and job training programs, as well as support services. Each participating resident must enter into a five-year contract that specifies their individualized goals to achieving self-sufficiency. These goals can include job training or education, and the resident receives assistance with childcare, transportation and other necessities to help ensure a successful endeavor.

The neighborhood revitalization initiatives being undertaken by Clark County, Las Vegas and North Las Vegas directly affect the public housing developments located in the target areas. Improvements to public facilities, parks and the continued funding of public service programs affect the residents of the entire neighborhood, including the many public housing residents located in those neighborhoods.

CONTINUUM OF CARE FOR THE HOMELESS

Introduction

The number of low-income people in Nevada continues to increase and the cost of rental property continues to climb. The homeless population is expanding rapidly with the largest new groups being the elderly, and women and children. Homelessness involves not only needless human suffering but creates a blight on our tourist economy, drains our limited human services programs, and creates a generation of children who are unhealthy, under-educated, and likely to be unproductive citizens in the future. For these and many other practical, social and moral reasons, it is important that the community address the needs of our homeless citizens.

Clark County's accelerated growth, coupled with the 24-hour resort environment, attracts many homeless individuals and families to the area who anticipate obtaining immediate employment, inexpensive food and shelter, and living in a warm climate. Families leave depressed areas and come to Las Vegas to find employment in the construction or service industries. Although the cost of rent and purchasing a home is more expensive in many other areas throughout the nation, several factors still make it difficult to obtain affordable housing in Southern Nevada. Entry jobs in the service industry are low pay, and the construction industry employs the majority of its workforce from the local unions. The unions maintain a waiting list, making it difficult to obtain work within a short time frame in this industry.

The jurisdictions that make up Southern Nevada contracted with the University of Las Vegas, Nevada to conduct a homeless count due to the poor count that was done for the 1990 Census and to aid planning processes, such as the Continuum of Care and Consolidated Plan. UNLV conducted a one night, point-in-time count on May 12-13, 1999 using 248 "enumerators". These people counted people "visible" on the street and a count of people in shelters was obtained. A Las Vegas Metropolitan Police helicopter was used to locate individuals in the Las Vegas Wash and Pabco Swamp through its heat identifying technology. This search identified 158 homeless who otherwise would not have been counted.

A total of 3,821 individuals were counted in shelter or on the street. This number was then multiplied by 2.34 to account for the homeless who presumed to have been missed in the count, such as those who stayed in motel/hotels, their vehicles or with friends. The final count of homeless individuals in the Las Vegas Continuum of Care is **6,707**. The following week, over 500 interviews were conducted to obtain demographic information on the homeless population. This information has been used to conduct the analysis of needs for homeless persons. Where information on a certain subpopulation was not available, information from the Stand Down was used.

The Southern Nevada Homeless Coalition (SNHC) Consolidated Plan Focus Group provided input necessary to the preparation of this homeless section of the Consolidated Plan. The SNHC is a

group of individuals, businesses, and agencies concerned with issues related to the homeless and to affordable housing. The Coalition meets monthly to discuss trends, gaps in services, policy development, and expanding the public's awareness and involvement in serving the homeless.

In 1997, the Homeless Coalition underwent a year-long planning process that resulted in a Five-Year Strategy. The strategies and objectives outlined in this plan are designed to serve homeless populations that have been documented to be of critical need in that 5-Year Strategy and through the collaboration process described below. The Gaps Analysis, provided later in this section, verifies the critical need for an increase in all supportive services for the homeless. Additionally, the Gaps Analysis and "Housing" section of the Consolidated Plan demonstrate that the HCP Consortium faces a dearth of permanent housing that is truly affordable for disabled individuals and families attempting to transition out of homelessness. The SNHC Consolidated Plan Focus Group began meeting in November 1999 to specifically focus on refining the strategies outlined in the SNHC Five Year Strategy.

The strategic plan reflects an inclusive process that is fair and equitable in the allocation of limited resources. It provides an essential balance between the need to maintain existing programs with the need to initiate new programs to fill existing gaps in service.

Consultation

The Consolidated Plan process used for homeless issues in the Las Vegas Valley is collaboration among the advocacy group of the Southern Nevada Homeless Coalition, the local governmental entities and a citizens input process through the Community Housing Resources Advisory Committee (CHRAC). Through this collaboration, SNHC is the main advocacy group for homeless issues in Southern Nevada, while the governmental planners provide the data upon which to make decisions concerning Continuum of Care matters, and the CHRAC, made up of non-ESG applicants, ensures citizen representation. This melding of processes furthers the development of a holistic approach for generating the community input needed to create a more complete Continuum of Care.

Southern Nevada Homeless Coalition

The Southern Nevada Homeless Coalition (**SNHC**, or alternately, the **Homeless Coalition**) was formed in late 1990 to assist in the planning and coordination of homeless services and housing on a regional basis. The SNHC was formed with the goal of organizing a working group of agencies and individuals concerned with the issues of homelessness and affordable housing. The purpose is to advocate for the homeless by examining and understanding their needs, identifying service gaps, educating the community, and maximizing resources through coordination, collaboration and communication among public and private organizations as well as individuals serving the homeless.

The membership of the SNHC constitutes a diversity of interests and expertise from a cross-section of the community and is open to any individual or agency concerned with homeless issues. There is no cost to join the Homeless Coalition. Each company/agency is allowed to have two members who can vote on Coalition issues, but can have more than two in attendance at meetings.

Currently, 79 agencies and individuals make up the membership roster of the SNHC. These include service providers, bankers, real estate developers and local business representatives. Meeting on the second Tuesday of each month, the Coalition addresses the many needs of the homeless, as well as legislative issues, national and local events that impact the homeless, and gives updates on the individual agencies and the services they provide. Networking among the membership, emphasizing a comprehensive service provision, and focusing on avoiding duplication of service are the prime concerns of these meetings, and is the driving force behind the overall success of the Coalition. This cohesiveness has allowed the Homeless Coalition to grow into a highly respected organization that has become the center for information on homeless issues and the primary source of advocacy for the homeless.

Members of the Southern Nevada Homeless Coalition:

ACLU - Las Vegas	HELP of Southern Nevada
Aid for AIDS of Nevada (AFAN)	Interfaith Hospitality Network
Bank of America	Key Foundation (Homeless Veterans)
Catholic Charities of Southern Nevada	Las Vegas Indian Center
Center for Independent Living	Las Vegas Metro Police Dept. HELP Team
Christ the King Catholic Church	MASH Village & CIC
City of Henderson	Mirage Resorts, Inc.
City of Las Vegas	Nevada Legal Services
City of North Las Vegas	Nevada Partners
Clark County, Community Resources Management	Nevada State Welfare
Clark County Health District	Parson's Place
Clark County Housing Authority	Poverello House
Clark County Legal Services	Review-Journal/Sun Newspapers
Clark County School District	Safe Nest/TADC
Clark County Social Services	State of Nevada Housing Division
Community Counseling Centers	SuperCuts
Community Health Centers of So. NV	The Salvation Army
Consumer Credit Counseling Services	The Shade Tree Shelter
Economic Opportunity Board Project HOME	U.S. Senator Harry Reid's Office
First Presbyterian Church	United Way of Southern Nevada
First Security Bank	United Methodist Social Ministries
Fox 5 TV B KVVU	V.A. Community Based Outreach Clinic
Friends in the Desert	Vietnam Veterans of America Chapter 17
Giving Life Ministries	WestCare
Healthy Families Project	Women's Development Center

The Consolidated Plan Homeless Focus Group

In an effort to link with plans already in place to assist the homeless, the Consolidated Plan Homeless Section includes input from the 1999 Continuum of Care process and a focus group made up of members of the Southern Nevada Homeless Coalition. The Homeless Focus Group began meeting in November 1999 and presented its plan to the entire SNHC at the monthly meeting in March 2000. This focus group is comprised of business people, formerly homeless individuals, and agencies and groups serving the homeless. The focus group worked on identifying gaps in the continuum of care and devising strategies and objectives for implementation over the next five years. The individuals and agencies were encouraged to submit all information and reports available for incorporation into the planning process.

Organizations that participated in the focus group include:

Catholic Charities of Southern Nevada	Las Vegas Metro Police Dept. HELP Team
City of Henderson	Las Vegas Housing Authority
City of Las Vegas	Las Vegas Rescue Mission
City of North Las Vegas	Lighthouse Compassionate Care
Clark County, Community Resources Management	Mash Village
Clark County Housing Authority	Mirage Resorts, Inc.
Clark County Health District	Poverello House
Clark County School District	Safe House
Economic Opportunity Board Project HOME	State of Nevada Division of Mental Health
Friends in the Desert	The Salvation Army
HELP of Southern Nevada	The Shade Tree Shelter
Individual Homeless Advocates	V.A. Community Based Outreach Clinic
Interfaith Hospitality Network	Vietnam Veterans of America
	Women's Development Center

Upon the completion of work on the needs assessment and strategies for the Continuum of Care, the plan was presented to the entire SNHC for review and comment.

1998-2000 Homeless Strategies Meetings

Step	Timeline	Accomplishment
Three all day and one half-day planning sessions to develop a five-year strategy for the Southern Nevada Homeless Coalition in the Las Vegas Valley	April 1998 through July 1998	Developed strategic plan with support of entire Las Vegas Valley. Once fully implemented, the Strategic Plan addresses goals, strategies, and performance outcomes (benchmarks).
Monthly Homeless Coalition meetings to assess and address issues in each phase of the Continuum of Care.	2 nd Tuesday of each month	Generates input from non-profit and public providers of services as well as homeless advocates to ensure that all community needs and gaps in services are addressed to the greatest extent possible

Periodic meetings of SNHC Committees (Housing, Advocacy, Public Awareness, Membership, and Continuum of Care) to address progress to date on existing projects and need for additional projects to fulfill community need.	Monthly	Focuses on specific needs and projects as well as implementation of Strategic Plan goals. Accomplishments include the resolution to problems posed by construction on shelter sites such as reduction in services for Winter Weather Emergency Shelter, public-access restroom facilities, advocacy for lower-rent affordable housing, etc.
Continuum of Care HAT Team begins meeting to develop and submit application for Supportive Housing Programs	January through June 1999	Reviewed progress of previously funded projects; reviewed the 1998 Continuum of Care narrative description and began updating it.
Two Continuum of Care Public Meetings to generate additional community input on Strategy	March and April 1999	Compared past Continuum of Care gaps analysis to community needs presented at Coalition meetings throughout the year. Reviewed 1998 strategies for effectiveness in meeting community need.
Homeless Focus Group meets to discuss strategies, objectives and priorities for Consolidated Plan	November 1999 through February 2000	Using Continuum of Care needs analysis and SNHC Five-Year Strategy, Homeless Focus Group devises strategies and objectives for the Consolidated Plan
Homeless Focus Group presents proposed strategies to SNHC for review	March 2000	

Ongoing assessment and evaluation of the Continuum of Care projects and strategy is conducted through the regular meetings of the SNHC's General Membership.

Citizen Participation

In addition to membership and participation in Homeless Coalition projects, in member agencies, or in the planning process for the Continuum of Care application and Consolidated Plan process, citizen input is facilitated via local Citizens Advisory Boards. These Boards are made up of local citizens, business owners, and other interested participants who are appointed by each governmental entity to formalize the mechanism by which citizens can voice their opinions about government planning processes.

The purpose of the Citizen Advisory Boards is to encourage participation by all citizens; especially the very low-income persons and those affected by CDBG, HOME, ESG or CoC funds. The Citizens Advisory Board system ensures access to information concerning funding opportunities, technical assistance to citizens and potential grantees, public comment periods, public hearings, and recommendations on funding to decision-making bodies. Unfortunately, there is a disconnection between these committees and the policy and strategic planning groups, such as the SNHC. This is an area that will need to be improved upon over the next five years by providing training to the Citizen Advisory Boards on the needs identified in the Consolidated Plan.

Citizen Advisory Boards Affecting the Southern Nevada Homeless Funding Allocations:

Community Development Advisory Committee
(CDBG & HOME Advisory Board B County)
North Las Vegas Citizens Advisory Committee
(CDBG & HOME B North Las Vegas)
Local Law Enforcement Block Grant Advisory
Committee (LLEBG)
Planning Commission (CDBG B Boulder City)

Community Development Recommending Board (CDBG,
HOME & HOPWA - City of Las Vegas)
Community Housing Resources Advisory Committee (ESG
- County and City of Las Vegas)
Housing Advisory Committee (CDBG, HOME, LIHTF -
State)

Homeless and Formerly Homeless Persons

Homeless and formerly homeless residents have been active in homeless housing and service organizations as well as with the Southern Nevada Homeless Coalition. Many of these persons came forward at SNHC community planning forums to provide input into the SNHC process; confidentiality requirements preclude listing individuals' names.

Public Hearings

The SNHC received a briefing on the policies and strategies devised by the Consolidated Plan Homeless Policy Focus Group at their monthly meeting in March 2000. Each jurisdiction held a public hearing on the entire Consolidated Plan at a monthly public meeting of their respective Councils or Commissions.

Homeless Needs Assessment

Introduction

In addition to the monthly meetings, where Homeless Coalition members identify gaps in services and discuss, explore and advocate for improving the quality and quantity of services, the Homeless Coalition also sponsors the nation’s largest “Stand Down for the Homeless” each October. The Stand Down is a convention of sorts for the homeless, assembling over 40 programs and services in a single location to serve the homeless. During this day, citizen volunteers conduct a UNLV prepared survey of the nearly 3,000 homeless in attendance to identify their needs and service gaps, and collect demographic information.

Each year, the survey focuses on a different aspect of homelessness. The first year, the 1993 survey, was compared to other, smaller surveys conducted on Southern Nevada’s homeless for validity and acts as a baseline of information. Over the past six years, the surveys have gathered information on:

Families and children’s needs	Housing and shelter resources and their use	Emotional/mental health stressors
Obstacles to obtaining employment	Precipitating factors that led to homelessness	Experience of homelessness for the elderly and frail
Access to public assistance or entitlement programs	Gambling habits and addictions	Income sources

Homeless Coalition members give input to the development of the surveys and ask for specific issues to be researched to assist in planning for the care of the homeless. Much has been learned about the homeless in the Las Vegas Valley from these surveys and from the information shared at the monthly Homeless Coalition Meetings. Yet, the Stand Down Surveys have provided a picture only of what homelessness is like in October, and only for those homeless and at-risk individuals who have attended the Stand Down.

Recognizing the limited scope of this data, the City of Las Vegas initiated an effort in 1999 to conduct a more comprehensive demographic study of the Valley’s homeless. The Cities of Henderson, North Las Vegas, and Clark County assisted in funding this study, which provides a “point in time” count of the number of homeless persons in the Las Vegas Valley in May 1999, and a Qualitative Analysis of key subgroups identified. The Qualitative Analysis explores each subgroup’s social and economic ties, their perception of the usefulness of various social service programs, and provides an analysis of potential improvements to services targeting the homeless. The University of Nevada, Las Vegas Sociology Department, conducted this study.

Homeless Needs Study Summary of Needs

The UNLV Homeless Study conducted a point in time count of the homeless during the night of May 12-13, 1999. A total of 248 enumerators worked in teams of two or more to identify and record information about homeless people found. Further, a Las Vegas Metropolitan Police helicopter was used to locate individuals in the Las Vegas Wash, areas around the Silver Bowl and the Pabco

swamp through its heat identifying technology. This search identified 158 homeless who certainly could not have been otherwise counted.

A hard count of 3,821 homeless individuals was completed and then extrapolated to cover an estimated number of those who were anticipated to have been missed from the count by the enumerators in the one-day survey. This equaled a total of 6,707 homeless in the street or in shelters.

In the second major portion of the study, interviews were conducted for profiling the homeless population. It is important to note that the results of the UNLV study correspond to the results of the Stand Down surveys. (The UNLV Homeless Study is available in its entirety from each of the local governmental jurisdictions.)

Based upon the UNLV Homeless Study, we know that:

- The majority of Las Vegas' homeless are men (87.6%). However, females (12.4%) are more likely to seek shelter in motels and weekly rentals, areas that fall outside the stricter homelessness definition used for the count.
- The homeless people located on the point-in-time count night were identified as 68.1% White, 21.3% Black, 8.3% Hispanic and 2.3% fell into other categories.
- The homeless Black population at 21.3% is significantly higher than the Black population in general.
- When age data for sheltered and non-sheltered are combined, 20.2% of homeless are estimated to be 30 or younger, 28% are 31-40, 29.5% were 41-50, and 22.3% were estimated to be 51 or older.
- The research indicated that higher proportions of homeless females stay in shelters relative to homeless males: 33.4% of homeless males were in shelters, while 65.6% of the homeless females were in shelters. This is probably due to greater safety concerns for females outside of shelter.
- The only other group that was observed in shelters more than was expected was African Americans, almost half of who were located in shelters.
- Up to 14.1% of homeless adults have children with them.
- More than one-third of homeless individuals were Veterans.

Interviews were conducted with over 500 homeless. It is important to note that over 600 individuals were contacted, however 100 or 20% were too incoherent to complete the survey, being either mentally disabled or inebriated. The interviews indicate that 58.5% of the homeless lived on less

than \$400 in the previous month. Only 23.3% are receiving any checks from the government. A little less than half are long-time residents of Southern Nevada, with 41.6% having lived here 3 or more years. The community's emergency shelter programs served only 35.8% of the homeless, with up to 64.2% roughing it on the streets, in their cars, or doubling up with friends or family. A majority are experiencing repeated incidences of homelessness, indicating residential instability once housed. Almost 70% had been homeless less than 6 months.

Information was also collected on homeless subpopulations, with 31.5% indicating a problem with alcohol, 16.9% professing drug abuse and 34.2% calculated to have a dual diagnoses (more than one addiction and/or mental health problem). Furthermore, 16.9% have been diagnosed with a mental illness, 25.1% have a physical disability and 17% have a gambling problem. An additional 20.3% have a health problem of some kind and, of the 20% who had ever been a victim of domestic violence, 44.6% indicated that domestic violence contributed to their current homelessness.

The UNLV study shows less than 1% admitting to HIV/AIDS. However, according to the "1999 Needs Assessment" of the Las Vegas MSA Ryan White Title I Planning Council, an average of 25% of persons with HIV/AIDS had been homeless in the last two years (40% among Blacks). This amounts to at least 963 homeless persons with HIV/AIDS. As already noted, the community's shelter spaces cannot accommodate the total number of homeless, and many HIV+ individuals are afraid to stay in the homeless shelters because their immune systems are not able to resist other types of diseases that one might encounter in an emergency shelter. Transitional housing units for persons infected with HIV who find themselves evicted and homeless are increasing, but still inadequate to shelter the HIV-infected and affected homeless population.

Almost one third of the homeless reported that they were employed in some manner. Slightly more than 34% of the working homeless indicated that they worked in a "day job", indicating that the types of employment these individuals have is relatively unstable and dependent upon health and physical issues, among other things.

Overall, when asked the ultimate question of why these individuals had been forced into homelessness, the largest response category (50.7%) included the interrelated factors of "money", "rent", or "job" problems. Family, domestic, or marital problems was the second largest response at 21%.

Non-profit homeless service providers have identified a new sub-population of homeless that is currently expanding and for whom specific services do not exist: seniors. Mirroring the major increase in seniors among the general population, there has been a sharp increase in the numbers of homeless senior citizens accessing services. This population may include mentally or physically disabled seniors abandoned by their families, seniors who have become homeless due to medical bills or seniors without a family support system who have been taken advantage of by society at large. This population is difficult to remove from homelessness because of their general inability to work, need for medical treatment and severely limited incomes (social security).

Homelessness in the rural communities defies obtaining an accurate count, particularly in Laughlin, Nevada and Mesquite, Nevada, which are experiencing a boomtown environment. Homeless services for the Laughlin area are provided across the Colorado River in Bullhead City, Arizona. Bullhead City social service organizations and volunteers registered 119 homeless individuals in a Special Census in 1990. However, due to the lack of a shelter in the area, these figures were derived from counts received from the Bullhead City Salvation Army, St. Vincent de Paul and the Bread of Life Mission. These agencies provide food, clothing, transportation, counseling, and referral services. In the City of Mesquite, the Chief of Police estimates that homelessness is a problem for one to two percent of the City's population; however, living in overcrowded conditions due to high area rental costs affects about 20 to 25 percent of the population.

Recognizing that homelessness has many causes, the Continuum of Care needs to address housing, from emergency to permanent, and supportive services to help homeless people achieve self-sufficiency. Gaps continue to exist for both families and individuals in emergency, transitional and permanent housing. At no point in the Continuum of Care are enough resources available to meet all of the need. However, the highest priority needs include all forms of housing, especially permanent housing for those exiting homelessness, case management, substance abuse treatment, mental health services and medical health services.

Homeless Subpopulations Needs

The Needs of Subpopulations of the Homeless identifies, when possible, the needs of homeless subgroups, including the severely mentally ill (SMI), those with alcohol or drug abuse problems, those who are both severely mentally ill and have chemical dependence, those who have experienced domestic violence, those infected with HIV/AIDS, the elderly and homeless unaccompanied youth. For the most part, this section is based on findings of the UNLV Homeless Study. As part of the study, interviews were conducted for profiling the homeless population. The interviews took place between early June and late July 1999. Interview sites were selected to reflect the numbers by sector of the point-in-time count. Interviews were conducted at varying times of day and night, though most were conducted during the daylight hours, as the response and completion rates were significantly higher during those times.

Severely Mentally Ill (SMI) Only

Mentally ill people represent a large portion of the homeless population. The UNLV Homeless Study found that 17% of the homeless had been diagnosed with a mental illness. However an additional 20% of all homeless persons approached for interviews were not coherent enough to conduct an interview.

The severely mentally ill homeless are generally chronically homeless, with a great distrust of institutional systems for care. In order to bring the SMI homeless into the Continuum of Care, supportive services need to be provided on a drop-in basis to begin developing a level of trust. The Safe Haven approach appears to be the most effective way of permanently removing them from the street. A safe haven is a form of supportive housing that does not require participation in services

and referral as a condition of occupancy. Rather, it is hoped that after a period of stabilization in a safe haven, residents will be more willing to participate in services and referrals, and will eventually be ready to move to more traditional forms of housing. The Salvation Army recently opened a Safe Haven that will provide 25 beds for treatment but many more are needed.

Alcohol, Drug and Other Addictions

Substance abuse is another major problem among the homeless. In examining questions related to addictive behaviors from the UNLV Study, it becomes clear that many of those interviewed have experience with these problems. When asked if they had ever had problems with alcohol abuse, 31.5% said that they currently had such a problem, while an additional 14.2% said that they had such problems in the past.

Transitional housing in SRO housing, group residences and low-cost apartments are the three most important housing needs for persons exiting alcohol or drug rehabilitation programs. To be effective, transitional housing must include continuing case management to prevent relapse and must be close to public transportation, public facilities and support services facilities. Persons transitioning to an addiction free lifestyle are most successful when counseling, medical services and other support services are received in a residential environment. Currently, the Salvation Army provides 70 units of transitional housing for Adult Rehabilitation program graduates in a SRO facility. Additional transitional supportive living environments for individuals exiting substance abuse treatment programs are needed in order to break the cycle of homelessness among this subpopulation group.

Overall, this incidence of gambling addiction is similar to the local general adult population. However, it should be considered that this is a population without much disposable income, and as such, a gambling problem poses a serious constraint on the ability to exit homelessness. Among the total homeless sample, 78% of those asked said that they had ever gambled, while 52% said that they currently gambled. Among the entire homeless population, 23.9% indicated that their gambling had contributed to their homelessness. When asked specifically whether they considered themselves problem gamblers, 17% said that they felt that they were “currently” problem gamblers while 5.4% indicated that they had been in the past.

Few services are currently available to specifically address problem gambling among the homeless. The creation of a gambling addiction treatment program would be a start toward assisting this population. Eventually, transitional group housing, SRO housing and low-cost apartments would be most important for people exiting an addiction program. Persons transitioning to an addiction free lifestyle are most successful when counseling, medical services and other support services are received in a residential environment.

Dually Diagnosed: Severely Mentally Ill (SMI) and Alcohol/Other Drug Addicted (AODA)

Respondents to the UNLV interviews were asked if they ever had a “dual diagnosis” (having more than one of problems such as alcohol, drugs, gambling or mental health problem). When this

question was posed, 20.8% said that they had received such a diagnosis. However, when responses to other specific questions on addictions and mental health problems were examined, 34.3% qualified as “dual diagnosis” individuals. Of those who qualify as “dual diagnosis”, approximately 12.5% had an addiction problem combined with a mental health problem.

Resources within Clark County are severely limited for individuals who are diagnosed as both SMI and AODA since most programs deal with only one or the other. No residential treatment facilities provide both substance abuse and psychiatric care. There is an urgent need for residential treatment facilities for dual-diagnosed persons, as well as low-cost transitional housing with case management and support services to promote the move to independent or semi-independent living.

Domestic Violence

Of the entire Homeless Study sample, 20% of those questioned said that they had been a victim of domestic violence. Only 5.8% of females victimized by domestic violence slept on the street or in a camp the previous night; the rest sought shelter in homeless shelters, transitional housing, with friends, or in other less-dangerous locales. Of the entire sub-sample of domestic violence victims, 44.6% said that domestic violence contributed to their homelessness.

The primary needs of domestic violence victims include safe transitional housing, case management, childcare, life skills counseling, and education on domestic violence issues, job training and employment placement.

HIV/AIDS

According to the “1999 Needs Assessment” of the Las Vegas EMA Ryan White Title I Planning Council, an average of 25% of persons with HIV/AIDS had been homeless in the last two years, which totals at least 963 homeless persons living with HIV/AIDS. Over 40% of persons living with HIV/AIDS have incomes at the poverty level, or less than \$500 per month, an amount inadequate to pay current rents in Clark County. Homeless HIV/AIDS victims in shelters or on the streets are further exposed to conditions that increase their susceptibility to opportunistic infections.

The greatest needs of HIV/AIDS homeless include transitional housing, permanent housing, food, transportation and medical care.

Unaccompanied Youth

Runaway youth frequently leave home because they feel conditions are unbearable. Some have been abused or neglected at the hands of their families, and many more encounter brutal conditions once on the street. Hunger and exposure to the elements are common, as is alcohol and/or drug abuse. Those who engage in prostitution or other sexual activity in order to gain protection or a means to survive are at risk of physical violence, rape and sexually transmitted diseases, including HIV. Once off the streets, runaway youth may end up in a variety of settings. While some can be reconciled with their families, others end up in foster care or become wards of the State and are placed in group

homes, such as the Center for Independent Living or other institutions such as Boys Town or St. Jude's Ranch.

Homeless or runaway youth need a safe haven from further abuse and neglect, as well as a host of services, including individual and family counseling; education on AIDS/HIV and alcohol and drug abuse issues; school reintegration classes; and life skills training. Runaways who were abused in their own family may need therapy to overcome such problems as depression, low self-esteem, inability to form intimate relationships, and aggressive behavior.

Homeless or runaway youth need emergency shelter facilities that can offer a safe place to stay while they are evaluated to determine the services that meet their individual needs. Older unaccompanied youth need transitional housing, providing low cost shelter while they develop independent life skills and technical skills to compete in the job market. The limited facilities in Clark County must be expanded to address this growing need for unaccompanied youth shelter. Family shelters also must be expanded to accommodate families with teenage males, who currently are excluded from existing shelter facilities.

Veterans

The data shows that the overwhelming majority of homeless veterans generally have more than one chronic characteristic. These characteristics include prolonged and repetitive homelessness (61%), unemployment and inability to hold a job (60%), domestic violence experiences (50% of women), hunger for lack of money (48%), health problems and physical disabilities (29%), mental illness including post traumatic stress and other psychological disorders (28%), substance abuse (23%), dual diagnosis (18%) and gambling addiction (15%). A host of other, more unique problems, equally serious to those who have them, hold lesser percentages of the homeless veterans in their grip.

This population of homeless requires a range of services from outreach in the “bush” to try to bring them back into the care system to quality housing with supportive services.

Disabled Homeless

According to the UNLV Homeless Study, approximately 25.1% of the homeless say they have a physical disability. Unfortunately, the current emergency shelter facilities cannot accommodate the disabled homeless population. These facilities are not accessible nor is the staff trained to handle persons with severe disabilities. The new Shade Tree and St. Vincent's shelter will both be handicapped accessible but the need for trained staff will remain. This dearth of services for the disabled homeless is reflective of the lack of services for the local disabled population in general.

As with several other homeless subpopulations, permanent supportive housing is the major need for this population.

Needs of Persons Threatened with Homelessness

Many low-income persons and families in Clark County are at risk of becoming homeless due to the lack of sufficient income, or in the event of a temporary crisis, including loss of employment, sickness or disability, loss of spouse or domestic violence. Extremely low-income households paying 50 percent or more of their household income for housing are at greatest risk. These households are often one paycheck away from becoming homeless.

The “Affordable Housing Needs in Clark County, 1996-2010” study provides an assessment of permanent housing needs and inventory. While this study did not address the affordable housing needs of the homeless population, per se, it did touch upon what has been identified as the “at-risk of becoming homeless” population and their needs. This study identified 3,128 units of rental housing that would be affordable to the 31,863 very low-income renter households (income less than \$15,000/year), resulting in a shortfall of 28,735 affordable units. Homeless individuals and families ready to transition into permanent housing place an added burden onto this shortfall.

The resources available to assist these households are extremely limited. The local public housing authorities have extensive waiting lists for all types of assisted housing, and emergency rental, mortgage and utility assistance for temporary crisis situations are in short supply. United Way of Southern Nevada manages Federal Emergency Food and Shelter Program funds for Clark County. In FY 1999 (October 1999 - September 2000), the United Way allocated \$455,070 to twenty-three organizations for distribution to the needy. Agencies and non-profit organizations utilize other Federal, State and local funding sources in addition to private donations to assist households in crisis situations. The goal of providing rental, mortgage and utility assistance is to enable households to avoid losing their existing housing and the high security, cleaning and utility deposits which are required in the current rental housing market

The most cost effective way to prevent households from losing their current housing is increased assistance through grants or revolving loan programs. In addition, creative options that offer lower cost rental units on a permanent basis are necessary, such as SRO housing for individuals, who represent a significant portion of extremely-low income households.

Inventory Of Facilities And Services For Homeless

Introduction

The Inventory of Facilities and Services for the Homeless details the facilities and social services currently available to the homeless and those threatened with homelessness in Clark County. Included in this section is a listing of the County's primary emergency shelters, transitional housing, permanent supportive housing, and permanent housing resources, as well as a description of programs designed to prevent homelessness.

The Las Vegas Valley Continuum currently provides 1,650 shelter beds, with an additional 450 beds planned for completion within two years. Upon completion of the new beds, the balance of shelter bed type will shift from 79% for single men and 21% for families and single women to 66% for men and 34% for families and single women. Approximately 1,258 transitional housing spaces are available to a variety of subpopulations of homeless with an additional 282 slated for construction in FY 2000 to bring the total to 1,540. Only 67 permanent supportive housing spaces are available in the Las Vegas Valley. There are an extremely limited number of very low cost (under \$350) rental units available and only 185 spaces specifically available for the formerly homeless.

Continuum of Care Model

Many players are necessary to address homelessness in the Las Vegas Valley. The federal government is a primary player by providing the largest sources of funding to address the problem. The County and City play a central role, from the delivery of health and social services to the poor to funding for housing and services, through federal and local grants.

The community organizations serving the homeless are the most crucial participants. Their funding is derived in part from private sources and in part from public entities. These organizations bring together the multi-faceted aspects of the Continuum through their diverse responsiveness to the homeless. Their missions are to serve homeless persons through social services, health services, or other supportive services, as well as in many cases to provide adequate housing for a temporary period or on a permanent basis. Many have formed special needs forums for specific needs groups of the homeless, such as unaccompanied youth, victims of domestic violence and AIDS Coalitions. The Southern Nevada care system, and all its component parts, is laboring daily to assist homeless individuals and families, as well as people who are on the brink of being homeless. This assistance to homeless people covers a continuous range of personal service:

- Assistance begins with access to the basic human essentials of shelter, food, and adequate facilities to maintain personal hygiene.
- Assistance continues with transitional and affordable housing, medical care, employment supports and other supportive services to keep people from slipping into homelessness.

- Assistance extends to working on the causes of homelessness, using counseling and rehabilitation, and by providing the community supports necessary for the very low-income to succeed.

Services to the homeless in Southern Nevada have been developing and evolving from a response of providing only for the emergency, basic needs ten to fifteen years ago, to providing access and developing capacity for the full continuum of shelter and support services needs that we have today. Several agencies targeting a special subpopulation have developed different direct services within their own agencies, providing a full array of services within the continuum.

Recognizing that homeless people and those at-risk of becoming homeless suffer multiple problems, not just lack of shelter, Southern Nevada’s care system addresses the varied needs of the homeless and involves the various segments of the community in responding to the homeless individual’s needs. Southern Nevada’s care system for the homeless includes programs and services that prevent the incidence of homelessness, shelters, and food programs to respond to their emergency needs, transitional housing programs offering supportive services and direct assistance to overcome the obstacles to self-sufficiency, and the development of affordable housing, both rental and ownership opportunities.

The care system also includes programs that provide:

Employment training	Food subsidy	Parenting skills classes
Employment placement	Child care subsidies	Child support enforcement
Public transit	Substance abuse treatment	Life skills classes
Home energy assistance	Subsidized health care	Crisis intervention
Special access to bank accounts for the homeless	Dental care	Emergency temporary protective orders

Outreach and Assessment Services

Outreach teams identify the homeless who have not been able to enter the system of services or who are resistant to seeking assistance. Outreach is particularly important for groups such as the mentally ill and unaccompanied youth who are unaware of services, reluctant to use them, or unable to negotiate the system without help. Outreach teams are most effective with the chronically homeless, who reject efforts to push them into services and the structure of the care system. Outreach teams go to homeless persons rather than waiting for homeless persons to come to them. Through this proactive contact, outreach teams identify homeless persons, assess needs and encourage homeless persons to engage themselves in services.

Outreach efforts are offered through a variety of community services and institutions. The Las Vegas Metropolitan Police Department has instituted the HELP Team, which is specifically designed to deal with the homeless population, service providers, and the community. The Clark County School District employs three outreach workers who visit specific sites where homeless families stay, such as campsites or weekly motels, and enrolls children in school. Safe Nest/TADC, the battered women’s shelter and resource center, and the Metropolitan Police Department have

teamed up to provide the Crisis Response Team. This Team pairs a trained volunteer with a police officer to provide on-site, emergency counseling and case management, including needs assessment and referrals, to women experiencing the aftermath of a domestic violence situation. The prison/jail system provides a “Street Readiness Program” that gives soon to be released prisoners \$21 and a list of local resources. Several programs go out into “the bush” daily or weekly, bringing food, clothing or services to the non-service-using homeless. Such agencies include: Healthcare for the Homeless through Nevada Rural Health, the PATH Program at The Salvation Army, Friends in the Desert and The Key Foundation outreach programs to the homeless veteran, and Dusk to Dawn and Alpha Programs outreach to homeless unaccompanied youth. Although each of these groups provides services to a special population, each makes referrals and encourages all the homeless they come into contact with to participate in a program that can assist their return to self-sufficiency.

The Salvation Army Day Resource Center (DRC), and its new Safe Haven, complement outreach teams in that they have open doors so that homeless people enter and leave voluntarily. These centers offer a place to be off the streets along with restroom facilities, food, a variety of activities, and connections to the larger continuum of care system. If desired, a homeless person can receive case management services and referrals to needed programs. A testament to its effectiveness is the fact that the Day Resource Center is filled to capacity each day, with many homeless sitting on the curbs of the streets surrounding the DRC, awaiting room. The Henderson Salvation Army is developing a similar Day Resource Center for the homeless population in Henderson.

The Shade Tree Shelter for Women and Children offers a Day Shelter that operates from 8 a.m. to 4 p.m., seven days a week. The Day Shelter provides “street” women and other homeless women and children with a safe place to escape the urban environment and have access to food, beverages, and all facilities.

A comprehensive one-day Stand Down, sponsored each October by the Southern Nevada Homeless Coalition, is the largest one-day outreach effort in the nation. Over 40 public and private programs that can benefit the homeless are brought to the Cashman Field Convention Center, located just 1.5 miles from the main homeless shelters. During this day, over 2,000 homeless persons access housing services, family support services, educational programs, drug or alcohol treatment programs, employment support programs, legal assistance (including the quashing of warrants and providing pro-bono attorneys), primary health care services, a Job Fair, food, blankets and clothing, and other supportive services such as state identification cards at no charge, vaccinations, HIV testing, etc. It is a collaborative effort by member agencies and local businesses of the SNHC and is the largest effort of its kind in the country.

General Services

For the general homeless population, the Salvation Army provides emergency shelter and meals, and has created a more complete continuum of services for the substance abusing and the mentally ill homeless. For the substance abusing subpopulation, the Salvation Army provides drug/alcohol addictions treatment, shelter and employment development services, transitional housing and continuing supportive services. With the aid of a Supportive Housing Program grant, the Salvation

Army recently opened a Safe Haven project to add one more service to the continuum of services it provides to the homeless mentally ill.

Catholic Charities, in the process of redeveloping its St. Vincent's Plaza site, built a new dining facility which feeds thousands daily. They also offer an employment training program, several emergency shelter programs and a transitional housing program.

Similarly, the Economic Opportunity Board (EOB) began targeting the special population of homeless families in 1988. The EOB provides a full continuum of housing options for families facing homelessness, from Homeless Prevention activities, to Transitional Housing with supportive services for up to six months, an extended stay transitional housing program for those needing further assistance up to two years, and permanent affordable housing where the rents are set at considerably less than fair market rents. Homeless families may take advantage of any or all of the components. Other agencies offering a continuum of care to their targeted subpopulations include, but are not limited to: the Women's Development Center (single-parent families), Aid for AIDS of Nevada (through their partnerships with housing programs targeting HIV-affected individuals and families) and the Las Vegas Rescue Mission.

The Women's Development Center offers assistance through its SAFAH "LINK" Program for families that are transitioning from an emergency shelter or a transitional living program into permanent housing. An eligible family must be referred through one of these programs, be working for 30 days and be moving into permanent housing. The program will assist with up to the 1st month's rent, deposits, utility arrearages, food, furniture and a moving van. Applicants participate in a 6-month case management program in an effort to track self-sufficiency. This is the only program of this kind in Clark County and helps families make the difficult and expensive transition into permanent housing.

M.A.S.H. Village and Crisis Intervention Center is another agency with a continuum of care that includes needs assessment and referrals for all people who are homeless or at-risk of homelessness. Any individual who fits this criterion may access programming that includes services from over 31 different social service agencies that are located within the M.A.S.H. Village Crisis Intervention Center (CIC), either on a full-time or part-time basis. M.A.S.H. Village provides transitional housing (up to two years) for single women and families. Included in the continuum of care are assessment, vocational testing, Adult Basic Education, parenting classes, substance abuse and gambling addiction education and counseling all brought together in comprehensive case management. For clients participating in the long-term transitional housing program, a Resource Room is available five days a week that provides a phone bank for free phone calls, computers for resume writing and skill building, a fax machine, copy machine, and staff to assist clients in employment searches.

In other cases, a public or private agency may specialize in just one or two aspects of the care system, supplementing other agencies' services to the homeless. These services are depicted in Figure 48, along with the agencies that provide those services. Many agencies have overlapping service components, while others provide a unique service that may be shared by multiple recipients;

many have formed collaborations amongst themselves to provide responses to particular subpopulations. Figure 48 represents the fundamental components of the Continuum of Care system currently in place. These organizations are located throughout the County with the majority in the City of Las Vegas. The Salvation Army, Las Vegas Rescue Mission and St. Vincent's Plaza are the three principal providers of daily meals to sheltered and unsheltered homeless.

Some of the organizations listed in the figure do not restrict their services to the homeless, but nevertheless provide an essential network of services to the homeless and those at risk of becoming homeless. Financial assistance, job training and placement, counseling, basic medical services, substance abuse treatment and childcare are among the services offered by these agencies and organizations. Life skills training is an important component of the continuum of care by offering training on budgeting, parenting, nutrition and shopping, and job behavior, to name only a few of the basic skills lacking among the homeless population. These skills are essential to avoid or escape homelessness and to assist the homeless in achieving self-sufficiency.

Many of the organizations assisting the homeless either provide meals or refer clients to the Community Food Bank. The Clark County Social Services Agency provides a one-time rent voucher for \$277 to eligible homeless individuals and from \$372 to \$1128 (based on family size) for families in need of assistance who have secured a job, but who do not have the immediate resources necessary to pay for rent and security deposits.

The SNHC Resource Committee provides photo ID cards to the homeless which are recognized by local banks to assist homeless individuals in cashing checks, picking up food stamps and obtaining other benefits.

Public agencies have also instituted programs designed to meet the specific needs of the homeless. The Las Vegas Metropolitan Police Department created the Homeless Evaluation Liaison Program (HELP) in 1992 to assist the unsheltered homeless and reduce the number of incarcerated homeless. HELP Team officers refer the homeless to appropriate emergency shelter facilities and assist them in accessing needed community services. This program has been tremendously successful and saves taxpayer funds by avoiding the unnecessary and costly incarceration of homeless individuals.

Figure 48
Homeless Services Available, by Agency
HCP Consortium

Legend	
F = families	C = children
M = men	S = seniors
W = women	A = all

Agency	CASE MGMT	COUNSELING	CHILD CARE	CLOTHING	FINANCIAL ASSISTANCE	FOOD-MEALS	FOOD PROVISIONS	ID CARDS	INFORMATION REFERRAL	JOB TRAINING/SEARCH	LONG TERM HOUSING	MEDICAL DENTAL	MENTAL HEALTH TREATMENT	SUBSTANCE ABUSE	TEMPORARY SHELTER	TRANSITIONAL SHELTER	TRANSPORTATION	OTHER	CLIENTS SERVED
Aids for AIDS of Nevada	X	X		X	X	X	X		X			X			X	X	X	X	F M W C S
Baby Find				X			X		X									X	
Boulder City Welfare					X		X		X						X		X		-
Bridge Counseling Association		X							X					X			X		F M W C S
Caminar (SMI)	X	X				X			X		X	X							S
Catholic Charities of Southern Nevada	X		X	X	X		X		X			X					X	X	-
Residential Work Program - St. Vincent's Plaza	X	X		X		X			X	X					X	X	x		M W
Winter/Summer Emergency Shelter Program						X			X						X				M W
Marian Manor/Crossroads Shelters for Elderly	X	X		X	X	X			X	X						X	X		F
Center for Independent Living		X					X		X	X						X			Y
Christian Learning Center						X											X		-
Clark County Health District									X			X		X					F M W C S
Clark County Housing Authority											X								F M W C
Clark County School District - Homeless Outreach		X		X		X			X								X	X	F C
Clark County Social Services Department	X	X			X			X	X	X		X			X		X		F M W C S
Clark County Juvenile Court Services/Child Haven						X									X				C

Agency	CASE MGMT	COUNSELING	CHILD CARE	CLOTHING	FINANCIAL ASSISTANCE	FOOD-MEALS	FOOD PROVISIONS	ID CARDS	INFORMATION REFERRAL	JOB TRAINING/SEARCH	LONG TERM HOUSING	MEDICAL DENTAL	MENTAL HEALTH TREATMENT	SUBSTANCE ABUSE	TEMPORARY SHELTER	TRANSITIONAL SHELTER	TRANSPORTATION	OTHER	CLIENTS SERVED
Clark County Pro Bono Project																		X	
Colorado River Food Bank						X	X		X										
Community Food Bank						X	X		X										A
Economic Opportunity Board of Clark County		X	X	X	X	X	X		X	X	X	X		X			X	X	X F M W C S
Project Home	X	X	X	X	X	X	X	X	X	X		X				X	X	X	F M W C
Friends in the Desert						X	X		X										
Giving Life Ministries (Henderson)				X	X	X	X		X										
God in Me Ministries		X		X	X	X	X		X	X	X				X	X	X		M
Golden Rainbow	X	X		X	X	X	X	X	X		X	X				X	X	X	M W S
Golden Rule/Parson's Place						X	X		X							X			M W
HACA	X	X		X	X	X	X		X			X				X			F
Hatchery Home		X				X			X		X								C
Healthy Families Project	X	X	X	X	X	X		X	X	X		X		X		X	X		
HELP of Southern Nevada				X	X	X	X	X	X	X					X		X	X	F M W C S A
Hope for the Homeless Ministries						X													
Interfaith Hospitality Network	X			X	X	X			X	X					X				F
Jewish Family Services	X	X		X	X	X			X					X					-
The Key Foundation (Veterans)		X		X	X	X	X	X	X	X		X				X	X	X	S M
Las Vegas Housing Authority											X								F M W C S
Las Vegas Indian Center	X	X		X	X	X	X	X	X	X			X	X		X	X	X	F M W C
Las Vegas Paiute Tribe	X	X		X	X	X			X	X		X	X				X		S
Las Vegas Rescue Mission	X	X		X	X	X			X	X					X	X			F M W C
Winter Emergency		X		X	X	X									X				F M W C
Lighthouse AIDS Ministry	X	X		X	X	X	X		X			X				X	X		M

Agency	CASE MGMT	COUNSELING	CHILD CARE	CLOTHING	FINANCIAL ASSISTANCE	FOOD-MEALS	FOOD PROVISIONS	ID CARDS	INFORMATION REFERRAL	JOB TRAINING/SEARCH	LONG TERM HOUSING	MEDICAL DENTAL	MENTAL HEALTH TREATMENT	SUBSTANCE ABUSE	TEMPORARY SHELTER	TRANSITIONAL SHELTER	TRANSPORTATION	OTHER	CLIENTS SERVED
Lutheran Social Services	X			X	X	X	X	X	X								X	X	
Martin's Mart Thrift Shop				X															
M.A.S.H. Village Crisis Intervention Center	X			X				X	X										F M W C S A
M.A.S.H. Village Transitional Living Center	X	X	X	X		X			X	X		X		X		X			F W C
Winter Emergency									X						X				
Metro Police HELP Team									X										-
Mt. Ararat Rehabilitation Center		X				X			X	X					X	X			F M
Nevada Association of Latin Americans (NALA)	X		X	X	X	X	X	X	X	X				X			X	X	F M W C
Nevada Legal Services									X									X	-
Nevada Rural Health – Healthcare For The Homeless		X							X			X		X					-
Nevada State Welfare Division																			
Henderson District Office			X	X	X	X	X	X	X	X		X					X		F M W C S
Belrose District Office			X	X	X	X	X	X	X	X		X					X		F M W C S
Charleston District Office			X	X	X	X	X	X	X	X		X					X		F M W C S
Owens District Office			X	X	X	X	X	X	X	X		X					X		F M W C S
North Las Vegas Housing Authority											X								F M W C S
Opportunity Village	X								X										
Social Security Administration					X				X										M W C S
Safe House	X	X	X	X		X	X		X						X				W C
Safe Nest/TADC	X	X	X	X	X	X	X		X	X				X	X		X	X	W C
The Salvation Army	X	X		X	X		X	X	X								X		F M W C
Day Resource Center				X					X						X				M W
Adult Rehabilitation Center	X	X		X	X	X			X	X		X		X		X	X	X	M W C S

Agency	CASE MGMT	COUNSELING	CHILD CARE	CLOTHING	FINANCIAL ASSISTANCE	FOOD-MEALS	FOOD PROVISIONS	ID CARDS	INFORMATION REFERRAL	JOB TRAINING/SEARCH	LONG TERM HOUSING	MEDICAL DENTAL	MENTAL HEALTH TREATMENT	SUBSTANCE ABUSE	TEMPORARY SHELTER	TRANSITIONAL SHELTER	TRANSPORTATION	OTHER	CLIENTS SERVED
Family Service		X		X	X	X	X	X	X			X					X		F M W C S
Safe Haven for mentally ill	X	X		X		X		X	X	X		X	X	X	X		X	X	M W
PATH and PATHWAYS for mentally ill	X	X		X		X	X	X	X	X	X	X	X	X		X	X	X	M W
Transient Service Center				X		X			X	X					X				M W
Winter Emergency Shelter Program				X		X			X						X				M W
Sandy Valley Food Sharing Program				X			X		X								X		A
The Shade Tree	X	X		X		X		X	X						X		X		F W S
Winter Emergency Shelter Program		X		X		X			X						X				M
Southern Nevada Adult Mental Health	X	X						X	X	X		X	X			X	X		M W S
St. Rose Dominican							X					X					X		F S C
St. Vincent-HELP Transitional Living	X	X					X		X	X						X			M W
Transitional Living Communities				X		X			X						X				M
United Methodist Social Ministries - Hats N Hands				X															F M W C S
United Way of Southern Nevada									X										F M W C A
VA Community-Based Outreach Program	X	X		X				X	X			X		X			X		M W S
Veterans Affairs Medical Center		X			X			X	X	X		X	X	X			X		M W S
Vietnam Veterans of America, Chapter 17		X							X										M W S
We Care		X		X			X		X										F
Weekend Emergency Assistance Program				X	X		X		X						X				
Wellsprings Ministries							X		X										
WestCare, Inc.	X	X		X		X			X					X	X	X			F M W C S
Women's Development Center	X	X	X	X	X		X	X	X	X	X	X				X	X		F C

Emergency Shelter

There are over 10 agencies in Southern Nevada providing 1,650 emergency overnight shelter spaces to the homeless. Yet, studies show that less than half of the area's homeless are able to access space in the existing emergency shelters. The other half must sleep in the desert, on the streets, or in their cars. When possible, through day-labor resources, others occasionally stay in motels. In general, the emergency shelter programs have minimal entry criteria, include time limits (varies by agency), are located in a structure offering protection from the elements, provide restroom facilities and drinking water, are supervised and offers appropriate lighting, heating/cooling and proper ventilation. Generally, no fee or religious participation is required. Most programs have specific target populations and cannot accept all homeless persons or families.

Many homeless persons, especially single adults, learn of emergency shelter programs by word-of-mouth or through crisis intervention centers. Homeless families often seek services, but find few programs available to serve family units without splitting them up. A number of families, therefore, do not seek shelter due to the requirement to be separated from each other. Individuals and families, who become homeless by domestic violence, are referred to services and emergency shelter through telephone hotlines and through assistance from law enforcement officers who can identify available programs.

For persons living on the streets and/or unaware of services, outreach teams, as described above, are now working in many areas of the region and regularly refer homeless persons to an emergency shelter program. In many cases, Metro's police officers make referrals and will provide transportation to local shelters.

Over the next five years, several agencies will be expanding their programs. The Shade Tree is currently constructing a new shelter for women and children. The facility will shelter 364 with an additional 100 cots available for overflow. MASH and TADC (Safe Nest) will be constructing additional shelter spaces for women and women with children. There will be a smaller increase in the number of shelter spaces for men, primarily at Catholic Charities St. Vincent Plaza. However, while the new Catholic Charities shelter is under construction, the number of shelter spaces for men will decrease substantially in spite of a temporary tent to house those displaced by the construction.

Figure 49
Emergency Shelter Bed Inventory
December 1999

Emergency Shelter Spaces for Women and Women with children			
Provider	Maximum Capacity	Planned (Within 5 yrs)	% Change Incr (Decr)
The Shade Tree	84	364	333%
The Shade Tree - Cots	0	100	100%
Salvation Army	50	0	(100%)
Rescue Mission	25	25	0%
Interfaith Hospitality Network	12	12	0%
Safe Nest/TADC	71	101	42%
Safe House (Henderson)	54	54	0%
MASH-mattresses	50	50	0%
TOTALS:	346	706	104%

Emergency Shelter Spaces for Single Men (primarily)			
Provider	Maximum Capacity	Planned (Within 5 yrs)	% Change Incr (Decr)
Salvation Army (75 is ideal max.)	75	75	0%
Catholic Charities - Weather	175	204	17%
Rescue Mission	120	120	0%
God in Me Ministries	30	35	17%
MASH - Tent (Weather)	250	250	0%
WestCare	18	18	0%
Catholic Charities \$5/night*	204	188	(8%)
Catholic Charities - Program*	300	372	24%
Salvation Army \$4/night*	42	42	0%
Salvation Army - Program*	90	90	0%
TOTALS:	1304	1394	7%

Emergency Shelter Spaces Total			
	Maximum Capacity	Planned (Within 5 yrs)	% Change Incr (Decr)
Total for Men, Women & Children:	1,650	2100	27%
% Shelter Spaces for Men:	79%	66%	(16%)
% Spaces for Women/Families:	21%	34%	60%

* differs from other Emergency Shelter services in either length of time or fee for service, but conforms with other Emergency Shelter criteria by emergency response/placement, minimal entry criteria (sober), lack of criteria excluding segments of the population, and minimal case management and direct financial assistance

Transitional Housing

There are 18 agencies currently providing 1,258 transitional housing bed spaces to the homeless in Southern Nevada. There are fewer transitional housing beds than emergency shelter beds, which creates a bottleneck in the system and necessitates an increase in this component. The admission process and criteria for transitional housing programs differ from emergency shelter programs in that transitional housing programs generally assess the prospective resident's appropriateness for the program and her/his willingness and capacity to adhere to program rules. The program rules, in turn, are designed to enhance the resident's self-sufficiency. Case management services are provided, as are other direct services designed to remove the obstacles individuals or families face when attempting to return to self-sufficiency. In addition, many of the programs listed target specific sub-populations, tailoring their services to meet that population's needs. The subpopulation served is sheltered in space that is appropriate to the individual's or family's needs, and the program provides for the residents' nutritional needs, either by providing access to a kitchen facility or by providing catered meals.

Most individuals or families accessing transitional housing programs are referred by emergency shelters and outreach programs, or by social service agencies. Some agencies have their own small continuum of programs, providing emergency, transitional and permanent housing, attracting persons in need. Three new transitional shelters are planned in the next several years. These facilities include 80 units for veterans to be constructed by HELP of Las Vegas, 150 units for veterans to be renovated by US Vets and 52 units for substance abuse treatment at WestCare Ranch. Upon completion of these additional transitional shelters, the Las Vegas Valley will have 1,540 spaces of transitional housing.

Figure 50
Transitional Housing Spaces
December 1999

Agency	Total Spaces	# Reserved For: for spaces for children)	Single Women	Single Men	Veterans	Seniors	Adolescents	HIV/AIDS	Mentally Ill	Phys. Disabled Substance Abusers	
Caminar-Pedregal House	12		yes	yes				12			
Catholic Charities - Adolescents	15						15				
Catholic Charities – Seniors	41		yes	yes		41					
Catholic Charities/HELP	120	yes	60	60	yes	yes				yes	
Center for Independent Living	36						36				
EOB Project HOME	65	59				6					
God In Me Ministries	32			32							
HACA	20	20									
Healthy Families	12	yes								12	
HELP USA	80*		yes	yes	80	yes					
Hope House	16									16	
KEY Foundation	36				36				yes		
Las Vegas Indian Center	10	yes	yes	10						yes	
Lighthouse	6		yes	yes	yes		6				
MASH Village - Long Term	83	53	30								
MASH Village - Short Term	159	69	90								
NV Homes for Youth	6						6				
Parson's Place	57		yes	57	yes	yes				yes	
Salvation Army	137		yes	70	yes	yes		67			
Transitional Living Communities	200									200	
US Vets	150*		yes		150						
We Care	9		9								
WestCare	106						16			90	
WestCare Ranch	52*						52				
Women's Development Center	79	79									
Current Grand Totals:	1,258	281	189	229	36	47	73	18	67	0	318
Planned Totals	1,540	281	189	229	266	47	125	18	67	0	318

*Planned

Permanent Housing

Referrals to permanent housing are made throughout the continuum of services: prevention, outreach, emergency and transitional shelters. Some transitional housing programs also offer permanent, affordable housing and streamline their transitional housing clients into any vacant units. There are only 185 units of this type of housing. The majority of units are for families with a few set-aside for persons with HIV/AIDS. Most transitional housing and emergency shelter programs have housing placement specialists who help residents apply for and obtain apartments in the nonprofit and market sectors.

Figure 51
Permanent Housing For Homeless
March 2000

Agency	# Units
EOB. of Clark County	44
Golden Rainbow	9
Lighthouse AIDS Ministry	2
WDC	130
TOTAL	185

The MASH Village is planning an additional 50 units of permanent housing. The MASH village Garden Apartments will provide approximately 50 units of affordable rental housing to residents exiting the existing Transitional Living Center. The Garden Apartments will be available to families for approximately two years from the time of their discharge from the Transitional Living Facility. The current capacity for families at the Transitional Living Facility provides enough space for only 21 short-term families (up to four months) and an additional 16 long-term families (up to two years). The proposed project would triple the available long-term units, overcoming one of the major barriers to successful discharge from the short-term program – lack of affordable long-term housing.

In the private sector, the owners and operators of affordable units maintain their own waiting lists and each must be contacted directly regarding availability of units. The waiting lists are typically long. Furthermore, nonprofit housing providers must fill vacancies according to criteria established by their boards, funding agencies and state and federal fair housing laws. Housing placement specialists help homeless families and individuals identify available units in the nonprofit sector. Permanent supportive housing is at a particularly low level with only 67 spaces available for homeless individuals through two Shelter+Care Programs as shown in Figure 52.

Figure 52
 Permanent Supportive Housing For Homeless
 January 2000

Agency	# Spaces	Target Population
State of Nevada Mental Health and Developmental Services Division	Average of 50 per year over 5 years	Mentally ill homeless
Clark County Social Services	17 per year for 5 years	HIV/AIDs Disabled homeless

The region’s public housing units and Section 8 certificates/vouchers provide the most affordable choice and are also the most difficult to access because the supply cannot meet the demand. The waiting lists are long. The demand requires applicants to wait several years for a unit. For example, the City of Las Vegas Housing Authority has over 1,100 families on the waiting lists for public housing. Section 8 Rental Assistance Waiting Lists average 24-36 months. Oftentimes, Section 8 voucher recipients pay more than 30% of their income towards housing costs as the rent rates increase and the better quality units cost more than fair market rent.

Affordable permanent housing is not provided at a level sufficient to meet the growing population in the community. In fact, according to the “Affordable Housing Needs in Clark County, 1996-2010” study, there are currently 46,226 households in the Las Vegas Valley that are experiencing a 50% or greater housing-cost burden. This study performed a housing inventory and renter household income comparison and found that there are currently 31,863 households with incomes under \$15,000 per year and only 3,128 rental units that could be affordable to them, resulting in a shortfall of housing for 28,735 households. This number is projected to reach 128,000 households by the year 2010.

The Clark County Affordable Housing Committee (AHC) commissioned this study in June of 1998. The Center for Business and Economic Research at the University of Nevada, Las Vegas (UNLV), prepared a set of projections of housing needs in conformance with estimates of the future growth of the Las Vegas economy. The study identified many positive community factors influencing the development of affordable housing in Clark County, including: large parcels of land remaining available in core urban areas; a large labor pool/work force; lenders’ view of Nevada as an attractive place to invest; and a recent legislative act which allows units of local government to deed over land to non-profits for the development of affordable housing. There were various negative factors, though, identified by the study, including: NIMBYism (Not In My Back Yard); the cost of land in high-growth areas; the expiration of Section 8 contracts; the loss of public housing inventory due to demolition and/or sale; the decrease/possible extinction of new Section 8 certificates/vouchers; continued dominance of the hotel/gaming industry and associated service-sector industry in the work force; and that older multi-family housing inventory is vulnerable to redevelopment, resulting in the loss of affordable housing. The need for affordable housing is further addressed in the “Housing” section of the Consolidated Plan.

Supportive Services

Case Management provides supportive services to persons in housing and shelter programs. Case managers assess the client's needs and natural resources, negotiate a Plan of Action to be taken by the client, and facilitate the issuance of direct services offered by the housing program to remove the obstacles to self-sufficiency. Case managers also make referrals to other programs and services, and teach clients how to find resources themselves.

A critical component to successfully and quickly assisting homeless persons to self-sufficiency and future stability is to offer the supportive services directly while a client awaits service from community sources. For instance, programs serving homeless families with minor children must offer childcare services while the families wait for assistance from the state (usually a 9- to 12-month wait). When programs focus on work activities, they must offer financial assistance in obtaining special work clothes, tools, and/or work cards. Transitional housing programs for homeless persons with substance abuse issues will offer 12-step groups on-site for residents, etc. When such services are offered directly by the homeless provider, the likelihood of a person staying engaged in services and succeeding is increased. Other support services that are often offered by housing program staff on-site include life skills workshops, housing placement, benefits assistance, children's services, and transportation.

For homeless persons not yet in a housing program, the outreach teams and access centers are critical links to supportive services. The various programs that go out into "the bush" tailor their programs so that these non-sheltered homeless can still receive the supportive services necessary to maintain health and personal safety, and to encourage them to access the more structured programs. Other programs go to day shelter programs, like the one offered at The Shade Tree Shelter, an emergency shelter for women and women with children. The day shelter operates during the hot day hours providing homeless women and homeless women with children a safe place to escape the urban environment. Outside service providers such as nurses, family and mental health counselors, housing and transitional shelter staff, legal advisors, etc. come to the facility to do intake and provide on-site assistance.

The Crisis Intervention Center is often the first point of contact for many individuals and families at-risk of becoming homeless, or who are homeless but not sheltered. The CIC provides an opportunity to learn about and participate in many services in one location. Through the CIC, over 18,000 homeless persons each year receive information to address their needs and access services; at least 9,000 of these were first-time visitors. The CIC services include referrals to needed services whether those services are available at the center or elsewhere in the community.

The Veterans Administration's Community-Based Outreach Clinic, which is located in the MASH Crisis Intervention Center, serves all homeless veterans, sheltered and un-sheltered alike, with case management, alcohol/drug addictions intervention, access to veterans benefits, and streamlined access to Veterans Administration's Medical Clinic services. Other supportive services provided by the community and available to residents in emergency shelters, transitional shelters, or permanent housing include: child care assistance payments for working parents; public assistance such as food

stamps, TANF, etc.; child support enforcement through the County District Attorney's Office; Consumer Credit Counseling services to assist in budgeting and deficit management; and first-time homebuyers programs to assist in homeownership.

In collaboration with the University of Nevada Las Vegas, Lake Mead Hospital and the Department of Veterans Affairs, MASH Village will add a pre-fabricated 1,500 square foot structure to its current site in FY 2000 from which to provide a full range of medical services. The clinic will provide primary medical care, psychological counseling for individuals and groups, medical referral to specialists, medical case management, and a dispensary stocked with appropriate pharmaceuticals.

Homeless Prevention

Eight agencies, distributed across the valley, offer Rental Assistance, Utility Assistance or New Move In Costs to individuals and families either facing homelessness because they have received a five-day "pay or quit" notice, or who are currently homeless and have income, but need assistance with move-in costs. These agencies utilize funds from FEMA's Emergency Food and Shelter program, HUD's Emergency Shelter Grant program, and Clark County General Funds in their efforts to prevent or end homelessness. Additionally, many local churches and synagogues assist their congregants and members of their faith community with rental assistance to prevent homelessness. Jewish Family Service Agency and the Church of Jesus Christ of Later-Day Saints (LDS), for instance, both offer a variety of formal support services to their community members, including case management, rental, utility or food assistance.

Many low-income, at-risk families and individuals are prevented from homelessness through a variety of support programs available through state or local programs that can impact their ability to remain stable. Public agencies as well as non-profit agencies provide employment training and basic education services to at-risk households. The State of Nevada has tripled its assistance to families needing childcare subsidies in order to continue working. The State supports several non-profit programs that offer substance abuse treatment for the indigent. The City of Las Vegas, through HOPWA funds, and Clark County, through General Funds, assist HIV+/AIDS affected persons by providing comprehensive supportive services, including emergency rental assistance and health coverage when needed, to ensure many of these individuals and families can remain stable. County Low Income Housing Trust Funds (LIHTF) have been allocated to the Housing Authority to support the new construction of 61 additional public housing units, utilizing local resources to continue this important resource.

Another advancement in homeless prevention has been an improvement in the criminal justice system's response to domestic violence. Emergency Temporary Protective Orders (ETPO) are now available 24-hours per day, 7-days per week in Clark County. These ETPOs allow a judge to evict the violent perpetrator from the residence, and can even assign temporary child support or spousal support. Hence, survivors of domestic violence attempting to end a violent relationship need not become homeless to do so.

Individuals and families access these services in a variety of ways. Direct self-referrals generally stem from information published in “Community Notices”, leaflets included quarterly in utility bills. Flyers in local libraries and at community fairs also serve to inform the community of the variety of social services provided.

As with most communities, the United Way of Southern Nevada is a well-known source of support for programs designed to help the low-income and indigent. The United Way of Southern Nevada provides a telephone-based information and referral program as well as a web-based database of services called Service Link. Service Link allows access to information via on-line computer network. A user can type in a word or phrase, such as “homeless” or “rental assistance”, and the program will show on-screen any agencies or organizations that offer services for the need. For the past twenty years, HELP of Southern Nevada has provided comprehensive Information and Referral services to all programs offering social support services in Southern Nevada and HELP also administers some FEMA-EFS Rental Assistance funds.

Additionally, the MASH Village Crisis Intervention Center, as a “one-stop shop”, facilitates access to services for those who are at-risk of homelessness. Its ability to triage clients to any of the 33 on-site agencies acts to prevent occurrences of homelessness.

Direct financial aid is provided through the Nevada Welfare Division Temporary Assistance to Nevada Families (TANF) program which contracts with Clark County Social Services to distribute the funds. Clark County Social Services also manages a general financial assistance program. Unfortunately, even with all of these homelessness prevention programs, the need is still greater than the available resources.

Consortia

Coordination of services through consortia is a proven means of improving the efficiency and effectiveness of service provision by reducing duplication of services. Southern Nevada has had remarkable success with this type of collaboration. The Howard Cannon Senior Center, established in 1987, was one of the first such multi-agency, single-site collaborative efforts in Nevada. Consortia benefiting the homeless population located in the Las Vegas Valley include the following:

Clark County Social Services (CCSS) and Aid for AIDS of Nevada (AFAN)

Clark County Social Services and Aid for AIDS of Nevada have formed an innovative alliance that meets the specific shelter and support services needs of HIV-affected individuals and families. AFAN provides support services for persons with AIDS and has found that traditional shelters jeopardize the compromised immune systems of their clients. Therefore, AFAN and CCSS designed a system whereby CCSS provides for private temporary shelter space (i.e., hotel/motel room, single room occupancy, apartment) and streamlined access to other general assistance programs, and AFAN provides the specialized case management and support services functions needed by the HIV- and AIDS-affected homeless population. CCSS applied for and will receive a Shelter+Care grant to

assist with permanent housing, increasing this collaborations' ability to fully serve this frail homeless subpopulation.

Family Resource Centers

Family Resource Centers were established by the Nevada State Legislature in 1995 with the purpose of strengthening families, neighborhoods and communities by providing access to services to promote individual and family well being while striving to eliminate isolation, abuse, crime, poverty and disease.

The 17 existing Family Resource Centers (FRCs) scattered throughout Clark and Nye Counties provide a service network developed by residents of each FRC neighborhood to serve the population of that specific "at-risk" area. Each center attempts to eliminate bureaucratic, geographic, and cultural barriers by allowing a "grassroots" approach in designing services tailored to the needs of area families, thus diminishing traditional barriers to service access. Neighborhood councils comprised of families, local businesses and neighborhood-based organizations located in the targeted neighborhood, create a service delivery plan unique to the demography and desires of the residents and responsive to changing needs and resources. Family Resource Centers are flexible, fluid alternatives to more structured and restrictive service environments. The homeless of the Las Vegas Valley access services at most Southern Nevada FRC's, and particularly through the Community Partners FRC located at the M.A.S.H. Village Crisis Intervention Center. The following lists the FRCs providing services in Southern Nevada.

Gatekeeper System for HIV/AIDS Services

Essential HIV/AIDS service providers are now co-locating their central service offices in the same medical building, centrally located off the main freeway in the middle of town. AFAN and the UMC Wellness Center have been located in the same building for over a year, and await the move of a pharmacy that provides oral medications to the HIV/AIDS community in the upcoming year. This co-location allows clients to schedule primary medical provider appointments at the Wellness Center to coincide with their AFAN case manager appointments. Now, clients may access medical care, food pantry, transportation and housing assistance, and take part in the AFAN hot-lunch program all in the same visit.

Interfaith Hospitality Network (IHN)

The Interfaith Hospitality Network (IHN) is a coalition of churches, synagogues, and faith related schools that utilizes existing facilities and faith community volunteers to provide emergency shelter to families who are homeless. IHN's contribution to the homeless population is that it: expands the community's capacity for emergency shelter utilizing existing facilities; provides emergency shelter to family groups not served by other emergency shelters (two-parent families, single fathers with female children or single mothers with older male children, etc.); keeps families together in one facility/room; and it involves the private citizen in serving the homeless. The staff of IHN provides

leadership, case management and supervision. The over 1,000 volunteers of IHN provide care, love and the tangible support of food and shelter.

MASH Village Crisis Intervention Center

The MASH Village Crisis Intervention Center is the collaboration that focuses on homeless and at-risk of becoming homeless populations. This “one-stop-shopping” network includes needs assessment by MASH CIC staff and referral to the 33 providers who provide homeless prevention assistance, entry to transitional housing programs, basic medical screening services, mental health care, referral to treatment and recovery programs, and veteran-specific services. Every agency and community group knows it can send its family or individual in crisis to the MASH CIC and the person will be immediately integrated into the program or service s/he needs in order to return to self-sufficiency.

Veterans Administration and Los Angeles Veterans Initiative

The Veterans Administration Medical Clinic and US Vets have formed an innovative alliance that meets the specific supportive services needs and shelter needs of the valley’s homeless veterans. US Vets has been invited into the community to provide housing resources and intensive, needs-specific case management for the valley’s veterans who are homeless, and the VA will provide streamlined access to the benefits programs the veteran is entitled to, and will pay for the in-patient care provided in the long-term housing service. US Vets applied for and will receive a Supportive Services Only grant to provide intensive case management and intervention services for the first phase of this project.

Housing Developers

Nonprofit housing developers have been especially important in planning for and meeting the needs of the homeless. Nonprofit developers attempt to garner the resources to provide affordable permanent housing for homeless persons with special needs; they also inform the planning process regarding the required resources to meet the permanent housing needs of homeless persons. The following developers have been active in providing affordable housing to the Las Vegas Valley Continuum of Care system.

Non-Profit Housing Developers

Nevada HAND	Economic Opportunity Board (EOB)
Community Development Programs Center	LISC
Accessible Space, Inc.	D. Miller Foundation
Catholic Charities	RPS, Corp.
Women’s Development Center	North Las Vegas Neighborhood Housing Services
HELP of Las Vegas	Community Services Agency
Nevada Homes for Youth	Volunteers of America

Hospitals/Clinics

The following hospitals and clinics across the Las Vegas Valley region have made efforts to design programs for homeless households and have become involved in the SNHC Continuum of Care planning process.

Hospitals and Clinics

University Medical Center (UMC)
MASH Village Medical Clinic
EOB Treatment Center
So. Nevada Mental Health Clinic

Nevada Rural Health
V.A. Community Based Outreach Clinic
Clark County Health District
WestCare

Enterprise Community Linkage

The communities designated as part of the Enterprise Community have the highest concentration of homeless in the region. Residents of these communities are given priority for service and are encouraged taking advantage of the childcare subsidies (100% subsidy for the first year of employment to EC residents), education, and employment training programs.

Many agencies participating in the community's Continuum of Care are also active participants in the Enterprise Community planning process. As such, linkages have been developed between agencies to better leverage available dollars - Enterprise Community, HUD, and private.

Many of the City's homeless providers were instrumental in providing input in the successful application for the Enterprise Community. Most of the homeless shelters are located within the SNEC-designated areas. Participants in these shelter programs benefit from the SNEC assistance as well as HUD programs. For instance, residents of the MASH Village Transitional Living Center are eligible to receive SNEC 100% childcare subsidies during the first year of employment, and then transition into regular state-subsidized child care assistance afterwards to help ensure continued stability. Such matching of supportive services facilitates a rapid return to stability and self-sufficiency of these homeless families.

The Executive Board of SNEC, in developing the EC, took into account the population that comprised the targeted neighborhoods and continues to support efforts to include the homeless population in planning needs

Sub-Populations

Severe Mental Illness (SMI) Only

The Salvation Army recently opened its Safe Haven for the homeless severely mentally ill. This facility will be the first step in meeting a large need for services and outreach to the homeless mentally ill. Until the opening of the Safe Haven, the various community programs targeting the homeless have struggled to serve the homeless mentally ill and facilitate their enrollment into the Salvation Army's PATH and PATHWAYS program. Other community resources that provide

information and referral to this population and that serve as conduits into the continuum are the Southern Nevada Adult Mental Health, Nevada State Welfare, Clark County Social Services, the Metropolitan Police Department, Mojave Mental Health, and University Medical Center.

Alcohol, Drug and Other Addictions

Many local outreach teams are trained in identifying substance abuse issues, and make referrals to appropriate services. Local emergency shelter, transitional housing, and support services only programs generally have agreements with drug treatment programs for the indigent to refer presenting problems to appropriate services. The Metropolitan Police HELP Team is instrumental in referrals to detoxification programs as a first step towards recovery. The primary providers of drug/alcohol treatment services to the indigent are: The Salvation Army, EOB Treatment Center, and WestCare.

The largest residential substance abuse treatment program for adults in Clark County is the Salvation Army's Adult Rehabilitation Program, which accommodates 85 men in its lodge and 32 women in its new Lied Residence facility. An additional 15 beds in the emergency lodge are reserved for program participants. Approximately 15 of the total 132 residents are dual-diagnosed (SMI and AODA). The Salvation Army estimates that 85 percent of the Adult Rehabilitation Program residents were homeless before entering the facility; however, this percentage includes those who were living with relatives or friends prior to admittance, as well as transient homeless. The Economic Opportunity Board (EOB) of Clark County's Treatment Center provides 30 beds (15 men and 15 women), as well as outpatient treatment for substance abusers. EOB indicates that all of the persons entering their treatment facility were previously homeless.

Adult Services Center at WestCare, Inc. provides 11 beds for Phase I clients (48-hour stay), 14 beds for Phase II clients (five-day stay), and an 18-bed transition/re-entry program. WestCare is the only facility accepting homeless individuals who are intoxicated at the time of entry. WestCare's Harris Spring Ranch provides longer-term substance abuse treatment for 40 adults and 16 boys ages 13 - 17. Approximately 3,000 individuals are served annually in WestCare Phase I alcohol and drug detoxification units, but this number includes repeat admissions. WestCare estimates that 80 % of its Adult Service Center clients are homeless prior to entry.

There are currently few services available for homeless problem gamblers. Gamblers Anonymous is available to any person but homeless people may not have access to the meeting locations or are unaware of the program. MASH Village offers a Gambling Education Program for its clients and the VA has programs to which homeless veterans can be referred.

Dually Diagnosed: Severely Mentally Ill (SMI) and Alcohol/Other Drug Addicted (AODA)

This sub-population is among the hardest to reach and engage for meaningful services. Outreach to this population is similar to those persons with mental illness or substance abuse however; the population's reluctance to engage services can create a less meaningful intervention. Specialized providers accept referrals from outreach teams and drop-in centers. The Salvation Army treats 15

dual-diagnosed persons in its substance abuse program, but only after they have received psychiatric care. The Salvation Army's Safe Haven offers a drop-in center to the mentally ill, including the dually-diagnosed, building their trust to engage them in services and housing. Additionally, the Department of Veterans Affairs' Medical Clinic and the State Department of Mental Health both serve the dually-diagnosed and will facilitate their movement into the homeless services care system when necessary.

Domestic Violence

Safe Nest/TADC (Temporary Assistance for Domestic Crisis) is the oldest shelter exclusively available to domestic violence victims in Clark County. During FY 1999 (July 1998 - June 1999), TADC provided emergency shelter to over 631 domestic violence victims (approximately half women and half children). While only five clients were turned away due to lack of facilities, this is due to the availability of Emergency Temporary Protective Orders (ETPOs), allowing women to stay in their homes, while removing the abuser. Currently, TADC has 71 beds available for domestic violence victims and their children and plans to add 30 more beds by 2001. TADC also provides a telephone hotline counseling service and therapy sessions. In FY 1999, TADC provided telephone hotline counseling to 17,156 callers and conducted therapy sessions for 1,375 individuals experiencing domestic violence problems. TADC also issued 8,978 ETPOs and TPOs (protective orders) through the Clark County Family Court in 1999. Safe House in Henderson provides 54 shelter spaces for domestic violence victims.

The Shade Tree, an emergency shelter for women and their children, will be offering a Victims' Advocacy Program upon the completion of its new facility. The program will serve those who are victims of domestic violence or street crimes. Full-time victims' advocates are available to assist with crisis intervention, obtaining Temporary Protective Orders, victim's compensation/entitlement, safety plans and to facilities placement into a safe house when necessary.

Safe Nest/TADC operates a 24-hour Crisis Hotline, offering crisis counseling, peer support, needs assessments, referrals to community programs, access to and assistance with Temporary Protective Orders, and screening for entry into its safe house. Additionally, Safe Nest staffs the Temporary Protective Order Office in the Family Courts and provides volunteers who respond on-site to victims in crisis once the abuser has been arrested.

HIV/AIDS

The primary conduits of needs assessments, referrals and services for the HIV/AIDS subpopulation are their physicians and Aid for AIDS of Nevada (AFAN). Specifically, the community has been developing a one-stop-shop for HIV/AIDS services. The community has over 3,500 persons who have been diagnosed as being HIV-positive. Nearly 100% of this population has an income at or below 80% of AMI, and are therefore susceptible to homelessness. In fact, over 858 households were assisted with short-term housing assistance last fiscal year in an attempt to prevent the homelessness of this frail population. The need was far greater; the "Clark County Health District's HIV/AIDS Surveillance Study" conducted in April 1999 identified an additional 817 HIV/AIDS

affected households needing housing assistance in Clark County. There are a number of agencies assisting with housing, support services and/or referrals for this subpopulation, including Clark County Social Services, UMC, Golden Rainbow, Aid for AIDS of Nevada (AFAN), Caminar, Lighthouse Compassionate Care, and Nevada Association of Latin Americans (NALA).

Unaccompanied Youth

WestCare Inc. provides the only emergency shelter for runaway, homeless and/or exploited youth between the ages 11 and 17 in Clark County. Currently WestCare assists approximately 1,500 children annually in its 18-bed co-educational emergency shelter. The average stay in the WestCare facility is one to three days. WestCare also manages a 20-bed co-educational youth shelter in Bullhead City, Arizona to serve runaway and homeless youth in the Laughlin, Nevada/Bullhead City, Arizona area. Boys between the ages of 13 and 17 years of age who are in need of substance abuse residential treatment can be treated at a 16-bed facility at WestCare's Harris Springs Ranch program. For older youth (ages 17-21), Nevada Homes for Youth runs a 6-bed independent living facility providing residents with transitional housing and employment skills and manages 18 other units of affordable housing.

The Street Outreach Program of WestCare is designed to prevent sexual abuse among runaway and homeless youth, and targets the Las Vegas Strip and Downtown areas. Supplementing WestCare are a few small all-volunteer programs that provide meals, clothing and counseling support services to homeless youth in the area's parks and public ways late at night. The volunteer groups provide for the basic needs and encourage the homeless unaccompanied youth to access shelter either from WestCare, Nevada Homes for Youth, or from the Center for Independent Living (transitional housing programs for youth), or to (re) enter the foster care system. The Metropolitan Police HELP Team also encounters this population. Referrals from schools are also common.

Veterans

Groups reaching out to the veteran population in desert encampments (in the bush) include the Key Foundation, Vietnam Veterans of America, Chapter 17, and Friends in the Desert. These groups often try to meet basic needs, such as food, clothing and basic employment assistance, and encourage the veteran to utilize the services offered within the continuum. The Veterans Administration Medical Clinic is the primary service provider for veterans. The VAMC's Community Based Outreach Clinic (CBOC) is located in the Crisis Intervention Center, providing an easy-access into the VA supportive services system, and a conduit to housing and other supportive services needed by any veteran patient of the VAMC. CBOC has initiated two new programs: the Metro Ride-Along Program in which a CBOC staff member rides with Metro in their patrol car to areas where homeless are located and provides information to them on VA services and the Street Readiness Program which provides assistance to incarcerated veterans who will shortly be discharged from jail. The program provides the veteran with information on community resources. US Vets and HELP of Las Vegas are each planning supportive housing projects, which when completed will provide 230 units for homeless veterans.

Disabled Homeless

There are several agencies in town servicing persons with disabilities that perform the assessment and referral services for any of their clients identified as homeless. The primary referral point used by these agencies is to the MASH Crisis Intervention Center, the one-stop-shop assessment and referral program for the homeless. Generally, the disabled identified in this way receive services for problems other than their disability as no funding is available to specifically serve homeless with physical disabilities.

Homeless Strategic Plan

Introduction

The causes of homelessness range from personal problems to societal and economic issues, such as the gap between a living wage with health benefits and a minimum wage without benefits. The SNHC 5-Year Strategic Plan and Homeless Focus Group strongly supports the efforts to find and accomplish real solutions for the problem, but it also recognizes the immediate crisis of serious deficiencies in existing facilities and services available to homeless people in the community. People with inadequate shelter, food, and access to personal hygiene are not offered gainful employment, so the cycle of homelessness continues. Thus, the Consolidated Plan Homeless Strategies are committed to the basic goal of ensuring the availability of high quality services that meet the basic needs of all homeless persons in Southern Nevada while also promoting the goal of developing a range of housing for the homeless.

Homeless Priority Needs

The HCP Consortium has based its homeless strategic plan on the 1999 UNLV Homeless Study, updated reports and surveys regarding homeless, comments from citizen participation meetings, and interviews with homeless providers. Areas of need are assigned one of four priority designations based upon the percentage of need as indicated by the data.

Priority needs were devised by using the following methodology:

51% to 100% unmet need/gap	High Need
21% to 50% unmet need/gap	Medium Need
1% to 20% unmet need/gap	Low Need
0% or lower unmet need/gap	No Need

In some cases, updated reports and/or studies affected the priority designation due to the nature of the clientele or the relative priority of the need in comparison to other needs. For example, ‘case management’ is consistently recognized to be essential in assisting a homeless individual or family climb the ladder to self-sufficiency while ‘education’ or ‘housing placement’, which are also important, are not as essential. Another example is the permanent housing needs that are given a higher priority than would be given based solely on the percentage gap. This was done because all homeless persons will eventually need some form of permanent housing and there is a severe affordable housing shortage at the very low rent level. While several of the priorities for families would appear to be low, the impacts of homelessness on children can be devastating which makes programs assisting families with children a higher priority.

*High Priority: Activities to address this need will be funded by the HCP Consortium during the five-year period of this plan.

*Medium Priority: If funds are available, activities to address this need may be funded during the five-year period of this plan.

Low Priority: The HCP Consortium will not fund activities to address this need during the five-year period of this plan.

No Such Need: It has been found that there is no need or the HCP Consortium shows that this need is already substantially addressed.

*Please note that the citizen committees that make recommendations to the governing bodies of the HCP Consortium will judge specific projects on their individual merit. Therefore, while a particular project may address the needs of a High Priority group, it may or may not be funded at the discretion of the governing bodies based upon the recommendations of the citizen committees.

Gaps Analysis

Methodological Assumptions

In order to complete the Gaps Analysis that follows, some assumptions were made. First, the total number of homeless individuals is obtained from the UNLV Homeless Study. Second, homeless subpopulation figures are based on demographics obtained through the Homeless Study and the Stand Down. The Stand Down statistics were generated from the last six Stand Downs, during which over 2,000 homeless individuals completed surveys each year. Third, the estimated need for supportive services slots is based on the UNLV Homeless Study and the Stand Down statistics, which identified the sub-populations within the homeless. The percentage of persons in those sub-populations was applied to the number of homeless to obtain the number needing a particular supportive service. Lastly, the current inventory of service slots for case management, and the number of homeless persons needing those slots, may reflect duplications because the Las Vegas Valley does not have a uniform, community-wide intake system at this time. The local government entities are researching computer database software systems to determine the most compatible system for the community's needs.

The need for the different housing types is based on information gathered by the UNLV study on where the people interviewed had slept the night before. First, it is assumed that those who were identified as being on the street, in camps or sleeping in vehicles (47.9%) will all need emergency shelter prior to being moved into transitional housing. This assumption is made based on the experience of homeless providers who state that those who are living "on the street" have issues that will need to be addressed before they will be successful in transitional housing. Second, an assumption was made that those currently staying in the emergency shelters (35.8%) will eventually be prepared to access transitional housing. Finally, it is assumed in the gaps analysis that those living in transitional housing, with friends, or in motels (16.4%) are the most prepared to access

permanent housing and be successful. While more affordable permanent housing is needed than is identified in the Gaps Analysis, the housing needs of the extremely low-income are addressed in the “Housing” section of the Consolidated Plan.

Number of Persons in Need of Services

According to the UNLV Study and StandDown statistics, of the estimated 6,707 homeless persons in the Las Vegas Valley, 81% are single adults, and 19% are members of families. Up to 35% of all homeless adults are veterans. Women head the majority of the homeless families, and it is estimated that about 20% of all families and individual women are victims of domestic violence. These single mothers are more likely to have substance abuse problems or to be involved with those who do.

The Estimated Need for beds/units reflects information provided by agencies servicing the highest concentration of homeless clients. These agencies used their monthly reports and their expertise to estimate applicable subpopulation percentages.

Based on the UNLV Study and the Stand Down data, we know that at least 33% of the homeless suffer from severe mental illness. Add to this the UNLV study, which figures 12.5% of the homeless suffer from a mental illness combined with some sort of substance abuse, and it becomes clear that mental illness among the homeless is a significant problem. Only about one-quarter is believed to be receiving some kind of treatment within the community. Over one-third of the Las Vegas Valley’s homeless are chronic substance abusers. Additionally, gambling is a significant problem for the homeless. The UNLV study found that 52% of the homeless have gambled in the past 12 months, and that 17% can be diagnosed as pathological gamblers.

Inventory

The Las Vegas Valley Continuum currently provides 1,650 shelter beds, with an additional 450 beds planned. Upon completion of the new beds, the balance of shelter bed type will shift from 79% for men and 21% for women and families to 66% for men and 34% for women and families. The inventory indicated for emergency shelter for women and women with children is based upon the current supply of 346 spaces plus The Shade Tree’s new shelter with 464 spaces, which is under construction. Approximately 1,258 transitional housing spaces are available to a variety of subpopulations of homeless. While an additional 282 are planned, none are currently under construction and therefore were not counted in the inventory for the gaps analysis. There are only 252 units of very low cost (under \$350) rental and supportive housing units available for the formerly homeless through non-profit organizations.

The “Current Inventory” of supportive services slots for these special-needs populations only reflects any slots that are reserved for or specifically designed to serve the homeless. For instance, while some homeless individuals may receive mental health services from Nevada State Division of Mental Health and Developmental Services, such service slots are not reflected in the “current inventory” of supportive services slots because the Department makes no accommodations for the homeless and is often over-burdened by the needs of the community at large.

Over the past several years, transitional housing services for individuals and families have increased, due to the advocacy efforts of the Homeless Coalition and government investment of CDBG, HOME, SHP and private foundation funds in this program area. Yet, the Valley has evidenced an increase in a return to homelessness among both individuals and families, or to put another way, a decrease in residential stability once housed. In 1988, only 40% of the valley's homeless had been homeless before; yet, ten years later 55% had been homeless at least once before.

In years past, the Homeless Coalition placed great priority in increasing and improving services targeting homeless women and families, resulting in several new programs funded through Supportive Housing Program funds. The Coalition also increased community investment in those and existing programs, such as the planned expansions of Safe Nest/TADC and The Shade Tree emergency shelter for women and women with children. In this past year, the Homeless Coalition has noted that programs targeting men and veterans have not grown at the same pace as programs targeting women and children. Moreover, emergency shelter and other basic-needs services have been neglected in support of comprehensive transitional housing programs.

Geographic Location of Homeless Services

In 1991, the City of Las Vegas hired a private consultant to develop the best approach for serving the homeless. The community input received through that process resulted in a determination that the homeless are better served by simplifying access to the services by centralizing services in a single area. With this goal in mind, the City of Las Vegas began the planning and led the effort, under the leadership of former Mayor Jan Jones, which ultimately resulted in the development of the MASH Village, consisting of the Transitional Living Center and the Crisis Intervention Center.

Catholic Charities, the Salvation Army and The Shade Tree have furthered the original plan by improving their facilities in this same geographic area. The City of Las Vegas, along with others, has been very successful in developing new and improved services to assist the homeless. This action points to the importance of such planning studies as a critical tool in guiding public and private investments.

The concentration of homeless facilities and services in a central area facilitates the coordination of service providers and reduces duplication of effort. There are no jurisdictional boundaries to complicate or delay the delivery of homeless persons to the services and facilities they require. Public transportation issues can be addressed more efficiently allowing homeless persons to go to one geographic location for all or nearly all of the services they require.

Unfortunately, there have also been some "unintended consequences" of concentrating such facilities in a single area. Beyond the costs of funding the operation of homeless facilities and provision of services, there are other less visible costs to the community including increased law enforcement, loss of business development reluctant to locate near homeless facilities and the intrusion of homeless upon residential neighborhoods. As noted in the UNLV Study, 34% have dual addictions and approximately 17% have mental disabilities, which affect their behavior and actions

in public. The concentration of these persons in one geographic location has created a perception of a “homeless corridor”. Further, due to the lack of transportation, many homeless persons in outlying areas are unable to access services in the City of Las Vegas and according to the UNLV Study, are unaware of the availability of such services.

The solution is to improve the Continuum of Care system in outlying areas such as rural Clark County, Henderson, Mesquite and Boulder City. It makes little sense to relocate a homeless person away from their community of choice, particularly if that is where they are employed (34% of homeless are employed), to Las Vegas so that they can receive services. The Homeless Strategic Plan contains many goals related to improving the provision of services to homeless located in outlying areas. While the new course of action will help alleviate some of the pressure on services located in the City of Las Vegas, it is important to recognize that NIMBY (“Not-In-My-Backyard”) attitudes may make it difficult to establish geographically disbursed facilities in other locations due to anticipated community and neighborhood opposition.

The UNLV Homeless Study states, “...the City of Las Vegas is bearing the economic and social burden for the regional issues of homelessness”. The City of Las Vegas agrees with the strategy to provide facilities and services to the homeless citizens in the Consortium; however, the City’s position is that the City has provided more than its fair share of such facilities and services within its jurisdiction. Therefore, it is doubtful that the City, as a matter of policy, would consider the provision of additional facilities and services within its boundaries without first providing such services in outlying areas.

Map 3
Homeless Facilities in Downtown Las Vegas

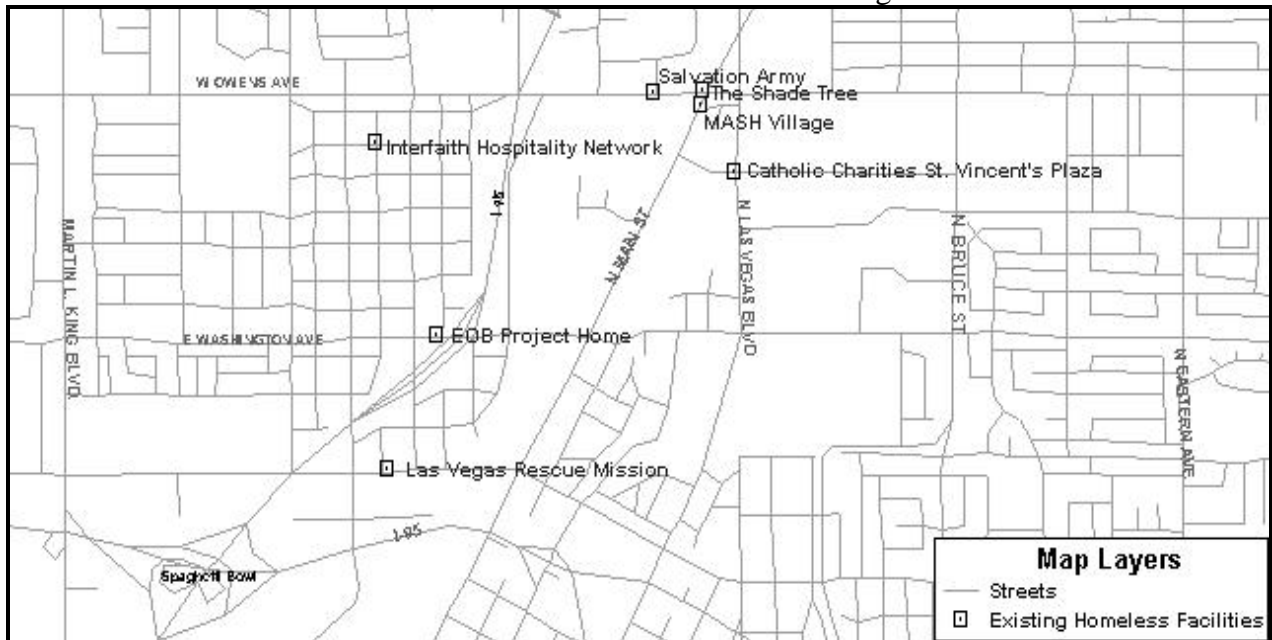


Figure 53
 HUD Table 1A
 Gaps Analysis
 Homeless Individuals

		Estimated Need	Current Inventory	Unmet Need/Gap	Priority Need
Beds/Units	Emergency Shelter	2,602	1,304	1,298	M
	Transitional Housing	1,945	765	1,180	H
	Permanent Housing	891	78	813	H
	Total	5,438	2,147	3,291	
Estimated Supportive Services Slots	Job Training	1,135	817	318	M
	Case Management	4,993	765	4,228	H
	Substance Abuse Treatment	1,067	318	749	H
	Mental Health Care	1,855	67	1,788	H
	Housing Placement	4,547	765	3,782	M
	Life Skills Training	4,547	1,417	3,130	H
	Other - Domestic Violence Shelter	52	13	39	M
	Other – Education	1,494	30	1,464	M
Estimated Sub- Populations	Chronic Substance Abusers	1,067	761	306	M
	Severely Mentally Ill	963	67	896	H
	Dually-diagnosed	893	0	893	H
	Veterans	908	36	872	H
	Persons with HIV/AIDs	780	18	762	H
	Victims of Domestic Violence	52	13	39	M
	Unaccompanied Youth	1,000	73	927	H
	Other - Gambling addiction	217	30	187	M
	Other - Physically Disabled	653	0	653	H
	Other - Seniors	161	47	114	H
Other - Non-service using homeless	734	20	714	M	

Figure 53 Continued
Gaps Analysis
Homeless Families with Children

		Estimated Need	Current Inventory	Unmet Need/Gap	Priority Needs
Beds/Units	Emergency Shelter	610	676	0	No Need
	Transitional Housing	456	293	163	H
	Permanent Housing	209	174	35	H
	Total	1,276	1,143	198	
Estimated Supportive Services Slots	Job Training	266	0	266	H
	Case Management	509	305	204	M
	Child Care	114	3	111	H
	Substance Abuse Treatment	227	12	215	H
	Mental Health Care	395	0	395	H
	Housing Placement	1,067	430	637	M
	Life Skills Training	1,067	455	612	H
	Other - Domestic Violence Shelter	230	113	117	H
Estimated Sub- Populations	Other – Education	350	83	267	M
	Chronic Substance Abusers	227	77	150	H
	Severely Mentally Ill	205	77	128	H
	Dually-diagnosed	190	0	190	H
	Veterans	193	0	193	M
	Persons with HIV/AIDs	183	0	183	H
	Victims of Domestic Violence	230	113	117	H
	Other - Gambling Addiction	94	83	11	M

Homeless Strategies

The following figure outlines the strategies the HCP Consortium will be pursuing for the next five years to serve the homeless. When a particular strategy does not clearly match up to the priority populations discussed above, the priority level is determined by the ability of the local jurisdictions to impact the particular strategy.

Figure 54
 HCP Consortium Continuum of Care
 Strategic Plan

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
HCP CONSORTIUM									
Reduce barriers to providing shelter and services to homeless									
H	Remove legal barriers to serving homeless unaccompanied youth	Change NRS Statutes that hinder assistance to homeless unaccompanied youth		∅				Nevada Partnership for Homeless Youth	η Legislators
H	Eliminate governmental/institutional impediments to serving homeless	Research providing discounts and waivers to non-profits for costs of bus tokens, sheriff's cards, phone cards and other governmental/institutional requirements			∅			Local Jurisdictions	η SNHC, HELP Team
		Periodically review regulations, ordinances, and statutes that appear to discriminate against the homeless					∅	Local Jurisdictions	η SNHC
M	Support efforts to educate public and governmental representatives about homelessness	Support "consequential" studies to demonstrate social savings for support & funding of homeless services					∅	Local Jurisdictions, United Way	η MASH, UNLV

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)	
			2000	2001	2002	2003	2004			
Increase the supply of housing affordable for extremely low-income and formerly homeless										
H	Provide additional emergency and transitional housing services for HIV/AIDS population	Support funding to assist in the development of 40 beds/units for people with HIV/AIDS					∅	Local Jurisdictions	\$ HOME, LIHTC, CDBG, HOPWA η SNHC Advocacy Committee	
H	Promote the new construction, rehabilitation, set-asides or rental vouchers for permanent housing for people at 30% or below AMI, especially seniors and disabled	Work with community leaders to encourage the use of HOME and CDBG for developments that focus on extremely low-income households					∅	SNHC Housing Committee	η Housing Developers	
		Facilitate coordination between affordable housing and social service providers					∅	SNHC Housing Committee	η Housing Developers	
		Support the acquisition or construction of 100 units of extremely low-income housing					∅	Local Jurisdictions	\$ Bonds, HOME, CDBG, LIHTC η SNHC Advocacy Committee	
		Advocate with the local Housing Authorities to prioritize public housing units and Section 8 certificates/vouchers for qualifying families or individuals exiting transitional programs		∅					SNHC Housing Committee	η HUD, Local Jurisdictions
		Support efforts to create 230 units of supportive housing for veterans		∅					VA, Veterans Advocacy Groups, Developers	\$ SHP, HOME η Local Jurisdictions,
		Support federal legislation to reserve vouchers specifically for homeless			∅				Local Jurisdictions	\$ HUD η SNHC

Homeless Strategic Plan
HUD Consolidated Plan 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)	
			2000	2001	2002	2003	2004			
H	Continue to support homeless prevention activities	Continue funding for rental assistance, utility assistance and other homeless prevention activities					☑	Homeless Service Providers	\$ ESG	
H	Continue to support maintenance and development of transitional housing especially for those with physical disabilities and mental health problems	Continue funding to assist in the maintenance of existing transitional housing					☑	Local Jurisdictions	\$ CDBG, HOME, SHP, ESG η SNHC Advocacy Cmte, Mental Health Coalition, ASI	
		Support funding to develop 200 new transitional housing units (Also see County Housing Section)					☑	Homeless Service Providers	\$ CDBG, HOME, SHP	
M	Work to develop emergency housing for men with children	Support funding for the development of 30 spaces of emergency housing for men with children					☑	Salvation Army, Catholic Charities	\$ ESG, CDBG η WDC	
Increase supportive and essential services for homeless										
M	Continue to support the maintenance and development of emergency shelter beds that meet minimum standards	Support funding to assist in the operations and maintenance of existing emergency shelter programs and development of 500 new shelter beds						☑	Local Jurisdictions, SNHC	\$ CDBG, ESG η SNHC Advocacy Committee, Homeless Service Providers
H	Establish a comprehensive health care system for the homeless including a Respite Care service for homeless discharged from hospitals	Support funding for the development of a Respite Care Service for ill homeless people						☑	Hospitals, Shelter providers	\$ CDBG, ESG η Local Jurisdictions
		Maximize usage of existing health services through dissemination of information						☑	Health District	\$ CCHD/UMC ηSNHC
H	Ensure that homeless families have access to services that lead to self-sufficiency	Make the provision of childcare assistance to homeless families with children a priority						☑	SNHC	\$ State of Nevada η EOB, State Welfare

Homeless Strategic Plan
HUD Consolidated Plan 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Work to improve criminal justice system response to homeless	Work with Metro Police to prevent inappropriate placement of mentally ill in jail		ϕ				Salvation Army	\$ Safe Haven η Mental Health Coalition, Metro HELP Team
		Support continuation and expansion of the Metro HELP Team within Clark County and to other jurisdictions				ϕ		SNHC Advocacy and Public Awareness Cmtes	\$ Local Jurisdictions η Local Jurisdictions
		Encourage Metro to provide training to all officers on how to deal with homeless			ϕ			SNHC Advocacy and Public Awareness Cmtes.	\$η Metro
H	Improve outreach to non-downtown homeless	Outreach to homeless in parks and weekly's					ϕ	SNHC	\$ ESG, CDBG, η CCSD
		Increase the number of drop-in centers and outreach teams, and ensure they are geographically disbursed throughout the region			ϕ			SNHC Public Awareness Committee	\$ ESG, CDBG η FRC's, IHN, Faith Community
		Develop card with direct phone #'s for outreach workers to use for homeless	ϕ					SNHC	\$ Utility Companies
H	Ensure the provision of case management and examine ways to improve/enhance case management services for homeless clients	Continue to fund case management services					ϕ	Local Jurisdictions	\$ ESG, SHP, CDBG
		Provide training opportunities free of charge or lower fee to homeless programs providing case management					ϕ	SNHC	\$η Local Jurisdictions, UNLV/CCSN, United Way, Americorps

Homeless Strategic Plan
HUD Consolidated Plan 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Provide for basic needs, such as food, toiletries and transportation	Provide food and personal item vouchers, access to clothing, and public transit vouchers to homeless people to access services, school, employment training and new employment opportunities					∅	Service Providers	\$ ESG
H	Increase legal and health services for homeless, including mental health as well as addiction treatment for alcohol, drugs, and gambling addictions	Expand WestCare Detox and develop a Modified Medical Detox facility					∅	WestCare	\$ State of Nevada, Federal Funds
		Increase by 100 the number of beds for assessment and treatment of those homeless with alcohol/drug/gambling problem					∅	WestCare, EOB	\$ BADA, SHP η Mental Health Coalition
		Create collaboration with the Dental and Law schools at UNLV for internships and volunteer opportunities					∅	CCHD, UMC, Public Health Services Programs	\$ Foundations η Medical professionals, local business
		Initiate state legislation for a 3¢ tax on alcohol for substance abuse treatment					∅	Local Jurisdictions	η Advocacy Groups
H	Provide street-based education and outreach, including drug/alcohol treatment, counseling, and provision of I&R, especially for non-service using males	Continue Stand Down as way to reach out to homeless					∅	SNHC	\$ Business η Volunteers
		Support activities to outreach homeless veterans in dispersed locations					∅	Local Jurisdictions	\$ ESG η SNHC

Homeless Strategic Plan
HUD Consolidated Plan 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Work cooperatively with the Division of Mental Health and Developmental Services to facilitate the placement of homeless mentally ill into permanent, housing with supportive services	Place 250 mentally ill homeless clients in permanent housing by working with MHDS					∅	MHDS, SNHC, Salvation Army, WDC, EOB, Catholic Charities	\$ HOME, Tax Credits, CDBG, SHP
M	Enhance education and employment services available to the homeless, creating unique approaches to the special needs of this population	Support Catholic Charities in development of new employment center and support employment programs for the homeless			∅			Catholic Charities	\$ Reynolds Foundation η DOL, NVDETR
		Work with local employers to develop agreements for hiring formerly homeless individuals			∅			Employment Development Programs	\$ Foundations, DETR, ESG, Title XX η Americorps, Culinary Union
H	Continue to empower the homeless population to become more involved in the planning process	Continue to solicit and include homeless and formerly homeless persons in CoC, Consolidated Plan planning processes					∅	Local Jurisdictions	η Citizen's Committees, SNHC
		Encourage the continuation of tenant councils in shelters and transitional housing facilities					∅	Homeless Service Providers	η SNHC
Work to coordinate the service delivery system to avoid unneeded duplication, improve services, and promote collaborations to maximize funding									
M	Increase efforts to work with the faith-based community	Encourage SNHC Public Awareness Committee to meet monthly with faith-based groups to present information and learn about that groups efforts in the community					∅	SNHC	η IHN, Ministerial Associations, NCCJ

Homeless Strategic Plan
HUD Consolidated Plan 2000-2004

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
M	Coordinate long range planning efforts throughout the Valley regarding policy, funding and location of homeless services	Work with the Southern Nevada Regional Planning Coalition in formulating their long-range plan regarding policy, funding, and locations of homeless shelter and services					ϕ	SNHC	
		Continue meetings of SNHC to coordinate services and continue to work on long term policy issues and provide a united front to planning boards					ϕ	Local Jurisdictions, SNHC	
H	Advocate with the prison system/jails to adequately fund and support Street Readiness Teams	Identify resources currently available for those leaving prisons and jails			ϕ			SNHC	η Metro, CCDC, CLVDC
		Educate legislature on need for more funding for street readiness programs					ϕ	SNHC Advocacy Committee	\$ State of Nevada
		Support continuation of VA/Help Team “Street Readiness” program					ϕ	VA, HELP Team, CCDC, CLVDC	\$ VA η Women’s Prison System, Friends Outside, Help of S.N., NV Business Services
H	Work with the Clark County School District to increase the number of Homeless Outreach Workers assigned to serve the homeless student population	Support efforts of outreach workers by providing information on services, phone # cards, and referrals					ϕ	CCSD	\$ CCSD, Title I η SNHC
H	Create a shared database to ensure homeless clients are being served and to reduce duplication of services	Complete research and apply for funding to create a Southern Nevada management information system on homeless		ϕ				SNHC MIS Committee	\$ SHP, Private Industry, United Way

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
M	Increase and improve upon Consortiums as a service-delivery model	Encourage collaborations between organizations, with one acting as fiscal agent, to apply for an item, then creating MOU's to provide item to other agencies					∅	Homeless Service Providers	\$ SHP, DETR, Foundations, ESG, CDBG η CAT, SNAMH
		Create or support existing programs that duplicate success of consortiums model					∅	MASH, SNHC	\$ Foundations, ESG, CDBG η Cannon Sr. Ctr., MASH
M	Improve the capacity of local organizations at all levels	Work with SNHC to advocate for training and development for non-profits (professional training, board training, etc.)					∅	SNHC, Local Jurisdictions	\$η United Way
Provide services for homeless unaccompanied youth									
H	Increase the independent life skills of homeless and runaway youth (i.e. job skills, addictions recovery, budgeting, education, etc.)	Support organizations that provide life skills training and basic services to homeless unaccompanied youth					∅	Nevada Partnership for Homeless Youth	\$ ESG, SHP, Youthbuild, DHR, TANF
		Support the creation of a Drop-in Center for homeless unaccompanied youth (shower, food, telephone use, sleep, relax)					∅	Nevada Partnership for Homeless Youth	\$ DHR, ESG, TANF η Faith Community, local business
		Support the creation of emergency shelter for homeless unaccompanied youth					∅	Nevada Partnership for Homeless Youth	\$ DHR, ESG, TANF η Faith Community
		Support provision of alcohol/drug/gambling treatment for unaccompanied youth					∅	Nevada Partnership for Homeless Youth	\$ DHR, ESG, TANF η Faith Community

Obstacles to Meeting Underserved Needs

A nearly 100-year-old State statute prohibits emergency shelter providers from serving homeless unaccompanied youth without the consent of parents. Recognizing that a gap in services exists, the community has formed the Nevada Partnership for Homeless Youth and will be working to eliminate the obstacles to serving this population. The homeless coalition, which includes representation from the City, is working to have this statute changed so that the homeless youth, who are perhaps more vulnerable than adults, can access the same services. Until this obstacle is removed, the strategies for providing services to homeless unaccompanied youth cannot be fully implemented.

Institutional Structure

Federal, State and Local Agencies

In Southern Nevada, we are fortunate to have all levels of government involved in the ongoing planning and implementation of the community's care system for the homeless. Staff from the US Department of Veterans Affairs, Clark County, the Cities of Las Vegas, North Las Vegas and Henderson, and staff from the State of Nevada's Housing Division, Employment Security Division and Medical Assistance Programs regularly attend planning and committee meetings and lend staff support to Coalition needs. The U.S. Department of Veterans Affairs recently opened its Community Based Outreach Clinic, which specifically serves the homeless veterans' need for health care and access to financial benefits. Additionally, each of these agencies works cooperatively to remove any bureaucratic barriers presented by the need to account for services.

Government Agencies

City of Henderson	State of Nevada MOMS Program
City of North Las Vegas	Clark County, University Medical Center
State of Nevada Housing Division	City of Las Vegas, Housing Authority
City of Las Vegas, Neighborhood Services	Housing Authority of Clark County
Clark County Community Resources Management	Clark County School District
Clark County Social Services	US Department of Veterans Affairs
Las Vegas Metro Police Dept B HELP Team	Clark County Health District
State of Nevada Employment Security Division	Job Corps B State of Nevada
Child Protective Services/Children's Youth Division of Family Court	Clark County Public Guardian
Nevada State Department of Motor Vehicles	Adult Mental Health, State of Nevada

Non-Profit Organizations

The vast majority of agencies providing housing and services to homeless persons in the region are nonprofit organizations. They have participated in the planning and implementation process through Southern Nevada Homeless Coalition planning forums, general membership meetings, and representation on the Consolidated Plan Homeless Focus Group and through relationships with local government.

Private Industry Businesses and Civic Organizations

Having the support and involvement of the local business industry and of civic organizations has been an indispensable part of the success of the Southern Nevada Homeless Coalition and the Las Vegas Valley care system. Most of the following businesses originally got involved in the Homeless Coalition and became aware of homeless issues through their participation in the annual Stand Down for the Homeless. Many have expanded their involvement and level of commitment to attending Homeless Coalition meetings regularly, and/or being involved year-round in homeless service provision and planning. Those organizations that have exhibited a higher and ongoing level of commitment to programs other than the annual Stand Down are identified with an (*) asterisk.

Business, Foundations, Faith Community and Civic Organizations

Mirage Resorts, Inc.*	Don Reynolds Foundation	Bank West
Fremont Street Experience, Inc.*	MGM Grand Hotel & Casino	Industrial Property Group
Las Vegas Convention & Visitors Authority*	Montgomery Wards Credit Corporation	U.S. Bank
Nevada State Bank*	Wells Fargo Bank	KLAS TV-8*
Norwest Bank	Silver State Disposal Service	Kaufory, Armstrong & Company
Pioneer Citizens Bank*	SuperCuts*	St. James Catholic Parish
Household Bank	Las Vegas Sun Newspaper*	St. Viator Catholic Parish
GE Capital	Boulder Dam Area Council Boy Scouts of America*	Unitarian Universalists
B'nai B'rith of Greater Las Vegas*	CitiBank*	Wellspring Thrift
Culinary Union, Local 226*	NexTel Communications*	Charles Stewart Mott Foundation
Greyhound Exposition Services*	Reddy Ice	Lied Foundation
Hard Rock Café Restaurant*	Fertitta Foundation*	Treasurer Island
Pizza Hut*	Planet Hollywood	Andre Agassi Foundation
Alexis Park Resort	United Way of Southern Nevada*	Valley Outreach Synagogue
Boyd Foundation	Christ the King Catholic Church*	Westminster Presbyterian Church
San Francisco Sally's formal Wear	All Saints Episcopal Church	St. Thomas More Catholic Community
Salvation Army		Celebration United Methodist

Technical Assistance

Within the Las Vegas Valley, there are many resources for technical assistance in planning programs and services for the Continuum of Care system. These include private nonprofit organizations, education/research institutions, and private consultants. Individual service and housing providers have received assistance in understanding and participating in the planning process, and the Southern Nevada Homeless Coalition has received assistance in collecting information and analyzing needs.

Organization

Commitment and Activity

Clark County and City of Las Vegas	Assists in the development and planning for Continuum of Care; facilitates meetings, and assists agencies in application preparation
Local Initiatives Support Corporation (LISC)	Creates community development corporations, focusing on creating community and neighborhood response to critical issues, particularly to housing and infrastructure development

Organization	Commitment and Activity
FEMA Management Board	Provides technical assistance and funding recommendations for basic services of homeless needs
United Way of Southern Nevada	Provides assistance on homelessness and information/referral services; also offers professional training such as grant writing and strategic planning, as well as a continuing education Certificate in Non-Profit Management.
University of Nevada, Las Vegas	Provides Masters and Bachelors degrees in professional fields; provides professional training through its Continuing Education Program.
Enterprise Foundation	Provides assistance in program development
HUD	Provides technical assistance to state, local governments and nonprofit agencies
Howard Cannon Center for Research and Policy Study	Designs the survey of homeless participants at each year's Stand Down convention; organizes the data analysis and encourages students from all disciplines to study homeless issues.
Affordable Housing Resource Center	Technical assistance to non-profit housing developers

Gaps in Institutional Structure

The institutional response to youth exists through the foster care and juvenile justice system. However, neither is adequate to respond to the needs of homeless unaccompanied youth. Currently, only WestCare offers some assistance to homeless (runaway/throwaway) youth in Clark County. WestCare does not have an institutional financial commitment for this population and must use funds earmarked for other low-income populations. Further, state statute prohibits emergency shelter providers from serving this population. Recognizing that a gap in services exists, the community has formed the Nevada Partnership for Homeless Youth and will be working to eliminate the barriers to serving this population. It is hoped that existing service providers will be able to expand their current services to include this population. Without a subsequent increase in funding, service providers will be forced to use already scarce resources to serve even more homeless individuals.

Nevada State Mental Health, while attempting to serve the mentally ill, has received reduced funding over the past decade. Unfortunately, the population of severely mentally ill has increased substantially leaving many severely mentally ill persons homeless and without support or treatment. The non-profit providers of mental health services have not been able to fill the gap in services due to the extent of the problem.

The SNHC members have noted an increase in elderly homeless, particularly elderly women. All providers agree that many more senior women are presenting for services. Many of the transitional housing programs must turn them away, as they do not meet several of the criteria such as children in the household or the ability to be readily employed and quickly returned to self-sufficiency. Currently, only Catholic Charities offers a transitional housing program targeting the elderly. MASH has been the primary provider of free shelter for up to four months for the elderly women. However, multiple barriers (age, some mental health issues, and lack of income sufficient to afford housing) are challenging their ability to assist both senior women and men. The Homeless Coalition is considering ways to meet the emergency housing needs more effectively of this fragile population. In an attempt to meet the permanent housing needs of seniors, Catholic Charities will be constructing the McFarland Apartments using a HUD Section 202 grant. Directly across from McFarland Apartments, Nevada HAND will be constructing Tropical Pines, an affordable senior complex, using Low Income Housing Tax Credits and HOME funding. The Salvation Army is building a 60-unit Section 202 senior development near the Community College of Southern Nevada in North Las Vegas called Silvercrest. Catholic Charities is also planning to construct senior units at the corner of Martin Luther King and Carey at the Community Resources Campus.

Coordination

One of the purposes of the Southern Nevada Homeless Coalition is to facilitate the development of an unobstructed ladder of access to services and programs that strengthen self-sufficiency and self-determination. The monthly meetings are attended by the policy makers as well as many line-staff, resulting in the kind of networking that facilitates the movement of homeless clients from one component to another.

Case managers, working one-on-one with homeless persons, are a critical link in helping homeless persons assess their needs and move through the continuum of care. Each component of the continuum of care - outreach, emergency, transitional and permanent housing and services - allows case managers to shepherd a client through the system in accordance with each client's needs.

The next level of linkage consists of structured relationships between agencies. There are the formal consortia referenced earlier, and less formal agreements and sharing of resources among agencies that serve non-homeless and those that serve the homeless. To avoid duplication of efforts and inefficiently using scarce resources, agencies work together to meet clients' needs, regularly referring clients to one another's programs. These collaborative relationships are formed among and between independent nonprofit agencies and governmental agencies.

In the upcoming year, the Homeless Coalition will research central computer database systems and recommend a system that can be utilized by each of the homeless service providers to more readily share information and better serve the clients.

COMMUNITY DEVELOPMENT PLAN

Introduction

Community development is the means whereby citizens can exert influence and control over the basic decisions that affect the way in which they live and how they will live (i.e., “quality of life”). Through the citizen participation and consultation process, neighborhood plans and designated revitalization areas, residents decide what “a suitable living environment” means to them and they can tangibly see the results of their input through improved streets and sidewalks, additional public facilities like parks and recreation centers, and the provision of cultural, recreational and improvement programs for young and old alike. In this way, government is not seen as a distant and indifferent entity, but instead is an active and positive partner working with the community to translate the promises of democracy into a better life for all.

This section of the Consolidated Plan is concerned with establishing the needs of the HCP Consortium area with respect to infrastructure, public facilities, crime prevention, and economic improvements. While the Consolidated Plan addresses in large part the housing needs of Southern Nevada, it must also address the provision of a suitable living environment.

Non-housing CDBG activities are described for the HCP consortium, which is composed of two entitlement communities, the Urban County Consortium and the City of Las Vegas. The Urban County Consortium consists of Unincorporated Clark County and the Cities of North Las Vegas, Boulder City and Mesquite. The Urban County Consortium non-housing plan was developed under the Cooperative Agreement for Housing and Community Development and ensures that housing and non-housing community development activities are performed jointly within Clark County, North Las Vegas, Boulder City and Mesquite. The second listing of CDBG funded activities are based on non-housing community development needs specified by the City of Las Vegas.

The non-housing community development plan of the HCP Consortium follows the CDBG priorities as outlined by HUD's CDBG goals. The first of these goals is to provide decent housing. Efforts to achieve this goal include assisting homeless persons obtain affordable housing, preserving current levels of affordable housing, providing additional affordable permanent housing on a non-discriminatory basis to all Americans, and increasing the stock of supportive housing for people with special needs.

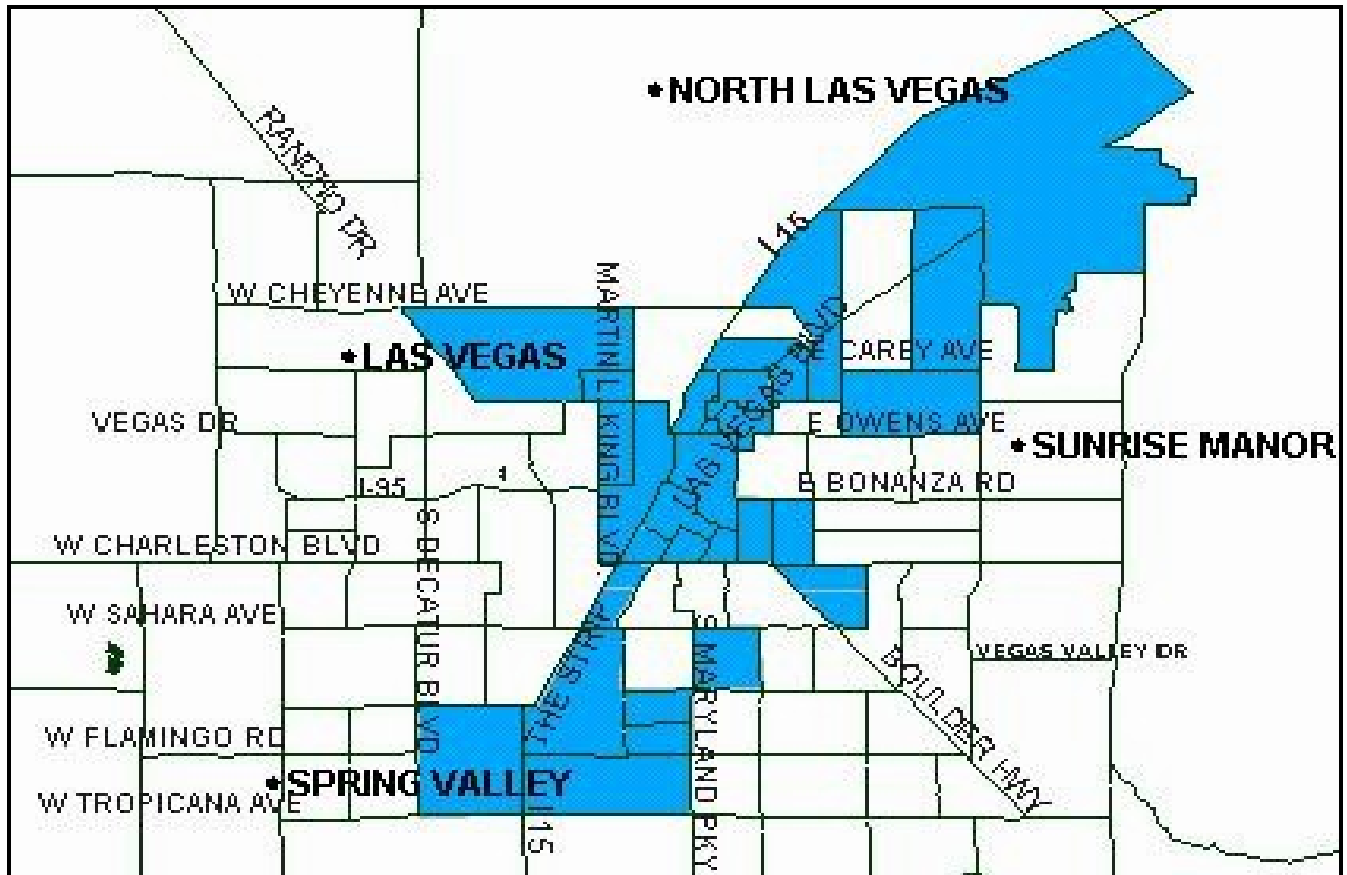
The second goal of locally funded non-housing programs is to provide all citizens with a suitable living environment. The HCP achieves this goal through the improvement of the safety and livability of neighborhoods and the quality of facilities and services available in those neighborhoods. Reducing income disparities by deconcentrating housing opportunities and stimulating neighborhood development are also included.

Finally, the HCP Consortium has incorporated the HUD's third major statutory goal for non-housing development needs, that of expanding economic opportunities. Efforts here have focused on

creating jobs accessible to those with low-and very-low incomes, providing credit opportunities to community development projects that promote long-term economic and social viability, the guaranteeing the empowerment and subsequent self-sufficiency of low- and very-low income persons living in Federally assisted and public housing.

The majority of CDBG activities take place within the CDBG eligible census tracts outlined in Map 4. The eligible census tracts were designated based upon the 1990 Census. Therefore, the areas may change once the 2000 Census information is available. However, until that time, the CDBG eligible census tracts will remain as indicated.

Map 4
CDBG Eligible Census Tracts
(Low/Mod Population of 49.5% or more)



Citizen Participation and Consultation

Building a community development strategic plan based upon citizen input, the CDBG Consortium and City of Las Vegas decided to use the information generated through the recent Southern Nevada Empowerment Zone application. The boundaries of the proposed Southern Nevada Empowerment Zone (SNEZ) coincide with those areas in the Cities of Las Vegas and North Las Vegas that are eligible to receive CDBG funds. While there are additional census tracts in North Las Vegas, Las Vegas and Clark County, which are eligible for CDBG funds, the proposed SNEZ area is the most distressed area of the valley. Further, the challenges faced in the SNEZ neighborhoods are the same challenges faced in the non-SNEZ areas. Therefore, the information gathered on issues through the SNEZ Strategic Plan process apply to all CDBG eligible neighborhoods. These assumptions are supported by the non-profit applications for funding.

The Community Participation Program for the SNEZ Strategic Plan took place from April through October 1998 and included the following five techniques:

- SNEZ Strategic Plan Monthly Newsletters and Home Page/Website Updates
- Community Workshops
- Focus Group Meetings and Survey
- City Councils and County Commission Adoptions
- Project Planning Team Coordination and Management

SNEZ Strategic Plan Monthly Newsletters and Home Page/Website Updates

Three issues of the SNEZ Strategic Plan Newsletter were published during the months of June/July, July/August and August/September 1998, at which time the heaviest community involvement activities were underway in the strategic planning process. The newsletter presented a review of project progress, announced upcoming community involvement events and identified key issues or concepts under consideration. Each newsletter was published in English and Spanish, mailed to all participating community group, neighborhood associations, service organizations, governmental entities and an every increasing list of community members involved in the process. A supply of each issue of the newsletters was also distributed to all community centers, Family Resource Centers and other active community gather locations throughout the SNEZ Target Area. The websites for Clark County, the City of Las Vegas and the City of North Las Vegas were also updated regularly throughout the strategic planning process to provide the same information as the newsletters.

Community Workshops

Three series of Community Workshops were held throughout the strategic planning process at key intervals in the process. Each series of workshops took place on sequential evenings (Tuesday, Wednesday, Thursday) in each of the geographic regions within the SNEZ Target Area: West Las Vegas, North Las Vegas, and East Las Vegas. Translating services were provided to individual Spanish-speaking residents, and many meetings were conducted in both English and Spanish to encourage participation of all attending, particularly in East Las Vegas. Overall, approximately 450

community members attended the workshops, representing all existing community organizations, neighborhood associations, merchant groups, residents at-large and minority population within the Target Area.

Focus Group Meetings and Survey

Three series of Focus Group Meetings were also conducted throughout the strategic planning process at key intervals in the process. Each series of Focus Group Meetings took place on sequential days (Tuesday AM and PM, Wednesday AM and PM) and included all State, regional and local interest groups, stakeholders and interested citizens at-large in the following critical areas addressing the social, economic and physical aspects of community revitalization.

- Economic Development
- Neighborhoods, Housing, Public Safety and Community Facilities and Services
- Social and Human Services
- Education and Job Readiness

City Councils and County Commission Adoptions

A presentation of the final draft of the SNEZ Strategic Plan was made to each participating jurisdiction for approval before submission to HUD. Each appropriate governing body approved the plan.

Project Planning Team Coordination and Management

Throughout the strategic planning process, the Project Planning Team composed of staff from Clark County, the City of Las Vegas, the City of North Las Vegas, and the consultant team, met regularly to plan community involvement events, program project activities, review draft work products, address various issues that arose during the process and coordinate documentation of commitments.

North Las Vegas Consolidated Planning Meetings

In an effort to ensure that housing and community development needs for all of North Las Vegas were considered (not just SNEZ census tracts), four community meetings were held in December 1999 and January 2000. One meeting was specifically designed for input from the non-profit community, the second meeting was held at the public library for direct citizen input, the third meeting was held at a public housing development to obtain the views of public housing residents, and the fourth meeting was held at a senior center. The input from those meetings is reflected in the CDBG and HOME priorities identified in this plan.

Las Vegas Consolidated Planning Meetings

As noted in previous sections, to ensure citizen and non-profit participation in the Consolidated Plan process, the City of Las Vegas sponsored five "Community Needs and Priorities Review" public meetings in October 1999. An additional public hearing was held on April 5, 2000 while the draft document was available for public review and comment.

Clark County Community Development Planning

The public service priorities established in this document are based upon needs expressed by non-profit applicants for CDBG funds, through the CDAC and, as outlined above, through the broad based SNEZ Strategic Plan development process.

In preparation for the 2000-2004 Consolidated Plan, Clark County sought HUD pre-award approval for a five-year Capital Improvement Plan for the expenditure of CDBG capital monies. The Community Development Advisory Committee (CDAC), which makes recommendations to the Board of County Commissioners on the expenditure of CDBG funds, had previously approved several of the projects selected for pre-award approval. The other projects were chosen based upon Commission, non-profit, and CDAC priorities.

Clark County received the HUD pre-award approval for the Capital Improvement Program. Through this process, the County can advance funds for previously approved CDBG projects and then pay them back from grants for the period 2000-2004. With the HUD pre-award approval accompanied by a County line of credit, CDBG projects will be completed years earlier than previously possible.

Key dates for the approval of the HUD pre-award citizen participation are as follows:

- April 20, 1999, the Board of County Commissioners considered and approved a five-year CDBG Capital Improvement Plan for FY 2000-2004. This plan assumes a level capital allocation of \$3,206,984 over the five-year period.
- May 4, 1999, the Board conducted a public hearing to take comment on the FY 2000-2004 CDBG Capital Improvement Plan. Following the close of the public hearing, the Board then moved for the Capital Improvement Plan for the County's share of the CDBG monies to be submitted to HUD.
- May 5, 1999, Community Resources Management submitted the pre-award request to HUD.
- August 4, 1999, HUD sent a letter approving that portion of the Capital Improvement Plan not previously approved by their earlier March 30, 1998 and December 24, 1998 letters.
- September 7, 1999, the Board of County Commissioners approved the allocation of \$5 million from the County Capital Projects Fund (437) to pre-fund costs associated with the FY 2000-2004 CDBG Capital Improvement Plan.

Community Development Strategic Plan

This section describes each jurisdiction's non-housing community development priority needs eligible for assistance under HUD's community development programs. These needs are arranged by CDBG category. The specific community development objectives, including economic development activities that create jobs, are outlined.

All CDBG related activities will primarily assist people at or below 80% of AMI. A significant portion of past funded public service programs have focused on people at 50% of AMI. Income groups are defined as follows:

Extremely low-income	30% or less of area median income
Low-income	50% or less of area median income
Moderate income	80% or less of area median income

Figure 55 outlines the priority categories that will be addressed over the next five years. The following provides an explanation of what this means:

*High Priority: Activities to address this need will be funded by the HCP Consortium during the five-year period of this plan.

*Medium Priority: If funds are available, activities to address this need may be funded during the five-year period of this plan.

Low Priority: The HCP Consortium will not fund activities to address this need during the five-year period of this plan.

No Such Need: It has been found that there is no need or the HCP Consortium shows that this need is already substantially addressed.

*Please note that the citizen committees that make recommendations to the governing bodies of the HCP Consortium will judge specific projects on their individual merit. Therefore, while a particular project may address the needs of a High Priority group, it may or may not be funded at the discretion of the governing bodies based upon the recommendations of the citizen committees.

Figure 55
 HUD Table 2B
 Community Development Needs
 HCP Consortium

PRIORITY COMMUNITY DEVELOPMENT NEEDS	Priority Need Level High, Medium, Low, No Such Need		Estimated Priority Units		Estimated Dollars to Address	
	Urban County Consort.	City of Las Vegas	Urban County Consort.	City of Las Vegas	Urban County Consortium	City of Las Vegas
PUBLIC FACILITY NEEDS						
Neighborhood Facilities	H	H	0	2	0	\$3,000,000
Parks and/or Recreation Facilities	H	H	10	5	\$24,000,000	\$14,400,000
Health Facilities	H	H	4	4	\$2,000,000	\$2,000,000
Parking Facilities	N	N	0	0	0	0
Solid Waste Disposal Improvements	N	N	0	0	0	0
Asbestos Removal	N	N	0	0	0	0
Non-Residential Historic Preservation	M	M	1	5 units	\$100,000	\$500,000
Other Public Facility Needs	M	M	9	5	\$10,000,000	\$4,000,000
INFRASTRUCTURE						
Water/Sewer Improvements	M	L	20 miles	0	\$10,000,000	0
Street Improvements	L	H	0	40 miles	0	\$24,000,000
Sidewalks	M	H	30 miles	15 miles	\$6,000,000	\$3,000,000
Sewer Improvements	L	L	0	0	0	0
Flood Drain Improvements	L	M	0	1	0	\$200,000
Other Infrastructure Needs	M	M	0	0	0	0
PUBLIC SERVICE NEEDS						
Handicapped Services	H	H	500	1,000	\$100,000	\$200,000
Transportation Services	H	M	500	100	\$100,000	\$50,000
Substance Abuse Services	H	H	8,000	5,000	\$200,000	\$250,000
Employment Training	H	H	1,200	1,200	\$200,000	\$540,000
Health Services	H	M	25,000	25,000	\$2,500,000	\$2,500,000
Other Public Service Needs	H	H	100,000	106,300	\$2,000,000	\$2,000,000

PRIORITY COMMUNITY DEVELOPMENT NEEDS	Priority Need Level High, Medium, Low, No Such Need		Estimated Priority Units		Estimated Dollars to Address	
	Urban County Consort.	City of Las Vegas	Urban County Consort.	City of Las Vegas	Urban County Consortium	City of Las Vegas
ANTI-CRIME PROGRAMS						
Crime Awareness	L	M	0	4 Nbd's	0	\$100,000
Other Anti-Crime Programs	M	M	100	4 Nbd's	\$100,000	\$100,000
YOUTH PROGRAMS						
Youth Centers	M	H	2	2	\$2,000,000	\$2,000,000
Child Care Centers	H	H	4	6	\$2,000,000	\$3,000,000
Youth Services	H	H	20,000	16,000	\$4,000,000	\$3,500,000
Child Care Services	H	H	3,000	6,000	\$4,500,000	\$9,000,000
Other Youth Programs	H	H	4,000	4,000	\$1,000,000	\$1,000,000
SENIOR PROGRAMS						
Senior Centers	H	H	4	2	\$8,000,000	\$2,000,000
Senior Services	H	H	10,000	8,000	\$1,100,000	\$1,000,000
Other Senior Programs	H	M	2,000	2,000	\$400,000	\$250,000
ECONOMIC DEVELOPMENT						
Rehab; Publicly- or Privately-Owned Commercial/Industrial	M	H	10	50	\$250,000	\$1,000,000
CI Infrastructure Development	M	H	10	30	\$250,000	\$1,000,000
Other Commercial/Industrial Improvements	L	M	0	15	0	\$1,000,000
Micro-Enterprise Assistance	H	H	20	45	\$500,000	\$1,000,000
ED Technical Assistance	H	H	25	15	\$300,000	\$150,000
Other Economic Development	M	M	30	30	\$500,000	\$500,000
PLANNING						
Planning	M	H	10	10	\$400,000	\$500,000
TOTAL ESTIMATED DOLLARS NEEDED:					\$82,500,000	\$81,240,000

Priority Community Development Needs

The priority community development needs were developed based upon the input provided during the SNEZ application workshops and focus groups, the four community meetings held by the City of North Las Vegas and community meetings held by the City of Las Vegas.

Public Facilities

Community input identified the need for youth, senior and other public facilities. Development of community centers providing social and human services, or service information and referral are a key neighborhood needs. The aspiration for these centers is that they would be neighborhood focal points offering a multitude of services to local residents which meet the needs of all residents as they progress through the life cycle, and become actively empowered within their communities to carry out neighborhood revitalization activities. This includes providing for senior centers both as separate facilities and as a part of a comprehensive community center.

Childcare centers are considered an essential component of job training and job placement programs. Considering the prevalence of female-headed households in CDBG eligible areas, the lack of access to free or inexpensive childcare is a major detriment to those willing to take advantage of job training and placement programs. The community centers identified above are also seen as opportunities to provide childcare services.

Other activities identified as priorities include increasing the number of neighborhood parks, improving both equipment and safety in existing parks, developing and expanding community recreational centers, opening schools after hours for recreational and educational activities and expanding participation in musical organizations at the middle and high school levels. The HCP Consortium recognizes the need to pursue consolidation of recreational facilities with cultural and arts facilities which provides for an efficient use of public funds. Non-residential historic preservation is a priority for the Las Vegas Downtown Revitalization.

At the State level, Nevada has a higher percentage of the population who are medically uninsured (22.6%) than any other state in the United States. Nevada also has one of the highest teen pregnancy rates in the United States. In 1990, Nevada ranked second behind Georgia with a teen pregnancy rate of 107.4 per 1,000 women aged 15-19. Clark County has the highest teen pregnancy rate in Nevada. Finally, the number of AIDS cases reported annually in Nevada is 44 per 100,000, which is 20% above the national average. There is a need for additional health facilities to accommodate those who cannot afford the high price of medical and dental care, and to provide services to pregnant teens and those with HIV/AIDS.

Infrastructure Improvements

Infrastructure includes transportation facilities such as roads, bridges and sidewalks, sewers, and storm drainage systems. The installation of infrastructure is dependent upon development wherein fees proportionate to the usage attributed to such development are collected to pay for needed

improvements. However, in those portions of low-income census tracts (CDBG Eligible Areas) that coincide with the older sections of the cities and county, infrastructure is aging and new development lacking. Therefore, the local governments must look to alternative funding sources to construct or reconstruct components of the infrastructure system.

Las Vegas will continue to work on improving the image of target neighborhoods through clean ups, improving existing streets and sidewalks and street lighting. Also identified as needs that will be addressed in revitalization areas are housing and commercial rehabilitation which are considered necessary if the neighborhoods are to attract private investment and encourage local residents to participate in rehabilitation efforts. North Las Vegas plans to institute a pilot Neighborhood Beautification Project to revitalize commercial and residential properties in a specified low-income area. While the current five-year Clark County Capital Improvement Plan does not provide funding for these types of activities, they are not precluded from receiving CDBG funds as part of the next five-year Capital plan.

Many public facilities require design modifications to accommodate the accessibility needs of disabled persons. Local jurisdictions are required to comply with un-funded Federal mandates including handicap accessibility requirements for public sidewalks, while Sections 10 and 11 of The Uniform Building Code contain accessibility requirements for on-site structures, facilities and paths used by the public. The City of North Las Vegas will continue its accessibility program for sidewalks in lower income neighborhoods as needed and may expand the program to include public buildings and parks. Boulder City will continue to expend its CDBG funds for accessibility improvements, particularly in parks and public facilities. Las Vegas and Clark County also recognize that accessibility improvements may be needed, particularly for non-profit agencies.

Public Services

The human and social service needs identified during the strategic planning process are as varied as the population, and range from improved health care to assisting the homeless, to family planning. In general, the issues run the entire life cycle, beginning with the issue of teen pregnancy prevention. The first issue is to ensure that people who have children are equipped to provide loving, nurturing environment that lay the groundwork to end the cycle of poverty. After families are started, flexible and quality childcare facilities should be available to meet the demands of single parents and families working in the 24-hour a day milieu of the Las Vegas Valley. Parenting classes should be available to ensure that the parent(s) effectively cope with the responsibilities of parenthood. As children grow, a variety of programs are necessary to positively channel their energies into their school, family and social environments.

Special services are needed for the mentally challenged, physically and developmentally disabled, the homeless, people with HIV and other debilitating afflictions, people who are addicted to gambling, and people who immigrate to the area from other countries and who do not speak English.

Within those areas with high Hispanic populations, the need for translation services and assistance in accessing existing human services is considered a high priority. These areas also need programs that would assist residents in receiving US citizenship classes and immigration services. Throughout this entire life cycle and encompassing the demands of the special populations listed above, is the

need for quality and affordable health care services, including dental and mental health care.

Human service needs identified by community residents include programs which strengthen family support structure by providing a broad array of family services, including parenting classes, family planning counseling, child abuse and neglect prevention and neighborhood health clinics. Drug abuse by parents and youth is a deterrent to family unity and a problem that must be treated through a number of venues, including drug prevention programs for youth and treatment program for youth and adults. There continues to be a need for youth activity programs to divert young people from drug experimentation and abuse, and membership in neighborhood gangs. The need for senior services, including respite care and transportation, continues to grow with the population of senior citizens moving to Clark County.

Because health information is not aggregated by census tract, it is difficult to precisely document the conditions of distress in lower income areas. However, as a rule, available data clearly substantiates that impoverished children and their families, the elderly and adolescents experience higher rates of acute medical conditions, debilitating chronic diseases, accidents and psychological problems. Barriers that limit access to basic health services exacerbate these problems. These include educational barriers (lack of knowledge about preventative medical techniques), financial barriers (lack of discretionary income or insurance), socio-cultural barriers (language), transportation barriers (limited or no access to private vehicles and public transportation), and system/institutional barriers (bureaucratic policies). Additional problems that limit availability and accessibility to health care for the lower income relate to the fragmented nature of services delivered by both public and private health service providers.

Crime Prevention

Living in safe neighborhoods continues to be a major issue. The need for continued community policing, as well as other measures, such as neighborhood watch, youth diversion programs and street lighting, are responses to ensuring that neighborhoods are free from crime.

Economic Development Needs

Since the late 1980's and throughout the 1990's, Las Vegas has experienced an economic boom. Primarily fueled by the expansion of the casino/resort industry, hundreds of thousands of jobs have been created over the period. Unemployment is at a low 4.2%. However, the jobs created are primarily low-wage service sector jobs. There is a need to diversify the economy of the valley and attract higher wage employment.

The issues identified through the citizen participation process ranged from macro (large-scale development projects creating significant high quality employment opportunities) to the micro (small, startup entrepreneurial-based enterprises) scale economic development. The predominant theme intertwined among many of the issues is that the government should act as a catalyst for economic development through the provision of infrastructure necessary to support development. For example, incentives could be offered that encourage development such as expedited review,

low-interest financing, site assembly and technical assistance to small businesses.

Economic development activities will focus on providing opportunities for business expansion, as well as increasing needed neighborhood retail shopping and services in order to provide much needed jobs while addressing the current lack of essential services (grocery and drug stores) within neighborhoods. Vacant commercial properties, particularly in West Las Vegas, Downtown Las Vegas and Downtown North Las Vegas, provide opportunities to upgrade neighborhood services.

Providing capital for business expansion utilizing small business development programs (loans and grants, educational and skills training) are favored as a means to increase employment while encouraging economic development. Other means of promoting economic opportunities include offering micro-business loans, small business education and skills training, as well as office and warehouse space for start-up businesses, or incubation facilities. The need to attract private, as well as public, investment is noted, with the realization that improving the area image must be accomplished before private investment would likely occur.

Employment of area youth through summer job programs, on-the-job training, job placement, and cultural and recreational programs are methods to motivate youth to stay in school. These programs, working in tandem with job skills and life skills training, have been successfully initiated by Nevada Business Services, the Clark County School District and the Community College of Southern Nevada in the public housing projects within Las Vegas and offer a base to be built upon.

Housing and Other Community Development Issues

To prevent blight and deterioration, residents want aggressive and fair code enforcement, a wide variety of housing rehabilitation programs, property management and maintenance training, and safe neighborhoods. Expanding resident wealth is a high priority, followed by attracting and retaining middle-income residents. Improving the image, both real and perceived, for low-income neighborhoods is also viewed as important to stave off blight.

Homeownership programs are advocated as opportunities to increase the stability of CDBG-eligible neighborhoods, by providing a balance of housing tenure types, giving residents a stake in the community and assisting families to achieve economic self-sufficiency. The need to assist families in all aspects of homeownership, including mortgage, credit and property maintenance counseling and downpayment assistance programs is recognized. Housing rehabilitation, both renter and owner, is a high priority for all neighborhoods.

Considering the high number of multi-family units within all CDBG eligible areas, efforts to build single-family units as infill housing on currently vacant lots and the potential to acquire and rehabilitate existing structure for resale to owner occupants are necessary elements of a homeownership program.

Improving the image of the CDBG neighborhoods through the expeditious demolition of vacant and

boarded properties, the clean up of vacant lots, street and sidewalk improvements and exterior improvements to existing housing units are high priorities. The lack of maintenance and rehabilitation of existing properties is seen as a deterrent to current owners investing in their properties.

Acquisition and rehabilitation of existing rental properties by non-profit organizations is considered a means of retaining affordable rental housing while improving the community's housing stock. The current neighborhood-based organizations continue to need technical and monetary assistance to successfully complete neighborhood revitalization efforts.

Public Housing Non-Housing Needs

There are three public housing authorities in the Las Vegas Valley—Clark County, Las Vegas and North Las Vegas Housing Authorities. The Clark County Housing Authority properties are generally located in suburban neighborhoods that are not experiencing decline. The North Las Vegas Housing Authority properties are located in a deteriorated neighborhood with a wide variety of community development needs. Those needs include economic development activities, park and public facility improvements and housing rehabilitation. Strategies to improve these neighborhoods are covered in the North Las Vegas strategic plan. The Las Vegas Housing Authority has properties scattered throughout the city. The majority is located in distressed neighborhoods. The non-housing needs around their sites include economic development, housing rehabilitation, and a variety of social services particularly for youth and seniors. Again, strategies to meet these needs are covered by the Las Vegas neighborhood revitalization strategies.

Community Development Strategies

The following figure outlines the strategies the HCP Consortium will be pursuing for the next five years to provide community facilities and public services.

Figure 56
 Community Development Strategic Plan
 HCP Consortium

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
CLARK COUNTY									
Support the provision of new community facilities and improve the quality of existing community facilities to serve lower income residents									
H	Support development of new parks and recreation centers in eligible areas	Support funding for 1 park improvement or development and 2 recreation centers					U	CRM	\$ CDBG, Bonds
H	Assist non-profit organizations to maximize service provision through facility development or improvements	Provide funding for Community Food Bank warehouse, Opportunity Village expansion, TADC Shelter and other recommended projects			U			CRM, Community Food Bank	\$ CDBG, Foundations
Provide a variety of supportive services for low income people and neighborhoods									
H	Ensure that affordable or free legal advice is available	Support funding for programs that provide legal assistance to low-income households					U	CRM	\$ CDBG
H	Support food programs	Support funding for programs that provide for the basic needs of low income people including food and toiletries					U	CRM	\$ CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Support programs that provide specialized services to low-income households	Support funding for programs that provide a variety of services that assist households in becoming self-sufficient, such as case management						CRM	\$ CDBG
Provide supportive services and facilities for seniors and disabled									
H	Construct and/or expand senior centers	Expand West Flamingo Senior Center, develop Upland Senior Center						CRM	\$ CDBG
H	Support programs for seniors and people with disabilities	Continue to fund all types of programs that provide services to seniors and people with disabilities including transportation, respite care, employment, etc.						Service Providers	\$ CDBG η NAH
Provide supportive services and facilities for youth, particularly those considered at risk									
H	Support and expand youth intervention and diversion programs	Support provision of after-school, latchkey programs, mentoring programs, programs that provide after school and/or track break activities, scholarships for summer youth vocational training and higher education						Service Providers	\$ CDBG, CCSD, Banks
Provide for needed infrastructure improvements in low-income areas									
M	Work to ensure accessibility to all public and community facilities	Support funding for sidewalk accessibility retrofitting						NLV, BC	\$ CDBG η NAH
		Support funding for accessibility retrofitting in eligible buildings and parks						NLV, BC	\$ CDBG η NAH

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Support neighborhood preservation and improvement activities									
M	Promote increased awareness among property owners and residents of the importance of property maintenance to long-term housing quality.	Encourage property management companies and real estate agents to develop property maintenance education program					η	CRM	η Banks
M	Improve efforts to preserve housing and neighborhoods through enforcement of housing codes and/or code enforcement	Pursue the elimination of overcrowded, unsafe, and unsanitary conditions through vigorous pursuit and correction of zoning and maintenance violations to improve the quality of neighborhoods					η	CC Public Response, Building Department	\$ CDBG, General Funds
Assist families in achieving stabilization and self-sufficiency									
H	Provide affordable, quality childcare	Construct two new early childhood development centers			η			CRM	\$ CDBG, General Funds
		Support provision of tuition scholarships, particularly to parents pursuing education or employment					η	Service Providers	\$ CDBG,
H	Support comprehensive family support and development services	Increase availability of parenting and child abuse/neglect counseling					η	FYS, Service Providers	\$ CDBG, General Funds
		Provide specialized support services to teen parents					η	Service Providers	\$ CDBG, General Funds
H	Provide for transportation services	Provide public transit vouchers to low-income youth and adults to access school, employment training and new employment opportunities					η	RTC, CAT, Service Providers	\$ CDBG, CAT η EOB, CCSD, CCSN, NBS

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Provide educational opportunities									
H	Expand literacy and support community education	Support funding for vocational training programs for at-risk youth and young adults					∩	Nevada Business Services	\$ Youthbuild, CDBG
		Support computer literacy programs					∩	Service Providers	\$ CDBG, CCSD, CCSN
H	Provide specialized services for immigrant residents	Support funding for ESL, translation services, and US Citizen classes through community centers					∩	Service Providers	\$ CDBG
Provide for the economic development needs of low-income areas									
M	Provide comprehensive approach to attracting large-scale economic development	Investigate, and implement as needed, land cost discounts, low-cost development financing, expedited development reviews and approvals, infrastructure upgrades					∩	CRM	\$ Strategic Planning Community
H	Provide customized job training, placement and follow-up	Support funding for employment services					∩	Catholic Charities	\$ Strategic Planning Community
M/H	Stimulate small business development, attraction and retention	Investigate, and implement as needed, site acquisition and sale at discounts, low-cost development financing, business skills training, tutoring and mentoring, infrastructure upgrades					∩	CRM	\$ Strategic Planning Community
		Provide targeted and customized job skills training, placement and follow-up linked to new small business formation and expansion					∩	Nevada Business Services	\$ Strategic Planning Community

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
CLARK COUNTY									
Provide for affordable health care									
H	Establish or expand comprehensive neighborhood health clinics and provide health, dental, and mental health care	Complete new health clinic construction and find suitable tenant	η					Local Jurisdictions	\$ CDBG, Foundations
H	Increase substance abuse counseling and treatment facilities	Provide funding for treatment facilities					η	Service Providers	\$ CDBG, Foundations
H	Provide counseling and health services for pregnant teens	Support programs for pregnant teens and for prevention activities					η	Service Providers	\$ CDBG
Improve public safety through prevention programs									
M	Support crime prevention programs, especially for young people	Peer mediation programs					η	Service Providers	\$ CDBG
M	Upgrade street level security	Install street lighting where lacking or insufficient and ensure high level of maintenance of existing fixtures					η	CDC's	\$ CDBG η Public Works

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
CITY OF LAS VEGAS									
Support the provision of public facilities including community centers, parks and open space, health facilities and historic preservation to improve the quality of life for lower income neighborhoods									
H	Construct Community Centers to serve the various program needs of lower income neighborhoods	Develop the East Las Vegas Community and Cultural Arts Center on the Southwest corner of Stewart and Eastern Avenues. The Center will include a theater, workshops, and program space for cultural activities, senior services and library services.					∅	City of Las Vegas	\$ CDBG
		Develop a Community and Cultural Arts Center in the Downtown					∅	City of Las Vegas	\$ CDBG
H	Develop a mix of Parks and open spaces where residents of low income neighborhoods are currently under-served	Develop parks system as outlined within the Downtown Neighborhood 2000 Plan including pocket parks, neighborhood parks and open spaces for the display of public art.					∅	City of Las Vegas, CDC	\$ CDBG
H	Complete improvements on existing parks and/or open spaces where residents of low income neighborhoods are currently underserved	Complete improvements to existing parks as outlined within the West Las Vegas Neighborhood Plan					∅	City of Las Vegas	\$ CDBG
M	Support the Preservation of historic structures as part of neighborhood revitalization strategies within low income areas to create a unique district and stimulate economic activity and job creation	Support the preservation of 5 non-residential, historic structures within the Las Vegas High School Historic District for office or neighborhood commercial services requiring the provision of jobs for low or moderate-income residents.					∅	Non-Profit or For Profit	\$ CDBG, State and Federal Historic Preservation funds

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Provide health care facilities in underserved, low-income neighborhoods	Develop the Health Care Center as outlined within the West Las Vegas Neighborhood Plan at Lake Mead and Martin Luther King Boulevard. This Health Center will provide affordable medical and dental care to children					∅	City of Las Vegas	\$ CDBG
Support the provision of public infrastructure including street and sidewalk reconstruction or infill as well as street lights and landscaping as part of neighborhood revitalization efforts within lower income areas									
H	Support the reconstruction of streets within low income neighborhoods to encourage further investment through private development and increase access to existing businesses	Support the reconstruction of streets as outlined within the West Las Vegas Neighborhood Plan.					∅	City of Las Vegas	\$ CDBG
H	Support the reconstruction or infill development of sidewalks within low income neighborhoods to provide safe pedestrian access and encourage further investment through private development	Complete infill development of sidewalks as outlined within the Downtown Neighborhood 2000 Plan including Stewart Avenue to provide safe pedestrian access from residential areas to nearby neighborhood commercial districts.					∅	City of Las Vegas	\$ CDBG
		Complete the reconstruction and infill of sidewalks as outlined within the West Las Vegas Neighborhood Plan including the areas bounded by Owens Avenue, Bonanza Road, H Street and Interstate 15.					∅	City of Las Vegas	\$ CDBG
M	Install street lighting in low income neighborhoods to increase safety and complete street design improvements within neighborhood revitalization areas	Install streetlights in accordance with Streetscape and Gateway Plans as outlined within the West Las Vegas Neighborhood Plan.					∅	Local Jurisdiction	\$ CDBG
		Install streetlights in Districts as outlined within the Downtown Neighborhood 2000 Plan.					∅	City of Las Vegas	\$ CDBG
Provide affordable public services to low income residents with special needs who otherwise cannot afford to access such services									

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Improve the living conditions of individuals with special needs and assist them in overcoming the conditions which have reduced or limited their quality of life or ability to gain self dependency	Assist local, non-profit organizations providing services to Physically disabled individuals.					∅	Non-Profit	\$ CDBG
		Assist local, non-profit organizations providing services to Developmentally disabled individuals.					∅	Non-Profit	\$ CDBG
		Assist local, non-profit organizations providing services to Mentally disabled individuals					∅	Non-Profit	\$ CDBG
		Assist local, non-profit organizations providing services to individuals infected with HIV/AIDS					∅	Non-Profit	\$ HOPWA, CDBG
		Assist local, non-profit organizations providing services to individuals with drug and alcohol addictions					∅	Non-Profit	\$ CDBG
Provide affordable public services to low-income residents to improve their quality of life.									
H	Improve the quality of life for low income residents through provision of services which they could not otherwise afford to access	Assist local, non-profit organizations providing Other public/social services to low income residents including referral services, life skills, and transportation assistance					∅	Non-Profit	\$ CDBG
		Assist local, non-profit organizations providing affordable medical and dental care to low income residents					∅	Non-Profit	\$ CDBG
		Assist local, non-profit organizations providing English as a Second Language classes and/or interpretation services to low income residents					∅	Non-Profit	\$ CDBG
		Assist local, non-profit organizations providing Parenting classes to low income residents					∅	Non-Profit	\$ CDBG
H	(continued from previous page)	Assist local, non-profit organizations providing food and/or clothing and/or personal care items to low income residents					∅	Non-Profit	\$ CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
	Improve the quality of life for low income residents through provision of services which they could not otherwise afford to access	Assist local, non-profit organizations providing legal services to low income residents					∅	Non-Profit	\$ CDBG
Provide public service and public facilities to improve the quality of life for low income youth, particularly those considered at risk									
H	Improve the quality of life for low income youth through the support and/or expansion of outreach, intervention and diversion programs	Support provision of after school, latchkey programs to serve the needs of 1,000 low income youth					∅	Non-Profit	\$ CDBG
		Support programs that provide activities for youth after school and during track break to serve the needs of 3,000 low income youth					∅	Non-Profit, City of Las Vegas	\$ CDBG
		Support programs providing vocational training and incentives to obtain higher education to serve the needs of 600 low income youth					∅	Non-Profit	\$ CDBG
		Support programs providing self esteem, mentoring and recreational activities to serve the needs of 5,000 low income youth					∅	Non-Profit	\$ CDBG
Provide youth services and facilities that assist low income families achieve financial stability and self sufficiency									
H	Provide affordable, quality child care within low income neighborhoods currently underserved	Support the development and/or expansion of child care centers providing affordable, quality child care to serve the needs of 500 youth from low income families					∅	Non-Profit	\$ CDBG
		Support the operation of child care centers providing affordable, quality child care to serve the needs of 1,000 youth from low income families					∅	Non-Profit	\$ CDBG
Provide supportive services and facilities for low income seniors									

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Develop and/or expand Senior centers	Develop the Mirabelli Senior Center with classrooms, activity and multi-purpose rooms, studios, shops and office space to serve the program needs of 18,000 seniors					∅	City of Las Vegas	\$ CDBG
		Develop the East Las Vegas Community Cultural Arts and Senior Center on the Southwest corner of Stewart and Eastern Avenues. The Center will include a theater, workshops, and program space for cultural activities including senior services					∅	City of Las Vegas	\$ CDBG
H	Support programs improving the quality of life and access to services for Seniors	Support the operation of organizations providing outreach, transportation, meals and other basic needs to serve 5,000 seniors					∅	City of Las Vegas	\$ CDBG
Provide economic development opportunities to low income residents to improve their standard of living and quality of life.									
H	Provide jobs for low and moderate income residents through the development of small businesses	Support the operation of the Las Vegas Business Incubator Center program to assist a total of 250 low and moderate income residents obtain jobs					∅	City of Las Vegas	\$ CDBG, EDA
H	Provide public loans to facilitate the development and expansion of businesses or to rehabilitate commercial property for the purpose of generating or retaining employment for low and moderate income residents	Support the operation of the Economic Development Revolving Loan Fund Program to assist 30 businesses through provision of low interest loans wherein at least one job is created or retained for a low or moderate income resident per \$35,000 of loan value					∅	City of Las Vegas	\$ CDBG, EDA

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Provide for the economic development needs of low income neighborhoods									
H	Encourage private sector business development to attract services and jobs which perpetuate further economic development within low income neighborhoods	Continue to support the development of the existing 75-acre business park at the northwest corner of Martin Luther King Boulevard and Vegas Drive in the West Las Vegas Neighborhood Plan area.					∅	Non-Profit or For Profit, City of Las Vegas	\$ CDBG, EDA, Private Sector
Provide Planning efforts in support of the Consolidated Plan goals to improve housing, create suitable living environments and expand economic opportunities									
H	Encourage the Neighborhood Planning Process through development of new Neighborhood plans and the implementation of existing Neighborhood plans	Support the efforts of the Neighborhood Services Department in developing additional Neighborhood plans to achieve the greatest level of citizen participation in identifying community needs as well as implementing the goals of the Downtown Neighborhood 2000 Plan and the West Las Vegas Neighborhood Plan					∅	City of Las Vegas	\$ CDBG
H	Support the development of planning documents on a City wide scale in cooperation and coordination with Neighborhood plans	Continue to update the Elements within the City's general plan as the population continues to grow and evaluate the implementation of objectives toward the accomplishment of Neighborhood and Citywide Plans					∅	City of Las Vegas	\$ CDBG
		Fund Downtown Façade Improvement Program					∅	City of Las Vegas	\$ CDBG
Improve Public Safety through greater cooperation between the City and the Metropolitan Police Department									
M	Foster greater cooperation and coordination between law enforcement and development within low-income neighborhoods.	Support the strategies to improve both immediate and long term public safety issues as outlined within the Downtown Neighborhood 2000 Plan					∅	City of Las Vegas	\$ CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
NORTH LAS VEGAS									
Support the provision of new community facilities and improve the quality of existing community facilities to serve low income residents									
H	Support development of new parks in CDBG eligible areas	Support funding for 1 park development or improvement					⊃	NLV	\$CDBG, Bonds
H	Assist non-profit organizations to maximize service provisions through facility development or improvements	Continue to support Opportunity Village work center improvements and expansion which will provide additional employment opportunities		⊃				NLV	\$CDBG
Provide a variety of supportive services for low income people and neighborhoods									
H	Ensure that affordable or free legal advice is available	Support funding for programs that provide legal assistance to low-income households					⊃	Service Providers	\$ CDBG
H	Support food programs	Support funding for programs that provide for the basic needs of low income people including food and toiletries					⊃	Service Providers	\$ CDBG
H	Support programs that provide specialized services to low-income households	Support funding for programs that provide a variety of services that assist households in becoming self-sufficient, such as case management					⊃	Service Providers	\$ CDBG
Provide supportive services and facilities for seniors and disabled									
H	Support programs for seniors	Continue to fund programs that provide services to seniors, such as general health care, social services and employment opportunities.					⊃	NLV, Service Providers	\$CDBG, General Fund
H	Support senior and disabled persons in accessing services	Continue to support transportation programs which assist seniors or disabled person in accessing services					⊃	Service Providers	\$ CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Support neighborhood preservation and improvement activities									
M	Improve efforts to preserve housing and neighborhoods through enforcement of housing codes and/or code enforcement	Pursue the elimination of overcrowded, unsafe, and unsanitary conditions through the correction of zoning and maintenance violations to improve the quality of neighborhoods.					∩	NLV	\$CDBG, General Fund
Provide for needed infrastructure improvements in low-income areas									
M	Support funding for accessibility retrofitting in eligible buildings, parks and sidewalks	Fund rehabilitation to various existing City-owned public buildings and parks and sidewalks with regard to ADA accessibility					∩	NLV	\$CDBG
Assist families in achieving stabilization and self-sufficiency									
H	Provide affordable, quality childcare	Support provisions for tuition scholarships, particularly for parents pursuing education or employment opportunities					∩	Service providers	\$CDBG
H	Support comprehensive family development services	Increase availability of parenting and child abuse/neglect counseling					∩	Service providers	\$CDBG
		Provide specialized support services for teen parents					∩	Service providers	\$CDBG
Provide supportive services and facilities for at-risk youth									
H	Develop and/or expand community recreational, cultural and arts facilities and services for youth	Expand after-school and/or track break programs that provide activities for youth					∩	Service providers	\$ Redevelopment Funds, CDBG
		Expand mentoring programs for middle and high school students					∩	Service providers	\$CDBG
		Continue to provide and expand scholarships for year round youth athletic and/or educational programs					∩	Service providers	\$CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Provide educational opportunities									
H	Expand literacy and support community education	Support computer literacy programs					⊃	Service providers	\$CDBG
Increase employment opportunities for low and moderate income residents through business attraction and retention									
M	Implement comprehensive marketing plan	Utilize direct mail marketing program to contact prospective businesses					⊃	NLV Economic Development	\$ General Funds
		Attend specific conferences and trade shows to make personal contact with prospects					⊃	NLV Economic Development	\$ General Funds
M	Continue recruitment of warehouse and distribution facilities	Respond to referrals from Nevada Development Authority and the State of Nevada					⊃	NLV Economic Development	
M	Diversify economic base by recruiting light manufacturing facilities	Market to automotive related, bio-medical, plastic extrusion and food processing industries					⊃	NLV Economic Development	\$ General Funds
		Assist prospects with obtaining state-offered economic development incentives					⊃	NLV Economic Development	\$ General Funds
H	Provide customized job training and placement	Continue to participate as key member of the Area Employment Plan Coordinating Committee					⊃	NLV Economic Development	
		Maintain a liaison with Community College of Southern Nevada and MAP Program					⊃	NLV Economic Development	\$ General Funds
M	Provide adequate commercial services to residents	Recruit both large and small commercial service providers including restaurants, retailers and health related services					⊃	NLV Economic Development	\$ General Funds

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
Increase employment opportunities for low and moderate income residents through business attraction and retention									
H	Stimulate small business development	Provide technical assistance and referral services to new and existing small business					∩	NLV Economic Development	η CCSN, Nevada Partners
M	Promote legislative changes to remove barriers to economic diversification	Continue to work with Nevada Development Authority and other governmental entities to amend NRS to allow governmental investments in local businesses and provide greater financial incentives					∩	NLV Economic Development	η Legislators
Provide better quality of life for low-income residents in the mature areas of North Las Vegas									
M	Institute a pilot Neighborhood Beautification Project	Revitalize commercial and residential properties in a specified low-income area by leveraging a variety of resources					∩	NLV Economic Development	\$ CDBG, HOME η NDA
M	Provide adequate commercial services to residents in mature areas	Recruit both large and small commercial service providers including restaurants, retailers and health related services					∩	NLV Economic Development	η CCSN, Nevada Partners
H	Stimulate small business development	Provide technical assistance and referral services to new and existing small businesses					∩	NLV Economic Development	\$ Redevelopment Funds
Provide for affordable health care									
H	Continue support of comprehensive neighborhood health clinics and provide health, dental, and mental health care	Provide funding for neighborhood health clinics and programs providing health, dental, and mental health care					∩	NLV Grants Administration	\$ CDBG
H	Continue support of substance abuse counseling and treatment programs	Continue to fund substance abuse counseling and treatment programs					∩	NLV Grants Administration	\$ CDBG

Priority	Strategy	Objective	Projected Completion Date					Initiation Responsibility / Partnership	Funding Sources (\$) and Other Resources (η)
			2000	2001	2002	2003	2004		
H	Provide counseling and health services for pregnant teens	Support programs for pregnant teens and prevention activities						U	Service providers \$ CDBG
BOULDER CITY									
Provide supportive services and facilities for low and moderate income									
H	Continue to fund public service organizations which aid low/mod income residents in Boulder City	Provide the maximum 15% of CDBG funds to public service organizations especially for emergency rent, utility and food and elderly and handicapped services						∅	Boulder City Welfare, Lend A Hand \$ CDBG
Support the provision of new community facilities and improve the quality of existing community facilities to serve lower income residents									
M	Provide ADA improvements to various public buildings	Fund rehabilitation to various existing City-owned public buildings with regard to ADA accessibility						∅	BC Public Works \$ CDBG
M	Provide ADA improvements to various public sidewalks	Fund improvements to existing sidewalks for ADA accessibility						∅	BC Public Works \$ CDBG
H	Provide assistance to the Senior Center of Boulder City	Fund improvements and rehabilitation for the Senior Center building in Boulder City			∅				BC Parks and Leisure \$ CDBG
MESQUITE									
Provide supportive services and facilities for seniors and disabled									
H	Construct and/or expand senior centers	Construct new senior center for Mesquite			U				Mesquite \$ CDBG

Clark County CDBG Capital Improvement Program

The HUD pre-award approval, accompanied by a County loan/line of credit to finance those improvements, is expected to help Clark County accomplish its CDBG Capital Improvement Program in a more expedited manner. Using prior site assemblage and the re-siting of existing architectural plans for those buildings, Clark County will not have to wait to assemble the necessary funds before beginning the planning and construction of such buildings, but will instead be able to advance the monies and reimburse itself upon the receipt of its subsequent CDBG grants.

This innovative approach has the following benefits:

- Buildings can be constructed more quickly thereby serving the public sooner.
- Facilities can be constructed using current dollars; minimizing the impact of future possible cost inflation.
- Local government can meet the HUD grant threshold of encumbering and spending its grant funds more quickly, as past costs will be expense adjusted upon grant receipt.
- Long term capital planning is possible, thereby facilitating the development of larger projects of community significance, with greater “economies of scale”, than smaller, single-year grant projects.

Figure 57
Clark County
Five-Year CDBG Capital Improvement Plan
Fiscal Years 2000-2004

Proposed Project	Total Funding*	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004
Cambridge Rec. Center	\$7,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000
Opportunity Village	\$223,200	\$172,104				
Safe Nest/TADC Shelter	\$986,795	\$486,795				
Cecile/Walnut Rec. Center	\$4,001,670	\$500,000	\$500,000	\$1,000,000	\$1,000,000	\$1,001,670
Community Food Bank Warehouse	\$3,163,709	\$68,085	\$206,984	\$626,984	\$626,984	\$1,584,672
Upland Senior Center	\$1,320,000	\$400,000	\$920,000			
Catholic Charities Employment Ctr.	\$250,000					\$250,000
West Flamingo Senior Center	\$1,404,496					\$240,642

* Includes FY 1999 funds already allocated to projects.

Institutional Structure

The institutional structure for the implementation of the Community Development Strategic Plan has been previously described in the Housing section of the Consolidated Plan. In summary, under the CDBG Entitlement program, Clark County receives funds from HUD, and then allocates them to the cities of North Las Vegas, Boulder City and Mesquite based on an Interlocal Agreement. These jurisdictions then utilize these funds for planning and implementation activities. The Community Resources Management Division administers unincorporated Clark County's allocation of CDBG funds. The Neighborhood Services Department serves as the lead participant in community development activities for the City of Las Vegas. Leveraging CDBG funds with local general funds and foundation grants, the CDBG Consortium and Las Vegas administer CDBG funds to build public facilities and provide public services to low and moderate income Valley residents.

Coordination

Coordination between the governmental entities in the HCP Consortium is outlined in the Housing section. In summary, due to the close geographical proximity of the various governmental jurisdictions in the Consortium Area and the need for joint support and funding of housing and community development projects to ensure feasibility, intergovernmental coordination is vital.

Clark County, North Las Vegas, Boulder City and Mesquite participate in the Urban County Interlocal Cooperation Agreement for Housing and Community Development. Under this agreement, Clark County applies to HUD for CDBG entitlement funds and, pursuant to the agreement, disburses a portion of these funds to the participating jurisdictions on a percentage basis. Clark County assumes final responsibility for CDBG Program administration for all of the participating jurisdictions. Consolidating program administration allows a coordinated approach to funding housing and other CDBG eligible activities. The City of Henderson has elected not to participate in this agreement for FY 1999 through FY 2002, and the City of Las Vegas continues to act as its own administrator of CDBG entitlement funds.

Clark County and the cities of Las Vegas, North Las Vegas, Boulder City and Mesquite meet on a monthly basis to discuss issues relating to HOME, CDBG and ESG. The discussions range from questions relating to joint projects, to coordination of grant application cycles. The City of Henderson started participating in these Consortium meetings in 1999 and will continue to attend the meetings. Although Henderson is not part of either the HOME or CDBG Consortia, their activities affect the region and the Consortia's activities may affect their community. Their participation in the monthly Consortium meetings allows for an assessment of the regional impact of housing and community development policies. Discussions regarding the development and content of the Consolidated Plan took place at all of the Consortium meetings for FY 1999 and early FY 2000.

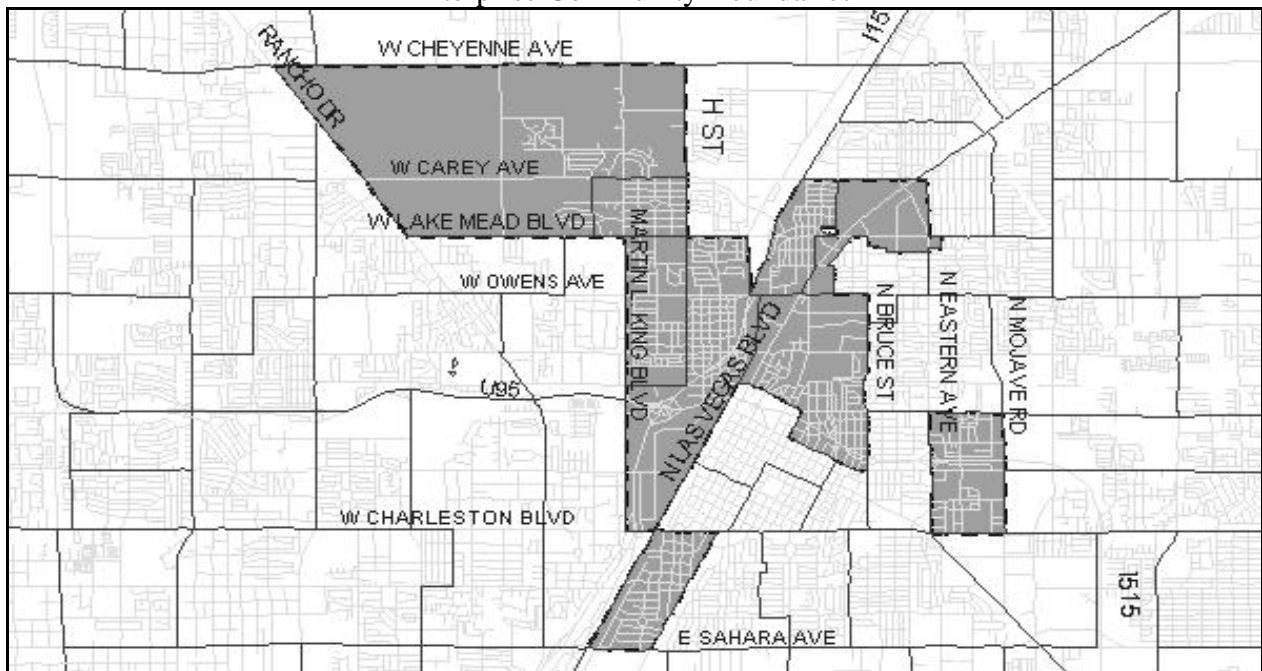
The HCP Consortium members will continue to participate in the Southern Nevada Reinvestment Accountable Banking Committee (SNRABC), with representatives from Nevada Legal Services and non-profit housing and community development organizations. Through this committee, Clark County has participated in work to develop public/private partnerships for Economic development.

Through SNRABC work, the County has leveraged over \$20 million in community reinvestment dollars. Through financing of affordable housing developments and small business programs sponsored by financial institution, economic development has made inroads into poor community. Activities include an increase in access to capital for consumers, businesses and first time homebuyers, the ability to leverage local CDBG and HOME dollars with private CRA investment dollars, an increase in banking services to homeless populations and low to moderate income persons and relaxed credit criteria and implementation of three tier review for mortgage loans.

Anti-Poverty Strategy

The Anti-Poverty Strategy describes the programs and policies, which will be utilized to reduce the number of households with incomes below the poverty line, in coordination with affordable housing efforts. According to the 1990 Census, there were 72,182 persons below the poverty level in the HCP Consortium Area, or approximately 11 % of all persons for whom poverty status was determined. Of all households 28,921, or approximately 24 %, were below the poverty level.

Map 5
Enterprise Community Boundaries



Many of the projects and programs that impact people at the poverty level are funded or take place in the Southern Nevada Enterprise Community (SNEC). Beginning in late 1993, Clark County and the Cities of Las Vegas and North Las Vegas banded together in conjunction with poverty neighborhoods to develop a strategic plan to obtain an Enterprise Community designation for nine census tracts located in the urban core (See Map 5). Since December 1994, when Southern Nevada received its Enterprise Community designation, the local jurisdictions and neighborhoods have leveraged the community's resources for operating a "War on Poverty" at the local level. Along

with the \$2.95 million in Title XX Social Service Block Grant (SSBG) funds received with this federal Enterprise Community designation, the larger Las Vegas community has been able to assemble over \$1 billion in public and private resources that has been committed or spent in SNEC neighborhoods since 1994. While the Title XX funds have been expended almost completely, the resources developed through the Enterprise Community continue to grow and most programs have found alternative funding sources. Many of the programs described in the following paragraphs are either funded by SNEC monies or take place in the SNEC areas.

Clark County and the City of Las Vegas have promoted, and will continue to promote, housing efforts that incorporate support services, which assist extremely low- and low-income housing residents in achieving self-sufficiency. Clark County and the City of Las Vegas will continue to encourage applications by non-profit organizations and public housing authorities for programs designed to promote self-sufficiency among assisted housing and transitional housing residents. Such programs include the Public Housing and Section 8 Family Self Sufficiency Program, the Supportive Housing Program and the Supplemental Assistance for Facilities to Assist the Homeless Program. Such programs coordinate the use of public and private resources to assist low-income residents in achieving economic independence.

Current funding for preschools and day care centers will allow low-income households to secure job training and placement with the knowledge that their children are well cared for during working hours. CDBG Program funds have also been used for education programs that provide classes in English as a Second Language and classes designed to assist high school dropouts in receiving their GED. Programs such as these provide the basic skills necessary to enter job training and job placement programs.

The Las Vegas Business Center in West Las Vegas, serves as a small business incubator facility, as well as a job-training center for area residents. CDBG and ESG Program funds are annually committed to transitional housing organizations to provide the operating funds necessary to assist residents in entering the workforce.

The HCP Consortium believes that the main opportunities to assist those below poverty level to achieve economic independence in coordination with affordable housing activities is through education and job training apprenticeship programs provided through the public housing authorities, and through transitional housing programs operated by non-profit organizations. Programs for young people who reside in public housing and which focus on building self-esteem and promoting education are also essential to foster personal achievement and break the cyclical nature of poverty.

Existing Programs

All local jurisdictions have taken an active role in promoting economic development. Boulder City, Henderson, Las Vegas, North Las Vegas and Clark County all have their own economic or industrial development offices and staff. In addition, each community in Southern Nevada has its own Chamber of Commerce as an active promoter of their community and the County.

Formed in 1956 as a nonprofit corporation, the Nevada Development Authority's (NDA) goal is to foster economic growth and diversification in Southern Nevada. It is comprised of hundreds of business-oriented individuals and aggressively pursues relocating or developing companies that would be compatible with Southern Nevada's environment and community. NDA's primary function is to provide information to companies considering such relocation, as well as firms already doing business here.

The University of Nevada, Las Vegas (UNLV) lends expertise and support to efforts at economic development through such offices as the Center for Business and Economic Research. It was founded in 1975 and provides research and analysis services to clients in both business and government. The Nevada Small Business Development Center is also operated at UNLV and offers business counseling and expertise to existing and new businesses.

Micro Business Program

The Economic Opportunity Board of Clark County (EOB) is funded by the State to operate a Micro-Business Program. The program provides technical assistance in business practices, development and financing of new small businesses, and also administers the Small Business Loan Guarantee program with the Enterprise Community Federal Credit Union as part of the Southern Nevada Enterprise Community Program.

The Nevada Micro Enterprise Initiative (NMI), a non-profit small business development organization, provides technical assistance and loans to micro-enterprises throughout Nevada. Certified by the SBA as a Micro Loan Demonstration Program and Women's Business Ownership Demonstration Program, NMI provides entrepreneurial training in the form of pre-start up courses, business plan courses and business tune-up classes. NMI also provides micro-enterprise loans to start-up and existing businesses from their \$750,000 SBA- and privately-financed loan pool.

The City of Las Vegas Neighborhood Services Department has had an ongoing small business revolving loan fund for the past three years, which made small business loans utilizing CDBG funds. These loans were made throughout CDBG eligible neighborhoods. A second revolving loan fund has also been established for small businesses in low-income neighborhood utilizing a grant from the US Department of Commerce Economic Development Administration (EDA).

Welfare to Work

The State of Nevada Department of Human Services – Welfare Division is aggressively moving forward to implement the US Department of Labor Welfare-to- Work Program throughout the State of Nevada. The State received a \$3.4 million grant from the Department of Labor in early 1998. Administered through the Southern Nevada Private Industry Council (PIC), approximately 77% of the grant is made available to various agencies and organizations in Southern Nevada who provide supportive services (e.g., life skills, substance abuse prevention, child care, adult education, transportation) that enable low income people to find jobs with opportunities for career advancement, and that provide health benefits to employed individuals and their families. The

organizations chosen to receive these funds include Nevada Partners, Clark County Social Services Department and Camino El Futuro.

The Welfare Division in conjunction with the Department of Employment Training can also utilize its Temporary Assistance for Needy Families (TANF) funds, coupled with the Welfare-to-Work grant to fund customized job training for specific employers that will commit to hiring low-income individuals. The biggest challenges faced by the State of Nevada in administering the Welfare-To-Work Grant Program is securing good jobs for certified individuals, sustaining long term job retention with proper support services in place and developing a longitudinal tracking system to evaluate and measure program performance.

Community College of Southern Nevada

The Community College of Southern Nevada (CCSN) offers a large selection of courses and programs, which include Associate of Applied Science Degree programs in approximately thirty occupational and technical areas that can be utilized in developing skills and expertise, required to meet the goals of the Consortium's Anti-Poverty Strategy.

In addition to these specific examples, CCSN has a Continuing Education Division that offers seminars and workshops to assist small business with development and maintenance of their viability. This division also operates a Center for Business and Industry Training, which produces customized training for specific businesses and training to meet the needs of a business intending to locate in the area.

CCSN coordinates many of its programs and activities with other County institutions in the University and Community College System as well as the Clark County School District. Provision is also made for business, industry and other constituents to provide advice and counsel to the CCSN through various advisory committees and boards.

Head Start

EOB administers Head Start and other education programs. Head Start helps eliminate the poverty cycle by providing comprehensive programs that meet the educational, social, health, dental, nutritional, and psychological needs of low-income and handicapped preschool children. Essential to the success of Head Start is family involvement, parent education, and program planning. Head Start parents serve on Policy Councils/Committees and play a major role in shaping administrative and management decisions.

Senior Services

A wide variety of services to elderly and physically challenged populations are administered/coordinated through various jurisdictional and non-profit providers. Senior centers are located throughout the HCP Consortium area. These centers provide customer access to services such as congregate and home-delivered meals, educational opportunities, recreation and

socialization activities, information and referral, advocacy, and transportation. Serving as community focal points, the centers mobilize resources to support and maintain independent living for senior citizens and physically challenged adults.

Regional Transportation Commission

Jurisdictions in the Consortium support regional transportation planning through the Regional Transportation Commission (RTC). The RTC oversees Citizen Area Transit (CAT), the regional bus company that has expanded services over the past several years. CAT has plans for continued expansion of residential routes, including low-income neighborhoods where Public Housing Authority developments exist; in order provide low-cost transportation to workers. Coordinating transportation planning and transportation services with community-based service agencies through its Para-Transit Service provides accessible transportation to the community.

Appendix A
Public Comments and Responses

Comment Letter #1



KENNY C. GUINN
Governor

STATE OF NEVADA
DEPARTMENT OF HUMAN RESOURCES
WELFARE DIVISION
538-A South Boulder Highway
Henderson, Nevada 89015-7512
(702) 486-5000 • Fax (702) 486-1270

CHARLOTTE CRAWFORD
Director

MYLA C. FLORENCE
Administrator

April 12, 2000

Kristin Cooper
Clark County Community Resources Management
P.O. Box 551212
500 South Grand Central Parkway - 5th Floor
Las Vegas, Nevada 89155-1212

Dear Ms. Cooper:

In regards to the 2000-2004 Consolidated Plan and Action Plan 2000 for Housing and Community Development in Clark County, we would like to see funds used to rehabilitate older neighborhoods.

Sincerely,

A handwritten signature in cursive script that reads "Paula Petruso".

Paula Petruso
Social Welfare Manager IV

Working for the Welfare of ALL Nevadans

Comment Letter #2

April 26, 2000

Kristin Cooper
500 S. Grand Central Parkway
Box 551212
LV, NV 89155

I have been reviewing the DRAFT of the Consolidated Plan 2000-2004. I appreciate the work that went into the document but do have a question about one section. On page 174, (the last paragraph) there is a quotation from the UNLV Homeless Study. It appears that, according to the statement, the City of Las Vegas has withdrawn its support of the efforts to assist the homeless that it began under Mayor Jan Jones. In fact it appears from this quotation that the City of Las Vegas has withdrawn its support of the homeless entirely. Even if this should be true I question the wisdom of telling HUD, or any other potential funding group, that the city will not be supporting such projects "... as a matter of policy...." This can only hurt the State, County, City, and private agencies in their efforts to raise funding for one of the most difficult social problems we face – Homelessness.

While I hope the City of Las Vegas will continue and increase its support and funding for this needed social service a recent experience with a committee upon which I serve seems to indicate otherwise.

The HAT (Homeless Assistance Tactics) Team is a citizens' advisory group that reviews the applications for federal monies and prioritizes the applications based on local needs and gaps. The HAT Team is composed of members from all sectors of the community and closely interfaces with staff members from the City of Las Vegas and Clark County.

At our regularly scheduled meeting Thursday, the staff person from the City of Las Vegas, who has assisted in the writing and preparation of this HUD funding request, notified me that his job description no longer included work on the Continuum of Care narrative for this grant proposal. This proposal must be submitted for competitive funds to the U.S. Department of Housing and Urban Development. The involvement of the City of Las Vegas staff has been integral to the funding process that serves the Las Vegas Valley's homeless population. Annually, these dollars have consistently been around \$ 3,000,000. These dollars are vital to the continuation of many programs in the City of Las Vegas and Clark County.

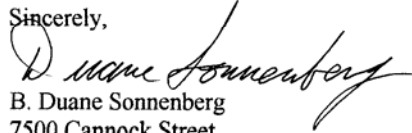
Because the HAT Team is composed of community representatives and has no operating funds, it is nearly impossible for the team to hire a grant writer on such short notice. In addition, it will be extremely difficult to locate a volunteer grant writer who is not involved in the individual submissions from an organization that supports homeless in the community. In most cases there are no funds available locally or through competitive grants that will accomplish what the HUD Continuum of Care does. These organizations,

Comment Letter #2 Continued

which depend upon this source of funding, will have to turn to city and county funding sources. The City of Las Vegas' action can put millions of dollars at risk that can only be replaced by increasing local revenues (taxes) or cutting services. If services are cut the homeless will be forced into the businesses of Las Vegas in their attempt to meet their basic living needs.

Please respond to my concerns and I hope that the City of Las Vegas will reconsider its position in this matter.

Sincerely,



B. Duane Sonnenberg
7500 Cannock Street
Las Vegas, Nevada 89131

Comment Letter #3

CASTLE
PROPERTY
COMPANY

MEMORANDUM

April 28, 2000

By fax: 455-4038

TO: Kristin Cooper

FROM: George R. Mehocz 

SUBJECT: COMMENTS ON DRAFT TO THE CONSOLIDATED PLAN

1. Regarding your discussion on household income on page 25, you used 1990 data. However, elsewhere on the report (page 19) you mention that the average household income has increased 59% since 1990. Why do we emphasize 1990 data when more recent estimates are available?
2. Regarding affordable housing programs for rental housing. Most developers back calculate the maximum income that a renter household can have assuming that no more than 30% of the income goes to pay rent. However, this also realistically creates a bit of a floor for incomes as well because there are no government programs available to subsidize rent levels below this calculation. In effect, the very low income people are totally ignored.
3. I totally disagree with your comment in the introduction to the barriers to the production on affordable housing on page 77 when you state, "public policies do not currently present a barrier to the production of affordable housing". From our meetings, it is clear that it is government policies regarding density, etc., which is causing the price of housing to increase and become less affordable. This has been discussed in our committee meetings many times.
4. In the report there seems to be shifting back and forth between individual income and household income as is evident in point number 9 on page 78. Although the tourism industry may in fact pay low individual incomes, with over 50% of households having two individual incomes, obviously the household income for these people is higher if there are two of them working. In fact, it could be as much as \$52,800 a year. I would posture that it is more likely that higher income households are less likely to have two people working than lower income households.
5. Also, I'd like to bring to your attention that figure 37 list of Clark County projects I believe also contains projects from other counties. In particular, the Yerrington Apartments, Churchill Apartments, Washoe Mills Apartments are not familiar names to me but are the names of other counties in the state of Nevada. The only Lakeview Apartments I know are in Reno. This would mean even fewer affordable units are available here.

Word/Memos from George/Cooper

3311 S. Jones Boulevard, Suite 210
Las Vegas, Nevada 89148-2770
(702) 251-1991
FAX 251-3429

Apr. 28 2000 12:41PM P2

FAX NO. : 2511991

FROM : CASTLE PROPERTY COMPANY

Comment Letter #4

From: David Buer <buer@intermind.net>
To: CCGOVA.DS2PO(KRC)
Date: Tuesday, May 02, 2000 7:44:17 AM
Subject: Comment-Consolidated Plan

Dear Kristin,

Please add these comments to the Consolidated Plan:

"Along with facilities provided by service providers in the homeless corridor, the homeless also used public parks. The parks closest to the corridor, namely James Gay and Ethyl Peason, were the most used for a safe, comfortable refuge. It would not be unusual for 2-3 dozen homeless to be spread out throughout these parks resting under the shade of the beautiful trees. In July 1999, the Las Vegas City Council declared these parks "children's parks" making it illegal for the homeless to use them.

The Southern Nevada Homeless Coalition (SNHC), beginning in August 1999 entered into good faith negotiations with City of Las Vegas officials, including representatives of Neighborhood Services, Mayor Goodman, Councilman Reese, Councilman Weekly, and Councilwoman Boggs-McDonald. Different promises and proposals were made. Finally, at the March 29 meeting at Councilman Weekly's office, Morris Arberry suggested the possibility of using the State of Nevada Day Labor facility at Washington and A St. as a safe refuge for the homeless in lieu of the parks. The SNHC representatives visited the site in early April and were enthusiastic about the almost 1 1/2 acres site.

Neighborhood Services had asked for a recommendation from the SNHC. The SNHC recommended that the site be created for daytime hospitality 7 days a week, expanding its current hours of 5 am to 2 pm Mon-Fri to 5 am to 5 pm 7 days a week. Also it was recommended that the large gravel area along Washington St. be filled with sod and shade trees and shade structures as well as shrubs along the Washington St border. The SNHC recommended that the facility be ready by June 1. In the meantime there should be a moratorium on the enforcement of the children's park ordinance

A service provider should be hired to supervise the facility as a joint venture with the State of Nevada. In other words, it will become a joint use facility providing job opportunities as well as hospitality. The City of Las Vegas, because of the passage of the children's park ordinance, has an obligation to initiate funding on this project and it should be fast tracked. But other government entities should also contribute--Clark County and the City of North Las Vegas."

David Buer, ofm
Poverello House--Director
Member, SNHC

Comment Letter #5

05/02/2000 16:46 7027963007

PAGE 02



May 2, 2000

Kristin Cooper
Community Resource Management
Clark County Government Center
500 South Grand Central Parkway, 5th Floor
Las Vegas, Nevada 89155

Re: Consolidated Plan 2000-2004 Comments

Dear Ms. Cooper

I would like to take this opportunity to comment on the Consolidated Plan 2000-2004 and Action Plan Draft

I. Consortium

The Clark County consortium consists of four separate units of local government. These comments contain concerns regarding separate entities. The comments are labeled respectively. Overall, the Consolidated Plan changes from specific to general by municipality

A. City of Las Vegas

The City of Las Vegas Consolidated Plan sections are deficient in three respects. The community input into the development of the City plan was not provided in line with the rest of the consortium. Separate meetings were held. This agency attended two of four sessions. In some instances, various community members were excluded from making comment or filling out the survey at various sessions.

The follow up after the community meetings was also deficient. No summary of community comments was presented. The public was also not provided a comprehensive review of all comments from the four public meetings.

The Consortium Plan was released thirty days in advance for public comment, excluding the City of Las Vegas portion. In effect, the community had less than three weeks to comment of the City of Las Vegas portion of the plan.

The action plan provides no specifics about what prior goals/strategies were met and/or completed. The 2000 action plan merely provides a detailed listed of how funds were spent. While a funding report is key, some correlation to the prior five-year plan and actions taken should be made.

943
East
Sahara
Avenue
Suite 201
Las Vegas
Nevada
89101
(702) 796-7770
Fax
(702) 796-3007

Consolidated Plan Comments

The City also does not state how priorities were developed. Were priorities an outcome of community needs? Did the local government determine needs independent of the community? Page 25, for example of the City's 2000 Action Plan lists, as a priority, community centers, parks and open space, health facilities and historic preservation to improve the quality of life for low income neighborhoods. The plan goes further to name downtown as an area for theaters, workshops etc. There is no correlation between the low to moderate-income persons, which will benefit from the project and the action to be taken. Read literally, CDBG funds appear to be slated to build theaters and cultural centers. The substantive portion of the Consolidated Plan (pages 190 through 201) list low to moderate income statistics and needs for Clark County but not the City of Las Vegas. In no document is the need for cultural centers relate back to low to moderate income, urgent need or the elimination of urban blight.

The City also states that HOME funds may be directly provided to a for profit developer (page 95-98). This was not identified as a recommendation from the community focus groups and does not lend to capacity building of the not-for-profits. Traditionally the local non-profits target the special needs population or the very very low-income population. A for profit corporation could be awarded the HOME subsidy but meet only the minimum threshold requirements set by HUD. The outcome being the people most in need may not be served. By nature non-profits have a social purpose and should given priority for HOME funds. The City should encourage non-profit development and for-profit involvement only when it is a joint venture with a non-profit partner (51% interest). This Non-profit or Joint Venture) has been a longstanding position of the City but the recent plan indicates a shift to funding for profit corporations. Our community has not been made aware of this policy change and has not had opportunity to comment.

B. City of North Las Vegas

The City of North Las Vegas provides no substantive overview of the conditions of the City. Page 201, second full paragraph states that "The North Las Vegas Housing Authority properties are located in a deteriorated neighborhood with a wide variety of community development needs". The Action Plan (pages 213 through 217) left completely blank a strategy for providing needed infrastructure improvements in low-income areas. The "Neighborhood Preservation & Improvement Activities" provides no detail around rehabilitation efforts, corridors, etc. A blanket statement is made around need with no vision for implementation.

Consolidated Plan Comments

The City of North Las Vegas accomplished none of the items set forth in the last Consolidated Plan. Without a specific strategy in 2000-2004, there is a risk that specific actions will not be taken.

North Las Vegas has designated specific areas where HOME dollars must be used. There is no correlation between the areas publicized and the needs identified in the consolidated Plan. The Plan also fails to itemize those boundaries provided to the public. A demographic or market study was not provided for the designated area.

Public input on the North Las Vegas Plan was limited to two general discussions over a short period of time. The meetings were very poorly attended. One notice was included in the monthly water bill. The follow up after the community meetings was also deficient. No summary of community comments was presented. The public was also not provided a comprehensive review of all comments from the two public meetings.

C. Clark County

Clark County chart (page 92 & 93) indicate that HOME funds could be utilized by either non-profit or for profit corporations. The Clark County focus group clearly stated that funds should be limited to non-profits and Joint ventures. This has been the policy position of Clark County and that policy should continue. It is my understanding that the law prohibits Clark County from providing funds to a for-profit. I respectfully request that it be clearly stated in the plan as such.

Thank you for the opportunity to express our suggestions and observations. If you have any questions please feel free to call me at 796-7770.

Sincerely,



Candace Ruisi
Executive Director
Women's Development Center



Nevada Fair Housing Center, Inc.

2725 E. DESERT INN ROAD • SUITE 180 • LAS VEGAS, NEVADA 89121
(702) 731-6095 • (702) 731-6176 HOTLINE • FAX (702) 731-6170 • TDD (702) 731-6178

PUBLIC COMMENT HCP CONSORTIUM CONSOLIDATED PLAN

Prepared By: Nevada Fair Housing Center, Inc

May 1, 2000

The Consolidated Plan (hereinafter referred to as the "ConPlan"), by law, provides an outline as to how five distinct categories of federal funding will and have been spent. Created in 1993, the statutory authority for the ConPlan process is contained in the National Affordable Housing Act of 1990.¹ The overall goal is to ensure that these related funds are used to meet the special needs of low to moderate income people.²

Local entitlement jurisdictions in Southern Nevada created the HCP Consortium. The purpose of the Consortium is to work jointly on issues. While the ConPlan incorporates all jurisdictions in the Consortium, several sections are less specific by entitlement jurisdictions. Title I of the Act³ requires each entitlement to develop a specific housing strategy, which identifies housing needs, establishes priorities among needs and state how resources will be used to address specific needs.

The following pages analyze the ConPlan for the HCP Consortium. Three major jurisdictions are covered by the Plan, namely, Clark County, City of Las Vegas, and City of North Las Vegas. A checklist is included to summarize additional needed action by jurisdiction. Eight key parts of the ConPlan were reviewed, namely:

- ▣ Citizen Participation
- ▣ Identification of Housing Needs
- ▣ Identification of Community Development Needs
- ▣ Fair Housing
- ▣ Progress In Implementation
- ▣ Five Year Strategic Plan
- ▣ Constraints On Housing
- ▣ Nongovernment Constraints On Housing

¹42 U.S.C.§12701.

²42 U.S.C. §5301©

³42 U.S.C.§12721

Comment Letter #6 Continued

A detailed checklist is attached to this summary, by jurisdiction.

I. Citizen Participation

By law, 42 U.S.C. § 5304(a)(3)(A), the ConPlan must reflect a citizen participation process and the ideas of social service agencies. In addition to having an on going citizen participation plan around the use of federal funds, six basic requirements must be satisfied in the context of developing the plan. The ConPlan process must encourage and provide for public involvement low income persons, minorities and social service agencies that serve the above populations. The public must have reasonable and timely access to local meetings. Public hearings must be held after adequate notice to the public. Two weeks have been deemed to constitute adequate notice. Hearings must be held at places convenient for low income people. Incorporation of citizen input into Consolidated Plan is required. If a significant number of people do not speak English, the ConPlan must state how these populations will be involved. Finally, the jurisdiction must give "written, meaningful and timely" responses to written public comment.

A. Clark County

To develop the ConPlan, Unincorporated Clark County developed a key task force from the Affordable Housing Committee. To start the process, public meetings were held in the community at Cashman field. Separate round table discussion groups were established to discuss the details of community needs. Groups were reconvened to summarize the outcome of the various smaller working groups. A series of separate meetings were held to discuss quantifiable goals, plan language, needs, etc. In many instances, participants engaged in heated debate around goals and strategies. The process was inclusive and well developed.

As a key participant, Nevada Fair Housing Center notes that the ConPlan details agencies participating in the process (see Appendix C and pages 21 & 22)

B. City Of Las Vegas

The City of Las Vegas Consolidated Plan sections are deficient in two respects. The community input into the development of the City plan was not provided in line with the rest of the consortium. Four separate meetings were held in various parts of the City. No follow-up occurred to ensure community input was incorporated into the ConPlan, as required by regulation. The City did not attend the round table meetings with the community held by the lead agency of the Consortium. The follow up after the community meetings was also deficient. No summary of community comments were presented. The public was also not provided a comprehensive review of all comments from the two public meetings.

The ConPlan was released thirty days in advance for public comment, excluding the City of Las Vegas portion. This discrepancy in plan release made public comment difficult. Overall, the diversity present at City public meetings was insufficient.

Comment Letter #6 Continued

C. City Of North Las Vegas

Public input on the North Las Vegas Plan was limited to two general discussions over a short period of time. Separate meetings were held for various populations. For example, providers of services were not encouraged to attend community meetings. No participating organizations are listed (see page 23). No written reports of comments were provided to meeting participants. In short, participants at meeting one never knew how participants at meeting two commented.

II. Identification Of Housing Needs

A key component of identifying housing needs is a comparison of prior needs to current needs. HUD regulation also provides that a housing market analysis should be conducted. The ConPlan should estimate housing needs by income categories, family size and renter versus owner needs. An assessment of housing needs for persons with HIV/AIDS and mental and physical disabilities should be included. The cost burden or estimates of the number of persons paying over 30% or 50% of their income; living in very poor quality or overcrowded housing must be spelled out. Finally, the nature and extent of homelessness should be clearly outlined.

The community profile for Clark County is very specific. The cost burden and market analysis for each jurisdiction is provided in the ConPlan. **Economic trends are only provided for Clark County.** This data impacts priorities and activities for community development and economic development. Information should be provided for the other two jurisdictions. For example, the economic condition of North Las Vegas and the ability to provide economic development activities is very different from the City of Las Vegas. The ConPlan, in order to be comprehensive should make this distinction.

III. Identification Of Community Development Needs

The ConPlan should estimate non-housing community development needs for the upcoming five years. While the regulations do not require community development needs to be prioritized⁴, prioritization is important for three reasons. First, without a comparison between housing and non-housing community development needs (i.e. street repair) the Consolidated Plan fails to be a comprehensive plan. Second, it informs the community about the actual need versus available resources. Third, it provides a blueprint for potentially leveraging other dollars to meet the needs of low to moderate income residents.

A. Clark County

Community Development, as defined by HUD includes a variety of areas. The most common are those issues such as parks, streets, fire stations, etc. The Consortium, in developing the ConPlan used information developed to established the Empowerment Zones. The SNEZ Strategic Plan, although comprehensive, does not include other components of community development, such as

⁴24 C.F.R. §91.215(a)(2)(b).

Comment Letter #6 Continued

leveraging private sector capital with public funds.

Clark County's section on community development **does not highlight activities to bring private capital and innovative programs to low to moderate income neighborhoods**. Clark County, since 1992, has participated in work to develop public/ private partnerships for Economic Development, through the Southern Nevada Reinvestment & Accountable Banking Committee (SNRABC). Through SNRABC work, the County has leveraged over twenty million dollars in community reinvestment dollars. Through the financing of affordable housing developments and small business programs sponsored by financial institutions, economic development has made inroads into poor communities. Direct benefits to Clark County from participation in Community Reinvestment Activities include:

- ▣ Increase in access to capital for consumers, businesses and first time home buyers
- ▣ Ability to leverage local CDBG and HOME dollars with private CRA investment dollars
- ▣ Increase in banking services to homeless populations and low to moderate income persons
- ▣ CRA dollars for education of first time home buyers
- ▣ Relaxed credit criteria (alternative sources of credit) and the implementation of three tier review for mortgage loans

Overall, Clark County has worked cooperatively with the non-profit community to advocate for access to capital for low to moderate income persons.

One objective of the Strategic Plan portion of the ConPlan should be continued participation in these efforts. In addition, continued volunteer time to attract private capital for economic development strategies for low to moderate income persons should be included.

B. City of Las Vegas

The City of Las Vegas has worked to attract private capital for projects as well. Wells Fargo bank provided three hundred thousand dollars in 1998 to develop an incubator. The specific production of loans or businesses served by the project is unclear. The City ConPlan should outline those private market initiatives planned for the next five years. In addition, because the economic development needs of this jurisdiction is different from the County; efforts should be made to identify non-traditional community development activities that will benefit low to moderate income persons. Cooperative efforts with local groups which serve these populations should be increased.

C. City of North Las Vegas

The City of North Las Vegas has not actively participated in Community Reinvestment activities. Although this was included as an objective in the Fair Housing Plan, the attraction of private capital under the CRA investment test has not occurred. Outlying North Las Vegas areas could benefit from economic development plan that attracts a diverse mix of small businesses that provide jobs to the community. The downtown area could benefit from a similar strategy.

Comment Letter #6 Continued

IV. Affirmatively Further Fair Housing

The affirmatively further Fair Housing mandate requires entitlement jurisdictions to (1) complete an Analysis of Impediments to Fair Housing Choice; (2) develop a Fair Housing Plan to eliminate identified barriers and (3) maintain records of activities taken. Each jurisdiction must also "submit a certification that it will affirmatively further fair housing, which means it will conduct an analysis to identify impediments to fair housing choice in the jurisdiction, take appropriate actions to overcome the effects of any impediments identified through the analysis, and maintain records reflecting the analysis and actions in this regard."⁵

The process used by each jurisdiction may vary. The Department of Housing and Urban Development, in its published Fair Housing Planning Guide, volumes 1 and 2, provided a detailed description of appropriate activities. The Analysis of Impediments and Fair Housing Plan, if comprehensive, will address issues that are key components of healthy neighborhoods. In some instance, if extreme barriers exist, the plan will flag priorities on which a jurisdiction should focus (ordinance change, deconcentration of neighborhoods, etc).

Each of the three municipalities in the HCP Consortium developed three distinct Fair Housing Plans. The chart behind Tab 2 provides a break down of proposed objectives and accomplishments by jurisdiction.

V. Progress In Implementation

According to the ConPlan regulations, each jurisdiction should provide an analysis of the significant difference between what was projected or planned in the previous element and what was achieved. Current goals, objectives, plan and policies should incorporate what has been learned from the results of the previous element.

A. City of Las Vegas

The action plan provides no specifics about what prior goals/strategies were met and/or completed within the City of Las Vegas. The 2000 action plan merely provides a detailed list of how funds were spent. While a funding report is key, some correlation to the prior five-year plan and actions taken should be made.

The City also does not state how priorities were developed. Were priorities an outcome of community needs? Did the local government determine needs independent of the community? Page 25, for example of the City's 2000 Action Plan lists, as a priority, community centers, parks and open space, health facilities and historic preservation to improve the quality of life for low income neighborhoods. The plan goes further to name downtown as an area for theaters, workshops etc. There is no correlation between the low to moderate-income persons, which will benefit from the project and the action to be taken. Read literally, CDBG funds appear to be slated to build theaters

⁵24 C.F.R. §91.225(a)(1) et. seq.

Comment Letter #6 Continued

and cultural centers. The substantive portion of the Consolidated Plan (pages 190 through 201) list low to moderate income statistics and needs for Clark County, but not the City of Las Vegas.

B City of North Las Vegas

At one of its community meetings, the City of North Las Vegas, due to limited staff resources, reported that the objectives of the last ConPlan had not been achieved. In the current ConPlan, no mention of past efforts and objectives is provided. This section of the Plan, should at a minimum be revised to provide information of how the City will achieve its current Plan, either through the allocation of additional general fund monies or other dollars. Without this analysis, current objectives and goals become meaningless.

The ConPlan for North Las Vegas does not address some key issues identified in community meetings. For example, how the City will continue to provide affordable housing (verses public housing) in the urban core is not address.

Conclusion

Overall, the ConPlan provides a comprehensive look at the housing landscape in Southern Nevada. The deficiencies listed in this document vary by jurisdiction in the Consortium. Because of the differences in populations and needs, it is important that the plan be narrowly tailored by jurisdiction. Some sections, are very specific while others are extremely general. The general sections should be amended prior to submission of the full plan. The attached checklist provides a detailed grading system of the ConPlan as compared to regulatory requirements.

Comment Letter #6 Continued

HCP CONSORTIUM CONSOLIDATED PLAN REVIEW
Prepared By: Nevada Fair Housing Center, Inc

CLARK COUNTY

Citizen Participation

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Consolidated Plan reflects citizen participation process and the ideas of social service agencies 42 U.S.C§5304(a)(3)(A)	X			21

Identification Of Housing Needs

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Comparison of prior needs to current needs.		X		224
2. Housing market analysis	X			57 - 65
3. Plan estimates housing needs for the upcoming five years and describes priority non-housing community development needs.	X			55
4. Plan estimates housing needs by income categories, family size and renter verses owner needs.	X			55 -56
5. Housing need for special populations are discussed in detail	X			52 - 54
6. The Plan discuss and estimates the number of persons paying over 30% or 50% of their income; living in very poor quality or overcrowded housing.	X			33
7. Nature and extent of homelessness are outlined.	X			130-189

Identification Of Community Development Needs (24 C.F.R. §91.215(a)(2)(b) et. Seq

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Economic trends identified		X		20
2. Specific examples of community development needs are detailed (i.e. child care centers, employment training and microbusiness)		X		88

Affirmatively Further Fair Housing

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Analysis Of Impediments To Fair Housing Choice completed	X			80
2. Fair Housing Plan adopted to eliminate barriers	X			Append
3. Ongoing activities and milestones have been achieved to eliminate barriers	X			Append
4. Tracking / monitoring of accomplishments	X			Append

Comment Letter #6 Continued

HCP CONSORTIUM CONSOLIDATED PLAN REVIEW Prepared By: Nevada Fair Housing Center, Inc

Progress In Implementation

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. An analysis of the significant difference between what was projected or planned in the previous element and what was achieved.		X		224
2. Goals, objective and policies are appropriate; plan incorporates what has been learned from the results of the previous element.	X			92

Current Five Year Action Plan

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Is specific and includes quantifiable goals	X			92-115
2. Plan is in line with identified community and social service agency needs	X			92-115
3. Plan encourages non-profit/government and private sector partnerships	X			92-115

Constraints on Housing

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Plan list actual housing constraints	X			78
2. Land use controls (e.g., zoning, growth controls, open space) are addressed		X		78
3. Codes and enforcement issues addressed		X		77
4. Impact fees address (permit fees & land dedication)		X		77
5. Plan incorporates "Fair Housing"	X			111
6. Other governmental constraints				77

Nongovernmental Constraints

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Available of financing		X		82
2. Price of land		X		82
3. Cost of construction		X		82
4. Other nongovernmental constraints		X		82

Comment Letter #6 Continued

HCP CONSORTIUM CONSOLIDATED PLAN REVIEW
Prepared By: Nevada Fair Housing Center, Inc

CITY OF LAS VEGAS

Citizen Participation

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
2. Consolidated Plan reflects citizen participation process and the ideas of social service agencies 42 U.S.C§5304(a)(3)(A)			X	22

Identification Of Housing Needs

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Comparison of prior needs to current needs.			X	None
2. Housing market analysis	X			58-59
3. Plan estimates housing needs for the upcoming five years and describes priority non-housing community development needs.			X	None
4. Plan estimates housing needs by income categories, family size and renter verses owner needs.	X			60
5. Housing need for special populations are discussed in detail	X			52-54
6. The Plan discuss and estimates the number of persons paying over 30% or 50% of their income; living in very poor quality or overcrowded housing.	X			37-40
7. Nature and extent of homelessness are outlined.				130-189

Identification Of Community Development Needs (24 C.F.R. §91.215(a)(2)(b) et. Seq

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Economic trends identified			X	None
2. Specific examples of community development needs are detailed (i.e. child care centers, employment training and microbusiness)		X		195

Affirmatively Further Fair Housing

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Analysis Of Impediments To Fair Housing Choice completed	X			80
2. Fair Housing Plan adopted to eliminate barriers	X			Appen
3. Ongoing activities and milestones have been achieved to eliminate barriers		X		Appen
4. Tracking / monitoring of accomplishments		X		Appen

Comment Letter #6 Continued

HCP CONSORTIUM CONSOLIDATED PLAN REVIEW Prepared By: Nevada Fair Housing Center, Inc

Progress In Implementation

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. An analysis of the significant difference between what was projected or planned in the previous element and what was achieved.			X	No
2. Goals, objective and policies are appropriate; plan incorporates what has been learned from the results of the previous element.		X		102

Current Five Year Action Plan

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Is specific and includes quantifiable goals		X		95
2. Plan is in line with identified community and social service agency needs			X	
3. Plan encourages non-profit/government and private sector partnerships		X		

Constraints on Housing

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Plan lists housing constraints (by jurisdiction)			X	No
2. Land use controls (e.g., zoning, growth controls, open space) are addressed			X	No
3. Codes and enforcement issues addressed			X	No
4. Impact fees address (permit fees & land dedication)			X	No
5. Plan incorporates "Fair Housing"				113
6. Other governmental constraints			X	

Nongovernmental Constraints

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Available of financing			X	No
2. Price of land			X	No
3. Cost of construction			X	No
4. Other nongovernmental constraints			X	No

Comment Letter #6 Continued

HCP CONSORTIUM CONSOLIDATED PLAN REVIEW
 Prepared By: Nevada Fair Housing Center, Inc

CITY OF NORTH LAS VEGAS

Citizen Participation

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Consolidated Plan reflects citizen participation process and the ideas of social service agencies 42 U.S.C§5304(a)(3)(A)			X	22

Identification Of Housing Needs

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Comparison of prior needs to current needs.			X	
2. Housing market analysis	X			57-65
3. Plan estimates housing needs for the upcoming five years and describes priority non-housing community development needs.			X	
4. Plan estimates housing needs by income categories, family size and renter verses owner needs.			X	
5. Housing need for special populations are discussed in detail	X			
6. The Plan discuss and estimates the number of persons paying over 30% or 50% of their income; living in very poor quality or overcrowded housing.	X			41
7. Nature and extent of homelessness are outlined.	X			130-189

Identification Of Community Development Needs (24 C.F.R. §91.215(a)(2)(b) et. Seq

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Economic trends identified			X	
2. Specific examples of community development needs are detailed (i.e. child care centers, employment training and microbusiness)			X	

Affirmatively Further Fair Housing

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Analysis Of Impediments To Fair Housing Choice completed	X			80-91
2. Fair Housing Plan adopted to eliminate barriers		X		Appen
3. Ongoing activities and milestones have been achieved to eliminate barriers		X		Appen
4. Tracking / monitoring of accomplishments		X		Appen

Comment Letter #6 Continued

HCP CONSORTIUM CONSOLIDATED PLAN REVIEW Prepared By: Nevada Fair Housing Center, Inc

Progress In Implementation

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. An analysis of the significant difference between what was projected or planned in the previous element and what was achieved.			X	
2. Goals, objective and policies are appropriate; plan incorporates what has been learned from the results of the previous element.				

Current Five Year Action Plan

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Is specific and includes quantifiable goals		X		
2. Plan is in line with identified community and social service agency needs			X	
3. Plan encourages non-profit/government and private sector partnerships			X	

Constraints on Housing

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Plan lists housing constraints			X	
2. Land use controls (e.g., zoning, growth controls, open space) are addressed			X	
3. Codes and enforcement issues addressed			X	
4. Impact fees address (permit fees & land dedication)			X	
5. Plan incorporates "Fair Housing"		X		114
6. Other governmental constraints		X		

Nongovernmental Constraints

	Exceeds Federal Standard	Satisfactory	Unsatisfactory	Page No
1. Available of financing			X	
2. Price of land			X	
3. Cost of construction			X	
4. Other nongovernmental constraints			X	

Responses to Comment Letters

Comment Letter #1

In general, CDBG funds are used for the construction of public facilities in low-income neighborhoods and for low-income persons. These facilities not only provide services to residents but also improve area aesthetics through architectural innovation and quality. Examples include the Rafael Rivera Community Center, the Cambridge Recreation Center under construction and the planned East Las Vegas Community Center. The Cities of Las Vegas and North Las Vegas outline neighborhood revitalization strategies for specific areas. Using CDBG funds, the City of Las Vegas will be rehabilitating an existing historic structure in the Downtown, making it into a community center. Further, each jurisdiction will continue to provide housing rehabilitation programs which assist low-income homeowners with interior and exterior home improvements. These strategies are described in more detail in the Housing Strategic Plan.

Comment Letter #2

The City of Las Vegas has not withdrawn and will not withdraw its support of efforts to assist the homeless. In fact, the City supports the strategies as outlined within the Consolidated Plan to provide facilities and services. In addition, the City supports the continued operation of facilities and services already existing within its boundaries. The City's position is that the concentration of facilities and services in one area creates at least two burdens, one upon the area where the facilities and services are located and secondly upon those homeless persons who are in outlying areas.

As noted within the "Geographic Location of Homeless Services" section, there are unintended consequences of concentrating facilities in a single area including increased law enforcement, loss of business development and intrusion upon residential neighborhoods. Certainly, the City realizes its obligation to serve the homeless within its boundaries; however, if the City is the only location of such facilities, then it becomes obligated to serve the homeless from all jurisdictions within the Las Vegas Valley. Thus, while the City provides for the Valley's homeless, it also deals with the consequences of providing these facilities and services. In addition, the homeless are also burdened by such a system of concentrating facilities and services. Homeless within outlying areas must gather their meager resources to find transportation to the City in order to receive the needed services. Those homeless persons who are employed are now forced to decide between employment and services since most will not have the resources to travel between communities. Furthermore, some homeless persons are not even aware of the existence of services or facilities in the City.

Again, the City supports the provision of facilities and services, but any new facilities should first be considered within other outlying communities within the Valley before consideration of such additional facilities within the City.

The comments regarding Continuum of Care are related neither to the Consolidated Plan nor to Action Plan and will be responded to separately.

Comment Letter #3

1. HUD requires the use of 1990 Census data or any other updated and equally reliable data. Unfortunately, there was no equally reliable, updated data available on housing needs. Therefore, 1990 income data was used in order to develop a consistent comparison. The updated income data is noted within the Community Profile section to ensure that the community and HUD are aware of the tremendous demographic changes occurring within the Consortium.
2. We agree that private housing developments are unable to provide high quality rental units affordable to very low-income households due to the costs of construction, related financing and continued operation. Therefore, federal and state funding sources are allocated to “Affordable Housing” developments to allow for the provision of high quality housing affordable to very low-income households. Assistance may include acquisition of land, mitigation of construction costs or favorable financing terms. However, these incentives require that such developments provide a specific number of housing units be made available at an affordable price to very low income households including all the same amenities offered to non-subsidized units within the same development.
3. The comment regarding the statement on page 77 is accurate and has been addressed within the Final Consolidated Plan. In fact, public policies do present a barrier to the production of affordable housing. The Housing Strategic Plan section of the Final Consolidated Plan outlines strategies to reduce such barriers.
4. The statement that “...[I] posture that it is more likely that higher income households are less likely to have two people working than lower income households”, there is no data to conclusively support such a position. Without such data, it is inappropriate for the Consolidated Plan to make such an assertion. For purposes of clarification, the housing needs outlined within the Housing Plan section rely upon a comparison of housing costs and “Household” income data. The observation is correct that the income data does not indicate the number of persons working in the household. The number of persons working within a household is not of concern except where the level of household income is below that required to provide affordable housing. Therefore, the point is made within the Community Profile section that the hotel/gaming/recreation industry offers low to moderate wages. The very positive side is that this industry provides jobs; however, the level of wages necessitates the continued development of affordable housing. In combination, households will be able to remain both self-reliant through employment and financially stable through provision of affordable housing.
5. The comment regarding Figure 37 and the inappropriate inclusion of housing developments from counties other than Clark County is accurate and has been addressed within the Final Consolidated Plan. This was due to staff error during the processing of raw data. Only federally assisted housing developments at risk of conversion within Clark County are now represented within the Final Consolidated Plan.

Comment Letter #4

The comments received do not pertain to any issues or strategies addressed within the Consolidated Plan; however, the statements will be addressed through a separate letter.

Comment Letter #5

1. Each of the communities within the Consortium conducted their own community input meetings in order to focus specifically on their communities. The City of Las Vegas conducted five Community Needs and Priorities Review meetings in October of 1999. In addition to public notices, regarding these meetings, in newspapers of general circulation, over 7,000 post cards were mailed to residents. Members of the community were not denied the ability to participate in these meetings. In some instances, persons from other communities attended and were informed that their comments applied to another area; however, these comments were still recorded. The surveys completed at each of the Community Needs and Priorities Review meetings were collected and are available on file at the Neighborhood Services Department.
2. The results of surveys completed by residents during the Community meetings were reviewed verbally at the end of each meeting. Further, these priorities were used to develop the Request for Proposal advertised with the distribution of applications for federal grant funds in November of 1999. A summary of the priority needs was published within the City's Grants Program Manual, which was made available to all persons making application for federal grants. In addition, this information was again made available to those who attended the publicly noticed "Technical Assistance" meeting in November of 1999.

In the future, as a courtesy to residents who take the time to attend and participate in the Community meetings, the City will offer attendees the option of requesting a written summary of the survey results.

3. The City's Action Plan was not released until April 6, 2000 because City Council did not review and take final action on the Community Development Recommending Board (CDRB) funding recommendations until April 5, 2000. These funding recommendations had to be included within the Action Plan. The City's Action Plan was mailed to anyone who received a copy of the Draft Consolidated Plan. The City continued to accept comments through May 8, 2000.
4. The Action Plan is not designed to provide a summary of the accomplishments of previous goals and strategies. The Comprehensive Annual Performance Evaluation Report (CAPER) is the HUD required document designed to inform the public of the jurisdiction's accomplishments over the program year. The City's CAPER is available on file at the Neighborhood Services Department.
5. The City of Las Vegas priorities as reported in the five year Consolidated Plan were developed in the same manner as all other Consortium jurisdictions. Priorities were generated using the information garnered from the community meetings, from the Housing Strategic Plan is

described on page 87 of the draft document; the Homeless Strategies are described on page 170; and the Community Development Strategies are described on page 194.

The Action Plan tables identify the five-year strategies and objectives, and then list the corresponding annual actions to be taken toward achieving said strategies. This is intended to clarify the relation between the five-year strategies and annual actions. In addition, maps are provided in the Action Plan outlining the low- to moderate-income areas and the location of projects. These maps are a graphic illustration that the majority of activities undertaken with federal entitlement funds occur in these low/mod areas.

The Community Development Plan (page 191 Draft Consolidated Plan) indicates that the Strategic Plan is based upon citizen input and the Southern Nevada Empowerment Zone application. This application included a Community Participation Program conducted from April through October of 1998 including newsletters, website, community workshops, focus group meetings and surveys, public hearings and planning teams. In addition, the City incorporated the survey results from the Community Needs and Priorities Review meetings conducted in October of 1999.

6. Regarding the provision of HOME funds to For-Profit developers, the City has never held the position that such funds would only be provided to Non-Profit developers either solely or in partnership with a For-Profit. Historically, the City has not provided HOME funds to For-Profit developers; however, do not confuse precedence with policy. Pursuant to Code of Federal Regulations governing the use of HOME funds, loans may be made to For-Profit developers. Further, federal regulations do not specify that jurisdictions must provide grants rather than loans to Non-Profit developers. Certainly, any use of HOME funds by a For-Profit developer would be subject to the same federal guidelines and stipulations as any Non-Profit developer. Also, understand that the Strategic Plan deals with strategies to meet under-served needs. Each developer and project will be evaluated based upon its ability to meet under-served needs as identified within the Consolidated Plan. Furthermore, the Strategic Plan does not in any way encourage preferential treatment for either For-Profit or Non-Profit developers with respect to funding.

Comment Letter #6

Citizen Participation

City of Las Vegas

Each of the communities within the Consortium conducted their own community input meetings in order to focus specifically on their communities. The City of Las Vegas conducted five Community Needs and Priorities Review meetings in October of 1999. Members of the community were encouraged to participate in these meetings. In addition to public notices regarding these meetings in newspapers of general circulation, over 7,000 postcards were mailed to lower-income residents. In some instances, persons from other communities attended and were informed that their comments

applied to another area; however, these comments were still recorded. The surveys completed at each of the Community Needs and Priorities Review meetings were collected and are available on file at the Neighborhood Services Department.

The results of surveys completed by residents during the community meetings were reviewed verbally at the end of each meeting. These priorities were then used, in conjunction with other data, to develop the Request for Proposal advertised with the distribution of applications for federal grant funds in November of 1999. A summary of the priority needs was published within the City's Grant Program Manual, which was available to all persons making application for federal grants. In this way, applicants could use this information to develop programs to serve the identified needs. In addition, this information was again made available to those who attended the publicly noticed "Technical Assistance" meeting in November of 1999.

The City of Las Vegas did not participate in the Clark County Housing Policy Task Force because this task force focused on unincorporated areas of the County.

In the future, as a courtesy to residents who take the time to attend and participate in the community meetings, the City will offer attendees the option of requesting a written summary of the survey results.

The City's Action Plan was not released until April 6, 2000 because City Council did not review and take final action on the Community Development Recommending Board (CDRB) funding recommendations until April 5, 2000. These funding recommendations had to be included within the Action Plan. The City of Las Vegas Action Plan was mailed, as an addendum, to all persons who had received the Draft Consolidated Plan. The City continued to accept comments through May 8, 2000.

The diversity of people attending the City's Community meetings is not within the control of the City, however, the 7,000 postcards were mailed to neighborhoods that have a high percentage of minority residents.

North Las Vegas

A separate meeting was held for service providers to give input into the plan. While providers were not specifically invited to the other community meetings, they were not excluded. The City of North Las Vegas preferred to have citizens make comments without undue influence of social service providers at the other community meetings. Written reports on comments were provided to Clark County as part of the information necessary to develop strategies. The draft of strategies was made available for public comment at a public hearing of the City Council. Participants were not provided with comment from previous meetings, as the purpose of each community meeting was to obtain unbiased, honest views on community needs from the group present.

Identification of Housing Needs

Apparently, the plan was not clear in its Community Profile section, "Employment Trends" that the information applies to the entire Consortium. For clarification, Clark County, as named in this section, has been changed to HCP Consortium. Based upon our research, there is little difference between jurisdictions concerning the types of employment available. The dominant industries are the gaming and service sectors, which account for 45% of all jobs. The jurisdictions that are a part of this analysis include unincorporated Clark County, Las Vegas, North Las Vegas, Boulder City and Mesquite, which will be referred to collectively as the HCP Consortium.

Identification of Community Development Needs

Clark County

Clark County appreciates the comments pertaining to the Southern Nevada Reinvestment and Accountable Banking Committee and has added the information provided to the plan.

Las Vegas

The specific production of loans or businesses already served by the Las Vegas incubator project will be described in the upcoming FY 1999 Consolidated Annual Performance and Evaluation Report (CAPER). Loans made in previous years are described in the respective CAPER documents, which are available through the City of Las Vegas Neighborhood Services Department. The Neighborhood Services Department is currently facilitating the development of two specific neighborhood plans, which will include the identification of economic development needs and strategies, including private market investment opportunities.

North Las Vegas

Economic development activities take place through the Redevelopment Division of the Community Development Department. Activities include marketing the older commercial areas to potential business interests, using redevelopment funds to provide commercial rehabilitation and landscaping upgrades. Private capital has been attracted to the more mature areas of North Las Vegas through the activities of the Redevelopment office. Attempts to attract Community Reinvestment Act resources have been unsuccessful to date, however, with continued private investment in the downtown area, the area is becoming more attractive to the banking industry. The Redevelopment Division will aggressively pursue partnerships with the banks in the upcoming years. The new five-year plan for North Las Vegas includes strategies and objectives to increase employment opportunities for low- and moderate-income residents and neighborhoods through business attraction and retention.

Affirmatively Further Fair Housing

The HCP Consortium will continue to work on addressing the fair housing issues identified in each jurisdictional Analysis of impediments to Fair Housing.

Progress in Implementation

The Consolidated Plan and Annual Action Plans are not designed to provide a summary of the accomplishments of previous goals and strategies. The Comprehensive Annual Performance Evaluation Report (CAPER) is the HUD required document designed to inform the public of the jurisdiction's accomplishments over the program year. The respective Annual CAPER documents are available at the City of Las Vegas Neighborhood Services Department and Clark County Community Resources Development Division.

City of Las Vegas

The City of Las Vegas priorities as reported in the five year Consolidated Plan were developed in the same manner as all other Consortium jurisdictions. Priorities were generated using the information garnered from the community meetings, from the Housing Strategic Plan is described on page 87 of the draft document; the Homeless Strategies are described on page 170; and the Community Development Strategies are described on page 194.

The Action Plan tables identify the five-year strategies and objectives, and then list the corresponding annual actions to be taken toward achieving said strategies. This is intended to clarify the relation between the five-year strategies and annual actions. In addition, maps are provided in the Action Plan outlining the low- to moderate-income areas and the location of projects. These maps are a graphic illustration that the majority of activities undertaken with federal entitlement funds occur in these low/mod areas.

The Community Development Plan (page 191 Draft Consolidated Plan) indicates that the Strategic Plan is based upon citizen input and the Southern Nevada Empowerment Zone application. This application included a Community Participation Program conducted from April through October of 1998 including newsletters, website, community workshops, focus group meetings and surveys, public hearings and planning teams. In addition, the City incorporated the survey results from the Community Needs and Priorities Review meetings conducted in October of 1999.

North Las Vegas

The Consolidated Plan and Annual Action Plans are not designed to provide a summary of the accomplishments of previous goals and strategies. The Comprehensive Annual Performance Evaluation Report (CAPER) is the HUD required document designed to inform the public of the jurisdiction's accomplishments over the program year. The Annual CAPER documents are available at the Clark County Community Resources Development Division.

How the City of North Las Vegas will achieve its five-year goals is outlined in the Community Development Strategic Plan Figure 56 under funding sources. The new five-year goals will be met using federal entitlement funds, general funds, redevelopment funds and private investment. The final tally of accomplishments for the last five years will be described in the upcoming FY 1999 CAPER. The first five year Consolidated Plan was developed without adequate input on the part of the City of North Las Vegas. Further, staffing levels were inadequate to accomplish the goals outlined in the plan. Current staffing levels will assist the City of North Las Vegas in meeting its new five-year goals.

The City of North Las Vegas, whose population is 53% low- and moderate-income, has identified its priority housing need as rehabilitation of existing housing. There is a preponderance of affordable housing in North Las Vegas that is in need of substantial rehabilitation. For this reason, North Las Vegas will focus on housing rehabilitation. However, the new five-year strategies also identify new affordable single-family housing (through infill) as a goal. The City of North Las Vegas supports the construction of new affordable housing primarily for seniors.

Appendix B

Citizen Participation Plan

Introduction

The purpose of the Consortium Citizen Participation Plan for the HUD Consolidated Plan (HCP) is to encourage participation by all citizens, especially very low- and low-income persons, and particularly those living in blighted areas and areas where CDBG funds may be used. Participation includes minorities and non-English speaking persons, and persons with mobility, visual and hearing impairments. In addition, consultation will be undertaken with public housing authorities and their residents. The following guidelines provide the steps that will be taken by the Consortium and the respective jurisdictions to maximize citizen participation in the development of the HCP and in the allocation of funds.

A portion of the Citizen Participation Plan describes the respective community participation processes developed to ensure an atmosphere of open communication and cooperation between the Consortium, local organizations and businesses, and individual citizens concerned with the health and vitality of their communities, neighborhoods, and homes.

Access to Information

To ensure that citizens and interested groups have access to information that may have an impact on their particular community interests, the following information will be furnished:

1. A summary of the amount of assistance each of the jurisdictions expects to receive from the various programs cited in the HCP.
2. An outline of the range of activities to be implemented, including the amount that will benefit persons of very low- and low-income and the plans to minimize displacement of persons and to assist any person displaced.
3. Comment sheets for all meetings will be made available to all participants in attendance, and, upon notification, comment sheets will be provided to concerned individuals who are unable to attend citizen participation meetings.

Anti-Displacement

It is the policy of the Consortium to discourage displacement by encouraging non-profit subrecipients to purchase vacant dwellings or dwellings where preliminary tenant surveys indicate eligibility under HOME program. In cases where displacement occurs, the CDBG and HOME Consortium members will follow the requirements of Uniform Relocation Act. Levels of assistance are consistent with the requirements of the Uniform Relocation Act.

Publishing the Plan

Each public meeting shall be posted and advertised in accordance with the Nevada Open Meeting Law and HUD participation requirements. Sufficient advance notice for each of the hearings will be provided. The Consortium will utilize local newspapers, including the Las Vegas Review Journal, Las Vegas Sun, El Mundo, the Latin Press and the Las Vegas Sentinel-Voice to publish a summary of the HCP. This summary will describe the contents and purpose of the plan and will include a list of the locations where copies may be examined.

Public Hearings

Two hearings shall be held during the program year to solicit input from citizens and representative groups, to be included in the HCP. The first public hearing will be a pre-publication meeting, and the second a post-publication meeting.

These hearings will address housing and community development needs, the development of proposed activities, and a review of program performance. In addition, citizen views on housing and community development needs, including the priority ranking of non-housing community development needs, will be solicited.

These hearings will address the Consortium's housing and community development needs, the development of proposed activities, and a review of program performance. In addition, the Consortium's priority ranking of non-housing community development needs will be addressed.

Additionally, in an effort to offer a variety of avenues for public participation, designed to accommodate a range of cultural, communications and learning styles, the following participation opportunities may be offered:

1. Interactive Workshops

A series of interactive workshops will be held in various locations throughout the Consortium. Locations will be selected that ensure accessibility for low-income residents, the disabled, seniors, and based upon geographic eligibility to receive funds. Each session will cover the following topics:

- Orientation to the Consolidated Plan process;
- Review of the programs covered by the Consolidated Plan, the range of activities eligible under those programs, and the amount of funding anticipated being available.
- Review of how the Consortium has employed the resources available to it in addressing the community's housing and community development needs;
- Opportunity for citizens to identify local housing and community development needs and issues, with particular emphasis on new or emerging needs;
- Prioritizing among needs and issues; and

- Identifying additional resources the community may leverage to complement or coordinate with state and federal resources.

As required by federal regulations, at least two community-wide public hearings will be held on the Consolidated Plan process, programs covered by the Plan, and to hear comments and concerns on housing and community development needs. One hearing will be held during the development of the draft plan, before its publication for public comment. The second public hearing will be held during the public comment period. The hearings will address:

2. *Participation in working groups*

A jurisdiction or the Consortium may elect to form one or more small working groups, focusing on specific topics, as part of its Consolidated Plan process. Participation of citizens in these groups will be encouraged.

3. *Printed Materials*

In addition to the Citizen Participation Plan, the Consolidated Plan Annual Action Plans and Performance Reports, several printed materials will be available to citizens, to explain the Consolidated Plan process and to facilitate public participation. Materials include:

- A Consolidated Plan Brochure highlighting the process and familiarizing citizens with the involved agencies.
- Individual Program Fact Sheets, outlining each of the major programs covered by the Consolidated Plan.
- A Consolidated Plan Executive Summary, containing a concise summary of the major findings and goals of the Consolidated Plan.

Access to Meetings

Meetings will be located convenient to public transportation, in facilities with handicapped access. The Consortium will provide translation services during meetings for non-English speaking residents, as appropriate.

Public Comment Period

The HCP participation process will provide a 30-day comment period to allow Consortium citizens to read the proposed HCP and to formulate comments regarding its specific objectives. To ensure many opportunities for public input, draft copies of the HCP will be made available at locations serving as depositories, such as government offices and other public places. A reasonable number of complimentary copies will be made available upon request to concerned citizens or assisting agencies. Citizen input provided verbally and in writing will be included in the HCP public comment section. A copy of citizen comments and views will be incorporated in the HCP, and, if applicable, the respective reasons for the non-inclusion of suggested revisions into the final document.

Area residents, businesses, non-profit organizations, public housing authorities, and other interested persons in each of the jurisdictions, will be given the opportunity to participate in the dialogue that ultimately shapes the details of the HCP.

Performance Reports

Performance reports are made available to the public for a 15-day review period prior to their submittal to HUD. Notices are published in local newspapers and mailed to interested parties. Any citizen comments, either in writing or presented orally at public hearings, are incorporated into the performance reports.

Plan Availability and Timely Notification

Copies of the HCP will be made available at libraries, appropriate government offices in each of the jurisdictions and at other locations frequented by Consortium citizens. The Consortium will provide timely notification by adhering to all posting requirements in compliance with the Nevada Open Meeting Law. The Consortium will mail notices of the two public hearings to interested non-profit organizations, groups, and active citizens.

1. *Newspaper Coverage*

At a minimum, advertising space will be purchased to publish announcements and required summaries in a newspaper of general citywide circulation. When appropriate, multiple newspapers may be used, including local non-daily publications, and papers serving minority communities. Display advertisements as well as legal advertisements may be used. The Consortium will also issue press releases, and provide background information to encourage press coverage of Consolidated Plan events.

2. *Direct Mail*

The HCP Consortium will create and maintain a master mailing list of persons and organizations interested in receiving information about the Consolidated plan. Persons signing attendance lists at interactive workshops, public hearings or other venues connected with the Plan will automatically be added to the mailing list. Persons on the mailing list will receive notice of availability of the Citizen Participation Plan, announcements of interactive workshops and public hearings, and notices pertaining to availability of the draft Consolidated Plan, Annual Action Plan, and performance reports.

3. *Other Media*

The Consortium will prepare, as needed, Public Service Announcements (PSAs) and press releases about interactive workshops and public hearings and provide them to broadcast television and radio stations for their use. PSAs will also be used to recruit citizen participation in working groups and to announce the availability of the Consolidated Plan, Annual Action Plans or performance reports for public comment. The Consortium may also use other media as appropriate, such as flyers, bulletin boards, Internet, libraries, etc.

Access to Records

Each of the Consortium jurisdictions will provide reasonable public access to information and related records from the preceding five years.

Technical Assistance

Each of the Consortium jurisdictions will provide technical assistance, upon request, to qualified very low- and low-income groups in developing proposals for funding under any of the programs covered by the HCP. The respective jurisdictions will each determine the level and type of assistance to be provided.

The Consortium will provide needed technical assistance at public meetings, to citizens and their representative groups, concerning the HCP process and the public comment portion of the plan. This assistance will include:

1. Providing grant applications and instructions for completion of each for the respective jurisdictions
2. Providing staff assistance in completing and responding to questions that may arise out of the development process.

Available Documents

The following documents will be available for public inspection at the Clark County Community Resources Management Division, 5th Floor, 500 South Grand Central Parkway, Las Vegas, Nevada, during normal working hours:

1. Clark County's Statement of Objectives and Projected Use of Funds;
2. Clark County's HUD Consolidated Plan;
3. Project Environmental Review Records;
4. Mailings and promotional materials;
5. Records of public hearings;
6. Regulations governing the program;
7. Copies of the Community Development Advisory Committee Program Manuals; and
8. Consolidated Annual Performance and Evaluation Report (CAPER).

Community Comments and Complaints

The Consortium will solicit input from very low- and low-income persons, particularly those living in blighted areas and where CDBG funds are proposed to be used. Input will be solicited from minorities and non-English speaking persons and persons with mobility, visual or hearing impairments. The HCP consultation process will include input from public housing authorities and their residents.

Public comments received, in writing or orally at the public hearings, will be reviewed by the

Consortium’s respective jurisdictions to determine if any action is needed. If a response is deemed necessary, the respective jurisdictions will provide a written response to the citizen. A summary of all comments and responses received during the public comment and plan development period will be included in the HCP.

If the Consortium receives a written citizen complaint related to the HCP development of the citizen participation plan, or to the amendments and performance report, the complaint will be reviewed, summarized and responded to within 15 working days by the Consortium.

Amendments

The criteria for Non-Substantial Amendments and Substantial Amendments are defined as follows:

➤ **Non-Substantial Amendments**

Either the termination, addition or change of any planned or actual activity in an amount of \$350,000 or less, or a change in location of any planned or actual activity within a five mile radius from the original site.

➤ **Substantial Amendments**

Either the termination, addition or change of any planned or actual activity in an amount greater than \$350,000 or a change in location of any planned or actual activity outside a five mile radius from the original site.

Before a Substantial Amendment can be implemented, the respective jurisdiction must provide citizens with a reasonable notice utilizing local newspapers and posting locations throughout the community with at least 30 days to comment. The respective jurisdiction shall consider all citizen comments received and attach a summarized evaluation of acceptable and unacceptable comments to the Substantial Amendment.

Adoption of the Citizen Participation Plan

The HCP shall be approved by the respective Board of County Commissioners and City Councils after the agenda item is legally posted and copies of the HCP are made available to the public. The Consortium will provide copies to the respective jurisdictions for public review, and will make copies available to each of the respective housing authorities.

Citizen Participation Specific to Jurisdictions

Urban County Consortium CDBG Citizen Participation Process

Under the Cooperative Agreement for Housing and Community Development, Clark County, the cities of North Las Vegas, Boulder City and Mesquite have agreed “that housing and community development activities are to be performed jointly.” As the grantee, the County assumes the role of lead agency ultimately responsible for overseeing the administration of the CDBG plan in terms of

meeting citizen participation requirements, ensuring that all four jurisdictions employ affirmative action in the areas of fair housing, equal employment opportunity, business opportunities for minorities and women, and administering environmental review records. The jurisdictions agree “they will assist the lead agency in performing any and all actions required and appropriate to comply with the provisions of the CDBG grant agreements.”

Planning activities will follow the same steps each year although the timing may vary somewhat. These steps are:

1. Dissemination of CDBG information to cities, towns, agencies, and individuals;
2. Identification of community development issues, needs, and concerns (joint effort of staff and citizens committees);
3. Submission of project applications; and
4. Project selection and development of CDBG Statement of Objectives for submission to HUD:
 - a. Meetings and hearings to obtain citizen input,
 - b. Review of project applications by CDAC and staff,
 - c. Project recommendations of CDAC to the Clark County Board of Commissioners,
 - d. Public hearing before the Board of County Commissioners and final selection of projects for application submission to HUD.

The primary conduits for citizen input take place via the countywide Community Development Advisory Committee (CDAC), the North Las Vegas Citizens Advisory Committee, and the scheduled public hearings and open meetings held in Clark County, North Las Vegas, Boulder City, and Mesquite. Citizen involvement is encouraged through dissemination of timely information and adequate advance notice of meetings and hearings.

All citizens are encouraged to participate in the development of the CDBG funding allocation and input is directly solicited from individuals in low to moderate-income groups, particularly those in blighted areas where CDBG funds are most likely to be directed and utilized. The County will continue to make special attempts to evoke participation from residents of public housing developments since they are a primary target of CDBG funding. Input from these citizens is sought through the means of a well-publicized notice of the annual public hearings during which a dialogue between process participants and representatives of local jurisdictions is welcomed. All aspects of this process will be made available to handicapped persons as they are often targeted as beneficiaries of CDBG funding. Attendance and input from minority populations and non-English-speaking community members will be strongly encouraged as part of the CDBG process.

Public Hearings And Meetings

Public hearings and meetings will be the prime vehicle for eliciting public input. Generally, public meetings will be held as needed to extend technical information and to respond to citizen questions and concerns. Public hearings will be held by CDAC, the Cities of North Las Vegas, Boulder City, and Mesquite, and the County Commission for the purpose of formal presentation and/or adoption of CDBG documents or policies.

North Las Vegas, Boulder City, and Mesquite, and each of the unincorporated towns must hold a public hearing to solicit citizen input concerning any projects proposed to be located within their respective boundaries. An endorsement by the appropriate City Council or town advisory board is required for all such projects.

Community Development Advisory Committee (CDAC)

CDAC is composed of thirty-six (36) members of the community. Each of the fourteen (14) town advisory boards and five citizens advisory councils is entitled to nominate one representative and one alternate, subject to appointment by the Board of County Commissioners. The North Las Vegas, Boulder City, and Mesquite City Councils each appoint a representative and alternate to the Committee. Finally, fourteen at-large members representing low income, minority, elderly, handicapped, housing, and other community-wide interests are selected by the County Commissioners.

CDAC is advisory in nature. The purpose of the Committee is to provide citizen input into CDBG planning and implementation activities. CDAC is responsible for making recommendations to the Board of County Commissioners with regard to the selection of projects to be funded with CDBG monies. It is important that all CDAC members be well informed regarding the CDBG Program, eligible and ineligible activities, planning and implementation processes, and applicable federal guidelines in order to responsibly fulfill their role as spokespersons for the community. The specific responsibilities of the three types of CDAC members are outlined below:

1. Town Advisory Boards/Citizens Advisory Councils

Members appointed to CDAC by the town advisory boards (TABs) and citizens advisory councils (CACs) primarily represent their respective unincorporated towns and unincorporated areas. They are responsible for insuring that fellow town advisory board members and residents are kept apprised of CDBG activities, requirements, and timetables. They serve as a conduit for input from their respective towns and areas into the CDBG planning and implementation process.

2. Participating Cities

CDAC representatives from North Las Vegas, Boulder City, and Mesquite serve primarily as non-voting liaisons for their respective cities.

Because North Las Vegas, Boulder City, and Mesquite will be largely responsible for planning and administering their own projects, they are encouraged to conduct independent meetings and hearings soliciting citizen input to augment the CDAC process. The North Las Vegas Citizens Advisory Committee, of which the North Las Vegas CDAC representative may be a member, will continue to meet on a monthly basis in their community and to advise the North Las Vegas City Council directly regarding Community Development activities.

Boulder City and Mesquite will meet the citizen participation requirements by conducting at least one City Council public hearing during each program year.

3. Community At-large

The fourteen representatives at large are responsible for insuring that the needs of the low and moderate-income families, elderly, handicapped, and minority populations are expressed and adequately reflected in CDBG activities. They also play a role in keeping County residents informed of program progress.

North Las Vegas Citizens Advisory Committee

The City of North Las Vegas annually appoints a Citizens' Advisory Committee (CAC) to review CDBG applications and make recommendations on funding to the City Council. Comprised of seven North Las Vegas residents, the CAC hear applicant presentations, review the applications and hold a public hearing. A separate CAC meeting is held to prioritize applications and vote on funding levels. The CAC recommendations are then forwarded to the City Council for action.

Project Application and Selection Process

The most difficult task the Community Development Advisory Committee and Citizens Advisory Committee face is selecting which projects and activities are to be recommended for funding. The limited amount of CDBG funds is inadequate to meet the requests of all the participating cities, towns, and neighborhoods. Development of a project ranking system enables CDAC and staff to prioritize proposals in a manner that will best meet countywide strategies and objectives.

The Cities of North Las Vegas, Boulder City, and Mesquite as well as nonprofit agencies interested in receiving CDBG funds must submit a project application to the Clark County Community Resources Management Division.

Once County staff has received the applications, CDAC and staff review will commence. Open meetings and hearings will be held. Bus tours of agencies and projects requesting funding will be taken. Finally, project selections will be made based on a Project Ranking System determined each year by CDAC. These selected projects will be presented to the Board of County Commissioners for their consideration and approval. Following Commission selection, funding allocations for these projects are approved, and an application and final statement of the final projects will be prepared and submitted to HUD for federal funding approval.

Clark County HOME Program Citizen Participation Process

The Cities of Las Vegas and North Las Vegas receive their HOME funding per an Interlocal Agreement. At their discretion, these government entities may award HOME/LIHTF or other housing funds for projects within their jurisdictions. This may be done by a competition (e.g., an RFP process), or through other means, such as designation by a City Council. The Cities of Las Vegas and North Las Vegas may elect to retain their HOME/LIHTF funds and undertake projects on their own.

The Clark County awards its funds through an RFP process that involves the submission of applications and a review by the Community Development Advisory Committee (CDAC) described above. However, the recommendations of CDAC are advisory only, and the Clark County Board of Commissioners makes final decisions vis-à-vis HOME and other awards.

Citizen Participation

To help ensure that HOME and Low-Income Housing Trust Fund (LIHTF) monies are used in a manner that responds to community needs, the Community Resources Management Division relies heavily upon participation and comment by the public. Input from the community is obtained in several ways.

First, the Community Resources Management Division publishes Requests for Proposals (RFP) for HOME and HOME-related programs. The publications are in the newspaper(s) of record within Clark County.

Second, Community Resources Management Division staff undertakes additional outreach, whereby potential HOME/LIHTF subgrantees are made aware of the programs through public advertisements, telephone calls, face-to-face meetings with Clark County staff, and by receipt of HOME/LIHTF application materials.

Third, the Community Resources Management Division provides a forum for the CDAC, which reviews HOME/LIHTF applications and makes recommendations to the Clark County Board of Commissioners. This advisory body includes representatives from local communities, as well as advocates for the homeless, the disabled, and representatives from various minority communities. The membership also includes representatives from the finance/banking industry and from the Clark County and local housing authorities.

Fourth, CDAC members serve annual terms, and their replacement provides yet another means of receiving additional representation from community members.

Fifth, CDAC holds public meetings to hear presentations from HOME/LIHTF applicants concerning their proposed projects to help the low-income achieve a "decent, safe, and sanitary" housing quality standard. A bus tour is undertaken to visit the project sites, where feasible.

Sixth, applications for HOME/LIHTF grants are presented at public hearings, after which the Clark

County Board of Commissioners makes its binding recommendations, which are based upon input from CDAC, County staff, and the general public.

Seventh, Clark County traditionally has awarded well over the 15% statutory minimum to Community Housing Development Organizations (CHDOs). Such organizations are neighborhood- or community-based, have community representatives on their boards of directors, and are specifically charged with affirmatively marketing affordable housing and furthering Fair Housing activities. To date, the Consortium has assumed the CHDO obligation for the State of Nevada, and furthermore, Clark County continues to assume the CHDO obligation for the entire Consortium.

City Of Las Vegas CDBG and HOME Citizen Participation Plan

To successfully meet the goals for citizen input, the voices of those individuals, neighborhoods and communities impacted by these federal funds must be heard. The primary conduits will be via the Citywide Community Development Recommending Board (CDRB), the scheduled public hearings and neighborhood meetings held in the City of Las Vegas. Citizen involvement will be encouraged through dissemination of timely information and adequate advance notice of meetings and hearings.

Community Development Recommending Board (CDRB)

The CDRB is a citizen's advisory group appointed by the City Council. Its members are appointed to represent the concerns and opinions of the community in advising the City of Las Vegas on the allocation of Community Development Block Grant, HOME Investment Partnerships Program, and the Housing Opportunities for Persons with AIDS program funds, including review and evaluation of proposed community development projects. The members represent target neighborhoods and populations, including low-income, disabled, minorities, elderly and the community-at-large.

Non-profit agencies and City Departments interested in receiving CDBG or HOME funds must submit a project application to the City of Las Vegas Neighborhood Services Department. Priorities and policies for desirable projects each entitlement year change based upon the Annual Action Plan. City staff reviews the applications for eligibility and then forwards the applications to the CDRB.

Through a series of open meetings, the CDRB reviews past projects, examines changes in community needs and explores trends as they affect community development as outlined in the Consolidated Plan. Subsequently, the CDRB evaluates projects using a review process that includes a careful evaluation of each eligible proposal within the context of program design and against program criteria and current objectives, both national and those outlined in the Consolidated Plan. As part of their review, CDRB members consider the ability of the participation agencies to carry out the requirements of a performance agreement.

As part of the review process, the CDRB will hold a number of hearings where the applicants may make presentations. The CDRB will also visit many of the proposing organizations on a bus tour of the CDBG eligible areas. The CDRB will subsequently make recommendations to the Las Vegas City Council, who will in turn make final project selections. Following City Council selection, the

Annual Action Plan will be prepared and submitted to HUD for federal funding approval.

Emergency Shelter Grant Process

Clark County and the City of Las Vegas combine their processes for the allocation of ESG funds in an effort to promote the efficient administration of these very valuable but limited federal funds. The Community Housing Resources Advisory Committee (CHRAC) was established in 1995 to review the applications submitted and make funding allocation recommendations to the Board of County Commissioners and the Las Vegas City Council.

Community Housing Resources Advisory Committee (CHRAC)

The CHRAC is composed of representatives from Clark County, the City of Las Vegas, the State of Nevada, business enterprise, nonprofit organizations and agencies, homeless advocacy groups, and from other local industries or institutions. Staff reviews all applications for eligibility prior to review by the Committee.

CHRAC holds a hearing where the applicants present their projects before the Committee. The CHRAC subsequently makes recommendations to the Board of County Commissioners and to the Las Vegas City Council who make final project selections for submittal to HUD.

Appendix C

Resources

Following is an overview of the programs and resources available to assist the implementation of the Housing Strategic Plan, the Continuum of Care for the Homeless Strategic Plan and the Community Development Strategic Plan. All of the programs and resources identified below may be utilized, as appropriate, in order to implement the objectives outlined in each strategic plan.

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
Federal						
Community Development Block Grant (CDBG)	HUD	Entitlement Grant	70% of funds to be used for activities that benefit low and moderate income persons	Entitlement Communities	Must have approved Consolidated Plan	Neighborhood revitalization, economic development, and improved community facilities, infrastructure improvements and affordable housing
Congregate Housing Services	HUD	Five-year renewable grant	Elderly and handicapped	States, local government and non-profit corporations		Meals programs, and other supportive services to prevent unnecessary institutionalization
Emergency Shelter Grant	HUD	Entitlement Grant	Homeless individuals and families	States and entitlement areas	Must have approved Consolidated Plan, a match of an equal amount required	Renovation and conversion of buildings for use as emergency shelters for the homeless, services, operations and homeless prevention
Home Investment Partnerships Program (HOME)	HUD	Entitlement Grant	Low-income households	Entitlement Communities	Must have approved Consolidated Plan, a match of an equal amount required	Housing acquisition, rehabilitation, new construction, tenant-based assistance, homebuyers assistance, planning and support services

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
HOPE 1	HUD	Grant	Public housing residents	PHA's, public or non-profit organizations, resident management corporations, cooperative associations, resident corporations and public bodies or agencies	Local match required	Assistance for homeownership to residents of public and Indian housing including
HOPE 2: Homeownership of Multi-family Units	HUD	Grant	Public housing residents	Eligible recipients include PHA's, public or non-profit organizations, resident management corporations, cooperative associations, resident corporations and public bodies or agencies.	Non-federal matching funds that are at least 33% of the grant amount.	Assistance for developing homeownership opportunities for low-income persons through the use of multi-family rental properties.
HOPE 3: Homeownership of Single-Family Homes	HUD	Grant	Public housing residents	Eligible recipients include non-profit organizations, public agencies, cities, states, counties and PHA/IHA's in cooperation with a private non-profit or cooperative organization		Financial assistance for homeownership.

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
HOPE 6: Modernization of Distressed Public Housing Units	HUD	Grant	Public housing residents	PHA's		Demolition, construction, rehabilitation and other physical improvements of public housing, development of replacement housing, and community & supportive services
Housing Opportunities for Persons with AIDS (HOPWA)	HUD	Entitlement Grant	Persons with AIDS	Entitlement funds go to areas with the AIDS cases	Must have approved Consolidated Plan	Housing information services; resource identification; development and operating costs for housing facilities; rental assistance; supportive services
LIHEAP Energy Assistance Program	HHS	Financial Assistance	Low-income households in need of assistance with utility expenses	Households with incomes at or below 125% of the poverty guidelines	Benefits provided on first come first serve basis	Assistance to low-income households to maintain utility services during winter heating season
Moderate Rehabilitation Single Room Occupancy Program (SRO) For Homeless Individuals	HUD	Grant	Very low-income and homeless	PHA's, non-profit corporations	Rental units leased under program must meet HUD housing quality standards	Acquisition and rehab of housing for extremely low income through rent subsidy
Public Housing Development	HUD	Grant	Lower-income families	PHA's		Development of affordable housing
Public Housing Modernization (Comprehensive Grant Program)	HUD	Grant	Public housing tenants	PHA's that administer public housing	Grant calculated with program formula for PHA's with 250 units or more	Capital improvements and related management improvements in public housing

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
Public Housing Operating Subsidy	HUD	Subsidy	Lower-income families	PHA's that administer housing under annual contributions contracts with HUD	Subsidies calculated in accordance with regulatory formula within Preference Funding System	Maintenance and continued operation of PHA housing projects
Section 8 Rental Voucher Lower-income Rental Assistance	HUD	Grant	Homeless individuals and Section 8 eligible current occupants	PHA's and private non-profit organizations	Rental assistance provided for 10 years. \$3,000 minimum rehab per unit; Continuum of care strategy required	Rental assistance creates affordable housing opportunities for single homeless persons, and serves low-income persons on danger of residing in shelters
Section 106 Counseling for Homebuyers, Homeowners, and Tenants	HUD	Grant	Persons going into homeownership, large families, elderly and the disabled	Approved HUD counseling agencies	Applicants for counseling must be eligible for HUD programs or have mortgage guaranteed by other government agencies	Counseling includes housing information, purchase and rental of housing, money management, credit and home maintenance
Section 202 Low-Income Elderly Housing	HUD	Capital advance	Elderly	Non-profit organizations and consumer cooperatives	Housing must remain available to very low-income elderly for at least 40 years	Development of rental housing with supportive services
Section 811 Supportive Housing for Persons with Disabilities	HUD	Capital advances	Low-income persons with disabilities who are between ages of 18-62	Private, non-profit organizations	Housing must remain available to very low-income persons with disabilities for at least 40 yrs	Provides assistance to expand supply of housing with supportive services for persons with disabilities
Section 8 Rental Voucher	HUD	Proportionate allocation and competitive	Very low-income families	Very low-income families with incomes not exceeding 50% of AMI	Rental units leased under program must meet HUD housing quality standards	Rental certificates for housing where rental assistance is difference between rent and 30% of adjusted income

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
Section 502: Homeownership and Rehabilitation Loans	USDA-RD	Loan	Families without adequate housing	People ineligible for private lender loans; must live in community of less than 20,000	Income and loan limits vary by county. Contact local USDA RD office.	Loans to buy, build, repair, or rehabilitate rural homes. Length of loans limited to 33 years
Section 504: Very low income Homeowner Repair Loans and Grants	USDA-RD	Grant or Loan	Very low income owner-occupants in rural areas. Grants limited to those 62 and older.	People ineligible for private lender loans; must live in community of less than 20,000	Maximum loans \$20,000. Lifetime maximum grant is \$7500. Grant may be subject to recapture if property is sold within 3 years.	Loans or grants for house repair, such as heating systems, wiring, roofing or plumbing
Section 515: Rural Rental Housing Loans	USDA-RD	Loan	Rural low and moderate income families, or elderly	Must live in community of less than 20,000	Applicants must provide at least 2% of project fees. Loans are for 30 years.	Loan to construct, improve, purchase, or repair rental or cooperative housing
Shelter Plus Care Program	HUD	Grant	Homeless people with disabilities	State, local government, public housing agencies and private nonprofit organizations	Support services must match value of rental assistance; need continuum of care strategy	Provides rental assistance
Supplemental Assistance for Facilities to Assist the Homeless (SAFAH)	HUD	Grant, direct loan	Homeless persons	State, local government, public housing agencies and private nonprofit organizations	Not more than five percent of any award may be used for administration, and not more than \$10,000 may be used for outpatient health services	Acquisition, rehab, or conversion of facilities to assist the homeless and for providing supportive services

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
Supportive Housing Program (SHP)	HUD	Grant	Homeless persons	State, local government, public housing agencies, private nonprofit organizations, and community mental health associations that are non-profit	Project must remain affordable for 20 years to homeless, Grants for new construction are limited to \$400,000 per structure, need continuum of care strategy	Acquisition, rehab, new construction, or leasing of transitional housing, permanent housing for homeless with disabilities, safe haven for severely mentally ill homeless, or supportive services only
Surplus Property for Use to Assist the Homeless	HUD	Rent-free leases on Federal properties	Homeless	State, units of local government and non-profit organizations	Homeless organization must pay operating and repair costs on properties	Provides Federal properties categorized as unused, excess, or surplus for homeless program use
Title X Lead-Based Paint Abatement Program	HUD	Grants	Children under age six who come from low income families	Communities with populations over 50,000	State must have a certification law to license lead abatement specialists, and are only eligible to receive moneys once	Reduction of lead-based paint hazards in low income and Section 8 housing
Weatherization Assistance for Low - Income Persons	Dept. of Energy	Grants	Low income homeowners who cannot afford to make changes in their home	Grants to states and community action organizations are formula driven		To improve the energy efficiency of the home of low income families the elderly
State and Local Programs						
City of Las Vegas Redevelopment Fund	City of Las Vegas	Redevelopment Bonds	Low and moderate income households	Non-profit organizations		Affordable housing development or rehabilitation

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
City of North Las Vegas Redevelopment Funds	City of North Las Vegas	Redevelopment funds	Low and moderate income households	Non-profit organizations		Affordable housing development or rehabilitation
FHLB Affordable Housing Program (AHP)	Federal Home Loan Bank of San Francisco	Subsidizes interest rate on advances or provides direct	Very low, low, and moderate income households	Funds applied for through member financial institutions	Subsidies awarded on a competitive basis	Finance purchase, construction/rehab of owner-occupied housing for target population; purchase construction/rehab of rental housing, at least 20% of units will be occupied by very low income households
FHLB Community Investment Program (CIP)	Federal Home Loan Bank of San Francisco	Low-priced, long-term, fixed rate funds to member financial institutions, CIP is used to provide funding at less than market rates to reduce the risk associated with making non-conventional mortgages for community development	Low or moderate income housing or development of commercial projects, infrastructure improvements, or businesses that create jobs	Member financial institutions of which there are 365 throughout Indiana and Michigan	Up to 20 year fixed-rate financing on a subscription basis	Acquisition mortgages, construction loans, rehab loans, permanent financing, lines of credit, funding for the Rural Economic and Community Development Program or community economic development that benefits low and moderate income neighborhoods

Name of Program	Agency	Program	Target Population	Eligible Applicants	Funding Requirements	Activity Type
Low-Income Housing Tax Credit (LIHTC)	State of Nevada	Federal tax credits	Low-income renter (households earning up to 60% of AMI), and special needs populations	Non-profit developers; for profit developers; limited partnerships	Multi-family rental housing developments only	Acquisition, rehabilitation, construction, or other housing for low income and special needs populations
Low Income Housing Trust Fund	State of Nevada	Rural property transfer tax	Low-income people below 60% AMI	Non-profit organizations		Low-income housing development and rehabilitation. Serves as match credit for federal HOME program
Land Donations	Local Jurisdictions	Donation	Low and moderate income households	Non-profit organizations		Donation of land for development of affordable housing
Multi-Family Project Bond Financing	State of Nevada	State issues tax-exempt bonds for affordable housing development.	Per IRS Code for bonds not less than 20% @ 50%AMI or 40% @ 60% AMI	Non-profit and for-profit organizations, limited partnerships	All bond financed projects are required to obtain 50% or more of the needed bond issuance authority from the local government	Financing medium to large-scale affordable housing projects. Almost all affordable housing projects that utilize bond financing are greater than \$5,000,000 in size
Private Activity Bond Volume (Bond Cap)	Local Jurisdictions	Bonds and Tax Credits	Low and moderate income households	Non-profit and for-profit organizations		Construction or rehabilitation of affordable housing
Single Family Mortgage Purchase Program	State of Nevada	Single Family tax-exempt bonds	Low and moderate income households	Income limits and mortgage maximums apply		Reduced interest rate mortgages
Space Rent Subsidy	State of Nevada	Self-funded by mobile home operators	Low income households		Recipients must have resided in a mobile home in Nevada for at least one year and earn \$750 per month or less	Rental assistance for residents of manufactured (mobile) homes

Appendix D

Monitoring

Clark County, Las Vegas and North Las Vegas include in the sub-recipient contracts an “on-site monitoring” section. It stipulates that the program under the agreement will be subject to “on-site monitoring” by jurisdiction staff or a HUD representative on a 24-hour notice during normal working hours. It also states that the representatives shall be granted access to all records pertaining to the program. Representatives, on occasion, may request to interview program recipients who volunteer to be interviewed.

An additional section of the sub-recipient contract addresses access to records. It states that at any time during normal business hours, the sub-recipient’s records, with respect to matters covered by the agreement shall be made available for audit, examination, and review by jurisdictional or HUD representatives.

The HCP Consortium uses a two-part form for monitoring the sub-recipient agencies. The first form is initially completed when the agency receives the grant award and the file is set up. This form addresses all the required certifications, insurance, legal documents and environmental review.

The second part is the actual on-site form used when the annual visit to the agency is undertaken. This form is used to conduct a random sampling to confirm eligibility of clients, and that appropriate documentation of such is in the agency files. It is also used to verify and tag any equipment that may have been purchased with grant funds. If the agency has any grant-funded employees, payroll tax returns and W-2’s are checked to make sure they were completed and submitted to the IRS.

When OMB raised the ceiling to \$300,000 for an A-133 audit, the Neighborhood Services Department of the City of Las Vegas added language in the sub-recipient grant contracts stipulating that if an agency received more than \$50,000, but less than \$300,000, in federal grant funds from the City for two consecutive years, they must submit an audited financial statement.

The HCP Consortium uses the year-end reports of subrecipients to monitor its performance in meeting its goals and objectives as set forth in its Consolidated Plan. Housing Quality Standards (HQS) inspections are conducted as rental projects and owner units are completed. Clark County requires that HQS inspections be submitted before the final draw down of funds. Clark County HOME staff also performs financial desk audits throughout the year with every request for payment, including reviewing information for accuracy and compliance.

The ESG subrecipient contracts include a clause indicating that the subrecipients will be monitored at least twice during their ESG grant period. Clark County ESG staff also performs financial desk audits throughout the year with every request for payment, including reviewing information for accuracy and compliance.

The Clark County CDBG program monitors its capital projects through the Real Property

Management Division that provides construction coordination and job supervision. A risk assessment of newly funded non-profits is completed to determine whether the organization will require additional technical support. Staff also performs financial desk audits throughout the year with every request for payment, including reviewing the information for accuracy and compliance. Further, staff and the 36-member citizen committee visit most of the non-profit subrecipients during the bus tours for new grant requests, where they then also visit capital projects under construction or recently completed.