DRAFT 4-28-2010

REVISED PROPOSED FIVE-YEAR CONSOLIDATED PLAN

For

FY 2011-2015

Consolidated Community Funding Advisory Committee
(CCFAC)

Fairfax County, Virginia

DRAFT

FAIRFAX COUNTY BOARD OF SUPERVISORS

Sharon Bulova, Braddock District, *Chairman, At-Large*
Penelope A. Gross, Mason District, Vice Chairman

John C. Cook, Braddock District	Catherine M. Hudgins, Hunter Mill District
Michael R. Frey, Sully District	Jeff C. McKay, Lee District
John W. Foust, Dranesville District	Pat Herrity, Springfield District
Gerald W. Hyland, Mount Vernon District	Linda Q. Smyth, Providence District

Anthony H. Griffin, County Executive
Patricia D. Harrison, Deputy County Executive
Edward L. Long, Jr., Deputy County Executive
David J. Molchany, Deputy County Executive
Robert A. Stalzer, Deputy County Executive

Consolidated Community Funding Advisory Committee Members

Pamela Barrett, Fairfax Area Disabilities Services Board, *Chair*
Judy Farabaugh, Fairfax County Public Schools/PTA/Schools Community, *Vice Chair*
Marlene Blum, Health Care Advisory Board
Mary Lee DiSpirito, Fairfax-Falls Church United Way
Jim Edwards-Hewitt, Community Action Advisory Board
Willard Jasper, Fairfax County Redevelopment and Housing Authority
Anita Kapper, Fairfax Area Commission on Aging
Stephanie Mensh, Fairfax County Human Services Council
Robert Stockton, Revitalization Areas
Ann Zuvekas, Fairfax County Alliance for Human Services

Prepared by the

Fairfax County Department of Housing and Community Development
3700 Pender Drive, Suite 300
Fairfax, Virginia 22030

Paula C. Sampson, Director

Telephone: (703) 246-5100 or TTY: (703) 385-3578

Division of Real Estate Finance and Grants Management
Aseem K. Nigam, Director
(703) 246-5170

For Information, call…….

To request a copy of the Fairfax County Consolidated Plan, obtain a Certification of Consistency with the Consolidated Plan, or for additional information on the County's Community Development program, call the Department of Housing and Community Development, *Public Affairs Office*, at (703) 246-5006 or the *Division of Real Estate Finance and Grants Management*, at (703) 246-5170. The TTY number is: (703) 385-3578. Comments may be sent to Fairfax County Department of Housing and Community Development, 3700 Pender Drive, Fairfax, VA 22030.

Information about the Fairfax County Consolidated Plan and the planning process is available through the Internet at:
http://www.fairfaxcounty.gov/rha/consolidatedplanshomepage.htm

EQUAL HOUSING OPPORTUNITY

The Department of Housing and Community Development provides equal access for citizens with disabilities to all activities and will provide reasonable accommodations upon request. Persons with disabilities who require special accommodations or who need this document in an alternative format should call the Department at (703) 246-5006 [TTY: (703) 385-3578] seven to ten working days in advance to make the necessary arrangements.

TABLE OF CONTENTS FOR THE FIVE-YEAR CONSOLIDATED PLAN

	PAGE
TABLE OF CONTENTS	4
GENERAL	8
Managing the Process	8
Executive Summary	10
Citizen Participation	20
HOUSING AND HOMELESS NEEDS ASSESSMENT	22
Key Definitions	22
Housing Needs Analysis	25
Homeless Needs Assessment	52
Special Needs Populations	59
Lead-Based Paint Needs	67
HOUSING MARKET ANALYSIS	69
General Characteristics	69
Needs of Public and Assisted Housing	85
Homeless Facilities and Services	90
Special Need Facilities and Services	97
Barriers to Affordable Housing	103
STRATEGIC PLAN	106
Time Period of Plan	106
Affordable Housing	108
Public Housing Strategy	115
Homelessness	119
Special Needs Populations	125
Non-housing Community Development	137
Barriers to Affordable Housing	171
Lead-Based Paint Hazards	177
Institutional Structure	178
Antipoverty	181
Coordination	184
Monitoring	190
CONSOLIDATED ACTION PLAN	
SF 424	
Executive Summary	
Citizen Participation	
Sources of Funds	
Statement of Specific Annual Objectives	
Description of Activities	
Outcome Measures	
Allocation Priorities and Geographic Distribution	

Annual Affordable Housing Goals
Needs of Public Housing
Homeless and Other Special Populations
Barriers to Affordable Housing
Antipoverty Strategy
Lead-Based Paint Hazards
Other Actions
Coordination
Monitoring

CERTIFICATIONS

MONITORING

APPENDICES

A. Citizen Participation Plan 1
B. Public Comments 18
C. Maps
Map 1. Distribution of Foreclosures, Fairfax County 26
Map 2. Percent of Low-Income Households (2006-2008) 27
Map 3. Median Household Income by Block Group (2007), Fairfax County 28
Map 4. Number of White Alone Persons by Block Group (2007), Fairfax County 28
Map 5. Number of Black Alone Persons by Block Group (2007), Fairfax County 30
Map 6. Number of Asian Alone Persons by Block Group (2007), Fairfax County 31
Map 7. Number of Hispanic Alone Persons by Block Group (2007), Fairfax County 32
D. Homeless Housing Inventory
E. Continuum of Care Information

TABLES (indexing to be updated to accommodate added tables)

Table 1. Consolidated Plan Objectives 16
Table 2. Comparison of HUD-Required Income Definitions for Consolidated Plan and FCRHA Income Definitions 23
Table 3. Extremely Low-Income Renters, Fairfax County, Virginia 2000 & 2005-2007 Average 28
Table 4. Extremely Low-Income Renters with Mobility & Self Care Limitations 2005-2007 Average 29
Table 5. Extremely Low-Income Renters (<30%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 30
Table 6. Extremely Low-Income Owners, Fairfax County, Virginia 2000 & 2005-2007 Average 32
Table 7. Extremely Low-Income Owners with Mobility & Self Care Limitations 2005-2007 Average 33
Table 8. Extremely Low-Income Owners (<30%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 33
Table 9. Low-Income Renters, Fairfax County, Virginia 2000 & 2005-2007 Average 35
Table 10. Low-Income Renters with Mobility & Self Care Limitations 2005-2007 Average 35

Table 11. Low-Income Renters (30-50%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 36
Table 12. Low-Income Owners, Fairfax County, Virginia 2000 & 2005-2007 Average 38
Table 13. Low-Income Owners with Mobility & Self Care Limitations 2005-2007 Average 39
Table 14. Low-Income Owners (30-50%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 39
Table 15. Moderate-Income Renters, Fairfax County, Virginia 2000 & 2005-2007 Average 42
Table 16. Moderate-Income Renters with Mobility & Self Care Limitations 2005-2007 Average 43
Table 17. Moderate-Income Renters (50-80%MFI)), Fairfax County, Virginia, 2000, 2010, 2015, 2020 43
Table 18. Moderate-Income Owners, Fairfax County, Virginia 2000 & 2005-2007 Average 45
Table 19. Moderate-Income Owners with Mobility & Self Care Limitations 2005-2007 Average 46
Table 20. Moderate-Income Owners (50-80%MFI)), Fairfax County, Virginia, 2000, 2010, 2015, 2020 46
Table 21. Middle-Income (80-95%) Renters, Fairfax County, Virginia 2000 & 2005-2007 Average 47
Table 22. Middle-Income Renters (80-95%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 47
Table 23. Middle-Income (80-95%) Owners, Fairfax County, Virginia 2000 & 2005-2007 Average 48
Table 24. Middle-Income Owners (80-95%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 48
Table 25. Above Middle-Income (95-120%) Renters, Fairfax County, Virginia 2000 & 2005-2007 Average 49
Table 26. Above Middle-Income Renters (95-120%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 49
Table 27. Above Middle-Income (95-120%) Owners, Fairfax County, Virginia 2000 & 2005-2007 Average 50
Table 28. Above Middle-Income Owners (95-120%MFI), Fairfax County, Virginia, 2000, 2010, 2015, 2020 50
Table 29. Income Levels of Homeless Individuals and Families 53
Table 30. Race and Ethnic Data for Homeless Individuals and Persons in Families 54
Table 31. Homeless County by Category 54
Table 1A Homeless and Special Needs Populations, Continuum of Care: Housing Gap Analysis Chart 56
Table 32. Below 80%MFI Renters Paying 50%+ for Housing Costs – CHAS 2005-2007 Average 59
Table 33. Below 80%MFI Owners Paying 50%+ for Housing Costs – CHAS 2005-2007 Average 60
Table 34. Below Moderate-Income Households with Persons with Physical or Mental Disabilities, 2005-2007 61
Table 35. Below Moderate-Income Households with Persons with Physical or Mental Disabilities and Any Housing Problem, 2005-2007 Average 62
Table 36. Service Needs for Elderly (ages 62-74) 62
Table 37. Service Needs for Frail Elderly (ages 75 and older) 62
Table 38. HIV/AIDs Prevalence Rates 2008,2009 63
Table 39 Housing Blueprint and Consolidated Plan Special Needs Categories 65
Table 1B Special Needs Non-Homeless Populations 66
Table 40. Projected Households, Fairfax County, 2000,2010, 2015, 2020 76
Table 41. Projected Households by Income, Fairfax County, 2000, 2010, 2015, 2020 77
Table 42. Projected Owner and Renter Demand, Fairfax County, 2000, 2010, 2015, 2020 78

Table 43. Owners by AMFI Category, 2000, 2010, 2015, 2020 78
Table 44. Renters by AMFI Category, 2000, 2010, 2015, 2020 78
Table 45. Gross Rent as Percent of Income, 2000 and 2008 79
Table 46. Affordable Rental Need and Supply, 1990, 2000, 2005-2007 Average 80
Table 47. Affordable Rental Housing Gap, 2005-2007 Average 81
Table 48. Affordable Owner Need and Supply, 1990, 2000, 2005-2007 Average 82
Table 49. Affordable Owner Housing Gap, 2005-2007 Average 82
Table 50. Housing Needs of Fairfax County Families Served by the PHA 85
Table 51. Federal Public Housing Projects in Fairfax County 86
Table 52 FCRHA-Adopted Local Preferences/Priorities for Admission to Federal Public Housing and Housing Choice Voucher Programs 87
Table 53. Housing Needs of Families on the Waiting List 88
Table 54. Non-Federally Assisted Rental Units Owned/Operated by the FCRHA/ Fairfax County 89
Table 55. Continuum of Care Housing Activity Chart (as of January 28, 2009) 90
Table 56. Service Activity Chart 91
Table 57. Mental Health Housing, 2009 99
Table 58. Senior Housing Residences, Fairfax County 100
Table 59. Tax Relief Income Requirements 104
Table 60 Consolidated Plan Housing Objectives 107
Table 61 Housing Blueprint and Consolidated Plan Priority Needs and Non-Homeless Special Needs 109
Table 2A Priority Housing Needs/Investment Plan Table 111
Table 62 Housing Blueprint and Consolidated Plan Special Needs Categories 125
Table 63. Priority Needs for HOPWA 130
Table 64. STRMU Client Population, FY2009 133
Table 65. TBRA Client Population, FY2009 134
Table 1C Summary of Specific Housing/Community Development Objectives 135
Table 2B Priority Community Development Needs 141
Table 66 Consolidated Community Funding Pool, FY2011-2012 Priorities 144
Table 67. Neighborhoods on the Community Improvement Program Waiting List 164
Table 68. Home Improvement Loan Program Income Requirements 165
Table 2C Summary of Specific Housing/Community Development Objectives 170
Table 69. Real Estate Tax Exemption Income Requirements 173
Table 70. Housing and Community Development Resources Expected to be Available (FY 2011-2015) 187

FIGURES

Figure 1. Residential Building Permits, Fairfax Co 2000-2008 77

GENERAL (91.200)

Managing the Process

Lead Agency

Fairfax County Department of Housing and Community Development
3700 Pender Drive, Suite 300
Fairfax, Virginia 22030

Paula C. Sampson, Director

Telephone: (703) 246-5100 or TTY: (703) 385-3578

Division of Real Estate Finance and Grants Management
Aseem K. Nigam, Director
(703) 246-5170

About the Lead Agency: Fairfax County's affordable housing and community development programs are administered by the Department of Housing and Community Development (HCD). In addition to its role as a department of County government, reporting to the County Executive and the Board of Supervisors, HCD also serves as the staff for the Fairfax County Redevelopment and Housing Authority (FCRHA). The FCRHA is a separate political body whose members are appointed by the Board of Supervisors and which possesses specific powers granted by state code.

Every five years, the Board of Supervisors adopts a Consolidated Plan describing the County's needs, gaps in service and priorities for affordable housing, community service, homeless assistance, community development, neighborhood preservation and revitalization, employment and economic opportunity services, as well as the resources and strategies to be used to meet these needs. Each year, the Board also approves a Consolidated Plan - One Year Action Plan that sets forth how it will utilize several large federal grants, including the Community Development Block Grant and the HOME Investment Partnership Grant, to meet the needs and priorities in the Consolidated Plan. These grants are administered by HCD. The Consolidated Plan and One Year Action Plan are prepared by HCD through an intensive citizen involvement process under the leadership of the Consolidated Community Funding Advisory Committee (CCFAC). Annually, a Consolidated Annual Performance Report is submitted to the U.S. Department of Housing and Urban Development (HUD) detailing how these funds have been spent.

Consultation / Coordination

Consultations within Fairfax County Departments

Anne Cahill, Manager, Economic and Demographic Research, Department of Systems Management for Human Services
Ina Fernandez, Director, Office for Women and Domestic and Sexual Violence Services
Tom Fleetwood, Strategic Planner, Department of Housing and Community Development

Dot Groce, Coordinated Services Planning, Department of Systems Management for Human Services
Patricia D. Harrison, Deputy County Executive
Cynthia Ianni, Director, Design, Development and Construction Division, Dept. Housing and Community Development
Stephen Knippler, Senior Program Manager, Department of Housing and Community Development
John Payne, Deputy Director, Real Estate, Department of Housing and Community Development
William Macmillan, Department of Systems Management for Human Services and Office to Prevent and End Homelessness
Audrey Spencer-Horsley, Associate Director, Grants Management, Department of Housing and Community Development
Mary A. Stevens, Deputy Director, Department of Housing and Community Development
Carl Varner, Planner, Disability Services Planning and Development, Department of Family Services
Michelle Milgrim, Department of Health

Consultations with Other Entities

In preparing this Plan, consultations were made with various local and regional agencies, community organizations, and boards. These resources provided critical information for inclusion in the Plan and/or provided review and comment for the Plan.

Fairfax County Board of Supervisors
Fairfax County Redevelopment and Housing Authority
Consolidated Community Funding Advisory Committee
Northern Virginia Family Service (NVFS)
Fairfax-Falls Church Community Services Board (CSB)
Fairfax Area Disability Services Board (DSB)
ENDependence Center of Northern Virginia
George Mason University
Metropolitan Washington Council of Governments (MWCOG)
Northern Virginia Regional Commission
Citizens, Public Forums
Human Services Council (HSC)
Community Action Advisory Board (CAAB)
Fairfax-Falls Church United Way
Fairfax County Commission on Aging
Advisory Social Services Board (ASSB)
Health Care Advisory Board
Fairfax County Alliance for Human Services
Governing Board to Prevent and End Homelessness
Office to Prevent and End Homelessness
Affordable Housing Advisory Committee
Wesley Housing Development Corporation
Reston Interfaith
Pathway Homes
Good Shepherd Housing and Family Services
New Hope Housing
Northern Virginia Affordable Housing Alliance
Communities of Faith United for Housing
Alliance for Human Services
AHOME (Affordable Housing Opportunity Means Everyone)

Executive Summary

The Executive Summary of the Fairfax County Five-Year Consolidated Plan for FY 2011-2015 is to help facilitate citizen review and comment. The Executive Summary includes a brief background review of the Plan process, a demographic profile summary, and a description of the current Plan contents. In addition, the Executive Summary provides the County's Vision and Mission statements for the funds governed by the Consolidated Plan, the broad objectives and outcomes identified in the Plan, and an evaluation of past performance. The Five-Year Consolidated Plan for FY 2011-2015 replaces Fairfax County's Five-Year Consolidated Plan for FY 2006-2010, which expires on June 30, 2010.

Background and Overview

In 1994, the federal regulations which govern the planning and application aspects of four federal programs of the U.S. Department of Housing and Urban Development (HUD) were revised to require the consolidated planning and submission of applications and reports. The Consolidated Plan combines the broad planning requirements of the National Affordable Housing Act of 1990 with the annual applications and reporting for the following four HUD programs administered locally by Fairfax County:

- Community Development Block Grant (CDBG)
- HOME Investment Partnerships Program (HOME)
- Emergency Shelter Grant (ESG)
- Housing Opportunities for Persons with AIDS (HOPWA)
  (Administered by Northern Virginia Family Service)

Consolidated Plan Contents: The Five-Year Consolidated Plan for FY 2011-2015 identifies a wide range of needs, current programs and strategies, and gaps and priorities for housing, community service, homelessness, community development, neighborhood preservation and revitalization, employment and economic opportunity programs and services in the County. The Five-Year Plan also includes broad goals and objectives to address priority needs with the use of resources available through the Consolidated Plan, as well as other public and private sources. Fairfax County used the HUD Consolidated Planning Management Process as a guide to prepare this Consolidated Plan.

The Plan for FY 2011-2015 is divided into seven sections:

1) *General Information:* Describes the process for developing the plan, provides this executive summary, and describes the process for citizen participation.
2) *Housing and Homeless Needs Assessment:* Addresses the housing needs of various categories of persons affected (housing needs are examined for different types of households falling within a range of income categories), homeless and other special populations, and those with potential lead-based paint hazards.
3) *Housing Market Analysis:* Addresses housing stock supply and demand for public housing and assisted housing, homeless facilities, special needs facilities and services, and assesses barriers to providing affordable housing units.
4) *Strategic Plan:* Describes the need priorities established through the Consolidated Plan process for the populations evaluated in the needs sections. The Strategic Plan section also provides the planned actions for addressing the needs identified. This section summarizes the non-housing priority needs of the County stating the short-term and long-term community development objectives and identifies other efforts that the County will undertake to improve livability for its citizens.

The final three sections provide the 5) *Action Plan (one-year plan)*, 6) *Certifications*, and 7) *Monitoring*, which discusses the process by which the County will monitor the actions described in the Plan.

Programs Included in the Consolidated Plan: The Fairfax County Five-Year Plan for FY 2011-2015 includes the four HUD programs mentioned above – CDBG, HOME, ESG, and HOPWA. The Plan also includes Fairfax County's Consolidated Community Funding Pool (CCFP), which is the combined funding process for local funds and CDBG funds under the Consolidated Plan. A citizen advisory group, the Consolidated Community Funding Advisory Committee (CCFAC), oversees the CCFP and guides the overall Consolidated Plan process. In addition, the Plan also includes a description of the Continuum of Care for homeless services and programs.

Participating Jurisdictions: Fairfax County has cooperation agreements with the City of Fairfax and the towns of Herndon, Clifton and Vienna to participate in community development programs and affordable housing activities provided through the Consolidated Plan. Fairfax County's homeless service programs are provided for these jurisdictions and for the City of Falls Church, which contracts with the County for the provision of various human services, including emergency shelters and services for homeless families and individuals.

Highlights of Community Profile

Population: The population of Fairfax County in 2008 was 1,045,694 and there were 381,686 households, with an average size of approximately 2.70 persons per household. This represents a population increase of 75,495 (7.8 percent) since the 2000 Census. While this growth rate is smaller in comparison to some other jurisdictions in the region, Fairfax County accounts for 20 percent of the total population for the Washington Metropolitan Primary Statistical Area. Current projections for 2015 anticipate the total number of households will be 409,599 (a 7.3 percent increase from 2008) and the total number of housing units will be an estimated 421,375 (a 7.6 percent increase from 2008).[1]

Diversity: Minorities comprise over one-third of the County's residents – 33.3 percent in 2008 (down from 38.2 percent in 2003). This is nearly three times the minority percentage of the population in 1980 and over 50 percent higher than the percentage in 1990. The percentage of foreign born in the County's total population has grown from 9.1 percent in 1980 to 28.1 percent in 2008. According to the Report of Student Membership by Ethnic Group and Gender, students in the Fairfax County Public Schools who were members of minority groups increased from 26.6 percent in 1989-1990 to 54.7 percent in 2008-2009. Meanwhile, diversity in the senior population is also increasing. In 1980, 6.4 percent of persons age 65 and older were racial minorities but by 2000 that proportion had nearly tripled to 18.3 percent.[2]

Age: Since 1980, the percentage of Fairfax County residents under the age of 45 has slowly decreased. Meanwhile, the percentage of persons 65 and older increased from 4.5 percent in 1980 to 9.9 percent of the total population in 2008. The elderly are the fastest growing age segment in Fairfax County and are projected to comprise 11.1 percent of the County's population by the year 2015. It should be noted, however, that while the percentage of children and youth under age 20 decreased slightly, the actual number is projected to increase by over 4,900 from 2010 to 2015.[3]

Education: Overall, Fairfax County residents are highly educated. In 2008, the percent of Fairfax County adults 25 years of age or older who had graduated from high school was 91.5 percent, and 58.6 percent of residents had attained at least a bachelor's degree or higher education. Only 8.6 percent of Fairfax County residents age 25 or older has less than a completed high school education or equivalency. (ACS 2008)

---

[1] Fairfax County Department of Systems Management for Human Services
[2] Fairfax County Consolidated Plan One-Year Action Plan for FY 2010
[3] Fairfax County Department of Systems Management for Human Services, 2008; United States Census Bureau, Census of Population, 1970 through 2000; US Census Bureau, American Community Survey (ACS) 2008 (median age); and Fairfax County Department of Systems Management for Human Services, 2008 (population and age distribution)

Business/Employment: Fairfax County along with the Northern Virginia region has been the economic engine of the Commonwealth of Virginia for the past few decades and is even more so during this time of economic crisis. Fairfax County's economic vitality is directly related to the way in which future job growth and residential growth are accommodated by the County. In 2009, there were 121,350 businesses located within Fairfax County including 355 foreign-owned businesses and 268 trade associations. Fairfax County continues to attract technology-based businesses, with over 6,184 such companies in 2009. There were 572,708 jobs in Fairfax County in 2009, a 2.7 percent decline since 2007 according to the Virginia Employment Commission. The unemployment rate in December 2009 was 4.6 percent compared to 2.1 percent in 2007. While the downturn in the economy has had its impact on Fairfax County, the unemployment rate is low compared to the state (6.7 percent) and the nation (9.7 percent).[4]

Urbanization: The urbanization of the County reflects the change from a suburban bedroom community of the 1960's and 1970's to becoming an employment center during the 1980's. As of the 2000 Census, Fairfax County was nearly 99 percent urban (the most recent available figure).

Income and Housing Cost Burden: While Fairfax County has one of the highest median household incomes in the nation (estimated $107,448 in 2008), there were an estimated 47,832 persons living below the poverty level in 2008 (based on data from the American Community Survey (ACS)). Although the percent of the population below poverty in Fairfax County (4.8 percent) is among the lowest of Virginia jurisdictions, the number of persons below poverty in Fairfax County is larger than the total population of 99 of the 134 local jurisdictions in Virginia. Persons with extremely-low incomes in a typically high-income area have a high incidence of housing problems. According to the 2009 Comprehensive Housing Affordability Strategy (CHAS) tables provided by the United States Department of Housing and Urban Development (HUD), 14,516 (87 percent) Fairfax County renter households with incomes below 30 percent of the area median income have what is described as "one or more housing problems" defined as having a significant cost burden (meaning over 30 percent of their income is used for housing costs), incomplete plumbing facilities, incomplete kitchen facilities, or overcrowding (defined by HUD as being over 1 person per room). (CHAS 2009).

Vision and Mission Statements

The Consolidated Community Funding Advisory Committee (CCFAC) is appointed by the County Executive to oversee the development of the Consolidated Plan and to recommend priorities for the funds governed by the Plan. The CCFAC has reviewed and reaffirmed the following vision elements and mission statement, which were included in the previous Five-Year Plan.

Vision

- A community that cares about its children, the elderly, persons with physical or mental disabilities and those less able to meet their basic needs.
- A community that values creative endeavors, arts and diversity which creates a strong, diverse and vibrant community that cares about the strengths and needs of its residents, where all can live to the best of their abilities in thriving, supportive neighborhoods.
- A community which adequately supports its human services system to ensure optimal service delivery.

[4] United States Bureau of Labor Statistics; www.vawc.viriginia.gov

- A community which actively participates in the planning, needs assessment, priority setting and decision-making processes to allocate community resources to meet the needs of its citizens.

- A community which addresses these needs by building dynamic, flexible partnerships among the public, private, and non-profit sectors, and community volunteers.

Mission Statement

The mission of the County is to maximize the effective and efficient use of resources in the Consolidated Plan through a citizen-driven, staff-supported process to develop and preserve affordable housing, promote healthy, thriving and safe neighborhoods, and provide quality, accessible human services that meet essential existing and emerging needs throughout Fairfax County.

Current Plan Trends and Past Performance

The five-year period since the last Fairfax County Consolidated Plan presented numerous housing challenges, many of which will continue through the upcoming years. The previous plan period began with exceptionally high housing prices. For lower-income residents, higher prices meant housing affordability became even more of a problem. Others took advantage of relaxed lending practices, or were taken advantage of by unscrupulous lenders, and bought homes assuming their house value and their income would continue to rise. With the onset of the financial and housing crisis, the housing problems increased for residents struggling financially. Rental costs through the period stayed fairly stable, but many low-income renters experienced income loss or additional financial difficulties making housing less affordable. Low vacancy and turnover rates added pressure on the rental market. Home values declined significantly, leaving some financially distressed owners with little choice other than foreclosure.

During this difficult period, Fairfax County made strategic investments of both federal and local resources to address emerging challenges. For example, the Board of Supervisors' Affordable Housing Preservation Initiative featured partnerships with the private sector and direct County investments of federal resources, such as CDBG and HOME funds, coupled with an unprecedented investment of local dollars. The Affordable Housing Preservation Initiative, started in mid-2004, preserved nearly 2,400 units of affordable housing which otherwise would have been lost to condominium conversions, repositioning in the rental market, and rising rents. The Board also initiated the "Silver Lining" and "Silver Lining Plus" programs to address the impacts of the foreclosure crisis, which emerged in 2008. The Consolidated Community Funding Pool has continued to assist community organizations in their mission to provide services to those in need.

Despite Fairfax County meeting or exceeding the goals of the Five-Year Consolidated Plan FY 2006-2010, in terms of addressing the housing needs of its citizens, the housing affordability gap has increased and the waiting list for assisted housing has grown. Based on the average of 2005-2007 data from CHAS 2009 as analyzed in preparation of the Five-Year Consolidated Plan FY 2011-2015:

- Over two-thirds of Fairfax County renter households and nearly three-fourths of owner households with incomes less than 30 percent of Area Median Family Income (AMFI) had severe cost burdens. A household is considered to have severe cost burden if they pay more than 50 percent of their income for housing.
- About one-third of renters and 40 percent of owners with incomes below 80 percent of AMFI had severe costs burdens.

- Over two-thirds of physically or mentally disabled renters and 90 percent of owners (likely due to a high number of elderly owners) with incomes less than 30 percent of AMI had at least one housing problem (more than 30 percent cost burden, overcrowded, or lacking complete kitchen or bathroom facilities). (Note: The housing needs of extremely low-income persons with disabilities, including but not limited to those who are homeless or at-risk of homelessness and persons in institutions, is the subject of a planned study by Fairfax County which is in the procurement process as of March 2010.)
- Over two-thirds of physically or mentally disabled renters and nearly two-thirds of owners with incomes less than 80 percent of AMI had at least one "housing problem" (in Fairfax County, this generally consists of households with a housing cost burden over 30 percent of income or overcrowding).
- The elderly are the fastest growing age segment in Fairfax County and are projected to comprise 11.1 percent of the County's population by the year 2015. There were approximately 2,845 elderly renters and 4,796 owners with incomes less than 80 percent AMI paying 50 percent or more of their incomes for housing in 2005-2007.
- The decrease in the young adult household formation rate results in a much slower rate of increase in households between 2000 and 2010 than between 1990 and 2000 (8.9 percent vs. 20.0 percent). Recessions, particularly deep recessions, affect housing demand among demographic groups.

Other key data points:

- Fairfax County's 2009 Continuum of Care point-in-time survey counted 1,730 homeless persons (including 663 unaccompanied individuals, and 1,067 persons in 315 families with 438 adults and 629 children).
- There are approximately 14,000 people on waiting lists for public or assisted housing or residential human services.
- A George Mason University study shows a need for over 63,000 additional housing units by 2025 to meet increased job growth.[5]

While the economic picture seems to be slowly improving, the effects of the housing crisis will be felt for some time. Looking to the next five years, Virginia Tech Center for Housing Research projections show that housing demand will grow, but at a slower pace than pre-recession. The timing and amount of growth will remain uncertain until macroeconomic conditions recover from recession level, but a rebound in demand and housing construction is expected by 2020.

[5] *"Linking Job Growth and Housing: Forecasts of the Demand for Workforce Housing in Fairfax County";* George Mason University, Center for Regional Analysis, 2008.

Current Plan Objectives and Activities

On January 26, 2010, the Fairfax County Board of Supervisors adopted a **"Housing Blueprint"**[6], which establishes the county's affordable housing policy direction for FY 2011 and beyond. The Housing Blueprint reflects the philosophy of the Board that affordable housing is a continuum ranging from the needs of the homeless to first-time homebuyers. The goals and priorities needs set forth in the Housing Blueprint and this Consolidated Plan were the product of the input gathered through the process of bringing together County officials and staff, representatives from the non-profit community and for-profit development sector, and the citizens of Fairfax County and supplemented by data compiled from local sources, HUD, and the U.S. Census.

The **housing goals** established for the next 10 years in the Housing Blueprint drive the Consolidated Plan for FY 2011-2015 and are as follows:

- **Goal 1:** To end homelessness in 10 years
- **Goal 2:** To provide affordable housing options to those with special needs
- **Goal 3:** To reduce the waiting lists for affordable housing by half in 10 years
- **Goal 4:** To produce workforce housing sufficient to accommodate projected job growth

To accomplish these goals, Fairfax County will draw upon the community and private sector to leverage resources through partnerships. The County will complete projects already in the pipeline as well as embark on new initiatives.

Consistent with the Housing Blueprint, the **philosophy** driving the priority needs in this Five-Year Plan is that affordable housing is a continuum ranging from the needs of the homeless to first-time buyers. Included in this range are the diverse housing needs of hard-working, but low paid families; senior citizens; persons with physical or mental disabilities; and the workforce across Fairfax County.

The consensus among the parties establishing the housing priorities for the next 10 years is that affordable housing priorities have changed and that the emphasis should shift to those with the **greatest need**. Those identified as having the greatest need include:

1) Individuals and families who are homeless;
2) Households with low- to extremely low-incomes;
3) Special needs populations including persons with physical or mental disabilities and seniors; and
4) The workforce essential to Fairfax County's economic health and growth.

In addition, a number of non-housing community development goals and objectives have been established in this Five-Year Plan.

[6] www.e-ffordable.org/documents/BlueprintSnapshot2.pdf

***Specific Objectives*:**

The specific objectives to be addressed in this Five-Year Plan are detailed in Table 1.

Table 1: Consolidated Plan Objectives

Objective Number	Objective Description
	Housing
1	Provide housing units affordable to homeless individuals and families
2	Provide housing units affordable to persons with physical or mental disabilities, including persons with HIV/AIDS
3	Provide housing units affordable to households with low to extremely-low incomes (<50 percent MFI) and other special needs populations
4	Provide sufficient workforce housing through land use policy
5	Provide sufficient workforce housing through private sector partnerships
6	Preserve existing Public Housing
7	Promote resident self-sufficiency
8	Foster coordination and partnerships
	Non-Housing Community Development
1	1.1 Promote healthy, positive child and youth development through a community support system that meets the diverse needs of all children and provides positive alternatives that help in the prevention of gang activity. 1.2 Identify gaps and develop strategies to meet critical current and emerging service needs in the community. 1.3 Encourage and support a coordinated public and private network of community services that fosters stability and maximizes independence of individuals and families. 1.4 Promote a human service system that ensures residents are able to meet basic and emergency human needs, that emphasizes prevention and early intervention to minimize crises and that preserves individual and family stability. 1.5 Encourage best practices, sensitivity to cultural differences and enhanced performances in service delivery to ensure residents receive high quality services as needed.
2	2.1 Strengthen current job skill training and employment programs to prepare potential workers for better job opportunities and strengthen communication and partnerships with employers to remove barriers and to improve access to and increase the number of job placements in enhanced employment, especially for families with low income. 2.2 Promote training and educational opportunities for workers to gain skills necessary for jobs that provide wages for individuals and families to be self-sufficient and that support family stability. 2.3 Strengthen the provision and flexibility of supportive services for individuals to begin new jobs or continue in existing jobs by ensuring they have access to affordable child care, disabled adult and elderly care, transportation, English as a Second Language programs and/or other needed support. 2.4 Support community efforts in the development and assistance to micro-enterprises and small businesses to reduce small business failures and to retain and create more jobs. 2.5 Ensure that the commercial revitalization program serves as a resource to achieve a portion of these objectives.
3	3.1 Develop strategies of prevention and early intervention in communities in danger of deterioration to reduce the need for greater community investment and improvements in the future. Continued implementation of Board Foreclosure Strategy. 3.2 Review existing plans for Conservation Areas, Redevelopment Areas, residential Revitalization Areas, Commercial Revitalization Districts and Commercial Revitalization Areas to promote a comprehensive and coordinated approach to meeting community development needs while maintaining the affordable housing stock and the unique character of each community. 3.3 Build on community strengths and involve the residents in decision making on needs, priorities, plans, improvements, and solutions to community concerns; in cooperation with the county's Code Enforcement Strike Team.

Proposed Outcomes/Activities

Goal: To End Homelessness in 10 Years -The County will address the 10-year need for 2,650 additional units/permanent housing opportunities for homeless individuals and families. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- *Bolstering the existing resources*, including providing housing opportunities funded with re-targeted and additional federal resources (such as Continuum of Care units, Project-Based Vouchers, Family Unification Program (FUP) vouchers), the conversion of non-profit owned transitional housing and capital for additional non-profit acquisitions, as well as the use of FCRHA-owned housing.
- *Initiating other efforts to house and serve homeless persons,* including renovating an existing shelter facility, new construction, federal vouchers, and private sector partnerships.
- *Using local resources, as appropriated,* to fund non-profit rental subsidy programs, short-emergency assistance, and non-profit housing acquisition.

Goal: To Provide Affordable Options to Special Needs Populations- The County will provide affordable housing options to special needs populations including low to extremely-low income households, seniors, and persons with physical or mental disabilities through several means. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- *Bolstering the existing resources,* by converting group homes to affordable housing for larger families, a home-sharing referral program for seniors and persons with disabilities, delivery by FCRHA of new 90-unit senior independent living development, and renovation of existing FCRHA housing stock, and the purchase/development of accessible units.
- *Initiate other efforts to house and serve seniors and persons with physical or mental disabilities,* including identifying county surplus land for future affordable housing development, incorporation of Universal Design in FCRHA new construction/rehabilitation, and require projects financed by the FCRHA to provide accessible where economically feasible.
- *Provide additional resources to address the needs of extremely-low income households, seniors, large-families, and persons with physical or mental disabilities.* Planned activities include those described above and the renovation of an existing assisted living facility.

Goal: To Reduce the Waiting Lists by Half in 10 Years - The County will address the FCRHA waiting list of approximately 12,500 households (includes federal and local programs), the 1,200 on the CSB waiting list, and the 100 on the shelter waiting list. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- *Bolster the existing resources,* by ensuring maximum lease-up in FCRHA programs and properties, establishment of a collaborative referral process with non-profit owners, and non-profit acquisitions using federal resources such as the HOME Community Housing Development Organization (CHDO) set-aside, and Neighborhood Stabilization Program (NSP) funds granted to Fairfax County.
- *Initiate other efforts to reduce waiting lists,* such as exploring tax exemption for developers of housing for persons earning extremely low-incomes, completion of FCRHA pipeline projects, and the use of voluntary cash contributions received from developers via the land use rezoning process to develop additional affordable units.
- *Provide additional funding to reduce waiting lists,* including potentially using local resources to complete the FCRHA development pipeline and fund non-profit operate rental subsidy programs and affordable housing development.

Goal: To Increase Workforce Housing through Creative Partnerships and Public Policy **–** The County will address the need for 63,660 net new housing units affordable to households earning up to 120 percent of AMI based on projected job growth through 2025 (source: George Mason University) through bolstering existing resources and initiating other efforts. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- *Bolstering the existing resources* through units delivered by private developers under the county's Workforce Housing Policy and the county's Affordable Dwelling Unit (ADU) program, as well as the county's homeownership programs and the development of affordable housing on county-owned land.
- *Initiate other efforts to increase workforce housing* via county land use policy and other means.

***Non-Housing Objectives*:**

Goal: Maintain and strengthen a safe, healthy and vibrant community through a human service system that is responsive to all populations and their diverse needs including children, the elderly, persons with disabilities, or those with other special needs, with emphasis on benefiting low and moderate income persons and families. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- Promote healthy, positive child and youth development through a community support system that meets the diverse needs of all children and provides positive alternatives that help in the prevention of gang activity.
- Identify gaps and develop strategies to meet critical current and emerging service needs in the community.
- Encourage and support a coordinated public and private network of community services that fosters stability and maximizes independence of individuals and families.
- Promote a human service system that ensures residents are able to meet basic and emergency human needs, that emphasizes prevention and early intervention to minimize crises and that preserves individual and family stability.
- Encourage best practices, sensitivity to cultural differences and enhanced performances in service delivery to ensure residents receive high quality services as needed.

Goal: Reduce poverty and foster self-sufficiency by using public and private resources to provide essential training and support services, and by encouraging employment opportunities and development of business. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- Strengthen current job skill training and employment programs to prepare potential workers for better job opportunities and strengthen communication and partnerships with employers to remove barriers and to improve access to and increase the number of job placements in enhanced employment, especially for families with low income.
- Promote training and educational opportunities for workers to gain skills necessary for jobs that provide wages for individuals and families to be self-sufficient and that support family stability.
- Strengthen the provision and flexibility of supportive services for individuals to begin new jobs or continue in existing jobs by ensuring they have access to affordable child care, disabled adult and elderly care, transportation, English as a Second Language programs and/or other needed support.
- Support community efforts in the development and assistance to micro-enterprises and small businesses to reduce small business failures and to retain and create more jobs.

- Ensure that the commercial revitalization program serves as a resource to achieve a portion of these objectives.

Goal: In commercial and residential areas that are vulnerable to instability, facilitate reinvestment, encourage business development, promote public and private investment and reinvestment, preserve affordable housing and prevent or eliminate the negative effects of disinvestment and foreclosures. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- Develop strategies of prevention and early intervention in communities in danger of deterioration to reduce the need for greater community investment and improvements in the future. Continued implementation of Board Foreclosure Strategy.
- Review existing plans for Conservation Areas, Redevelopment Areas, residential Revitalization Areas, Commercial Revitalization Districts, Commercial Revitalization Areas and Neighborhood Strategy Areas to promote a comprehensive and coordinated approach to meeting community development needs while maintaining the affordable housing stock and the unique character of each community.
- Build on community strengths and involve the residents in decision making on needs, priorities, plans, improvements, and solutions to community concerns; in cooperation with the in cooperation with the county's Code Enforcement Strike Team.

***Institutional Objective*:**

Goal: Ensure broad community input throughout the development and implementation of the Consolidated Plan, build public/private partnerships to implement the Plan, and monitor and evaluate the goals, strategies and program outcomes. Examples of the activities planned to achieve this goal starting in FY 2011 include:

- Implement the Citizen Participation Plan and monitor and evaluate the effectiveness of community outreach and education on community needs, plans and priorities; funded programs and results; and the effectiveness of the citizen participation process under the Consolidated Plan.
- Identify and pursue new resources and partnerships within the community and continue to strengthen capacity and coordination among County agencies and service programs to support the Consolidated Plan goals, objectives, strategies and annual action plans.
- Emphasize expanding the capacity of private non-profit agencies to meet community needs through the provision and identification of training, technical assistance, mentoring and leveraging of resources provided by the County.
- Promote broad assessment, awareness and understanding of community needs. Emphasize outreach efforts to those who may be neediest in the population and least able to access community services. Monitor changes in the community and associated services needs and alter service delivery as warranted.
- Monitor the performance of programs and projects funded through the Consolidated Community Funding Pool, as well as the overall community impact. Develop and implement strategies for enhanced performance and benefit to the community, such as projects may not be refunded in subsequent years if performance objectives are not achieved.

Citizen Participation

Public Participation

All procedures detailed in the Citizen Participation Plan as described below in the Summary of Citizen Participation were followed in preparing the Five-Year Consolidated Plan for FY 2011-2015. In addition to using more traditional forms of media for advertising the Five-Year Consolidated Plan process including public meetings and appropriate contact information, the County used the Internet for posting announcements of public meetings and the resulting comments.

Three public input forum meetings/public hearings were held on three separate dates (October 28 and 29, 2009 and November 6, 2009), at three different locations (Reston Community Center, South County Government Center, and Fairfax County Government Center) in preparation of the FY 2011-2015 Plan. The forums covered three broad areas: Affordable Housing, Homeless and Special Needs Populations, and Community and Economic Development. The priority needs set by the Consolidated Community Funding Advisory Committee and approved by the Fairfax County Board of Supervisors take into consideration comments from the public along with suggestions from housing advocacy groups, the Affordable Housing Advisory Committee, and the Fairfax County Redevelopment and Housing Authority, and other stakeholders. A summary of citizen comments may be found online at (http://www.fairfaxcounty.gov/rha/consplan/fiveyearconsolplan09.htm) or in Appendix A of this document. Assorted comments from the public forums are incorporated within appropriate sections of this Plan.

Summary of Citizen Participation Process

A Citizen Participation Plan was adopted by the Fairfax County Board of Supervisors December 8, 1997 and most recently revised and amended by the Board of Supervisors on April 30, 2007. The purpose of the Citizen Participation Plan is to serve as a guide for public input and participation in the Consolidated Plan process. The full Citizen Participation Plan may be found in Appendix B.

Per the Citizen Participation Plan, the County provided for and encouraged citizen participation from all sectors of the community in developing this Five-Year Plan. Particular emphasis was placed on participation by persons below the federal poverty line, low and moderate income residents of blighted areas and of areas in which federal funds are used or are proposed to be used; and the participation of minority and non-English speaking residents, as well as persons with mobility, visual, speech or hearing impairments.

The County provided citizens, public agencies, and other interested parties with reasonable and timely access to information and records relating to the County's Consolidated Plan, and the use of assistance provided by federal funding sources included in the Plan for the preceding five (5) years.

Citizens had an opportunity to comment on housing, community development, public service needs, and population and program priority needs identified to be addressed by community-based organizations and the proposed Consolidated Plan prior to its submission to HUD at public hearings, meetings, or by directly contacting the appropriate County agency.

Information on the Consolidated Plan schedule was disseminated to local agencies and nonprofit organizations working with minority, non-English speaking, and physically impaired residents to afford as many people as possible the opportunity for full citizen participation.

The County worked closely with the Fairfax County Redevelopment and Housing Authority (FCRHA) to encourage the participation of residents of public and assisted housing developments in the development and implementation of the Consolidated Plan. The County apprised the FCRHA of housing and community development activities related to its developments and surrounding communities so the FCRHA can make such information available at the annual public hearing on the Comprehensive Grant program.

Citizen input on housing, community development, and needs for services to be provided by community-based organizations was also received at a public hearing held by the Consolidated Community Funding Advisory Committee (CCFAC) on December 8, 2009. The CCFAC is composed of representatives from a variety of boards, authorities and commissions. Membership may also include representation from human services provider groups, and consumer and community organizations which relate to the Human Services Community, as appropriate. Members are appointed by the County Executive and serve for a term of three years. The roles and responsibilities of to the CCFAC are described in the Citizen Participation Plan (Appendix B).

HOUSING AND HOMELESS NEEDS ASSESSMENT (91.205)

Describe the estimated housing needs projected for the next five year period for the following categories of persons: extremely low-income, low-income, moderate-income, and middle-income families, renters and owners, elderly persons, persons with physical or mental disabilities, including persons with HIV/AIDS and their families, single persons, large families, public housing residents, victims of domestic violence, families on the public housing and Section 8 tenant-based Housing Choice Voucher waiting list, and discuss specific housing problems, including: cost-burden, severe cost-burden, substandard housing, and overcrowding (especially large families).

Key Definitions

In order to determine the housing needs of Fairfax County residents, various groups or household types are evaluated based on criteria or measures that expose a level of need. Definitions for some of these key groups and measures are provided here for better understanding of the information required by the U.S. Department of Housing and Urban Development (HUD) and provided in this Consolidated Plan.

Housing needs are broken down by various HUD-defined income categories provided through the 2009 CHAS data, special tabulations of the U.S. Census, American Community Survey (ACS) provided by HUD to support localities in preparing Consolidated Plans. The time period covered by the 2009 CHAS is the three year average of 2005-2007. Tables provided in the CHAS tabulations are estimates of the numbers of households that fit certain combinations of HUD-specified criteria such as housing needs by various types of households. Where categories of household types that are required by HUD for the Consolidated Plan were not broken down in the 2009 CHAS by the HUD-defined income categories, the Virginia Tech Center for Housing Research estimated the numbers based on income category numbers from the 2000 CHAS and the household type totals from the 2009 CHAS.

The income categories **required by HUD for the Consolidated Plan** are: extremely-low income defined as income less than 30 percent of median family income (MFI); low-income defined as income between 30 percent and 50 percent MFI; moderate-income defined as income between 50 percent and 80 percent MFI; and middle-income defined as income between 80 percent and 95 percent MFI. In order to better understand the needs related to workforce housing, the analysis presented in this plan also estimates the needs of those with incomes between 95 percent and 120 percent MFI referred to in this plan as above middle-income.

It should be noted that the income definitions required by HUD for the Consolidated Plan differ from those used by the Fairfax County Redevelopment and Housing Authority (FCRHA) for the purpose of its programs. The principal difference is that the FCRHA characterizes households earning between 60 and 80 percent of the median income as having “moderate income”, with a definition of “moderate income” of up to 100 percent of median income to be applied on a case-by-case basis. It should also be noted that Fairfax County, in its Comprehensive Plan, defines “affordable housing” as “… housing that is affordable to households with incomes that are 120 percent or less of the … [median income]”.

Table 2 below compares the income definitions required by HUD for the Consolidated Plan and those traditionally used by the FCRHA.

Table 2. Comparison of HUD-Required Income Definitions for Consolidated Plan and FCRHA Income Definitions

Income Label	***Expressed as Percentage of Area Median Family Income (AMFI)***	
	HUD: Consolidated Plan	***FCRHA***
Extremely low-income	0 – 30 percent AMFI	Same
Very low-income		30 – 50 percent AMFI
Low-income	30 – 50 percent AMFI	50 – 60 percent AMFI
Moderate Income	50 – 80 percent AMFI[7]	60 – 80 percent AMFI*
Middle Income	80 – 95 percent AMFI	
Above Middle Income	95 – 120 AMFI	
Workforce Housing		Up to 120 percent AMFI

**Note: The FCRHA defines "moderate income" as households earning between 60 and 100 percent of AMI; however, only a limited number of rental properties may use a standard of up to 100 percent of AMI on a case-by-case basis with the approval of the FCRHA.*

Household types for which needs are evaluated include elderly, non-family households (1 or 2 persons 62 or older); small family households (2 persons, neither person 62 years or over, or 3 or 4 persons); large family households (5 or more family members); and unrelated, non-elderly individuals.

Elderly households are defined in several ways. For greater detail in determining needs, elderly are broken into two categories: 1) elderly households containing 1 or more persons age 62-74, no persons 75 or older and 2) extra-elderly households containing 1 or more persons aged 75 or older. For determining demand, projections are provided for elderly households defined as 65 years of age or older.

Households containing a person with a disability are defined as a household containing 1 or more persons with a mobility or self-care limitation. This includes all households where one or more persons has a physical, mental, or emotional condition lasting 6 months or more making it difficult to dress, bathe, or get around the house or to go outside the home alone to shop or visit the doctor. This deviates from the 2000 definition, so no time period comparisons should be made. Also, due to limited sample sizes within income categories provided in the 2009 CHAS data, the 2005-2007 numbers should be viewed with caution.

The 2009 CHAS data and the needs described in this plan define a household as having a moderate cost burden if their monthly housing cost as a percentage of monthly gross income is greater than 30 percent and less than or equal to 50 percent and a severe cost burden if their monthly housing cost as a percentage of monthly gross income is greater than 50 percent. For the purpose of this plan, the numbers of households are reported that have a cost burden greater than 30 percent which includes both the moderate and the severe cost burdened households. The numbers of households also are reported that have a cost burden greater than 50 percent which includes only those with a severe cost burden.

[7] For the purpose of HUD-funded programs, 80 percent of MFI is capped at the national median income, with an added allowance for Fairfax County as a "High Housing Cost" area.

A household with housing problems is defined as a household that has 1 or more of 4 housing problems (housing unit lacks complete kitchen facilities; lacks complete plumbing facilities; has more than 1 person per room; *or* housing cost burden is over 30 percent). The definition of substandard housing is that the housing unit lacks complete kitchen or complete plumbing facilities. HUD defines "overcrowding" as persons-per-room greater than one. Severe overcrowding is defined by HUD as persons-per-room greater than 1.5.[8]

[8] "Room", for the purpose of the HUD definition of "overcrowding", refers to total rooms in a dwelling, including *but not limited to* bedrooms. The HUD definition of "overcrowding" for the purpose of CHAS data separate and distinct from the limitations on the occupancy of a dwelling unit provided for in Section 2-502 of the Fairfax County Zoning Ordinance.

Housing Needs Analysis

The County aims to identify those residents with the most need over the next five years in order to best target resources. Due to the housing crisis, residents impacted by foreclosure have grown dramatically in number and are first to be addressed in this section. The needs of groups typically identified as having housing needs are analyzed next and separated into renter households and owner households. First for renters and then for owners, housing needs are analyzed based on the income level of the household (the HUD-prescribed income breakdowns are defined above). For each income level, the total number of households and the number by types of households (elderly 1-2 person; small families; large families; and non-elderly, unrelated individuals) are reported as well as the number and percent that have cost burdens >30 percent, severe cost burdens >50 percent, and having any housing problem as defined above, have a disability, or are on the public housing waiting list. Data from 2000 are reported for comparison purposes. Also, provided are the number and percent of households that have a person with a mobility or self-care limitation with any housing problem also broken down by elderly households and extra-elderly households. Utilizing the Virginia Tech's Center for Housing Research housing demand model, estimates for 2010 and projections for 2015 and 2020 are provided for the number of families (non-elderly), elderly 65 or older, and non-family households.

Foreclosure Needs

Since development of the last Five-Year Consolidated Plan for Fairfax County, the housing crisis has had a major impact on the County. In 2005, the climate regarding homeownership in the entire nation was to jump on board and take advantage of wide-open financing opportunities with the promise of ever rising home prices. Over the next few years, housing values went into steep decline and the "bubble" burst. Some homeowners found themselves in a situation of not being able to pay their mortgages while at the same time their house value had declined. In Fairfax County, this resulted in a rash of foreclosures and a new group of residents with housing needs requiring the County's attention.

Beyond the toll foreclosure takes on individual families, foreclosure impacts neighborhoods. Foreclosure contributes to neighborhood blight, disinvestment, increased crime, and can impact the value of surrounding properties, potentially putting others at risk of foreclosure and the County at risk of an increasingly shrinking tax base. While the prevalence of foreclosure activity was not uniform throughout the County, foreclosures generally have had a dampening effect on competitive sale prices as reflected by a decline in the 2009 assessment values.

In February 2009, there were 1,723 net foreclosures (see Appendix C, Map 1) in Fairfax County (in addition to residential properties, this number includes vacant properties and a small number of commercial properties). Nearly half of the foreclosure activity was concentrated in the southeast part of the County with 45 percent of foreclosures in the Lee, Mason, and Mount Vernon districts. Seven areas of greatest need have been identified by the County: Springfield, Annandale, Herndon, Centreville, Alexandria, Chantilly and Lorton.

Significant foreclosure activity in Fairfax County qualified the County for receiving funds from the U.S. Department of Housing and Urban Development through the Neighborhood Stabilization Program (NSP). NSP was established under Title III of Division B of the Housing and Economic Recovery Act of 2008 and provides resources for assisting in the acquisition, rehabilitation, and redevelopment of abandoned and foreclosed homes.

Silver Lining Initiative

In 2009, Fairfax County received a direct NSP award from HUD of $2,807,300, and an additional allocation of $1,000,000 through the State of Virginia's NSP award. This funding was critical to the implementation of County's response to the foreclosure crisis, which consists of three components: 1) Assistance to homeowners in distress; 2) neighborhood preservation efforts; and 3) assistance to first-time homebuyers purchasing foreclosed properties under the Silver Lining Initiative.

The Silver Lining Initiative uses primarily NSP funds to provide gap financing for first-time homebuyers purchasing foreclosed properties in Fairfax County. These loans are in the form of a shared equity second trust; upon sale or transfer of the property, the greater of the principal and interest or the Fairfax County Redevelopment and Housing Authority's (FCRHA) share of the equity will be returned to the FCRHA.

The *Silver Lining Plus* program provides NSP funds to non-profits through a competitive application process, for the purpose of acquiring foreclosed properties (including single-family homes, townhouses, and condominiums) for rental housing. Funds will be provided through no-interest, deferred loans to purchase foreclosed properties for rental housing. Non-profit organizations may purchase any housing type, including condominiums, for use as rental properties to households that have incomes strictly at or below 50 percent of area median income (AMI). Applications must be for acquisition of property within the seven areas of greatest need, which include Springfield, Annandale, Herndon, Centreville, Alexandria, Chantilly and Lorton. Silver Lining Plus have been awarded to various non-profits through a competitive Request for Proposal (RFP) process; awardees include: Pathway Homes, Reston Interfaith Housing Corporation (RIHC), Homestretch Inc., and Marian Homes Inc., for the acquisition of up to 11 foreclosed units.

Foreclosure Forecast

By January 2010, net foreclosures in Fairfax County were down to 725 from a September 2008 peak of 2,257. The drop in net foreclosures from 1,723 in February 2009 may be attributed to programs developed through the NSP funding and increased sales of foreclosed properties. In general, foreclosure forecasts are predicting increased numbers of foreclosures over the next several years. The Virginia Tech Center for Housing Research projections indicate that homeownership will continue to decline in 2010. Unless the economy and the housing market improve significantly, it is likely that the number of foreclosures will remain relatively high throughout the next five years.

Extremely Low-income (ELI<30%AMFI) Housing Needs

<30%AMFI is <$28,350 based on the median income of a family of 4 in 2007 ($94,500) as determined by HUD for the Washington, DC metropolitan area.

ELI Renters (Table 3)

There were 16,675 extremely low-income renters based on the 2009 CHAS estimation (the estimate for the three year average 2005-2007 and referred to as 2005-2007 in this document). This represents an increase of 3,662 over the year 2000. The percent of all renters in the extremely low-income category increased from 12.8 percent to 18.0 percent.

Housing Needs of ELI Families (2-4 persons, 5+ persons) Renters

The number of extremely low-income (<30% MFI) renter families increased by approximately 1,025 between 2000 and 2005-2007 to a total 7,835. Most of these families are small (6,579), but 1,282 have 5 or more people. Large families have the highest rate of housing problems (nearly 100 percent) and are much more likely to be

overcrowded or be in units that are otherwise substandard. Subtracting the percent of cost-burdened (at 30 percent of income or more) households from the percent with any housing problem provides the percent that are overcrowded or in substandard housing but are not cost burdened. (Most of these are overcrowded, as the Census provides a very limited measure of substandard housing based on units lacking complete plumbing for the exclusive use of the occupants.) Nearly 18 percent of large families do not have a cost burden but are in overcrowded or substandard housing. Small families are the next most likely to be overcrowded or in substandard housing but not cost burdened (about 14 percent).

Extremely low-income renters, particularly large families, are very likely to have a cost burden exceeding 30 percent of income. Over two-thirds of small families have extreme rent burdens of 50 percent or more and 82 percent of large family renters.

ELI Elderly 1&2 Member Renters

Over one-in-five extremely low-income renters are households with one or more people aged 62+ (22 percent). Elderly extremely low-income renters are less likely to have housing problems than families or non-elderly, unrelated individuals (including 1-person households, unmarried couples without children, and unrelated roommates).

ELI Non-elderly, Unrelated Individual Renters

Non-elderly, unrelated individuals include single individuals, unmarried couples without children, and unrelated roommates. Of the four household types identified in Table 1, this is the second most frequent category among extremely low-income renters and has the highest incidence of extreme cost burden (70 percent).

ELI Disabled (including HIV/AIDS) Renters (Table 4)

There were 2,430 extremely low-income renters with mobility or self-care limitations in 2005-2007. Nearly half of these were elderly (62+ 1 & 2 member households) and more of the elderly households were 75 and older than 62 to 74. About 60 percent of the extremely low-income elderly renters with mobility and self-care limitations have housing problems, but 75 percent of non-elderly renters with mobility and self-care limitations have housing problems. Consequently, the non-elderly segment accounts for 60 percent of ELI renters with mobility and self-care limitations who have housing problems (964 of 1,600).

Estimates of HIV/AIDS are not segmented by income category and are presented in a separate section following the discussion of housing needs by income level.

ELI Public housing residents, families on the public housing and Section 8 tenant-based waiting list

Fairfax County has 7,678 families on the Public Housing and the Section 8 waiting lists that are ELI.

ELI Renter Worst Case Housing (cost-burden, severe cost burden, substandard housing, and overcrowding)

Of the 7,861 renters in 2005-2007 with extremely low incomes and extreme cost burdens, 39 percent are in small families and 31 percent are non-elderly unrelated individuals. The remainder is split somewhat evenly between elderly (22 percent) and large families (18 percent).

Extremely low-income renters with severe cost burdens require rent subsidies either through tenant-based or site-based assistance.

Table 3. Extremely Low-Income Renters, Fairfax County, Virginia 2000 & 2005-2007 Average

	Renters, 2005-2007 Average					Renters, 2000				
Household Income <=30% MFI	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	All Other Households (Non-elderly, 1+ Unrelated Individuals)	Total Renters	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	All Other Households (Non-elderly, 1+ Unrelated Individuals)	Total Renters
Total	3,711	6,579	1,282	5,103	16,675	2,933	5,120	1,690	3,270	13,013
% with any housing problems	71.7%	93.0%	99.6%	87.4%	87.1%	60.6%	82.5%	95.0%	72.3%	76.6%
% Cost Burden >30%	70.1%	78.7%	82.1%	70.4%	74.5%	59.3%	76.7%	81.7%	70.9%	72.0%
% Cost Burden >50%	52.6%	68.5%	82.1%	70.3%	66.6%	42.6%	62.2%	60.4%	66.2%	58.6%
Number any housing problems*	2,661	6,118	1,277	4,459	14,516	1,777	4,224	1,606	2,364	9,968
Number Cost Burden >30%*	2,603	5,179	1,052	3,591	12,425	1,739	3,927	1,381	2,318	9,369
Number Cost Burden >50%*	1,951	4,510	1,052	3,587	11,100	1,249	3,185	1,021	2,165	7,626

*Note: Figures are a subset of "total".

Table 4. Extremely Low-Income Renters with Mobility and Self Care Limitations, 2005-2007 Average				
	Renters			
Household Income <=30% MFI	Extra Elderly 1 & 2 Member Households	Elderly 1 & 2 Member Households	All Other Households	Total Renters
Total	620	477	1333	2430
% with any housing problems	59.2%	56.0%	72.3%	65.8%
Number any housing problems	367	267	964	1600

Projections Extremely Low-Income Renters (Table 5)

Utilizing the Virginia Tech's Center for Housing Research housing demand model, estimates of households by tenure, income and household characteristics were prepared for 2010 and projections were developed for 2015 and 2020. The 2010 estimates were calibrated with special tabulations prepared from the ACS microdata (PUMS) files for Fairfax County using pooled 2005-07 data files and 2008 data files.

The Center for Housing Research reports that in some instances, the projected numbers for 2010 may be lower than the numbers from the CHAS 2009 (2005-2007). The CHAS data covers the time period when the housing boom was at its peak. It would be expected that the estimated numbers for 2010 would reflect the changes in the housing market since mid-decade.

The Center's estimates and projections utilized Fairfax County's population projections by age (dated 2008) for 2010, 2015 and 2020. The County estimates the growth in the population aged 15 and older (the ages with the potential for household formation) from 2000-2010 at 10.3 percent, down from the previous decades increase of 17.1 percent. The County projects a slightly slower increase from 2010 to 2020 of 9.1 percent, with slower growth during the first half (3.9 percent over 5-years) than from 2015-2020 (5.0 percent). The age 15+ population is also projected to become significantly older due to aging and a slower rate of net in-migration of younger adults. The percentage of the 15+ population aged 45+ is projected to go from 22 percent in 2000 to 27 percent in 2010 and 29 percent by 2020. This shift in the age structure will tilt housing demand progressively toward ownership. Additionally, the long-term trend of significant income growth in Fairfax County should also result in favorable trends in housing demand.

A few important differences should be noted between the categories in these tables and the CHAS data tables. Elderly households in the CHAS tables are for ages 62 and older, and only include 1 and 2 person households. The elderly category for the 2010 estimates and 2015-2020 projections (and corresponding 2000 estimates based on Census 2000) are for ages 65 and older, and include all household sizes. As a consequence, the non-elderly families categories also differ from the CHAS tabulations in that the Center's estimates and projections include family households aged 62-64. In addition, the CHAS tabulations include households of 3+ persons headed by householders aged 62+ in the non-elderly family category, whereas these are categorized as elderly households if aged 65+ in the Center's model.

Estimates for 2010 and projections to 2015 and 2020 of extremely low-income renters for family, elderly households, and non-elderly unrelated individuals are provided in Table 3.

The Center estimates that extremely low-income renters have increased from 13,013 in 2000 to 17,011 in 2010, and projects a slower increase over the next five to ten years to 18,890 in 2015 and to 19,496 in 2020. Much of the projected 2010-2020 increase in the extremely low-income renter population is projected to occur among elderly renters. The number of extremely low income non-elderly unrelated individual renters is estimated to have increased significantly between 2000 and 2010 but is projected in increase more slowly in the next decade. If the extremely low-income unrelated individual and elderly populations continue to increase into this decade, there will be even greater strains on social services and housing assistance because: 1) both of these populations have higher incidences of disabilities; and 2) very poor unrelated individuals are at high risk of homelessness. Therefore, the need for assistance for these special populations is expected to grow rapidly.

Among extremely low income renters, non-elderly families are projected to remain around 7,500. The combination of the elderly and unrelated individual categories will be 65 percent larger than the family category by 2020, reflecting a large shift in the demographics of the county's poorest renters.

Table 5. Extremely Low-Income Renters (<30%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020

	2000	2010	2015	2020
Families (non-elderly)	7,310	7,237	7,628	7,582
Elderly (65+ householders)	2,742	4,506	5,458	6,249
Non-elderly, Unrelated Individuals	2,962	5,278	5,804	5,665

Source: Virginia Tech Center for Housing Research

Affordable Housing Demand: These numbers should not, however, be confused with a projection of the actual demand for affordable housing. According to the affordable housing gap analysis conducted by the Center for Housing Research and included as part of the Housing Market Analysis in this Plan, there is a current deficit of 12,445 rental units needed to serve extremely low-income households. According to the George Mason University Center for Regional

Analysis, more than 20,000 net additional units of rental housing affordable to households earning up to 50 percent of the median income (low-income) will be needed by 2025, based on projected job growth (this study did not provide a projection at 30 percent and below).[9] These two perspectives point to the continuing need for the production of housing affordable at this income level.

Extremely Low-Income Owners (Table 6)

There were significantly fewer extremely low-income owners in 2005-2007 than there were renters (9,375 versus 16,675) and the number of ELI owners increased by about 2,400 since 2000.

ELI Family (2-4 persons, 5+ persons) Owners

Among ELI owners (as with renters), large families are the most likely to have housing problems (nearly 100 percent), but there were only 909 such families in 2005-2007. Families are also the most likely to have significant cost burdens among ELI owners and constitute nearly two-thirds of ELI owners with extreme cost burdens. The number of ELI owners with extreme cost burdens increased by 1,966 households between 2000 and 2005-2007.

ELI Elderly 1&2 Member Owners

Elderly ELI Owners are less likely than other ELI households to have housing problems. However, the ELI owners are nearly as likely as the other household types to have severe cost burdens.

ELI Disabled (including HIV/AIDS) Owners (Table 7)

There were 1,135 ELI owners with mobility or self-care limitations in 2005-2007 and most were elderly. These owners had a high probability of having housing problems (1,020 of the 1,135 had housing problems).

Estimates of HIV/AIDS are not segmented by income category and are presented in a separate section following the discussion of housing needs by income level.

ELI Owner Worst Case Housing

There were nearly 6,800 ELI owners with extreme cost burdens in 2005-2007, a 71 percent increase over 2000. Nearly half of these owners were families, particularly small families, and there were nearly as many non-elderly, unrelated individuals (1,777) as there were elderly (2,022) in this worst case category among owners.

[9] *"Linking Job Growth and Housing: Forecasts of the Demand for Workforce Housing in Fairfax County";* George Mason University, Center for Regional Analysis, 2008.

Table 6. Extremely Low-Income Owners, Fairfax County, Virginia, 2000 & 2005-2007 Average

	Owners, 2005-2007 Average					Owners, 2000				
Household Income <=30% MFI	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	All Other Households (Non-elderly, 1+ Unrelated Individuals)	Total Owners	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	All Other Households (Non-elderly, 1+ Unrelated Individuals)	Total Owners
Total	2,964	3,167	909	2,335	9,375	2,672	2,144	694	1,479	6,989
% with any housing problems	86.3%	97.1%	98.6%	97.4%	93.9%	76.8%	86.7%	97.3%	81.4%	82.8%
% Cost Burden >30%	70.5%	93.0%	78.3%	79.3%	81.1%	76.8%	85.3%	87.9%	81.4%	81.5%
% Cost Burden >50%	68.2%	72.3%	77.6%	76.1%	72.5%	54.0%	79.1%	80.0%	76.7%	69.1%
Number any housing problems	2,560	3,075	896	2,275	8,805	2,052	1,859	675	1,204	5,790
Number Cost Burden >30%	2,091	2,945	712	1,852	7,600	2,052	1,829	610	1,204	5,695
Number Cost Burden >50%	2,022	2,291	705	1,777	6,795	1,443	1,696	555	1,134	4,828

Table 7. Extremely Low-Income Owners with Mobility and Self Care Limitations, 2000 & 2005-2007 Average				
	Owners			
Household Income <=30% MFI	Extra Elderly 1 & 2 Member Households	Elderly 1 & 2 Member Households	All Other Households	Total Owners
Total	481	209	445	1135
% with any housing problems	86.9%	90.1%	93.0%	89.9%
Number any housing problems	418	188	414	1020

Five Year Projection, Extremely Low-Income Owners (Table 8)

There are about half as many extremely low-income owners as there are renters and most of these owners are elderly. Extremely low-income owners are projected to go from 6,989 in 2000 to 7,863 in 2010 and 9,494 in 2020. The increase in extremely low-income elderly owners will be rapid from 2010 to 2020, with this category jumping by 33 percent, although many will continue to have substantial equity in their homes. The combination of extremely low-income elderly owners and renters will be the largest population at risk of severe housing problems, nearly 12,000 households, in the county by 2020.

Table 8. Extremely Low-Income Owners (<30%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020				
	2000	2010	2015	2020
Families (non-elderly)	2,341	2,922	3,101	3,212
Elderly (65+ householders)	3,235	3,488	4,688	5,617
Non-elderly, Unrelated Individuals	1,414	1,453	1,705	1,824

Source: Virginia Tech Center for Housing Research

Low-income (LI) Housing Needs (30-50% AMFI)

30-50%AMFI is between $28,350-$47,250 based on the median income of a family of 4 in 2007 ($94,500) as determined by HUD for the Washington, DC metropolitan area.

LI Renters (Table 9)
There were 11,750 low-income (30-50%MFI) renters in Fairfax County in 2005-2007, a decrease of 420 since 2000. More than half of LI renters are families (6,415) and nearly half are small families (5,260). The second largest household type among renters at this income level is non-elderly, 1+ unrelated individuals, with 3,700.

Nearly all of non-elderly unrelated individuals have housing problems in this income category, and over 85 percent of families have housing problems. Elderly low-income renters are less likely to have housing problems (72 percent) than other household types.

The percentages of low-income renters with extreme cost burdens (as well as cost burdens over 30 percent) increased significantly between 2000 and 2005-2007. This reflects the impact on the renter market due to rising housing prices during the early to mid 2000's.

LI Families (2-4 persons, 5+ persons) Renters
Large families at this income level are much more likely to be overcrowded without having a cost burden. Of the 86 percent with any housing problems, 67 percent have a cost burden exceeding 30 percent of income. Consequently, about one-fifth are either overcrowded or are in units lacking complete plumbing (there are very few of the latter). While cost burdens for family renters in the 30-50 percent MFI category are not too severe (percents drop significantly at the >50 percent of income level compared to >30 percent level), the percentage of large family renters with severe cost burdens in this income category increased from 8 percent to 18 percent since 2000.

LI Elderly 1&2 Member Renters
Elderly renters are more likely to have severe cost burdens at this income level, 32 percent, than are families, but less likely than non-elderly unrelated individuals. Elderly renters did not experience the increase incidence in cost burden between 2000 and 2005-2007 as did the other household types.

LI Non-elderly, Unrelated Individual Renters
Almost all non-elderly unrelated individual renters have housing problems or moderate cost burdens in 2005-2007. Non-elderly unrelated individual renters are much more likely to have severe cost burdens at this income level (67 percent), than the elderly or families and the incidence increased significantly since 2000 where 36 percent had extreme cost burdens.

LI Disabled Renters (Table 10)
There were 905 low-income renters with mobility and self care limitations in 2005-2007, only slightly less than as for extremely low-income renters. The probability of

housing problems is also very high for this group. Nearly 700 low-income renters had housing problems in 2005-2007 and nearly two-thirds of these were in non-elderly households.

LI Public housing residents, families on the Public Housing and Section 8 tenant-based waiting list

Fairfax County has 2,161 families on the Public Housing and the Section 8 waiting lists that are LI.

LI Renter Worst Case Housing

Of the 4,550 low-income renters with extreme cost burdens, 1,332 were small families, 2,479 were non-elderly unrelated individuals, 528 were elderly, and 211 were large families. Each of these categories increased between 2000 and 2005-2007.

Table 9. Low-Income (30-50%MFI) Renters, Fairfax County, Virginia 2000 & 2005-2007 Average

	Renters, 2005-2007 Average					Renters, 2000				
Household Income 30-50% MFI	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	All Other Households (Non-elderly 1+ Unrelated Individuals)	Total Renters	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	All Other Households (Non-elderly 1+ Unrelated Individuals)	Total Renters
Total	1,635	5,260	1,155	3,700	11,750	1,468	5,695	2,095	2,912	12,170
% with any housing problems	71.7%	90.5%	86.2%	99.7%	90.4%	73.1%	80.6%	84.5%	90.0%	82.6%
% Cost Burden >30%	71.1%	89.8%	67.2%	95.5%	86.8%	72.8%	73.8%	53.0%	89.4%	73.8%
% Cost Burden >50%	32.3%	25.3%	18.3%	67.0%	38.7%	31.7%	19.3%	8.1%	36.0%	22.9%
Number any housing problems	1,173	4,759	996	3,689	10,617	1,073	4,590	1,770	2,621	10,054
Number Cost Burden >30%	1,162	4,722	776	3,535	10,195	1,069	4,203	1,110	2,603	8,985
Number Cost Burden >50%	528	1,332	211	2,479	4,550	465	1,099	170	1,048	2,783

Table 10. Low-Income Renters with mobility and Self-Care Limitations, 2005-2007 Average

	Renters			
Household Income 30-50% MFI	Extra Elderly 1 & 2 Member Households	Elderly 1 & 2 Member Households	All Other Households	Total Renters
Total	261	79	565	905
% with any housing problems	76.9%	79.6%	76.4%	76.8%
Number any housing problems	200	63	432	695

Five-Year Projection, Low-Income Renters (Table 11)

The number of low-income (30-50 percent MFI) renters is estimated to be 14,619 in 2010, an increase of 20 percent over 2000. The largest demographic category is non-elderly families, but these are projected to peak in 2010 and remain stable for the next ten years. In contrast, low-income renters who are elderly and non-elderly unrelated individuals are projected to continue to increase between 2010 and 2020. Non-elderly unrelated individuals are projected to increase by 1,000 households over this period.

Table 11. Low-Income Renters (30-50%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020

	2000	2010	2015	2020
Families (non-elderly)	7,419	8,540	8,291	8,558
Elderly (65+ householders)	1,298	1,693	2,156	2,370
Non-elderly, Unrelated Individuals	3,454	4,386	5,161	5,281

Source: Virginia Tech Center for Housing Research

LI Owners (Table 12)

There were 14,615 low-income (30-50 percent MFI) owners in Fairfax County in 2005-2007. More than half of low-income owners are families with the smallest category non-elderly unrelated individuals. Nearly 80% of low-income owners have housing problems. In addition, the cost burdens for low-income owners increased between 2000 and 2005-2007. This reflects rising housing prices during the early to mid 2000's.

LI Families (2-4 persons, 5+ persons) Owners

Over three quarters of small families and about 87% of large families have housing problems in this income category compared with about two-thirds of elderly owners. Although large families among owners at this income level are more likely than other owners to be overcrowded, this is not evident as all large families with housing problems are also at least moderately cost burdened.

Large families are much more likely to be cost burdened at this income level if they are owners rather than renters (87 percent compared to 67 percent of renters). This probably reflects a combination of the high cost of owner-occupied housing in the area and the strong appeal of ownership. In addition, lack of supply in the rental market appropriate for large families may force families into a high-cost owner market.

LI Elderly 1&2 Member Owners

Elderly owners are much less likely to have severe cost burdens at this income level, 32 percent compared to about 60 percent for small families and for non-elderly unrelated individuals. However, the percentage of elderly, LI owners with extreme cost burdens increased slightly between 2000 and 2005-2007, just as the incidence of severe cost burden increased for other household types. However, many continue to have substantial equity in their homes.

LI Non-elderly, Unrelated Individual Owners

Of the few non-elderly unrelated individual owners in this income category, nearly all have housing problems. While non-elderly unrelated individual owners are more likely than other owners at this income level to be overcrowded without having a cost burden, of the 97 percent with any housing problems, 91 percent have a cost burden exceeding 30 percent of income meaning about 6 percent are overcrowded without having a cost burden. The percent of non-elderly unrelated individuals that have extreme cost burdens is the largest among low-income owners (65 percent). This suggests a significant level of housing stress.

LI Disabled Owners (Table 13)

There were 1,610 low-income owners with mobility and self care limitations in 2005-2007, over 700 more than for renters. There are 1,240 low-income owners with housing problems in 2005-2007 and almost two-thirds of these are in non-elderly unrelated households.

LI Public housing residents, families on the public housing and section 8 tenant-based waiting list

Not applicable to low-income owners.

LI Owner Worst Case Housing

Of the 7,475 low-income owners with extreme cost burdens, 3,352 were small families, 1,790 were non-elderly unrelated individuals, 1,381 were elderly, and 952 were large families. The number of extreme cost burdened owners increased significantly between 2000 and 2005-2007.

Table 12. Low-Income Owners, Fairfax County, Virginia 2000 & 2005-2007 Average

	Owners, 2005-2007 Average					Owners, 2000				
Household Income 30-50% MFI	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	Households (Non-elderly 1+ Unrelated Individuals)	Total Owners	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	Households (Non-elderly 1+ Unrelated Individuals)	Total Owners
Total	4,235	5,597	2,020	2,763	14,615	3,278	3,715	1,725	1,550	10,268
% with any housing problems	62.5%	77.1%	86.8%	96.6%	77.9%	47.8%	86.1%	90.7%	80.3%	73.8%
% Cost Burden >30%	62.0%	77.0%	86.8%	91.1%	76.7%	47.8%	83.2%	80.9%	80.3%	71.1%
% Cost Burden >50%	32.6%	59.9%	47.1%	64.8%	51.1%	25.3%	54.6%	38.3%	61.9%	43.6%
Number any housing problems	2,647	4,316	1,754	2,668	11,385	1,567	3,199	1,565	1,245	7,575
Number Cost Burden >30%	2,627	4,312	1,753	2,518	11,210	1,567	3,091	1,396	1,245	7,298
Number Cost Burden >50%	1,381	3,352	952	1,790	7,475	829	2,028	661	959	4,478

Table 13. Low-Income Owners with Mobility and Self Care Limitations, 2005-2007 Average				
	Owners			
Household Income 30-50% MFI	Extra Elderly 1 & 2 Member Households	Elderly 1 & 2 Member Households	All Other Households	Total Owners
Total	500	344	766	1610
% with any housing problems	49.5%	76.1%	95.4%	77.0%
Number any housing problems	248	262	731	1240

Five-Year Projection, Low-Income Owners (Table 14)

The number of low-income (30-50 percent MFI) owners is estimated to have increased to 13,826 in 2010 from 10,268 in 2000. Although the largest increase is among elderly owners (possibly representing aging in place), there was a significant jump (about 2,500 owners) in the number of low-income families owning homes between 2000 and 2010. This could reflect the rapid increase in ownership in the county during the housing bubble market. In 2010, half of the LI owners are estimated to be non-elderly families (6,998), reflecting the increase in ownership rates for this population during the past decade. Since the most recent data available to estimate ownership rates for this group is from 2008, it could understate the severity of the impact of the recession on ownership rates. The projection is for this category to stabilize around 7,500 low-income family owners over the next ten years.

The number of low-income owners is projected to increase significantly to 18,092 by 2020, largely due to aging. The elderly will be the largest category of low-income owners by 2020. This will shift the focus of low-income homeownership programs toward services to existing low-income owners, particularly the elderly, rather than the creation of new, first-time owners among low-income families.

Table 14. Low-Income Owners (30-50%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020				
	2000	2010	2015	2020
Families (non-elderly)	5,293	6,998	7,569	7,424
Elderly (65+ householders)	2,680	5,190	6,863	7,988
Non-elderly, Unrelated Individuals	2,295	1,638	2,275	2,680

Source: Virginia Tech Center for Housing Research

Moderate-Income (MI) Housing Needs (50-80% AMFI)

50-80% AMFI is between $47,250 and $60,000 based on the median income of a family of 4 in 2007 ($94,700) as determined by HUD for the Washington, DC metropolitan area.

Moderate-Income (MI) Renters (Table 15)
There were 21,600 moderate-income (50-80 percent MFI) renters in Fairfax County in 2005-2007, an increase of nearly 8,400 renters over 2000.
Slightly more than half of moderate-income renters are families (11,341) with non-elderly unrelated individuals accounting for most of the other household types (40 percent). There are few elderly moderate-income renters (8 percent).

MI Family (2-4 persons, 5+ persons) Renters
Small families were the least likely of the moderate-income renter households to have housing problems (44 percent), while large families were the most likely (78 percent). Although the percent of small families with any housing problems declined from 2000 to 2005-2007, the incidence of housing problems among large families increased (from 67 percent to 78 percent). Just over one quarter of large families have a cost burden based on housing costs greater than 30 percent of income.

Large families at this income level are much more likely to be overcrowded without having a cost burden. Of the 78 percent with any housing problems, only 27 percent have a cost burden exceeding 30 percent of income. Consequently, over half are either overcrowded or are in units lacking complete plumbing (there are very few of the latter).

Cost burdens for renter families in the 50-80 percent MFI category typically do not exceed 50 percent of income, with less than 5 percent of families having severe cost burdens.

MI Elderly 1&2 Member Renters
Two-thirds of the elderly renters in this income category had a housing problem or cost burdens. Elderly renters are much more likely to have severe cost burdens at this income level than other household types, but the level is only 22 percent. This is a slight increase over 2000.

MI Non-elderly, Unrelated Individual Renters
Over 70 percent of moderate-income non-elderly unrelated individual renters had housing problems which can be attributed mostly to cost burden (about 2 percent of housing problems are due to overcrowding). The non-elderly unrelated individuals have the highest percentage of >30 percent cost burdens (68 percent) of the household types in this income category. Only 5 percent of moderate-income renters have extreme cost burdens.

MI Disabled Renters (Table 16)
There were 940 moderate-income renters with mobility and self- care limitations in 2005-2007. The probability of housing problems is also fairly high for this group, particularly given their income level. About two-thirds of moderate-income renters had housing problems in 2005-2007 and three-quarters of these were in non-elderly households.

MI Public housing residents, families on the public housing and section 8 tenant-based waiting list

Fairfax County has 270 families on the Public Housing waiting and the Section 8 waiting lists that are MI.

MI Renter Worst Case Housing

Of the 1,265 moderate-income renters with extreme cost burdens, 366 were elderly, 383 were small families, 22 were large families, and 494 were non-elderly unrelated individuals.

Table 15. Moderate Income (50-80%MFI) Renters, Fairfax County, Virginia 2000 & 2005-2007 Average

	Renters, 2005-2007 Average					Renters, 2000				
Household Income 50-80% MFI	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	Households (Non-elderly 1+ Unrelated Individuals)	Total Renters	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	Households (Non-elderly 1+ Unrelated Individuals)	Total Renters
Total	1681	9511	1830	8578	21,600	1,084	5,740	2,030	4,350	13,204
% with any housing problems	63.2%	44.2%	78.1%	70.1%	58.9%	59.4%	54.8%	66.7%	64.6%	60.2%
% Cost Burden >30%	62.1%	44.1%	27.0%	67.6%	53.4%	56.2%	40.2%	19.7%	61.3%	45.3%
% Cost Burden >50%	21.8%	4.0%	1.2%	5.8%	5.9%	19.7%	3.7%	0.7%	5.2%	5.0%
Number any housing problems	1063	4206	1429	6016	12714	644	3,146	1,354	2,810	7,954
Number Cost Burden >30%	1044	4196	494	5801	11535	609	2,307	400	2,667	5,983
Number Cost Burden >50%	366	383	22	494	1265	214	212	14	226	666

Table 16. Moderate-Income Renters (50-80%AMFI) with Mobility and Self Care Limitations, 2005-2007 Average				
	Renters			
Household Income 50-80% MFI	Extra Elderly 1 & 2 Member Households	Elderly 1 & 2 Member Households	All Other Households	Total Renters
Total	161	100	679	940
% with any housing problems	75.0%	27.0%	66.6%	63.8%
Number any housing problems	121	27	452	600

Five-Year Projection, Moderate Income Renters (Table 17)

The Center for Housing Research projected the number of moderate-income (50-80 percent MFI) renters, middle-income (80-95 percent MFI) renters, and above middle-income (95-120 percent) renters. The number of moderate-income renters is projected to increase by 2,368 between 2000 and 2010, with most of the increase among non-elderly unrelated individuals (Table 15).

Table 17. Moderate-Income Renters (50-80%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020				
	2000	2010	2015	2020
Families (non-elderly)	8,003	8,148	8,408	7,578
Elderly (65+ householders)	1,267	1,456	1,644	1,788
Non-elderly, Unrelated Individuals	3,802	5,968	6,313	6,633

Source: Virginia Tech Center for Housing Research

Moderate-income (MI) Owners (Table 18)

There were 31,345 moderate-income (50-80 percent MFI) owners in Fairfax County in 2005-2007, an increase of 17,207 or a 120 percent increase since 2000. The moderate-income category for owners was the primary income group attracted into homeownership in the early to middle years of the decade.

MI Family (2-4 persons, 5+ persons) Owners

About 70 percent of moderate-income owner small families and three quarters of large families have housing problems. More families than elderly have housing problems but families do not significantly differ from non-elderly unrelated individuals (68 percent have housing problems).

The housing problems of large families are not solely due to cost burden, as 68 percent have cost burdens exceeding 30 percent of income leaving about 6 percent with housing problems due to overcrowding or some other substandard condition. Extreme cost burdens are more likely for the small family moderate-income owners than for large families and other household types. Small families also had the largest increase in severe cost burden from 2000 to 2005-2007.

MI Elderly 1&2 Member Owners

Elderly owners in the moderate-income category are much less likely than other household types to have housing problems including moderate and extreme cost burdens. Still, 44 percent of moderate-income elderly have housing problems or moderate cost burdens and 16 percent have severe cost burdens. Also, housing cost burdens increased from 2000 to 2005-2007 for elderly moderate-income owners, although not as much as the other household types. Many may also have substantial equity in their homes.

MI Non-elderly, Unrelated Individual Owners

About two thirds of the moderate-income owners who are non-elderly unrelated individuals have housing problems or moderate cost burden. Nearly one-third of non-elderly unrelated individual owners have severe cost burdens.

MI Disabled Owners (Table 19)

There were 2,800 moderate-income owners with mobility and self- care limitations in 2005-2007. Twelve hundred of these owners had housing problems and over two-thirds of those with housing problems were in non-elderly households.

MI Public housing residents, families on the public housing and Section 8 tenant-based waiting list

Not applicable to MI owners.

MI Owner Worst Case Housing

Moderate-income owners were much more likely than moderate-income renters to have extreme cost burdens. A quarter of moderate-income owners in 2005-2007 have severe cost burden. Of the 8,035 moderate-income owners with extreme cost burdens, 1,393 were elderly, 3,816 were small families, 689 were large families, and 2,137 were non-elderly unrelated individuals.

Table 18. Moderate Income (50-80%MFI) Owners, Fairfax County, Virginia 2000 & 2005-2007 Average

	Owners, 2005-2007 Average					Owners, 2000				
Household Income 50-80% MFI	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	Households (Non-elderly 1+ Unrelated Individuals)	Total Owners	Elderly 1&2 Member Households	Small Related (2-4)	Large Related (5+)	Households (Non-elderly 1+ Unrelated Individuals)	Total Owners
Total	8,504	11,823	4,009	7,009	31,345	3,640	5,395	2,220	2,883	14,138
% with any housing problems	43.7%	70.4%	73.7%	68.2%	63.1%	35.2%	73.8%	74.3%	67.4%	62.6%
% Cost Burden >30%	43.7%	70.3%	67.5%	65.3%	61.6%	35.2%	69.7%	58.8%	67.1%	58.6%
% Cost Burden >50%	16.4%	32.3%	17.2%	30.5%	25.6%	13.2%	20.6%	10.6%	19.9%	17.0%
Number any housing problems	3,714	8,328	2,954	4,783	19,779	1,281	3,982	1,649	1,943	8,855
Number Cost Burden >30%	3,714	8,312	2,704	4,580	19,310	1,281	3,760	1,305	1,934	8,281
Number Cost Burden >50%	1,393	3,816	689	2,137	8,035	480	1,111	235	574	2,401

Table 19. Moderate-Income Owners with Mobility and Self Care Limitations, 2005-2007 Average				
	Owners			
Household Income 50-80% MFI	Extra Elderly 1 & 2 Member Households	Elderly 1 & 2 Member Households	All Other Households	Total Owners
Total	755	520	1,525	2,800
% with any housing problems	29.7%	33.1%	52.6%	42.9%
Number any housing problems	225	172	802	1200

Five-Year Projection, Moderate - Income Owners (Table 20)

The number of moderate-income (50-80 percent MFI) owners is projected to increase to 21,688 by 2010 from 14,138 in 2000. Families are projected to have increased by the largest number (+4,384 or 59 percent) while elderly householders had the higher percentage increase (69 percent). Whereas non-elderly families in this income category are projected to decrease by 1,500 from 2010 to 2020, elderly householders are projected to continue to increase but at a slower rate than over the previous decade.

Table 20. Moderate-Income Owners (50-80%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020				
	2000	2010	2015	2020
Families (non-elderly)	7,387	11,771	11,610	10,217
Elderly (65+ householders)	3,693	6,248	7,721	8,346
Non-elderly, Unrelated Individuals	3,058	3,670	4,266	4,597

Source: Virginia Tech Center for Housing Research

Middle-Income (MidInc) Housing Needs (80-95% AMFI)

80-95%AMFI is between $60,000 and $89,775 based on the median income of a family of 4 in 2007 ($94,700) as determined by HUD for the Washington, DC metropolitan area.

For income categories 80-95 percent MFI and 95-120 percent MFI, data providing a 2005-2007 breakdown by household type (elderly, small families, large families, and non-elderly unrelated individuals) are not available. For each of these income categories a table for all renters and a table for all owners is provided for 2005-2007. Also, mobility and self care limitation data are not available for the higher income categories.

Middle-Income (MidInc) Renters (Table 21)

There were 8,025 middle-income renters (80-95 percent MFI) in 2005-2007. One-quarter have housing problems primarily due to cost burdens exceeding 30 percent of income. Almost no middle-income renters have severe cost burdens.

Table 21. Middle-Income (80-95%) Renters, Fairfax County, Virginia 2005-2007 Average

Household Income 80-95%MFI	Renters
Total	8,025
% with any housing problems	24.2%
% Cost Burden >30%	23.5%
% Cost Burden >50%	0.4%
Number any housing problems	1,945
Number Cost Burden >30%	1,885
Number Cost Burden >50%	30

Five-Year Projection, Middle-Income Renters (Table 22)

Based on the estimate for 2010 there are about 13,000 middle-income renters (Table 20). The relatively small number reflects that this is the income level when homeownership starts to become more prevalent. This is also a category with a great deal of uncertainty due to the potential erosion of ownership (as discussed in the next section).

The 2010 estimate and the projection to 2015 of non-elderly family owners in this income category point to a sharp decline of about 6,000 or more owners. This could result in increased demand for rental housing in this income category, or possibly other adjustments in household composition such as doubling-up.

Table 22. Middle-Income Renters (80-95%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020

	2000	2010	2015	2020
Families (non-elderly)	10,130	7,355	5,436	5,117
Elderly (65+ householders)	802	1,083	1,309	1,316
Non-elderly, Unrelated Individuals	5,281	5,404	6,323	6,313

Source: Virginia Tech Center for Housing Research

Middle-Income (MidInc) Owners (Table 23)

There were 18,085 middle-income owners (80-95 percent MFI) in 2005-2007. Over half have housing problems and nearly that many have moderate cost burdens (53 percent). Severe cost burdens are not significant for the middle-income owners with less than 10 percent spending over 50 percent of income for housing.

Table 23. Middle-Income (80-95%) Owners, Fairfax County, Virginia 2005-2007 Average		
Household Income 80-95%MFI	**Owners**	
Total	18,085	
% with any housing problems	54.2%	
% Cost Burden >30%	53.2%	
% Cost Burden >50%	9.8%	
Number any housing problems	9,795	
Number Cost Burden >30%	9,630	
Number Cost Burden >50%	1,770	

Five-Year Projection, Middle-Income Owners (Table 24)

There are an estimated 25,950 middle-income renters in 2010 (Table 24). Middle-income family owners are projected to decrease from over 16,000 households in 2000 to only 15,000 in 2010 and then dropping to about 10,000 in 2015 and 2020. The only growth in this income category for owners is for elderly households, which will increase to about 8,900 by 2020.

Table 24. Middle-Income Owners (80-95%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020				
	2000	2010	2015	2020
Families (non-elderly)	16,168	14,986	10,365	10,176
Elderly (65+ householders)	3,942	6,596	8,183	8,873
Non-elderly, Unrelated Individuals	5,220	4,368	4,858	5,476

Source: Virginia Tech Center for Housing Research

Above Middle-Income (95-120% MFI) Housing Needs

95-120%AMFI is between $89,775 and $113,400 based on the median income of a family of 4 in 2007 ($94,500) as determined by HUD for the Washington, DC metropolitan area.

Above Middle-Income (95-120% MFI) Renters (Table 25)

There were 11,540 above middle-income (95-120 percent MFI) renters in 2005-2007. Only 16 percent of renters in this income category have housing problems and 14 percent have moderate cost burdens. Severe cost burden at this income level is negligible.

Table 25. Above Middle-Income (95-120%) Renters, Fairfax County, Virginia 2005-2007 Average		
Household Income 95-120%MFI	**Renters**	
Total	11,540	
% with any housing problems	16.4%	
% Cost Burden >30%	13.9%	
% Cost Burden >50%	1.6%	
Number any housing problems	1,890	
Number Cost Burden >30%	1,600	
Number Cost Burden >50%	190	

Five-Year Projection, Above Middle- Income Renters (Table 26)

The above middle-income category (95-120 percent MFI) for renters is expected to remain around 20,000 households after a recessionary dip reflected in 2010 (Table 26). The rental market in this income range is split somewhat evenly between non-elderly families and unrelated individuals (including roommates and unmarried couples without children). There are very few elderly renters at this income, as most are homeowners.

Demand in this segment is projected to rebound over the next ten years, recovering to year 2000 levels by 2020, although the increase is entirely among non-elderly unrelated individuals.

Table 26. Above Middle-Income Renters (95-120%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020				
	2000	2010	2015	2020
Families (non-elderly)	10,720	9,022	8,932	9,321
Elderly (65+ householders)	784	960	881	986
Non-elderly, Unrelated Individuals	8,729	7,931	9,148	9,856

Source: Virginia Tech Center for Housing Research

Above Middle-Income (95-120% MFI) Owners (Table 27)

There were 31,650 above middle-income (95-120 percent MFI) owners in 2005-2007. Over one-third have housing problems with nearly an equal amount spending in excess of 30 percent of income on housing. About 5 percent of Above Middle-Income owners have severe cost burdens.

Table 27. Above Middle-Income (95-120%) Owners, Fairfax County, Virginia 2005-2007 Average	
Household Income 95-120%MFI	**Owners**
Total	31,650
% with any housing problems	35.9%
% Cost Burden >30%	34.6%
% Cost Burden >50%	5.4%
Number any housing problems	11,365
Number Cost Burden >30%	10,965
Number Cost Burden >50%	1,720

Five-Year Projection, Above Middle-Income Owners (Table 28)

Owners in this income category are estimated to have declined to 45,193 in 2010, about 4 percent below the year 2000 level (Table 28). However, this category is projected to expand to 56,823 households by 2020 as the economy rebounds and age-specific ownership rates start to return to year 2000 levels. Numerical growth in the category will also be affected by the aging of existing owners.

This category represents strong demand for workforce housing.

Table 28. Above Middle-Income Owners (95-120%MFI), Fairfax County Virginia, 2000, 2010, 2015, 2020

	2000	2010	2015	2020
Families (non-elderly)	32,567	29,001	33,944	36,729
Elderly (65+ householders)	5,427	7,972	8,212	8,791
Non-elderly, Unrelated Individuals	9,156	8,220	9,720	11,304

Source: Virginia Tech Center for Housing Research

Racial or Ethnic Groups with Disproportionately Greater Needs

In determining disproportional needs of racial or ethnic groups in Fairfax County, the criteria used for determining need was the percent having a housing problem. Having a housing problem is the only needs measure provided in 2009 CHAS by both income and racial and ethnic categories. The housing needs of white, black, and Asian households were all proportionate to the needs of all households within any income category identified by Table 1 of the 2009 CHAS data (there was less than a 10 percentage point difference in the percent with a housing problem within each income category as compared to all households). Within a few income categories, other race households and Hispanic households had a disproportionately greater need based on percentages with a housing problem 10 or more percentage points higher than for all households.

For other race, 97% of households with incomes < 30% MFI had a housing problem compared to 78% of all households (19 percentage points higher). Other race accounted for less than 2% of the <30% MFI category. For other race, 93% of households with incomes 30-50% MFI had a housing problem compared to 82% of all households (11 percentage

points higher). Again, other race accounted for only about 2% of the 30-50% income category. There were only 440 households designated as other race in the <30% MFI category and 660 in the 30-50% MFI category. Such small numbers are subject to the margin of error and cannot be reliably determined as disproportionate.

For several income categories, Hispanics were slightly over the 10 percentage point threshold that designates a disproportionate need. For Hispanics, 90% of households with incomes < 30% MFI had a housing problem compared to 78% of all households (12 percentage points higher); 93% of households with incomes 30-50% MFI had a housing problem compared to 82% of all households (11 percentage points higher); and 55% of households with incomes 80-95% MFI had a housing problem compared to 55% of all households (10 percentage points higher). For all other income categories, Hispanics were below the 10 percentage point difference threshold.

While the disproportionate need of Hispanic households as identified through the CHAS data is marginal, the County recognizes the special needs of this population. Call centers are set up to respond to the needs of Spanish speaking residents. Existing programs assist language minorities in improving their language skills, finding needed services, and seeking/maintaining employment.

Homeless Needs Assessment

Public Forum Input

The 2009 Public Forums held by Fairfax County in preparation for the Consolidated Plan provided input from individuals and representatives of community organization regarding the needs of homeless individuals and families. Homeless individuals and service providers continue to identify prevention as the highest priority in addressing homelessness. The November 6th public input forum on Helping Persons with special needs identified prevention through funding to maintain housing, diversion from homelessness, and rapid re-housing as the most pressing needs for preventing homelessness and supporting homeless persons. Participants in the forum also expressed concern over whether the complex system of services available was able to meet the individual needs of homeless persons and families. Oral testimony of a homeless individual with disabilities affirmed this need for individualized support. The need is to improve the capacity of the "safety net" to help persons facing challenges in program eligibility, access to case managers, housing voucher program access, and support for individuals with disabilities.

Participants identified access to services as a key challenge for this population. Complicated federal, state and local guidelines, program transfer issues, shelter wait lists, confusion over where to access services, effective evaluation of clients and community awareness were all cited as needs within the homeless service system. Although some specific service needs such as dental care and immigration services were noted, participants agreed that prevention services and a need for multiple levels of care were critical to service provision. Considering the important needs for persons who are homeless in the next 5-10 years, participants were concerned that increased lifespan in aging and younger generations with disabilities would increase needs for homeless facilities and support. They also were concerned that climate change will increase vulnerability for homelessness and that existing shelters need to address their environmental impact through green design. Community Organizations expressed support for a rapid re-housing and 'housing first' approach citing prevention as the highest priority need.

Continuum of Care

The needs of homeless persons and homeless families with children have been identified in the Fairfax County community through an annual point-in-time count for more than ten years. The count includes collection of information about the homeless population which helps to describe the nature and extent of homelessness in the community. Coupled with waiting list information for programs serving the homeless, information on best practice approaches for addressing identified needs, and information provided by Fairfax County Schools (recent trends show a 20 percent increase in homeless children attending County schools) these data are used to assess the needs for different types of facilities and services.

Historically, about 60 percent of the homeless population is in families, and about 40 percent is persons not accompanied by children under 18 years of age. In the 2009 count, unaccompanied individuals accounted for 38 percent of homeless and persons in families accounted for 62 percent, while children under age 18 accounted for 36 percent of the total homeless population. Over 45 percent of all homeless adults age 18 and above are employed, including 25 percent of single adults and 64 percent of adults in families. These percentages, and those mentioned below, are based on the total 2009 count of 1,730

homeless persons, including 663 unaccompanied individuals, and 1067 persons in 315 families with 438 adults and 629 children. These counts are from all programs serving homeless persons: emergency shelters, transitional housing, and outreach to street homeless and drop-in programs. Persons in permanent supportive housing are not included in the count of literally homeless persons.

There are significant differences between homeless individuals and homeless persons in families in the characteristics and needs of these populations. Among homeless individuals, 73 percent are male and 27 percent are female, and 45 percent are chronically homeless. Another 19 percent of individuals were unsheltered on the day of the point-in-time count. A total of 60 percent of individuals were identified as seriously mentally ill, chronic substance-abusers, or both, 30 percent have chronic health problems, and 11 percent are physically disabled. Only 10 percent were identified as veterans, 21 percent were in a language minority (primary language is not English), and 11 percent were reported as victims of domestic violence. In addition, 21 percent were identified as having been housed in an institution immediately prior to becoming homeless.

The average size of homeless families with children was 3.39 persons (1067 people), and 41 percent of persons were adults (438) while 59 percent were children (629). These households are predominately single female-headed families. Three out of four adults were female, although the children are almost evenly distributed between male (46 percent) and female (54 percent). Overall, 63 percent of persons in families are female and 37 percent are male. Among homeless families, 25 percent (including children) are victims of domestic violence and 22 percent are a language minority (primary language not English). Only 6 percent were identified as having chronic health problems, 3 percent had a physical disability, and 3 percent had a combination of serious mental illness, chronic substance abuse, or dual diagnosis. However, 51 percent do not fit into any sub-population category listed in the survey. Income data by category were collected in the 2009 survey and revealed that at least 9 out of 10 individuals and over three-quarters of families have incomes under 30 percent of the HUD median income for the Washington, D.C., metropolitan area. The results of this data collection are shown in Table 29.

Table 29. Income Levels of Homeless Individuals and Families

Individuals		
Income Level	Number	Percent
No income or unknown	357	54%
Income from $1 to $500 per month	115	17%
Income from $501 to $1,000 per month	134	20%
Income over $1,000 per month	57	9%

Families		
Income Level	Number	Percent
Adults with no income or unknown	98	22%
Adults with income from $1 to $1,000 per month	120	27%
Adults with income from $1,001 to $2,000 per month	113	26%
Adults with income over $2,000 per month	107	24%

Casework information suggests that many of these families become homeless due to economic situations, including low-income, loss of job, high rent, excessive debt, and similar circumstances. An assessment of specific factors contributing to homelessness and preventing the family from securing permanent, stable housing is made for all families participating in emergency shelter and transitional housing programs.

Among homeless single individuals, mental and physical disabilities combined with chronic health problems and addictions are a much larger factor in homelessness. Lack of employment or limited income contribute to remaining homeless, even though one quarter of homeless single individuals living in the shelters or on the streets work at least part of the time. Based on the 2009 survey, 45 percent of homeless individuals met the HUD definition of chronically homeless, and 19 percent were unsheltered.

Racial and ethnic data was collected in the 2009 point-in-time survey and shows that homeless families are predominantly African American (57 percent) while homeless individuals are predominantly white (40 percent) and African American (33 percent). This information is shown in Table 30.

Table 30.Race and Ethnic Data for Homeless Individuals and Persons in Families

Race or Ethnic Category	Individuals	Persons in Families
Black or African-American	33%	57%
White	40%	18%
Hispanic	19%	13%
Other Races, mixed or multiracial	8%	11%

As shown in Table 31, the point-in-time count for 2009 had a small decrease of 4.6 percent in the total number of homeless persons since the 2008 count, however, most of this decrease was in single individuals, which dropped by 81 persons (-9.2 percent). There was a very slight increase in number of families, but slightly fewer people, though the number of adults in families increased for the second year in a row with a decline in the number of children under age 18. While it is not clear that the financial crisis has had a direct impact on the number of homeless persons, 2008 was a second year of record levels of requests for emergency food, rent, utility, and eviction prevention assistance.

Table 31. HOMELESS COUNT BY CATEGORY

Category	2009	2008	2007	% Change 2007 to 2009
Total Number Counted	1,730	1,835	1,813	- 4.6%
Total of Singles	663	744	730	- 9.2%
Total Number of Families	315	311	307	+ 2.6%
Total of Persons in Families	1,067	1,091	1,083	- 1.5%
Total Adults in Families	438	418*	409	+ 7.1%
Total Children in Families	629	673*	674	- 6.7%

*Includes estimate of 4 adults and 3 children whose age status was uncertain.

Rural Homelessness

Fairfax County is an almost exclusively suburban and urban community. The County is 98.6 percent urban according to the 2000 U.S. Census. While some unsheltered individuals and families reside in wooded camp sites, they do not meet the definition of rural homelessness.

Gap Analysis and Subpopulation Data

The information on the homeless population in the preceding paragraphs is from the 2009 point-in-time survey conducted on January 28, 2009. The following table (Table 1A) includes the Gap Analysis and Subpopulation Data from the 2009 point-in-time survey used in the 2009 HUD Homeless Assistance grant applications for the Fairfax-Falls Church Continuum of Care, with revisions to include safe haven housing as a separate category.

Table 1A
Homeless and Special Needs Populations

Continuum of Care: Housing Gap Analysis Chart

		Current Inventory	Under Development	Unmet Need/ Gap
		Individuals		
Example	**Emergency Shelter**	**100**	**40**	**26**
Beds	Emergency Shelter	165 *	0	132 **
	Transitional Housing	143	0	0
	Safe Haven *(separate in HUD Inventory)*	8	0	35
	Permanent Supportive Housing ***	243	13	171
	Total	559	13	338

* 10 beds in DV Shelter with floating capacity for individuals or persons in families.
**Represents point-in-time need. Ten-year Plan is to address this need with permanent housing, not emergency shelter.

		Persons in Families With Children		
Beds	Emergency Shelter	206	0	0
	Transitional Housing	969	0	0
	Permanent Supportive Housing ***	24	9	115
	Total			

*** HUD Inventory includes only beds dedicated to homeless persons; some PSH beds are in non-dedicated programs. Persons in permanent supportive housing are *not* included in the count of homeless persons in the chart below.

Continuum of Care: Homeless Population and Subpopulations Chart

Part 1: Homeless Population	**Sheltered**		**Unsheltered**	**Total**
	Emergency	**Transitional**		
Number of Families with Children (Family Households):	70	245	0	315
1. Number of Persons in Families with Children	227	840	0	1067
2. Number of Single Individuals and Persons in Households without children	415	119	129	663
(Add Lines Numbered 1 & 2 Total Persons)	642	959	129	1730

Part 2: Homeless Subpopulations	**Sheltered**	**Unsheltered**	**Total**
a. Chronically Homeless	193	104	297
b. Seriously Mentally Ill	104		
c. Chronic Substance Abuse	127		
d. Veterans	61		
e. Persons with HIV/AIDS	13		
f. Victims of Domestic Violence	168		
g. Unaccompanied Youth (Under 18)	3		

Sources and Methods for Data

The data for the Gap Analysis Chart and Homeless Population and Subpopulations Chart in Table 1A and the data for the Housing Activity Chart found later in this section were collected during the January 28, 2009, point-in-time survey, with follow-up documentation and clarification from service providers. The following specific information is provided.

1. The survey was conducted on January 28, 2009.
2. The survey was done under the guidance of the Point-in-Time Committee of the Fairfax-Falls Church Continuum of Care, with staff support provided by the Fairfax County Department of Systems Management for Human Services. Data collection was completed by case managers, direct service providers, and outreach workers in known provider agencies throughout the community.
3. The purpose of the survey was to:
    1. Provide an unduplicated count of homeless persons in the community
    2. Identify basic characteristics (including subpopulations) of the homeless population
    3. Provide an inventory of beds available to serve homeless persons.
    4. Identify gaps in capacity to serve homeless persons.
    5. It should be noted that the survey was *not* designed to explain causes of homelessness or collect information on education or details on history of homelessness.
4. The geographic area covered was Fairfax County (including the Towns of Herndon, Vienna, and Clifton), the City of Fairfax, and the City of Falls Church.
5. The time period covered was the 24 hour period from 12:00 a.m. to 12:00 midnight on January 28, 2009. Persons who were served by homeless facilities and programs, or know to be homeless "on the street", were counted.
6. Locations included were all emergency shelters (including overflow), hypothermia prevention programs, transitional housing programs, permanent supportive housing, outreach programs that maintain contact with the street homeless, drop-in centers, and alcohol/drug and mental health programs serving homeless persons.
7. Procedures to ensure against duplicate counting are twofold. Homeless persons are only counted in one facility-based program (such as shelters or supportive housing) on any one day. The count of persons in non-facility based programs or services was coordinated by outreach workers, who maintain liaison with these programs as well as regular contact with persons who are living on the streets, in parks or wooded areas, under bridges, in abandoned buildings, etc. Names are cross-checked prior to submitting the data for tabulation to avoid duplication. The PATH outreach workers are part of the mental health, alcohol and drug services system, and were also able to cross-check case numbers within that system to ensure against duplication. Any corrections needed are made on a case-by-case basis to validate the data prior to completing the final tabulation.

Housing Needs of Homeless Families and Individuals

Fairfax County's 'housing first' approach in its Plan to End Homelessness in 10 Years necessitates a new approach to assessing the need for homeless facilities. The County is shifting from estimating the number of beds needed for homeless individuals and families to estimating the number of housing units needed. The Housing Options Task Force used information provided by the Continuum of Care survey and other data to estimate a need for 2,650 additional units/permanent housing for homeless individuals and families over the

next 10-year period. For FY 2011, there is a need to provide housing to 196 homeless households (68 individuals and 128 families) along with a range of supportive service needs.

Imminent Risk of Homelessness

Fairfax County Coordinated Services Planning (CSP) coordinates access to services for residents needing assistance, including homeless individuals and families in the Fairfax-Falls Church community. The CSP annual report shows a consistent increase in service requests that suggests an increased risk of homelessness in Fairfax-Falls Church. Since 2007, Fairfax County has experienced a 44 percent increase in call volume to Coordinated Services Planning with an average of 459 calls per day in FY 2010. There has been a 79 percent increase in requests since January 2006 while the population of Fairfax County-Falls Church has only grown by 1 percent in the same timeframe. Topics with the largest increase include emergency rent (71 percent), emergency utility (103 percent), food stamps (186 percent) emergency food (137 percent), and subsidized housing (97 percent) assistance.

HUD reports that overcrowding of multi-family or non-family households could be an indicator of at risk for homelessness. The 2009 CHAS data (the average of data from 2005-2007) suggests there are relatively few households that meet these conditions. According to the CHAS data, the County had about 150 households with the potential for greater risk of homelessness based on the criteria of multi-family households or non-family households with severe overcrowded conditions (persons per room greater than 1.5). Severe overcrowding was not prevalent among low-income non-family or 2+ families in Fairfax County with 55 households meeting this criteria. There were only 35 2+ family owners with incomes below 80 percent AMFI and only 20 2+ family renters with incomes below 50 percent AMFI. Over two thirds of the multi-family or non-family households with severe overcrowding had household incomes above 80 percent of AMFI making them less likely to be at greater risk of homelessness than those with lower incomes. There were no non-family households with incomes below 80 percent AMFI that were severely overcrowded. The majority of Fairfax County households with severe overcrowding (88 percent) were 1-family households who in general are less at risk of homelessness than multi-family households or non-family households with severe overcrowding.

When considering 2+ families or non-family households with moderate overcrowding (1 to 1.5 persons per room), an additional 685 households could be considered at greater risk of homelessness in Fairfax County. Again, most of these households had incomes above 80 percent of AMFI. There were 180 2+ family owners and 45 2+ family renters with incomes below 80 percent AMFI with moderate overcrowding. There were no non-family moderately overcrowded households with incomes below 80 percent AMFI. Using the criteria of multi-family or non-family households with moderate to severe overcrowding (greater than 1 person per room[10]) with incomes below 80 percent AMFI, there were 315 households with the potential risk of homelessness in Fairfax County. The risk was greater for owners than for renters (75 percent of households at risk of homelessness were owner households).

Notwithstanding the CHAS data, Fairfax County's experience in recent years demonstrates that the county faces a significant challenge from overcrowding. Since 2007, the county's Code Enforcement Strike Team has investigated more than 700 cases of egregious overcrowding. It should be noted that the HUD definition of "overcrowding" is distinct from the limitations on the occupancy of dwelling units provided for in the Fairfax County Zoning Ordinance.

[10] "Room", for the purpose of the HUD definition of "overcrowding", refers to total rooms in a dwelling, including *but not limited to* bedrooms. The HUD definition of "overcrowding" for the purpose of CHAS data separate and distinct from the limitations on the occupancy of a dwelling unit provided for in Section 2-502 of the Fairfax County Zoning Ordinance.

Special Needs Populations

Fairfax County's Housing Blueprint defines "persons with special needs" as including individuals and families who are homeless, persons with disabilities and low-income seniors. Consistent with the Blueprint, this section of the Consolidated Plan looks at special needs populations in terms of 1) households with extreme cost burdens (and therefore at-risk of homelessness); 2) persons with mental or physical disabilities, including the elderly; and 3) other special needs populations.

Households with Extreme Cost Burdens

Renters Paying 50 percent+ for Housing Costs

There were over 16,915 renters with incomes less than 80 percent MFI paying 50 percent or more of their income for gross rent in 2005-2007 (Table 32). This level of housing cost burden is considered by HUD to constitute a worst case housing need. About 33 percent of renters with incomes below 80 percent MFI have severe cost burdens compared 28 percent in 2000. Nearly all of the renters with worst case housing needs have low incomes (<50 percent MFI), plus the majority are either small families or non-elderly, unrelated individuals. Although the number of large families with extreme cost burdens is smaller than the other demographic categories, there are typically very few rental units available with three or more bedrooms. Consequently, this group is much more likely than others to experience overcrowding (see Needs Analysis). Over half of the large families in the 50-80 percent income category are overcrowded.

Table 32. Below 80%MFI Renters Paying 50%+ for Housing Costs - CHAS 2005-2007 Average

	<30% mfi	30-50%mfi	50-80%mfi	Total
	11,100	4,550	1,265	16,915
Elderly	1,951	528	366	2,845
Small Related	4,510	1,332	383	6,225
Large Related	1,052	211	22	1,285
All other	3,587	2,479	494	6,560

In 2005-2007, extremely-low and low-income renters faced a gross housing gap in excess of 21,000 units with much of this gap due to occupancy of affordable units by renters with incomes higher than 50 percent MFI. The Center for Housing Research estimates that the housing gap for very low-income renters increased by nearly one-third between 2000 and 2005-2007 as the affordable rental supply dwindled relative to demand.

Owners Paying 50 percent+ for Housing Costs

According to the average of 2005-2007 data from CHAS 2009, there are a larger number of below moderate-income owners (22,305) that have severe cost burdens than there are renters (16,915). About 40 percent of owners with incomes under 80 percent MFI have severe cost burdens compared to 33 percent of renters (Table 33). About two-thirds of moderate-income or below severely cost burdened owners have incomes below 50 percent MFI. Small families constitute the largest single group, followed by non-elderly unrelated individuals and the elderly.

Table 33. Below 80%MFI Owners Paying 50%+ for Housing Costs - CHAS 2005-2007 Average				
	<30% mfi	30-50%mfi	50-80%mfi	Total
	6,795	7,475	8,035	22,305
Elderly	2,022	1,381	1,393	4,796
Small Related	2,291	3,352	3,816	9,459
Large Related	705	952	689	2,346
All other	1,777	1,790	2,137	5,704

There are more below moderate income elderly owners with excessive cost burdens (21 percent) than renters (17 percent) of the same group. Although many below moderate-income elderly homeowners have low levels of debt for housing, utilities and property taxes can be significant contributors to their housing affordability problems. In addition, this group is targeted for predatory lending activities.

There are 39,200 renter and owner households with severe cost burden (housing cost burden of >50 percent of income). These households are vulnerable to bankruptcy, homelessness, and foreclosure.

Persons with Physical or Mental Disabilities Including the Elderly

Two of the largest subpopulations that may require housing or supportive services include persons with physical or mental disabilities and the elderly.

The Fairfax-Falls Church Community Services Board (CSB) estimates that as many as 3,000 low-income persons with physical or mental disabilities are in need of housing assistance and/or residential services in Fairfax County. As of August 2008, 17.6 percent - or 2,009 - of the 11,407 households on the combined Fairfax County Public Housing/Housing Choice Voucher waiting list identified themselves as having one or more members with a disability. As of January 2009, there were a total of 1,165 persons with mental illness, mental retardation and substance abuse disorder waiting on CSB's waiting lists for CSB residential services. As noted earlier, Fairfax County is planning to conduct a study to evaluate the housing needs of extremely low-income persons with disabilities.

Persons with physical or mental disabilities also make up a significant portion of the Fairfax County's homeless population. According to the Fairfax-Falls Church Continuum of Care 2009 Point in Time Summary Report, a total of 1,730 persons were identified as being homeless in January 2009, of which 434 were identified as seriously mentally ill and/or chronic substance abusers. A smaller number of homeless persons also suffer from other disabling conditions, including HIV/AIDS, brain injury, or physical disabilities. The County estimates that in order to successfully complete its initiative to end homelessness, as many as 2,650 additional units are needed over 10 years. Current economic conditions and returning disabled veterans may also increase the number of homeless persons and families in Fairfax County.

Households containing persons with physical or mental disabilities are defined as a household containing 1 or more persons with a mobility or self-care limitation. This includes all households where one or more persons has a physical, mental, or emotional condition lasting 6 months or more making it difficult to dress, bathe, or get around the house or to go outside the home alone to shop or visit the doctor. The definition used in 2005-2007 deviates from the 2000 definition. Also, group quarters were counted in two of the three years covered in 2005-2007 while not included in 2000. Due to these

significant differences, no comparisons are made between the numbers reported here and those reported in 2000. Also, due to limited sample sizes within income categories provided in the 2009 CHAS data, the 2005-2007 numbers should be viewed with caution.

Below moderate-income housing needs among elderly renters and owners are detailed in Tables 32 and 33 above. Over 7,600 below moderate-income elderly renters and owners had severe cost burdens in 2005-2007.

As shown in Table 34, there were 9,730 below moderate-income (80 percent MFI or below) households with a person with a physical disability or self-care limitation in 2005-2007, including 4,185 renters and 5,545 owners. These 9,730 households are included in the Non-Homeless Special Needs table. Over two-thirds of the below moderate-income elderly households with disabilities have low-incomes (<50 percent MFI). Not quite half of the below moderate-income households with a person with a physical disability or self-care limitation include an elderly person (4,466).

Elderly households are broken out into two categories, elderly and extra-elderly or sometimes referred to in the CHAS as the frail elderly. The elderly category is defined as 1 or 2 member households where either person is 62 to 74 years of age. The extra-elderly category is defined as 1 or 2 member households where either person is 75 years or older. One-fourth of below moderate-income renters with a disability are extra-elderly compared to 15 percent that are elderly. Over 30 percent of below moderate-income owners with a disability are extra-elderly while 19 percent are elderly. Of the extremely low-income households 26 percent of the renters and 42 percent of the owners are extra-elderly.

Table 34: Below Moderate-Income Households with Persons with Physical or Mental Disabilities, 2005-2007 Average

	Renters				Owners			
Income	Elderly	Extra-Elderly	Non-Elderly	Total Renters	Elderly	Extra-Elderly	Non-Elderly	Total Owners
<30%MFI	459	597	1,284	2,340	209	481	445	1,135
30-50%MFI	79	261	565	905	344	500	766	1,610
50-80%MFI	100	161	679	940	520	755	1,525	2,800
Total	638	1,019	2,528	4,185	1,073	1,736	2,736	5,545

Table 35 adds the criteria of having any housing problem to the universe of below moderate-income households with a disability. It is assumed that elderly households and extra-elderly households with at least one person who is disabled, have at least one housing problem, and have income below 80 percent MFI are in need of supportive services. Over two-thirds of renters and nearly 44 percent of owners with below moderate-income with a disability and with a housing problem are elderly or extra-elderly. An estimated 979 elderly and 891 extra-elderly with below moderate-incomes, with a disability, with a housing problem households are included in the Non-Homeless Special Needs table.

Table 35. Below Moderate-Income Households with Persons with Physical or Mental Disabilities and Any Housing Problem, 2005-2007 Average								
Income	Renters				Owners			
	Elderly	Extra-Elderly	Non-Elderly	Total Renters	Elderly	Extra-Elderly	Non-Elderly	Total Owners
<30%MFI	267	367	964	1,600	188	418	414	1,020
30-50% MFI	63	200	432	695	262	248	731	1,240
50-80% MFI	27	121	452	600	172	225	802	1,200
Total	357	688	1,848	2,895	622	891	1,947	3,460

Projections of service needs for elderly persons with physical or mental disabilities are provided in Tables 36 and 37.

Table 36. Service Needs for Elderly (ages 62-74)

Service Need	2010 Provisions	Projection 2015
Residential Services	91 Clients 77 Person Wait List	168 Clients
Case Management Services	340 Clients 9 Person Wait List	349 Clients

Table 37. Service Needs for Frail Elderly (ages 75 and older)

Service Need	2010 Provisions	Projection 2015
Residential Services	10 Clients 3 Person Wait List	13 Clients
Case Management Services	80 Clients 1 Person Wait List	81 Clients

Other Groups with a Disability

Mental Health and Alcohol/Substance-Abuse

As of January 2009, there were a total of 1,165 persons with mental illness, mental retardation and substance abuse disorder waiting on CSB's waiting lists for CSB residential services. The waiting list determines the unmet need for these populations. The unmet need for persons with mental disabilities was 918 and the unmet need for those with an alcohol or substance abuse disability was 254.

HIV/AIDS

Housing Opportunities for Persons with AIDS (HOPWA), which provides funding for housing and housing-related services for people living with HIV/AIDS and their families, is administered in the region by a local nonprofit, Northern Virginia Family Service. Eligible metropolitan areas receive direct allocation of HOPWA funding when the region has at least 500,000 people and 2,000 cumulative cases for AIDS are diagnosed. Under this formula, the Washington Metropolitan Area receives HOPWA funding that is then passed through the District of Columbia and the Northern Virginia Regional Commission to reach the Northern Virginia Family Service, a private nonprofit, which in turn,

administers funds for Northern Virginia residents living with HIV/AIDS and their families. As of December 31, 2009, there were 53 placements under HOPWA in the region of which 32 were Fairfax County residents. As of December 31, 2009, there were 240 persons on the waiting list.

Fifty percent of all people with AIDS may experience homelessness or face the serious risk of becoming homeless during their illness. Permanent housing can make a difference in having access to medication, to stability, and perhaps re-entry into the labor market. Stable housing for people with HIV/AIDS may reduce hospitalization and allow residents to address other priority issues such as mental health needs and substance addictions.

A study conducted by AIDS Housing of Washington (AHW) revealed the housing difficulties faced by persons with HIV/AIDS. Over multiple years, some 10,000 surveys related to housing needs of persons with HIV/AIDS were collected from respondents in fifteen counties or MSAs (including the Washington, DC MSA) and eight states (including Virginia). In this sample, 41 percent of respondents had been homeless at least once and nine percent were homeless at the time they were interviewed. Since discovering that they were HIV positive, over a third had slept in a shelter and almost a third had slept outside or in a car. Housing was often unstable for these respondents, as almost 40 percent had moved three or more times in the previous three years. Twenty-two percent were on the waiting list for housing assistance at the times they completed the survey (Virginia HIV/AIDS Epidemiologic Profile, Data Through 2000, prepared by Virginia Department of Health, Division of HIV/STD).

In 2008-2009, a combined 210 new HIV/AIDS cases were reported in Fairfax County by the Virginia Department of Health as shown in Table 38.

Table 38. HIV/AIDS Prevalence Rates 2008, 2009

	2008, 3rd Qtr.		2009, 3rd Qtr.		% change	
	Fairfax County	Virginia	Fairfax County	Virginia	Fairfax County	Virginia
HIV & AIDS						
Number of Living *	2,905	29,568	3,115	31,241	6%	7%
Living Rate **	195	253	207	270	6%	7%

*Total number of cases diagnosed, minus those who have died.

**Cases per 100,000 population.

Source: Virginia Department of Health, Division of Disease Prevention, Quarterly Surveillance Reports, 2008, 2009

Client Households Served, Fairfax County

As of December 31, 2009, there were 32 placements in Fairfax County under HOPWA. HOPWA recipients consisted of 16 female clients and 16 male clients of which 26 were Black, four were White, one was White Hispanic, and one was Asian. There were eight single mothers with 20 children. The average age of all clients was 44. Clients requesting Short Term Assistance were comprised of the following characteristics: 12 Black, seven White and one White Hispanic. There were 14 single clients and six clients with families including dependent children. There were 10 female clients and 10 male clients. The average age of the client was 42. Nine households receiving a security deposit and first month's rent were comprised of the following characteristics: eight Black and one White. There were five single clients and four with families including

dependent children. The average age of the client was 38. Six of the clients were female and three were male.

Victims of Domestic Violence

As reflected in the discussion on homeless populations, 11 percent of single homeless individuals are identified as domestic violence victims. Meanwhile, 25 percent of homeless individuals (including children) in families are identified as domestic violence victims. In 2008, there were 7,108 domestic disputes, 2,991 domestic violence incidents and 1,863 ensuing arrests. The Fairfax County Magistrate's Office issued 2,187 emergency protective orders (EPOs) and 2,168 warrants for domestic violence assault and battery misdemeanors. Furthermore, the Juvenile and Domestic Relations Court issued 780 protective orders in 2008. Recent trends show increases in male victims and increases in female offenders.

Fairfax County has several institutions and networks which help mitigate the issues associated with domestic violence:
Fairfax County Victim Assistance Network (VAN)

In FY 2008, VAN:

- Responded to 1,485 crisis hotline calls
- Provided individual counseling to 750 victims

Artemis House (formerly the Fairfax County Women's Shelter)

- Currently has 34 beds, all designated for victims of domestic violence
- 70 percent of victims speak English as a second language (or not at all) at home

In FY 2008, the Artemis House:

- Responded to 1,064 crisis hotline calls
    - 634 seeking shelter
    - 430 information requests
- Provided emergency shelter to 237 adults and children

Fairfax County Anger and Domestic Abuse Prevention & Treatment Program (ADAPT) (Batterer Intervention Program)

In FY 2008, ADAPT:

- Completed 253 intakes
- 122 clients completed the 18-week program

Non-Homeless Special Needs Table

Consistent with the Housing Blueprint, the "non-homeless special needs table" (Table 1B) was completed under the assumption that portions of the particular groups shown in Table 39 would require housing or supportive services (categories are NOT mutually exclusive).

Table 39. Housing Blueprint and Consolidated Plan Special Needs Categories

Housing Blueprint Definition of Special Need	***Consolidated Plan***
Low-income Seniors	• Elderly (aged 62-74 with <80 percent MFI with a mobility or self-care limitation and at least one housing problem)* • Frail Elderly (aged 75+ with <80 percent MFI with a mobility or self-care limitation and at least one housing problem)*
Persons with Disabilities	• Persons with severe mental illness and alcohol and substance abuse addition • Persons with intellectual disabilities • Persons with physical disabilities (<80 percent MFI income with a mobility or self-care limitation, includes elderly/frail elderly and also includes some persons with mental disabilities) * • Persons with HIV/AIDS and their families
Individuals or families who are homeless	• Victims of Domestic Violence (those who sought shelter)

*Based on average of 2005-2007 from CHAS 2009

Table 1B
Special Needs Non-Homeless Populations

SPECIAL NEEDS SUBPOPULATIONS		Priority Need Level High, Medium, Low, No Such Need	Unmet Need (Point In Time #'s)	Dollars to Address Unmet Need	Multi-Year Goals	Average Annual Goals
Elderly		High	979	$11,748,000 ($12k/person/yr)	331	66
Frail Elderly		High	891	$25,839,000 ($29k/person/yr)	55	11
Severe Mental Illness and Persons w/ Alcohol/Other Drug Addictions		High	912	$14,592,000 ($16K/person/yr)	230	46
Developmentally Disabled (Persons with Intellectual Disabilities only)	Group Homes/ Supervised Apartments	High Medium	209 47	$16,720,000 ($80K/person/yr) $1,645,000 ($35K/person/yr)	55 15	11 3
	Drop In (non-residential)	High Medium	232 132	$4,640,000 ($20K/person/yr) $2,640,000 ($20K/person/yr)	116 66	11 6
Physically Disabled		High	9,730	TBD	51	10
Persons w/HIV/AIDS		High	84	$896,112	15	3
Victims of Domestic Violence		Medium	634	TBD	TBD	TBD
Other						
TOTAL (Groups not mutually exclusive)						

Lead-Based Paint Needs

In 1978, due to known serious health implications, lead-based paint was prohibited by federal regulations. However, lead-based paint remaining in older structures continues to be a health threat for children primarily under the age of 6. The 2009 Comprehensive Housing Affordability Strategy (CHAS) tables, based on the American Community Survey microdata for 2005-2007, show there were 28,650 occupied housing units in Fairfax County built prior to 1980 with at least one child aged 6 or under.[11]

Fortunately, in Fairfax County there are relatively few reports of serious consequences related to lead-based paint contamination. According to statistics provided by the Virginia Department of Health, in 2007 there were 22 reported cases of elevated blood lead levels (blood lead level of 10 micrograms per deciliter or greater) of children under the age of 6 due to any cause – lead-based paint or other –in Fairfax County.[12] This roughly translates to 26.9 reported cases of elevated blood lead levels per 100,000 population (based on 81,675 children under the age of 6 as reported by the Virginia Department of Health). The Virginia Department of Health does not provide data by income levels.

All of the above figures deal with reported cases. While the Virginia Department of Health (VDH) recommends children at age 9-months and at age 2 years be screened for lead exposure, it is not required. Since all children are not tested, the question remains as to how many children have elevated lead levels in their blood that have not been tested and how many housing units contain lead-based paint hazards.

The Fairfax County Health Department provides free blood lead level testing for those children under 6 without health insurance. If testing from private health providers reveals an elevated blood lead level of 10 micrograms per deciliter or greater for children under 6, the results are reported to the Fairfax County Health Department. For all cases where elevated blood lead levels are determined, the Health Department initiates an evaluation and follow-up procedure. All tests and results are reported to the Virginia Department of Health.

The 28,650 occupied homes in Fairfax County built prior to 1980 with at least one child aged 6 or under can be used as an estimate of the number of housing units that have the potential for lead-based paint hazards. The percentage of Fairfax County households in 2008 who met the HUD income criteria for a family of 3 for extremely low-income[13] (<30 percent AMFI), low-income (<50 percent AMFI), and moderate-income families (<80 percent AMFI) were 8 percent, 17 percent, and 23 percent respectively. If the percentages of households with incomes below the HUD income criteria are applied, the result is an estimated 2,292 units occupied by extremely low-income, 4,871 units occupied by low-income, and 6,590 units occupied by moderate-income households. However, Fairfax County does not have figures on the number of units that removed lead-based paint or conducted other means of lead-based paint mitigation, so it would be reasonable to conclude that only a portion of the pre-1980 built units have the potential for lead-based paint hazards.

[11] 2009 CHAS, U.S. Department of Housing and Urban Development.
[12] Lead-Safe Virginia Program, Childhood Lead Poisoning Prevention Program, 2008 Surveillance Summary Report, Virginia Department of Health, http://www.vahealth.org/leadsafe/documents/DOCS_2009/PDF/2008SURVEILLANCEREPORT.pdf
[13] As defined by the Consolidated Plan regulations (24 CRF 91).

Another way to estimate the number of units that have the potential for lead-based paint hazards is to adjust the 28,650 units by the actual incidence rate of elevated blood lead levels. In 2007, a total of 8,964 children under 6 in Fairfax County were tested either in the private sector or through the Fairfax County Health Department, resulting in an elevated blood lead level incidence rate of .25 percent. If that incidence rate is applied to number of occupied homes in Fairfax County built prior to 1980 with at least one child aged 6 or under (28,650 on average between 2005 and 2007), one could extrapolate that roughly 71 housing units may have the potential for lead-based paint hazards. Applying the percentages of extremely low-income, low-income, and moderate income households in the County to the 71 housing units with the potential for lead-based paint hazards or other contaminants resulted in an estimated 5 Fairfax County units occupied by extremely low-income, 13 units occupied by low-income, and 16 units occupied by moderate-income households or a total of 34 units for all income groups. It should be noted, however, that there are many causes for elevated blood lead levels other than lead-based paint.[14]

[14] Virginia Tech Center for Housing Research.

HOUSING MARKET ANALYSIS (91.210)

Based on information available to the jurisdiction, describe the significant characteristics of the housing market in terms of supply, demand, condition, and the cost of housing; the housing stock available to serve persons with physical or mental disabilities; and to serve persons with HIV/AIDS and their families.

General Characteristics

The housing market of an area is dependent upon the characteristics of its population and the associated dynamics. A review of the current profile of Fairfax County's population is provided to set the background for the characteristics of the County's housing market.

Population

Fairfax County was 98.6 percent urban according to the 2000 U.S. Census. The population of Fairfax County in 2008 was 1,045,694 and there were 381,686 households, with an average size of approximately 2.70 persons per household. This represents a population increase of 75,495 (7.8 percent) since the 2000 Census. While this growth rate is smaller in comparison to some other jurisdictions in the region, Fairfax County accounts for 20 percent of the total population for the Washington Metropolitan Primary Statistical Area. The County's population also reflects a significant level of mobility. In 2008, 7.6 percent of the residents age 1 and over had moved to Fairfax County within the past year. (ACS 2008) Current projections for 2015 anticipate the total number of households will be 409,599 (a 7.3 percent increase from 2008) and the total number of housing units will be an estimated 421,375 (a 7.6 percent increase from 2008). (Department of Systems Management for Human Services)

While population has increased in Fairfax County since 2000, the increase is due to natural increases rather than in-migration. According to the Weldon Cooper Center for Public Service at the University of Virginia, Fairfax County's population increased between 2000 and 2008 by 87,739 persons due to natural increases but at the same time lost 40,170 persons to out-migration (a net gain of 47,569). The U.S. Census file, "Estimated Components of Resident Population Change", confirms this trend and provides an annual breakdown of net migration figures. Also, tax records from the Internal Revenue Service confirm that in every year since 2000 more people have been moving out of Fairfax County than moving in.

The Internal Revenue Service provides a special data file with the net migration of tax filers and exemptions claimed (the number of exemptions is an approximation of the number of people moving between areas). This IRS file identifies every city or county throughout the US with 10 or more tax filers moving into (or out of) Fairfax County. An analysis of the annual IRS Migration data from 2000-2001 to 2007-2008 provided migration trends for Fairfax County and showed that Fairfax lost more people to out-migration than it gained in in-migration over the 8 year period[15] (-79,979). Note: this is

[15] The IRS data file for 2000_2001 covers movement between 2000 and 2001 and reports the tax filing location for 2001.

a different from the Weldon Cooper estimate as the calculations are not based on the same criteria.[16]

However, the net loss of persons in Fairfax County due to migration peaked in 2005-2006 and has been steadily declining. In 2005-2006, the net loss was 18,201 and by 2007-2008 the net loss was 2,368, the smallest loss since 2000 (net loss of 1,489). Over the 8 year period, the largest net loss was to Loudoun County (-61,969) followed by Prince William County (-55,120). The net loss migration is particularly evident when examining the movement of persons between Fairfax County and Prince William County. Net loss was at an 8 year high of about 14,000 in 2002-2003 and was at about 9,400 in 2006-2007. But in 2007-2008 it was less than 880 (there was a spike in 2007-2008 in the number of people moving into Fairfax County from Prince William County). For the most part, however, the trend of decreasing net loss was largely due to smaller numbers of people moving to Prince William County from Fairfax County.

The two areas from which Fairfax County had the largest net gains over the 8 year period were Arlington County (24,624) and the City of Alexandria (22,480). The net gain was at a peak in 2003-2004 and showed a slow decrease in each year since.
The trend over time showed some slowing of in-migration to Fairfax County from these areas and a fairly stable pattern of out-migration from Fairfax County to both Arlington and Alexandria.

Diversity

Minorities comprise over one-third of the County's residents – 33.3 percent in 2008. Although this is down from a high of 38.2 percent in 2003, it is still nearly three times the minority percentage of the population in 1980 and over 50 percent higher than the percentage in 1990. The percentage of foreign born in the County's total population has grown from 9.1 percent in 1980 to 28.1 percent in 2008. According to the Report of Student Membership by Ethnic Group and Gender, the number of students in the Fairfax County Public Schools who were members of a minority group increased from 26.6 percent in 1989-1990 to 54.7 percent in 2008-09. Meanwhile, diversity in the senior population is also increasing. In 1980, 6.4 percent of persons age 65 and older were racial minorities but by 2000 that proportion had nearly tripled to 18.3 percent. (FY 2010 Consolidated One Year Action Plan)

Significant waves of immigration have occurred during the past thirty years in Fairfax County. Many refugees from Southeast Asia arrived during the 1970's, with continued immigration into the 1990's. Immigration of refugees from Central America began during the 1980's and has continued since 2000. During the 1990's, the number of refugees who emigrated from the Middle East to settle in the County increased. There has also been significant immigration from other countries, particularly Korea, the Indian subcontinent, and some other Asian countries. During the 1990's, the increase in the County's foreign born residents made up 73 percent of the net increase in total population. However, Fairfax County's foreign born population comes from a large

[16] The IRS data use the tax return method for estimating migration. (Source: SOI Tax Stats – County-to-County Migration Data Files; http://www.irs.gov/taxstats/article/0,,id=212695,00.html; http://mcdc2.missouri.edu/cgi-bin/broker?_PROGRAM=websas.irsmig_menu.sas&_SERVICE=appdev&st=51) The Weldon Cooper Center uses a ratio-correlation method that not only takes into account tax returns, but includes housing stock, school enrollment, birth records, and driver's license data. The Weldon Cooper estimates also take into account institutional population which includes students living in college dormitories. Source: Population Estimates for Virginia, Localities, Planning Districts, & Metropolitan Areas: Final 2007 & Provisional 2008, Weldon Cooper Center for Public Service, Demographics & Workforce Group, www.coopercenter.org/demographics.

number of different countries with no one country or group forming a predominant majority.

Unlike the overall net loss in County population due to out-migration, population of persons from foreign countries showed a net gain between 2000-2001 and 2007-2008 according to the IRS Migration files. The net migration was 11,194 over the 8 year period with 36,993 persons from foreign countries moving into Fairfax County and 25,799 moving out. However, there was little change in either in-migration or out-migration from year to year with roughly 4,500 persons from foreign countries moving in each year and roughly 3,000 moving out.

Cultural diversity in the County is reflected in the fact that more than one-third (34.9 percent) of Fairfax County residents age 5 and older speak a language other than English at home. (ACS 2008) A quarter of the residents who speak a language other than English at home lived in a linguistically isolated household in 2005; that is; no one age 14 or older spoke English "very well." Over 100 languages are spoken by students within the public school system, and over 20,000 students participate in the English for Speakers of Other Languages (ESOL) Program. (FY 2010 Consolidated One Year Action Plan)

Age

Since 1980, the percentage of residents under the age of 45 has slowly decreased. Meanwhile, the percentage of persons 65 and older increased from 4.5 percent in 1980 to 9.9 percent of the total population in 2008. The elderly are the fastest growing age segment in Fairfax County and are projected to comprise 11.1 percent of the County's population by the year 2015. It should be noted, however, that while the percentage of children and youth under age 20 decreased slightly, the actual number is projected to increase by over 4,900 from 2010 to 2015.[17]

Since many persons are retired at age 65 and older, the median household income for householders at that age group is lower than that for all householders. In 2008, householders age 65 and older had a median household income of $81,956 compared to $107,448 for all households. Increases in median household income for Fairfax County householders age 65 and older have not kept pace with the increases for all households. In 1980, the median household income for householders age 65 and older was 85 percent of that for all households, while in 2002, it was less than 70 percent.[18] In 2008, the median income for householders age 65 and older was 76 percent of that for all households, demonstrating a recent adjustment to the income disparity. (ACS 2008)

Education

Overall, Fairfax County residents are highly educated. In 2008, the percent of Fairfax County adults 25 years of age or older who had graduated from high school was 91.5 percent, and 58.6 percent of residents had attained at least a bachelor's degree or higher education. Only 8.6 percent of Fairfax County residents age 25 or older has less than a completed high school education or equivalency.[19] (ACS 2008)

---

[17] Population data: U.S. Census 1970-2000 Census of U.S. Population; median age: ACS 2008; Fairfax County Department of Systems Management for Human Services, 2008.
[18] Anticipating the Future, A Discussion of Trends in Fairfax County with a Focus on Seniors, Fairfax County Department of Systems Management for Human Services.
[19] ACS 2008

Business/Employment

Fairfax County along with the Northern Virginia region has been the economic engine of the Commonwealth of Virginia for the past few decades and is even more so during this time of economic crisis. Fairfax County's economic vitality is directly related to the way in which future job growth and residential growth are accommodated by the County.

The George Mason University Center for Regional Analysis evaluated the future need for affordable and workforce housing in Fairfax County based on projected job growth. In 2007, Fairfax County had approximately 674,000 jobs, rivaling the District of Columbia as a job center. At that time, the Center for Regional Analysis projected that Fairfax County would add nearly 200,000 jobs by 2025 – an increase of 29 percent and there would be a need for 63,660 net new housing units by 2020. The GMU study concluded that Fairfax County's economic vitality is "inextricably tied" to its response to the need for affordable workforce housing, and that the county's continued growth is "highly dependent" on the availability of housing that is "affordable to workers from the full spectrum of the economy".

In 2009, there were 121,350 businesses located within Fairfax County including 355 foreign-owned businesses and 268 trade associations. Fairfax County continues to attract technology-based businesses, with over 6,184 such companies in 2009.

There were 572,708 jobs in Fairfax County in 2009, a 2.7 percent decline since 2007 according to the Virginia Employment Commission. The unemployment rate in December 2009 was 4.6 percent compared to 2.1 percent in 2007. While the downturn in the economy has had its impact on Fairfax County, the unemployment rate is low compared to the state (6.7 percent) and the nation (9.7 percent).

Of nearly 590,000 residents in the labor force in 2008, more than 54 percent worked in Fairfax County. Approximately 22 percent commuted to work locations outside of Virginia. The Federal Government was the employer for 13.3 percent of Fairfax County residents. More than 59 percent of residents in the labor force are employed in the private for-profit sector and 8.4 percent are employed in the private non-profit sector. In 2008, the percentage of women age 16 or older participating in the labor force was 66.7 percent.[20] The percentage of women in the labor force has declined slightly from a high point of over 73 percent in the late 1990's due, in part, to growth in the number of elderly women who are no longer working as well as to the growing number of immigrant women from cultures where women are less likely to work outside the home.

Urbanization

The urbanization of the County reflects the change from a suburban bedroom community of the 1960's and 1970's to becoming an employment center during the 1980's. As of the 2000 Census, Fairfax County was nearly 99 percent urban (the most recent available figure).

In 2003, office and retail uses accounted for nearly 66 percent of the total nonresidential square footage, but only 9,990 acres, or 4.4 percent of the total land area, is zoned for commercial uses. The relative concentration of this development contributes to traffic congestion, and the lack of sufficient public transportation to many of the business, commercial, and employment centers in the County compounds the problem. Transportation, or the lack of adequate public transit, is one of the issues most

[20] http://www.fairfaxcounty.gov/demogrph/graphs/emplmf.pdf

frequently mentioned in community needs assessments, whether from citizens generally, or from groups focused more on the lower-income and disabled populations. As growth increases in the outer parts of the County (south and west), these problems become more pronounced, since public transportation to these areas is extremely limited or nonexistent.

From 1980 to 1990, the supply of vacant zoned land in the county decreased from 75,550 acres to 45,042 acres, and by 2008 the vacant acreage had decreased to 24,944 acres. In Fairfax County, roughly 89 percent of the land is zoned for residential, commercial and industrial purposes and 11 percent is in vacant or natural uses.

Of the usable land, 84 percent of the County is zoned for residential purposes, with 16 percent zoned for commercial or industrial use. Much of the remaining vacant land is in the western part and along the southwestern boundary of the County, large portions of which is in environmentally sensitive areas and protected watersheds.

Increased density is also reflected in residential development. Prior to 1980, single-family homes were the predominant housing type, with a significant number of multi-family units built during the 1970's. Since 1980, production of townhouses and multi-family developments has increased more rapidly, accounting for nearly half of all housing units. By 2015, single-family homes are forecast to account for only 47 percent of housing units, while townhouse and multi-family units will account for 24 percent and 29 percent, respectively. By 2030, multi-family homes are projected to account for over 34 percent of all housing units.

Income and Housing Cost Burden

While Fairfax County has one of the highest median household incomes in the nation (estimated $107,448 in 2008), there were an estimated 47,832 persons living below the poverty level in 2008. Although the percent of the population below poverty in Fairfax County (4.8 percent) is among the lowest of Virginia jurisdictions, the number of persons below poverty in Fairfax County is larger than the total population of 99 of the 134 local jurisdictions in Virginia.

Persons with extremely-low incomes in a typically high-income area have a high incidence of housing problems. According to the 2009 CHAS tables provided by HUD, 14,516 (or 87 percent) Fairfax County renter households with incomes below 30 percent of the area median income have what is described as "one or more housing problems" defined as having a significant cost burden (meaning over 30 percent of their income is used for housing costs), incomplete plumbing facilities, incomplete kitchen facilities, or overcrowding (over 1 person per room). (HCD and CHAS 2009).

Based on data from the 2006-2008 ACS, high concentrations of renters with low-incomes (below 50 percent of AMFI based on a family of 3, $46,200) are found in Groveton (50.7 percent of renters are low-income), Baileys/Seven Corners area (47.4 percent), and the town of Herndon (45.9 percent). The northern portion of the County has very few low-income renters.

Housing Stock Available to Needs Populations

The Fairfax County Redevelopment and Housing Authority (FCRHA) owns and operates a total of 2,995 units of multifamily affordable housing, including 1,063 federally-funded Public Housing units and 1,932 units managed under the local Fairfax County Rental Program (FCRP). The FCRP also includes 414 units of affordable housing for independent seniors. FCRP units are owned and/or operated by the FCRHA but are funded through sources other than federal Public Housing funds. The FCRHA also has an allocation of 3,204 federal Housing Choice Vouchers, the waiting list for which temporarily closed in 2007. In 2007, there were 4,992 subsidized rental units within the private system rental complex system in Fairfax County. On average, the rental subsidy for these units was $166 per month. Supportive housing units available to special needs populations include 450 beds for those in need of mental health services and 716 beds for serving individuals or families who are homeless. There are 148 existing housing units targeted for special needs populations or homeless individuals and families.

Affordable Housing Preservation

Preservation of affordable rental housing has long been a concern of the Board of Supervisors and the FCRHA. The stock of privately-owned subsidized units and non-subsidized rental housing with modest rents in the County has been declining as owners repositioned their properties in the market, prepaid their federally subsidized mortgages, opted not to renew their Section 8 project-based contracts or terminated their participation at the end of the control period for their FCRHA bond-financed properties. The centerpiece of the Board's Affordable Housing Preservation Initiative was the set-aside of one cent on the real estate tax rate for affordable housing. From FY 2006 through FY 2009, this policy produced $85.3 million in local funds for the preservation and production of affordable housing in Fairfax County. Due to fiscal constraints associated with the ongoing recession, this local contribution was reduced by approximately one-half in FY 2010 to approximately $10.2 million, nearly all of which is being used for debt service associated with earlier preservation projects.

The Board's Preservation Initiative had preserved a total to 2,376 units of affordable housing as of January 2010. These units were at risk of condominium conversion and repositioning in the market. A total of 83 percent of the 2,376 preserved units are affordable to low-income households (60 percent AMFI and below), including 27 percent which are affordable to households earning 50 percent of AMI and below.

Affordable Dwelling Unit (ADU) Program

Fairfax County's Affordable Dwelling Unit (ADU) Program was adopted by the Fairfax County Board of Supervisors, by Ordinance in 1989 to assist in the provision of affordable housing for persons of low and moderate income. Since inception of the program, nearly 2,000 ADU units have been successfully incorporated into the housing stock in Fairfax County. The program is designed to promote a full range of housing choices that include for-sale and rental units that are affordable to households whose income is seventy 70 percent or less of the Area Median Income (AMI) for the Washington Standard Metropolitan Statistical Area (MSA) adjusted for household size, as determined periodically by the U.S. Department of Housing and Urban Development (HUD). (See the Fairfax County Zoning Ordinance at http://www.fairfaxcounty.gov/dpz/zoningordinance/).

Developers and builders of housing incorporating ADU units should not experience an economic net loss as a result of providing affordable units as the ADU program provides bonus density in connection with the provision of affordable units. Where the affordable dwelling units differ in design and unit type from the other units in a development the affordable units should be integrated within the development to the extent feasible and

where the unit type is the same the affordable units should be dispersed throughout the development.

The ADU Program applies to most developments which are subject to rezoning, special exception, site plan or subdivision plat approval where:

- The site is to be developed at a density greater than one (1) dwelling unit per acre,
- The site yields fifty (50) units or more,
- The site is located within an approved sewer service area.

The Fairfax County ADU program effectively avoids "NIMBY" problems by requiring affordable housing to be included in nearly every new residential development in the County and by specifying that the design and placement of affordable units must be properly integrated into the development.

Residential projects for which these criteria are not applicable may still provide affordable dwelling units at the developer's option in order to take advantage of zoning district regulations applicable to affordable dwelling units. In such developments where ADUs are provided voluntarily, all ADUs must be of the same structure type as the rest of the units in such developments.

The Fairfax County Redevelopment and Housing Authority (FCRHA) has the right to purchase up to one-third of the ADUs delivered in for-sale developments to lease or re-sell to households earning 70 percent of the Area Median Family Income (AMFI) or below. The FCRHA also has the option to lease up to one-third of the ADUs delivered in rental developments, to re-rent to income qualified households. The leasing program provides greater dispersion of affordable renter-occupied housing.

Workforce Housing Policy

To address the impact of job growth in the County, Fairfax County is dedicated to providing housing for its workers. On September 24, 2007, the Board of Supervisors adopted a Workforce Housing Policy, which established a proffer-based incentive system designed to encourage private development of housing affordable to working households earning up to 120 percent of the Area Median Family Income (AMFI) in the county's mixed-use employment centers. This policy was adopted as an amendment to the Policy Plan of the Fairfax County Comprehensive Plan. Under the terms of the policy, additional development density or intensity may be made available to developers in return for proffered workforce housing units. The FCRHA is responsible for implementing and managing the County's Workforce Housing Policy. *As of September 2009, a total of 1,070 workforce housing units had been voluntarily committed by private developers via the land use process. It is anticipated that the first workforce housing units committed under this policy will be delivered by developers in FY 2011.*

Much of Fairfax County's remaining vacant land is in environmentally protected areas in the southwestern part County. In 2008, Fairfax County had approximately 21,000 acres of developable, vacant land zoned for residential development. The dwindling supply of land has driven up costs and contributed to the County's strategy to invest in high-density mixed-use urban centers.

The vacancy rate for commercial real estate is about 14 percent.

Housing Demand and Supply Analysis

Based on recent population projections prepared by Fairfax County, the Center for Housing Research projects total households (Table 40) to have increased by nearly 31,000 (8.8 percent) between 2000 and 2010 and then to increase by another 49,000 between 2010 and 2020 (12.9 percent). The 2010 household level reflects a large reduction in the household formation rate among young adults due to the recession and the housing crisis. Whereas in 2000, 9 percent of persons aged 15-24 were householders, we estimate this to have dropped to 5 percent in 2010. More importantly, we estimate that the proportion of householders among 25-34 year old persons dropped from 42 percent in 2000 to 35 percent in 2010. The decrease in the young adult household formation rate results in a much slower rate of increase in households between 2000 and 2010 than between 1990 and 2000 (8.9 percent vs. 20.0 percent). Recessions, particularly deep recessions, affect demographics as well as housing demand.

The Center's projection of households and housing demand for 2015 and 2020 assume that household formation rates among young adults will rebound from the 2010 recessionary trough but not fully to year 2000 levels: 8 percent for 15-24 year olds and 38 percent for 25-34 year olds. Rates for older age groups are assumed to stay at the estimated 2010 levels. Even though the population aged 15+ in Fairfax is projected to increase by a slightly slower rate from 2010 to 2020 (9.1 percent vs. 10.3 percent in 2000-2010), we project households to increase by 12.9 percent due to the rebound in household formation among young adults and the general aging of the population into age categories with higher household formation levels.

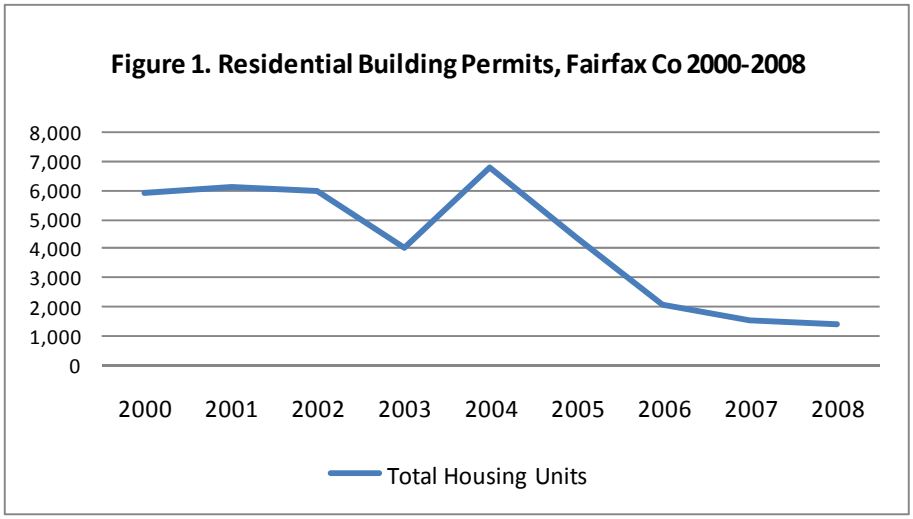
The household projection represents continued strong growth in housing demand in Fairfax. The pace of growth from 2010 to 2015 should be adequate to absorb excess inventory from the recession and result in a rebound in housing construction, but the timing and amount will remain uncertain until macroeconomic conditions recover from recession levels.

Table 40. Projected Households, Fairfax County, 2000, 2010, 2015, 2020

					% Change		
	2000	2010	2015	2020	2000-10	2010-15	2015-20
Families	250,281	272,268	289,792	303,964	8.8%	6.4%	4.9%
Married-Couple	208,393	223,125	238,994	250,923	7.1%	7.1%	5.0%
Other Family	41,888	49,144	50,798	53,041	17.3%	3.4%	4.4%
Non-Family	100,433	109,344	119,549	126,752	8.9%	9.3%	6.0%
Total Households	350,714	381,613	409,341	430,716	8.8%	7.3%	5.2%

Somewhat more than half of the projected growth (57 percent) between 2010 and 2020 is among married-couple families. Families headed by householders without a spouse present are only 13 percent of total households in Fairfax and are projected to increase at a slower rate than other household types. Non-family households constitute 29 percent of the Fairfax housing market and are projected to increase this share slightly from 2010 to 2020. Non-family households include persons living alone and two or more unrelated individuals living together. These include a variety of household types, including unmarried couples without children. The projected increase in this category is partly due to the assumed rebound in household formation rates among young adults and to population aging, as more households shift from the family category to a surviving spouse living alone.

The level of annual housing production in the County from 2000 and 2008 shows the sharp drop in 2006 with the onset of the housing crisis (Figure 1). For 2007 and 2008, housing permits fell below 1,500 units per year and preliminary data for 2009 indicate production fell by half again. The annual average for the decade was approximately 3,900 units. Between 2000 and 2010, households are estimated to have increased at an annual rate of nearly 3,100. Housing production appears to have kept up with projected demand from population growth from 2000 to 2010, but with little only 15 percent available for upgrading housing consumption. Despite the enormous disruption of the recession, the gross housing inventory will likely result in a very tight market once a recovery is underway.



The projection of households by income is presented in Table 41. Incomes are in nominal dollars unadjusted for inflation, which results in "bracket creep"—inflation pushes some households into higher income categories. The rebound in household formation among young adults anticipated with economic recovery will contribute to stabilization in the number of households with incomes below $20,000 from 2010 to 2020. The projection reflects assumptions of more modest growth in incomes in the current decade than from 2000 to 2010.

Table 41. Projected Households by Income, Fairfax County, 2000, 2010, 2015, 2020

					% Change		
Income (nominal)	2000	2010	2015	2020	2000-10	2010-15	2015-20
<$20,000	21,609	19,119	19,260	19,605	-11.5%	0.7%	1.8%
$20,000-$34,999	29,322	22,371	21,355	19,930	-23.7%	-4.5%	-6.7%
$35,000-$49,999	39,049	31,945	30,463	32,167	-18.2%	-4.6%	5.6%
$50,000-$74,999	70,399	56,730	54,100	51,959	-19.4%	-4.6%	-4.0%
$75,000-$99,999	59,228	48,587	44,904	43,747	-18.0%	-7.6%	-2.6%
$100,000-$149,999	73,345	84,757	90,458	94,907	15.6%	6.7%	4.9%
$150,000-$199,999	31,492	51,401	61,127	67,597	63.2%	18.9%	10.6%
$200,000+	26,271	66,711	87,713	100,937	153.9%	31.5%	15.1%

According to the Center for Housing Research, demand for owner-occupied housing is projected to increase more quickly than for renter-occupied housing across each period (Table 42). Demand for owner occupied housing is influenced by the age of householders, household types, incomes, and interest rates (among other factors). Between 2010 and 2020 owner-occupied housing is projected to increase by 43,300 units while renter demand is projected to increase by only 5,900 units. Based on this

projection, the ownership rate by 2020 would increase to 73.8 percent based on both a rebound in the housing market and the aging of the population (ownership increases with the age of the householder). However, the projected 2020 ownership rate would still be lower than the estimated peak rate of 75.2 percent in 2006 according the American Community Survey.

Table 42. Projected Owner and Renter Demand, Fairfax County, 2000, 2010, 2015, 2020

					% Change		
	2000	2010	2015	2020	2000-05	2005-10	2010-20
Owner-Occupied	248,820	274,566	298,145	317,857	10.3%	8.6%	6.6%
Renter-Occupied	101,894	107,054	111,235	112,992	5.1%	3.9%	1.6%
Total Households	350,714	381,620	409,380	430,849	8.8%	7.3%	5.2%

Tables 43 and 44 provide the Center's preliminary projections of owner and renter demand by income categories published by the U. S. Department of Housing and Urban Development (HUD). The categories are based on the Area Median Family Income (AMFI) in the MSA, which is estimated for the projection years based on the ratio of the 2000 and 2008 ratios of the MSA median to the Fairfax County median. The 2010 estimates reflect the impact of the housing boom and the recession, as well as population aging.

Table 43. Owners by AMFI Category, 2000, 2010, 2015, 2020

					% Change		
AMFI Category	2000	2010	2015	2020	2000-10	2010-15	2015-20
<30	6,989	7,863	9,494	10,653	12.5%	20.7%	12.2%
30-50	10,268	13,826	16,707	18,092	34.7%	20.8%	8.3%
50-80	14,138	21,688	23,597	23,160	53.4%	8.8%	-1.9%
80-95	25,330	25,950	23,406	24,526	2.4%	-9.8%	4.8%
95-120	47,150	45,193	51,876	56,823	-4.2%	14.8%	9.5%
120+	144,953	160,046	173,064	184,604	10.4%	8.1%	6.7%

The extremely low income category for both owners and renters is projected to increase, with extremely low income renters increasing by 31 percent from 2000-2010, while extremely low-income owners increase by 21 percent from 2010-2015 and another 12 percent from 2015-2020. The increase in extremely low-income owners primarily reflects increases among the elderly.

Table 44. Renters by AMFI Category, 2000, 2010, 2015, 2020

					% Change		
AMFI Category	2000	2010	2015	2020	2000-10	2010-15	2015-20
<30	13,013	17,022	18,890	19,495	30.8%	11.0%	3.2%
30-50	12,170	14,619	15,607	16,210	20.1%	6.8%	3.9%
50-80	24,848	15,572	16,364	15,999	-37.3%	5.1%	-2.2%
80-95	16,213	13,842	13,068	12,746	-14.6%	-5.6%	-2.5%
95-120	20,233	17,913	18,961	20,163	-11.5%	5.9%	6.3%
120+	27,016	28,086	28,344	28,380	4.0%	0.9%	0.1%

Table 45 provides the ratio of rental housing costs to renters' incomes for 2000 and 2008 (from ACS). This table identifies a significant shift upward in rental cost burdens, with decreases in renters with cost burdens below 35 percent of income and a very large increase in renters with cost burdens of 35 percent of income and higher. If this trend continues, nearly half of the renters in Fairfax County will soon be paying in excess of 30 percent of their incomes for rent, with most of these paying in excess of 35 percent. As indicated in the CHAS data from 2005-2007, many of the latter devote more than half of their incomes to housing costs.

Table 45. Gross Rent as Percent of Income, 2000 and 2008

	2000	2008	2000	2008
<25	53855	41136	53.0%	40.6%
25-29.9	12213	12025	12.0%	11.9%
30-34.9	7801	9328	7.7%	9.2%
35+	23199	34204	22.8%	33.7%
not computed	4579	4729	4.5%	4.7%
Total	101647	101422	100.0%	100.0%

Source: 2000 Census, 2008 ACS

The increased cost burden problems of renters between 2000 and 2008 shown in Table 45 could be due to the ownership market siphoning off renters with higher incomes and lower rental cost burdens or due to a reduced supply of housing. The impacts of the recession on rental demand and rental cost burdens are uncertain.

Affordable Housing Gap Analysis

*The total affordable housing **gap** for low- and moderate-income **renters** (earning 80 percent of AMFI and below) is approximately **28,405 units**. For low- and moderate income **owners**, the gap is approximately **49,120 units**.*

Affordable Rental Housing Gap Analysis: In order to examine the possible impact of changes in the affordable housing supply, Table 46 estimates the number of rental units with gross rents below the maximum level affordable incomes at 30 percent AMFI, 50 percent AMFI, and 80 percent AMFI. The housing supply affordable at 30 percent AMFI increased slightly but the supply of housing affordable at 50 percent AMFI decreased by 2,770 units between 2000 and 2005-2007. The increase in the supply of units affordable at 30 percent AMFI was less than the increase in renters below this income level, consequently the net deficit in units increased. Households at the 50 percent AMFI increased by 3,342 compounding the impact of the reduction in housing units affordable at that income level. As a result, the deficit of units affordable at 30 percent AMFI increased to nearly 7,500 units and the deficit of units affordable at 50 percent AMFI increased to over 8,000 units. (Both units and households shown in Table 47 are cumulative.) The excess supply of units affordable at 80 percent AMFI increased slightly (627 units) between 2000 and 2005-2007.

The excess supply of units at the 80 percent AMFI level should not be interpreted as an overabundance of available affordable units. Households with higher incomes often occupy many of the units that are nominally affordable to lower income households but are not available for occupancy by these households. The market sorts the occupancy of

the housing supply based on a variety of factors that result in a "mismatch" between affordable units and the households most in need of those units.

This mismatch is documented in Table 47 based on CHAS data for 2005-2007. There were nearly 9,200 rental units affordable to the 16,675 renters below 30 percent MFI, leaving a deficit of nearly 7,500 units. But households with incomes above 30 percent MFI occupied about 3,700 of the 9,200 units affordable to renters below 30 percent MFI, resulting in an actual deficit of 11,155 units. In addition, the CHAS data classify units based on their affordability at the upper threshold of the income category. The units affordable at this threshold income (e.g. 30 percent MFI) are not necessarily or even likely to be affordable to households further below this income threshold. Since the CHAS data provide the number of rent burdened households in each income category, we can estimate the number of units classified as affordable to renters within this income range that nonetheless resulted in a rent burden for their occupants. With this additional increment added in the below 30 percent MFI category, the affordable unit deficit increases to 12,445 units.

The nominal supply-demand balance in the 30-50 percent MFI category suggests 660 surplus affordable units, but renters with lower or higher incomes occupied 7,600 of the units affordable to this category, resulting in an actual deficit of more than 7,200 units. If the 30-50 percent MFI renters who were classified as occupying affordable units but were spending more than 30 percent of their income for housing are taken into account, the deficit grows to nearly 9,500 units.

For renters in the 50-80 percent MFI category, the large gross surplus of affordable units (37,590) was entirely absorbed by occupants with higher incomes (as well as by some with incomes below 50 percent MFI). Despite the small surplus of 2,380 affordable units in the 50-80 percent MFI category, there were nearly 9,000 renters in this category that were identified as cost burdened. If these cost-burdened renters on nominally affordable housing are considered, the surplus of units for the 50-80 percent MFI category becomes a deficit of nearly 6,500 units. Considering the mismatch problem and the misclassification of units as affordable based on actual cost burden for the occupant, we estimate an aggregate annual deficit of 28,000 affordable rental units for 2005-2007 for incomes below 80 percent MFI.

Table 46. Affordable Rental Need and Supply, 1990, 2000, 2005-2007 Average

		Units	
	1990	2000	2005-07
@30%AMFI	2807	8945	9195
@50%AMFI	7189	23055	20285
@80%AMFI	32938	67210	79475
		Households	
	1990	2000	2005-07
@30%AMFI	8,592	13,013	16675
@50%AMFI	18,688	25,183	28425
@80%AMFI	26,939	38,387	50025
		Deficit	
	1990	2000	2005-07
@30%AMFI	(5,785)	(4,068)	(7,480)
@50%AMFI	(11,499)	(2,128)	(8,140)
@80%AMFI	5,999	28,823	29,450

Table 47. Affordable Rental Housing Gap, 2005-2007 Average

	Total Rent Households	Total Units	Surplus (Deficit)	Occupied by Out of Income Category Renters	Surplus (Deficit) Adjusted for Out of Income Renters	Deficit Including Within Income Cost Burdened
<30%MFI	16,675	9,195	(7,480)	3,675	(11,155)	(12,445)
30-50%MFI	11,750	11,090	(660)	7,600	(7,265)	(9,495)
50-80%MFI	21,600	59,190	37,590	39,090	2,380	(6,465)

Affordable Homeownership Gap Analysis: The gap in the affordable supply for owner occupancy is presented in Tables 48 and 49. Estimates of the affordable owner supply assume a 95 percent loan to value ratio, a 30-year loan, a maximum ratio of mortgage payment (principal and interest) to income of 30 percent, and the national average interest rate and points for a 30-year fixed mortgage based on the Freddie Mac interest rate survey. Points were amortized over the life of the loan to calculate the effective interest rate. Thus the monthly cost of units used in estimating the number of affordable units in the owner sector can be higher or lower than the monthly cost to the current occupant.

In 2000 the effective interest rate was 8.05 percent, which dropped to 5.87 percent, 6.41 percent and 6.34 percent in 2005, 2006, and 2007 respectively. For the most part, the decline in interest rates was offset by the extreme price escalation leading up to the housing crisis making homeownership less affordable between 2000 and mid-decade (the average 2005-2007 reporting period covered by the 2009 CHAS). Low-income demand for ownership remained robust, however, due to the price-bubble effect on consumer wanting to obtain the American Dream and relaxed or unscrupulous lending practices. For 2005-2007, only 6,535 units were annually affordable to owners with incomes at the <50 percent MFI, about 10,000 units fewer than in 2000. The market impact was even greater for owners in the 50-80 percent MFI category. In 2000, there were 50,260 units affordable to this group and by 2005-2007 there were only 16,420 available (counting those also affordable to owners with lower incomes).

Deficits in the supply of affordable owner units increased between 2000 and 2005-07 The deficit (unadjusted for mismatch) was over 17,000 units for the <50 percent MFI owners and over 21,000 for the 50-80 percent MFI owners (Table 50[21]). As with the affordable rental supply, a significant proportion of the affordable housing supply for low-income homeowners is occupied by owners with higher incomes (who benefit from even greater affordability) and by some with lower incomes (who are probably cost burdened). In 2005-07, there was an annual average of over 13,000 units in the <50 percent MFI category occupied by owners outside that income category resulting in an adjusted deficit of over 22,000 units. There were nearly 26,000 units in the 50-80 percent MFI category occupied by owners outside that income category resulting in an adjusted deficit of over 27,000 units.

[21] The number of owner units affordable below 30% MFI were too few to estimate in the CHAS data, thus this category is not shown in Table 50.

Table 48. Affordable Owner Need and Supply, 1990, 2000, 2005-2007 Average

	Units		
	1990	2000	2005-07
@30%AMFI	586	0	0
@50%AMFI	1083	16985	6535
@80%AMFI	3148	50260	16420
	Households		
	1990	2000	2005-07
@30%AMFI	4,197	6,989	9,375
@50%AMFI	9,772	17,257	23,990
@80%AMFI	16,131	34,514	55,335
	Deficit		
	1990	2000	2005-07
@30%AMFI	(3,611)	(6,989)	(9,375)
@50%AMFI	(8,689)	(272)	(17,455)
@80%AMFI	(12,983)	15,746	(38,915)

Table 49. Affordable Owner Housing Gap, 2005-2007 Average

	Total Owner Households	Total Units	Surplus (Deficit)	Occupied by Out of Income Category Owners	Surplus (Deficit) Adjusted for Out of Income Owners	Deficit Including Within Income Cost Burdened
<50%MFI	23,990	6,535	(17,455)	13,142	(22,120)	(22,120)
50-80%MFI	31,345	9,885	(21,460)	25,704	(27,000)	(27,000)

The supply of affordable housing was simply inadequate to meet demand by renters at the 30 percent MFI level in 2000 and the supply affordable to renters with incomes between 30 percent and 50 percent MFI was only adequate if not occupied by higher income households. Since the market cannot impose occupancy standards that restrict the affordable supply of units to the renters who need them, in a tight market such as Fairfax County the gross deficit of units balloons due to a mismatch of affordable units and renters. Rental units with site based assistance can impose occupancy standards, but the supply of assisted units for renters below 30 percent MFI has been stagnant or dwindling and market pressures have been creating an even greater scarcity of affordable units. The affordable housing gap analysis indicates that the supply of affordable units relative to demand has shrunk between 2000 and 2005-2007. The affordable housing gap is further compounded by the mismatch problem. The Center for Housing Research estimates a gross deficit of rental units affordable to renters below 80

percent MFI of over 28,000 units in 2005-2007, with at least half of this deficit below the 30 percent MFI level.

The inadequate supply of affordable housing can only worsen with a scarce supply of housing across the market. Unless the aggregate supply of housing is expanded, the loss of affordable housing will become even more extreme. The existing supply of units restricted to low and moderate income occupancy will likely dwindle, including the supply of Low Income Housing Tax Credit units as their occupancy requirements expire. Fewer and fewer landlords are likely to accept tenant-based housing subsidies (vouchers and certificates) in this market.

The impact at the very bottom of the market is also likely to be severe, as fewer and fewer units are available for people with incomes below 30 percent MFI. More of these households can be expected to be homeless more often and for extended periods of time.

Concentrations of Low-Income Households

Map 2 (see Appendix C) shows the number of low-income households by Place for Fairfax County. The data are based on ACS 2006-2008 and HUD income limits for 2009 (which are based on 2007 ACS data). Fairfax County has seventeen places for which place data is available from the ACS based on having population of 20,000 or more (no data shows on the map for the remaining places). A household is determined to be low-income if its income is less than 50 percent of the Area Median Family Income for a family of 3.

The areas with the highest concentrations of low-income households were Bailey's Crossroads (32.5 percent), Groveton (28.8 percent) and the town of Herndon (25 percent). The area with the lowest percentage of low-income households was McLean with less than 10 percent low-income households.

Map 3 (see Appendix C) shows the median household income by block group based on 2007 estimates from Geolytics. The median household income varies significantly throughout Fairfax County. Median household incomes are typically the highest in the northern block groups and the lowest in the eastern block groups. Nearly every block group along the northern border has a median income of $125,000 or higher. Median incomes are lowest mainly in the southeastern part of the County. There is, however, a high level of intermixing of income groups by block group.

Concentrations of Minorities

Segregation indices were calculated to examine potential areas of racial/minority concentrations which generally correlate with concentrations of low-income families. A segregation index assesses segregation between two groups with values ranging from 0 to 1.00. The higher the number, the more segregated two groups are. A segregation index of 1.00 identifies complete separation of the group studied from the remainder of the population. Segregation indices were calculated at the block group level (block groups generally contain between 600 and 3,000 people, with an optimum size of 1,500 people). The measure computes the sum total in a larger area (Fairfax County) of the differences in the relative populations in sub areas (block groups). For an index value of zero, the proportion of the group studied has to be the same in each block group (e.g. if the group is 10 percent of the County population, it has be 10 percent of the population in each block group). Segregation indices above .70 identify high levels of segregation. Levels below .30 identify very low levels of segregation. (A completely random pattern would result in an average segregation index between .10 and .20.)

Segregation indices were calculated comparing Blacks, Asians, and Hispanics to the white population. The calculations are based on 2007 block group population estimates from Geolytics. The segregation indices and associated maps were based on persons identified by one race or ethnicity (e.g. "white alone") and exclude persons identified by more than one race or ethnicity. In 2007, the segregation index was .41 for blacks (compared to .45 for Blacks in 2000), .24 for Asians (compared to .29 for Asians in 2000), and .39 for Hispanics (compared to .48 for Hispanics in 2000). These are very low levels of segregation for Asians and moderate levels for the others. Blacks are significantly more segregated from the white population than Asians or Hispanics. Also, since 2000, Hispanics have become less segregated.

Maps 4 through 7 (see Appendix C) present the distribution of whites, Blacks, Asians, and Hispanics at the block group level. Each dot in Map 3 (Number of White Alone Persons by Block Group) indicates 1,000 people. Each dot on the other three maps for Blacks, Asians, and Hispanics, represents 100 people. The population distribution for each of these populations is fairly similar (as indicated by the segregation indices), with somewhat greater clustering of Blacks and Hispanics in the south (particularly in the Lorton area) and east portions of the County. The Asian population is dispersed more along the lines of the white population including in McLean which has few Blacks and Hispanics.

Needs of Public Housing and Assisted Housing

Needs Populations

As described in detail in the section on Housing and Homeless Needs Assessment under the subsection Housing Needs Analysis, the number of households by type and by income group are summarized in Table 50 below. The numbers provided in this table are from the CHAS 2009 data set posted on December 18, 2009 on the U.S. Department of Housing and Urban Development website (http://www.huduser.org/portal/datasets/cp.html). The numbers reflected in the 2009 CHAS are based on the three year average of 2005-2007 of the U.S. Census American Community Survey.

There are 26,050 extremely low-income households in Fairfax County with incomes less than 30 percent of the area median family income. Of those, 16,675 are renters and 9,375 are owners. Over 100,000 households have incomes below <80 percent MFI, the threshold for having moderate-income. Of those, 50,025 are renters and 55,335 are owners.

Table 50. Housing Needs of Fairfax County Families Served by the PHA

Name of Jurisdiction: **Fairfax County, VA**			Source of Data **CHAS 2009 (2005-2007 Average)**						
	Renters					Owners			
Household by Type, Income, & Housing Problem	Elderly 1 & 2 member households	Small Related (2 to 4)	Large Related (5 or more)	All Other Households	Total Renters	Elderly	All Other Owners	Total Owners	Total Households
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)
Extremely Low Income (< 30% MFI)	3,711	6,579	1,282	5,103	16,675	2,964	6,411	9,375	26,050
Low-Income(30-50% MFI)	1,635	5,260	1,155	3,700	11,750	4,235	10,380	14,615	26,365
Moderate Income (50-80% MFI)	1,681	9,511	1,830	8,578	21,600	8,504	22,841	31,345	52,945
Middle-Income or Above (>80% MFI)	3,518	18,240	1,824	18,863	42,445	38,641	178,649	217,290	259,735
Total Households**	10,545	39,590	6,091	36,244	92,470	54,344	218,281	272,625	365,095

** Includes all income groups

Federally-Funded Public Housing and Housing Choice Voucher (HCV) Programs

The FCRHA's federal Public Housing and Housing Choice Voucher (HCV) tenant-based assistance are primary sources of federal housing assistance for Fairfax County's low-income residents living in the FCRHA's three service areas—Service Area I (South County), Service Area II (Central County), and Service Area III (North County). The median income for families in both of these programs is below 30 percent of the area median, which meets HUD's definition of "extremely low-income". The FCRHA provides public housing units to 1,063 families and has 3,204 Housing Choice Vouchers authorized to provide rental assistance payments to families living throughout the three service areas.

Table 51 shows federal Public Housing projects located within Fairfax County. The table shows the number of units within each project and the location (Supervisor District) of each project.

Table 51. Federal Public Housing Projects in Fairfax County

Development Name	Units	Year Acquired	Year Built	Supervisor District
Armistead Park at Barkley	3	1996	1996	Providence
Audubon	46	1970	1969	Lee
Barros Circle	44	1983	1983	Sully
Belle View	40	1981	1948	Mount Vernon
Briarcliff II	20	1985	1985	Providence
Colchester Towne	8	1986	1973	Lee
Coppermill*	4	1998	1998	Hunter Mill
Greenwood Apartments	138	1984	1950	Mason
Greenwood II/Japonica	4	1996	1996	Lee
Heritage Woods	44	1980	1960	Braddock
Kingsley Park	108	1983	1948	Providence
Monroe Chase*	3	1998	1998	Hunter Mill
Newington Station	36	1974	1974	Mount Vernon
Old Mill Gardens	47	1996	1996	Mount Vernon
Ragan Oaks	51	1995	1995	Springfield
Reston Town Center Townhouses	30	1990	1990	Hunter Mill
Robinson Square	46	1980	1982	Braddock
Rosedale Manor	96	1978	1978	Mason
Shadowood	16	1980	1974	Hunter Mill
Sheffield Village	8	1983	1983	Mount Vernon
Springfield Green	5	1985	1964	Lee
Tavenner Lane	12	1996	1996	Lee
The Atrium	37	1976	1974	Lee
The Park	24	1980	1980	Lee
Villages at Falls Church	36	1983	1952	Mason
Virginia Station*	6	1998	1998	Providence
Walney Oaks*	6	1998	1998	Sully
Water's Edge	9	1993	1993	Springfield
West Ford I	24	1985	1985	Mount Vernon
West Ford II	22	1987	1987	Mount Vernon
West Ford III	59	1986	1986	Mount Vernon
West Glade*	26	1972	1972	Hunter Mill
Woodland Glen*	5	1998	1998	Springfield
Total	**1063**	**Units**		

*Includes units financed with Low-income Housing Tax Credits.

FCRHA's federal Public Housing and Housing Choice Voucher programs generally serve households with incomes up to 50 percent of median income; most new lease-ups are at or below 30 percent of AMFI. Tenants pay 30 percent of their income for rent. At least 40 percent of new admissions to Public Housing, and 75 percent of new lease-ups in the Housing Choice Voucher program must have extremely low-incomes. In order to placed on the waiting list for the FCRHA's federal Public Housing and Housing Choice Voucher programs, applicants must meet all program eligibility requirements, including income eligibility, and *all three* of the local preferences/priorities shown below.[22]

Table 52. FCRHA-Adopted Local Preferences/Priorities for Admission to Federal Public Housing and Housing Choice Voucher Programs

Preference	Definition
1) Residency	Applicants qualify for the benefit of Fairfax County residency if they: • Live in Fairfax County; or • Work within Fairfax County or the cities or towns with which it has agreements.
2) Working	Applicants are considered "working families" when the head of household or spouse meets at least one of the following: 1. Employed, attending school or participating in a job training program OR in a combination of these for at least 30 hours per week; 2. 62 years or older; 3. Meets the U.S. Department of Housing and Urban Development (HUD) definition of being disabled; 4. Is the only adult in the household, is working less than 30 hours per week, and is the primary caretaker of a disabled dependent.
3) Rent Burden	A household is considered rent burdened if it pays more than 30% of its gross annual income for rent and utilities or has household income below 50% AMI (Note: The FCRHA approved Resolution 45-09 in September 2009 to permanently adopt the exemption to the rent burden for households below 50% AMI, which previously placed them in a lower priority group. With the exception of current Public Housing and Housing Choice Voucher participants, households below 50% AMI are now in the highest priority group if they also meet the Residency and Working preferences.)

FCRHA follows income mixing guidelines provided by HUD. In order to ensure relative parity among its housing developments, effective with the FY 2006 annual plan, HCD is analyzing the income levels of public housing tenants on a twelve-month timetable to determine the average incomes of families in each development, per HUD guidance. High-income developments are defined as those with family incomes over 115 percent of the average and low-income developments as those with family incomes under 115 percent of the average. Reasonable income mixing is then obtained by either admitting higher income tenants where the development is more than 15 percent under the average or admitting lower income tenants where the development is more than 15 percent over the average.

[22] Effective December 10, 2009 (per FCRHA Administrative Item – 2; December 10, 2009)

FCRHA Waiting List

As of February 2008, there were 10,114 families on the FCRHA's combined waiting list for its federal Public Housing and Housing Choice Voucher programs (see Table 53; does not include local rental program waiting list and those waiting for CSB services). Over three-fourths had incomes less than 30 percent MFI and nearly one-quarter earned between 30 percent and 50 percent MFI. Families with children constituted most of those on the waiting list and nearly one-fifth were families with at least one person with a disability. In March 2004, the FCRHA initiated a new online registration system, giving applicants access 24 hours a day when the respective waiting lists are open. It should be noted that, as of March 2010, the waiting list for the federal Public Housing and Housing Choice Voucher programs was closed to new applicants; the FCRHA closed the waiting list to Housing Choice Voucher applicants in 2007, and Public Housing applicants in 2009. As of March 2010, FCRHA programs were experiencing historically low turnover due to the ongoing recession.

Table 53. Housing Needs of Families on the Waiting List (February 2008)

Waiting list type:
X Combined Section 8 and Public Housing

	# of families	% of total families	Annual Turnover
Waiting list total	10,114		
Extremely low income <=30% AMI	7,678	75.9%	
Low income (>30% but <=50% AMI)	2,161	21.4%	
Moderate income (>50% but <80% AMI)	270	2.7%	
Families with children	5,585	55.2%	
Elderly families	1,567	15.5%	
Families with Disabilities	1,909	18.9%	
Race/ethnicity Black	1,476	14.6%	
Race/ethnicity White	3,002	29.7%	
Race/ethnicity Asian	651	6.4%	
Race/ethnicity Other, not reported*	4,985	49.3%	
Race/ethnicity Hispanic**	2,225	22.0%	
Race/ethnicity Non-Hispanic/not reported**	7,889	78.8%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	2,630	35.0%	67
2 BR	2,685	35.0%	181
3 BR	1,506	20.0%	171
4 BR	725	10.0%	30

Source: FCRHA, 2008
*The FCRHA does not collect race or ethnicity data at the time of initial application. This information is collected when applicants update their information on the waiting list or when they are called for an interview. Therefore, the 4,985 applicants listed under "Race/ethnicity Other/not reported" either reported as not belonging to the white, black or Asian groups, or have not yet reported. The numbers reported under white, black and Asian only reflect those applicants that have provided that information via updates or interviews.
**Information concerning ethnicity (Hispanic/Non-Hispanic) is not collected at the time of initial application; this information is collected only when applicants update their information or when they are called for an interview. The 7,889 applicants listed under "Race/ethnicity Non-Hispanic/not reported" either have reported as non-Hispanic, or have not yet reported their information.

Non-Federally Assisted Housing

In addition to the federal Public Housing and Housing Choice Voucher programs, the Fairfax County Redevelopment and Housing Authority (FCRHA) owns and or operates a variety of non-federally assisted housing, including housing for families, single persons, seniors, and supportive housing for special populations. A total of 1,932 multifamily units and 414 units of senior housing are operated under by the FCRHA through the Fairfax County Rental Program (FCRP).

Some developments have FHA-insured, reduced rate mortgages and some units receive federal Housing Choice Voucher (formerly Section 8 Program) subsidies, making them affordable to lower income households. The FCRP serves a range of households with incomes from the low teens to moderate incomes, depending on program component. Except for Housing Choice Voucher assisted units, all units have a minimum rent requirement and thus a minimum income for eligibility. The FCRP generally serves working households with incomes which are higher than those households in the Public Housing and Housing Choice Voucher programs.

Table 54 shows the number of rental units owned by the FCRHA that are not funded under the federal Public Housing program:

Table 54. Non-Federally Assisted* Rental Units Owned/Operated by the FCRHA/Fairfax County (As of March 2010)

Program	**Units/Beds**
FCRP - Families	**1932**
Total Multifamily Units	**1932**
FCRP - Senior Housing	**414**
Assisted Living Beds	**112**
Supportive Housing Beds	**102**
Other Specialized Housing	**134**
Total Specialized Housing Units/Beds	**762**

*Note: Individual tenant households may receive federal tenant-based rent subsidies, such as a Housing Choice Voucher.

Homeless Facilities and Services

The Fairfax-Falls Church Continuum of Care (CoC) system includes all of the fundamental components of prevention, outreach, intake and assessment, emergency shelter, transitional housing with necessary support and rehabilitative services, permanent supportive housing, and linkage to permanent housing, with a full range of supportive services. However, the organization and service delivery philosophy for this system is now being re-examined from the perspective of ending homelessness through an emphasis on housing first and community-based supports focused on strong outcomes in prevention and housing stability.

The CoC chart in this section summarizes the current inventory of year-round beds for households with and without children. The inventory of facilities and services that assist homeless persons and families suggests that there is a need for an additional 25 beds in safe haven facilities and 132 beds in emergency shelters for households without children. However, the goal under the Plan to Prevent and End Homelessness is to address this shelter need through increasing the availability of permanent housing for this population.

The greatest unmet need is in permanent supportive housing where households with children lack 132 beds and 30 units, and 171 households without children are in need of permanent supportive housing. The Housing Options Task Force used information provided by the Continuum of Care survey and other data to estimate a need for 2,650 additional units/permanent housing for homeless individuals and families over the next 10-year period.

Continuum of Care Housing Activity

The inventory of existing and planned facilities and services that assist homeless persons and families with children are contained in Table 55, Continuum of Care Housing Activity Chart and Table 56, Service Activity Chart. The Housing Activity Chart reflects, in summary form, data presented in Exhibit 1 of the Continuum of Care community application submitted to HUD, as of January 2010.

Table 55: Housing Activity Summary Chart			
Program Type	**Total Beds – Single Individuals**	**Total Beds – Families with Children**	**Total Year-Round Beds**
Emergency Shelter	165	205	370
Transitional Housing	143	969	1,112
Safe Haven	8	n/a	8
Permanent Supportive Housing	243	24	267
TOTAL BEDS	559	1,198	1,757

Continuum of Care Service Activity Chart

A key to accessing components of the Fairfax CoC system is the integration of public sector and social services programs with programs of private service providers. The Fairfax community provides a flexible system of homeless support services that can be accessed directly by families and individuals or through multiple referral sources, including non-profit community-based organizations, ecumenical community groups, hospitals, or public safety and human service providers. The Fairfax County Human Services system offers universal access to public and non-profit services through a Coordinated Services Planning system using a widely publicized assessment, information and referral telephone number, with a separate Spanish line and walk-in availability. In addition, information on human services programs is accessible on the Internet and at County Libraries. The provider network also shares written and verbal notices of openings in programs on a regular basis. Information and assistance is provided in 10 languages. The co-location of multiple programs in regional offices on public transportation routes promotes easy access to services. Participation in homeless programs is tracked in a Homeless Management Information System consistent with the Plan to Prevent and End Homelessness. Table 56 summarizes key service components of the Fairfax-Falls Church Continuum of Care system, however, it may not include all of the extensive service activities available in the community.

Table 56. Service Activity Chart: Fundamental Components in the Fairfax-Falls Church CoC System
Component: Prevention ***Rent/utilities assistance:*** 1. Rent, mortgage and utility assistance, together with short-term case management is available to individuals and families through a partnership between non-profit community- and faith-based organizations, the Department of Systems Management's Coordinated Services Planning unit (CSP), and the Department of Family Services (DFS). Since 2006 requests for emergency rent assistance increased by 71 percent and emergency utility assistance by 103 percent. These are met primarily with funds from community organizations serving residents of one or more regions of the County or from DFS emergency assistance funds. Because of the diverse array of non-profit organizations meeting this need across the County, CSP coordinates access to this resource for County residents, providing front-door screening, assessment, eligibility determination, advocacy and linkage with one or more service providers to meet the need, short-term case management and referral to other needed services.
Legal assistance for eviction prevention: 2. Legal assistance is provided by Legal Services of Northern Virginia and the Fairfax Bar Association. Individuals may self-refer or may be referred by CSP, DFS, or other service providers. ***Crisis case management/eviction prevention and intervention:*** 3. A collaborative effort among three Human Service agencies (DFS, CSP, and the Department of Housing and Community Development - DHCD) prevents evictions through assistance with emergency funds and development of a service plan to stabilize the family prior to court action being filed to initiate the eviction. The Department of Family Services' Homeless Intervention Program, administered by Northern Virginia Family Services (NVFS), provides emergency assistance through case management and loans to prevent eviction or assist in securing affordable housing. Individuals and families are referred to CSP for screening for the program by CSP, DFS, CSB, DHCD or a non-profit service provider.

Table 56. Service Activity Chart: Fundamental Components in the Fairfax-Falls Church CoC System

Community-based prevention programs:

4. Several community groups offer ongoing mentoring and financial assistance to families and individuals at risk of becoming homeless, such as the Western Fairfax Christian Ministries Residential Assistance Program. The DFS Healthy Families program provides ongoing social work assistance to strengthen at-risk families and prevent destabilizing situations such as eviction. Families and individuals may be referred to these programs by the DCHD, DFS, CSP, health care providers, local churches or community groups.

Housing Opportunities Support Teams (HOST):

5. The HOST system operates as a partnership of local faith-based and nonprofit organizations, and Fairfax County human services and housing agencies. The program coordinates and manages prevention, housing placement and supportive services for those who are homeless or at risk of becoming homeless. Through HOST, the partner organizations collaborate to identify and coordinate housing opportunities, provide one-stop accessible triage, assessment and referral and deliver client-centered services to address the particular needs of homeless individuals and families.

Component: Outreach

Outreach in place primarily for persons living on the streets:

1. The Fairfax-Falls Church Community Services Board provides outreach to persons living on the streets, in parks, or in emergency shelters through both Mental Health and Alcohol and Drug Services staff. The PACT team (Program of Assertive Community Treatment) serves consumers who are seriously mentally ill and homeless, living in the streets, in shelters, or in CoC housing. PATH workers regularly visit emergency shelters and other areas where homeless individuals are present. The CSB's Emergency, Mobile Crisis, & Detoxification units are also equipped to provide outreach to homeless individuals and link them with appropriate services and housing in other CSB or community-based outpatient or residential services.
2. The emergency shelters have outreach staff who work to connect homeless individuals with case management, supportive services, and housing.
3. Four nonprofit agencies, FACETS, New Hope Housing, Reston Interfaith, and Volunteers of America, with contractual support from the county, have developed Hypothermia Prevention Programs in the four Human Services Regions of the County through partnerships with dozens of faith communities. These programs provide overnight shelter at multiple locations during winter months (December through March) for persons who would otherwise be sleeping outdoors or in other unsafe locations during cold weather. Volunteers provide a hot meal, and also engage with the homeless guests. In addition to the primary goal of preventing deaths from hypothermia, these programs provide an avenue for homeless persons, many of whom would not come into a regular shelter, to begin to accept assistance and services. The three year-round shelters for single adults also expand capacity during the winter months, and the City of Falls Church provides support to the Falls Church Winter Shelter, which is open from December through March.
4. FACETS provide outreach to single adults living on the streets, in the woods and under bridges in Fairfax. FACETS also operates a mobile food van serving homeless persons.
5. Year-round community drop-in programs are offered by the Lamb Center, the Mt. Vernon Mental Health Center, Bailey's Community Shelter, Embry Rucker Community Shelter, and the First Christian Church of Falls Church. These centers provide various services to homeless individuals, including laundry, shower, phone, mail, a hot lunch and networking with other service providers, especially the PATH Outreach workers, though not all of these services are available at each location. Mental health consumer groups

Table 56. Service Activity Chart: Fundamental Components in the Fairfax-Falls Church CoC System

also operate consumer-run wellness/drop-in centers in south and central county which provide networking for clients and access to support from mental health staff.

6. The Fairfax County Health Department, in partnership with community-based nonprofit agencies, administers a Homeless Health Care Program which conducts mobile outreach to homeless persons living on the streets in order to address primary medical needs, including emergency dental care. The program includes both professional nursing staff and community outreach workers in order to engage homeless clients, address immediate medical needs, and begin to engage them to access other services that may be needed.

The following neighborhood outreach programs are also available to homeless youth and other homeless persons:

7. Alternative House – the Abused and Homeless Children's Shelter – provides neighborhood-based outreach to at-risk youth. Emergency supplies and food are distributed to families of youth they serve. The program offers a drop-in teen center and a mobile outreach van. Alternative House also provides outreach to pregnant and parenting teens between the ages of 16 and 21 to prevent homelessness and support stability.
8. FACETS provide outreach and services to homeless families and singles living in motels or other temporary housing arrangements.
9. Residential Youth Services has a LIFT Outreach Worker providing outreach to runaways and older youth who are living apart from their families or on the streets. They also provide outreach to young mothers and pregnant teens.
10. The Herndon Neighborhood Resource Center provides walk-in access to a variety of mental health, substance abuse, and social services and provides a base for outreach activities in the Herndon community.
11. The Inova Juniper program, the Whitman-Walker Clinic, and the Northern Virginia AIDS Ministry provide outreach and connection to services for persons with HIV/AIDS.

Component: **Supportive Services**

Services in place:
A wide array of supportive services is provided by County agencies, non-profit providers, and community organizations to homeless families and individuals to assist them in achieving greater self-sufficiency and improving their quality of life. Supportive Services include case management, life skills, alcohol and drug abuse treatment, mental health treatment, AIDS-related treatment, education, employment assistance, child care, transportation, and other social services. In many cases organizations provide access to many or all of these services in one place or in partnership with other providers; other organizations provide more specialized services. Services are provided at housing sites, emergency shelters, and other locations throughout the County.

Case Management and comprehensive support services:

1. Some of the larger comprehensive service providers include: Department of Family Services, the Community Services Board, Pathway Homes, PRS Inc., Northern Virginia Family Service (NVFS), Reston Interfaith, Shelter House, New Hope Housing, Christian Relief Services, Homestretch, United Community Ministries, FACETS and Good Shepherd Housing and Family Services. Several organizations target services to refugees, immigrants and victims of human trafficking and domestic abuse, including Kurdish Human Rights Watch and the Multicultural Human Services Division of NVFS. Opportunities, Alternatives and Resources (OAR) provide comprehensive services to ex-

Table 56. Service Activity Chart: Fundamental Components in the Fairfax-Falls Church CoC System

offenders and their families. The Housing Opportunities Support Teams (HOST) provide supportive services through community based case management and a housing locator program to prevent people from becoming homeless and to help families and individuals to maintain housing stability.

Information and Referral and Coordinated Services Planning:

2. The Department of Systems Management's Coordinated Services Planning unit provides telephone access in 10 languages to the full array of public and private supportive services. Last year, CSP answered over 90,000 calls from persons seeking assistance with basic needs, housing, child care, medical care, transportation, and a variety of other human service needs.
3. The Hispanic Committee is a private non-profit providing similar information and referral and linkage to community services for Spanish-speaking individuals.
4. The Vietnamese Resettlement Association, Inc. provides access to health, mental health, and social services to recent immigrants.

Housing counseling and placement services:

Housing counseling services are often a component of case management and are provided by the organizations listed above. Other specific services designed to assist individuals on housing-related issues include:

5. Coordinated Services Planning (CSP) offers access to assistance with rent, utilities and security deposits; helps callers identify community and personal resources to stabilize their housing situation, distributes the Low and Moderate Income Housing Guide; and does a preliminary screening and refers clients to the HOST teams when it appears that the household will meet the eligibility criteria.
6. Housing & Community Services of Northern Virginia provides comprehensive housing counseling services to low-income persons, and the Center for Housing Counseling Training, Inc., provides a structured training curriculum to certify housing counselors.

Health Care services:

7. The Fairfax County Health Department has low-cost health care clinics for maternal and child health, the Women, Infants and Children (WIC) program, vaccinations, communicable disease care, and testing for HIV/AIDS. The Health Department provides RNs and PHNs to the emergency shelters, as well as a family nurse practitioner with prescribing authority to provide primary and preventive care services. The Health Department also supports the Medical Respite Program at one of the county shelters operated by a nonprofit, and administers the Homeless Healthcare Program with community-based nonprofit organizations.
8. The County's Community Health Care Network has three primary medical care sites and access to a network of specialists for low-income persons without health care coverage.
9. The Northern Virginia Dental Clinic provides dental care upon referral from other human service providers and sees residents directly from the emergency shelters.
10. The private non-profit hospital system in the Fairfax-Falls Church community provides millions of dollars of non-reimbursed care to homeless and low-income individuals annually.
11. The Inova Juniper program provides low-cost HIV/AIDS testing, treatment, case management, medication management, and primary medical care to persons living with HIV and AIDS.
12. The Whitman-Walker Clinic of Northern Virginia provides medical and other services to persons with HIV/AIDS.
13. The Health Access Team is a partnership between several public and private organizations to provide streamlined eligibility determination and enrollment in the most appropriate medical coverage home (Medicaid/SCHIP/FAMIS, the Medical Care for

Table 56. Service Activity Chart: Fundamental Components in the Fairfax-Falls Church CoC System

Children Partnership, or the Community Health Care Network).

Mental Health Services and Substance Abuse Treatment:

14. The Fairfax-Falls Church Community Services Board provides a full array of mental health and substance abuse treatment services to children, youth, adults and families. Services include: outreach, intake and assessment, residential services, outpatient and day treatment services, case management, detox and medication management, emergency services, and day support and vocational services. Services are directly-operated or provided through contracts with community-based partners, including Pathway Homes, PRS Inc., and Service Source. Services are provided at the shelters, at regional mental health centers, and at agency sites.
15. Several community providers provide mental health treatment targeted to immigrants and refugees, including the Multicultural Human Services Division of NVFS, Boat People SOS, and Kurdish Human Rights Watch.

Immigration/Legal Services

16. Legal Services of Northern Virginia, the Women's Center, the Fairfax Bar Association and the Fairfax Law Association provide a wide range of legal services to low-income persons, homeless individuals, and immigrants. Floris United Methodist Church, Mapavi, the Tahirih Justice Center, Progresso Hispano, the Multicultural Human Services Division of Northern Virginia Family Service, the Virginia Justice Center for Farm and Immigrant Workers, the Just Neighbors Ministry, Hispanos Unidos, and Ayuda, Inc. all provide legal advice and services for immigration.

Education

Education and instructional services are available on a variety of topics from public and private providers. Life skills and money management are often taught as a component of comprehensive case management or housing counseling programs. Other options include:

17. ESOL classes provided through the public schools, the Literacy Council of Northern Virginia, FACETS (provided specifically for homeless persons), a number of area churches, Progresso Hispano, MAPAVI, Hispanos Unidos, the Korean-American Association, and most of the major non-profit social service providers.
18. GED preparation classes and citizenship classes are available from many of the providers listed above.
19. Head Start, Early Head Start, and Nurturing Parenting programs are available throughout the County for children and their families.

Emergency Assistance for Basic Needs

20. There is a strong network of emergency and basic needs assistance providers in the Fairfax-Falls Church area. In FY 2009, CSP addressed over 20,000 requests for basic needs assistance, including emergency food or shelter, emergency rent and utility assistance, housing counseling, medical, transportation, or other emergency financial assistance. Of these requests, 72 percent (14,460) were met, and 68 percent of those met were without the use of public resources. However, over 80 percent of the unmet needs (4,472) were for emergency rent or utility assistance, which represent the largest categories of assistance requested, and which are often the most costly. Several programs focus on homeless persons, such as a mobile food van or drop-in programs that provide a bag lunch. Several organizations have a clothes closet, walk-in food pantries, or time-limited food delivery services. Those that provide case management and social services typically also address basic needs assistance for the individuals or families they serve. Many area houses of worship provide walk-in assistance and linkage to faith community and public resources. Through CSP, families or individuals needing

Table 56. Service Activity Chart: Fundamental Components in the Fairfax-Falls Church CoC System
more than one month's assistance can now be referred to the HOST teams, which in FY 2010 are using Homelessness Prevention and Rapid Re-housing Program (HPRP) funding from the American Recovery and Reinvestment Act to provide assistance for HPRP eligible households. ***Job Training and Employment Services*** 21. Employment Services targeted to specific populations and to the general public are available throughout the Fairfax-Falls Church area. Public resources include the Virginia Employment Commission, the Department of Rehabilitative Services, and the area's Workforce Investment Board partnership. The Fairfax County Department of Family Services provides welfare-to-work services for TANF and VIEW participants. Private, non-profit, and partnership programs include the Job Corps, Training Futures, Fairfax Opportunities Unlimited, the Microenterprise Business Development Center, LSS Refugee Works, and the Construction Opportunities Training Program. The Laurie Mitchell Employment Center provides drop-in employment services to persons with mental illness who may be homeless. Most of the mental health and mental retardation service providers include an employment/job readiness component in their programs, using funding provided by the CSB. ***Transportation*** 22. Transportation assistance in the Fairfax-Falls Church area is available through the Fairfax Connector, bus tokens and Metro passes, taxicab vouchers, MetroAccess, Seniors on the Go, Logisticare (for Medicade waiver recipients), FASTRAN Para transit services, emergency car repair assistance, and the Ride Serve program. Many providers of housing and comprehensive case management include rides or transportation assistance as part of their service. Many non-profit emergency assistance providers and County social workers offer rides by staff or volunteers for medical appointments and other needs. NVFS offers a Family Loan program for car purchase to enable persons to get to work or school. The Northern Virginia Aids Ministry provides transportation and emergency grants for persons affected by AIDS.

Special Needs Facilities and Services

Public Forum Input

The FY 2011-2015 Fairfax County Public Input Forum voiced the need to retrofit existing housing units and ensure that low-income households have access to the same quality of housing stock and access to amenities as any other households, e.g. inclusion of modern appliances such as dishwashers and laundry machines and internet access. In addition, the forum advocated for the use of Universal Design for the development of any new units, including rehabilitation and even acquisition. Fairfax County, through the concepts addressed in the Housing Blueprint as well as other efforts, will address the affordable housing needs of homeless individuals and families and those with extremely low incomes as well as those with physical or mental disabilities in partnership with the non-profit charitable organizations in the County.

Oral testimony was received regarding services for persons with disabilities related to spinal cord injuries specifically and persons with physical disabilities in general. Testimony received indicated that people with physical disabilities often "fall through the cracks" of county housing and other services. Oral testimony also claimed that persons with physical or mental disabilities need assistance in the form of affordable housing and other services in the county, but that that there is no effective coordination or team approach among county agencies to provide such supports. It was suggested that the Community Services Board and/or the Disability Services Board seek funding for vouchers to assist persons with disabilities in obtaining stable and affordable housing.

Need for Services

The Consolidated Community Funding Pool Funding Priorities and Data for FY 2005-2006 document stated that the impact of the lack of affordable housing as well as the financial instability that results from high housing costs is especially great for certain populations such as victims of domestic violence, individuals with disabilities, the elderly, and resettled refugees. Specifically the report indicates that the numbers of disabled individuals who will need alternative affordable and accessible housing will increase when their aging parents and caregivers will be no longer able to provide care and housing for them. The County was also bracing itself for the possibility of another influx of refugees due to the conflict in the Middle East. County reports show that there are an increased number of resettled refugees who cannot afford the rent of where they live once their re-settlement assistance expires.[23]

Fairfax County's elderly population has increased steadily between 1970 and 2003, with the number of persons 65 years and older increasing seven times from 13,674 persons in 1970 (which was 3.0 percent of the total population) to 100,212 persons in 2008 (9.9 percent of the population). In the coming years, the number of persons 65 years and older is expected to increase both in total number and in proportion of the County's total population. By 2015, this age group will account for 11.1 percent of the County's population and total approximately 121,699 persons. (Fairfax County Dept. of Systems Management for Human Services, 2008).

Identified Gaps with Regard to Housing Needs for Elderly and Persons with physical or mental disabilities are:

[23] Consolidated Community Funding Pool Proposed Funding Priorities and Data for FY 2005-2006.

- Affordability
- Inadequate supply of providers of housing-related services
- Enabling legislation necessary to increase auxiliary grants for residents living in Adult Care Residences
- Strategies to help older residents remain independent, including strategies geared toward income related concerns regarding affordable housing in the County.

The Consolidated Community Funding Pool Funding Priorities and Data for FY 2005-2006 document points out the need for programs that assist language minorities in improving their language skills and helping them find and maintain employment that leads to independence. Statistics showed that adults who lacked good English language skills were more likely to be very low income. Of all persons age 5 or older who were at or below 200 percent of poverty, only half spoke English "very well," and over 20 percent of those persons spoke English "not well" or "not at all". Regarding the County's unemployment rate, it is higher for language minorities. At the end of 2000, the rate was 2.5 percent for men who speak English at home, but 4.6 percent for men who speak only another language at home. For women, the rate was 2.6 percent for those who speak English at home and 10 percent for those who speak only another language at home.[24]

Employment concerns are magnified for persons with disabling conditions as well. According to the 2009 Needs Assessment survey; of the 37 percent of respondents who use employment services (job search, job preparation, on-the-job training, work site adaptations, and job coaching), 43 percent have an unmet need in the service area. The Consolidated Community Funding Pool Funding Priorities and Data for FY 2005-2006 document cites that, in 2000, 11.7 percent of area households reported one or more members with some type of long-lasting disabling condition such as vision or hearing impairment or physical limitations. Individuals with disabilities are half as likely to work full-time and twice as likely not to be in the labor force as compared to all other persons. They are also twice as likely to live at or below poverty or at or below 200 percent of poverty.[25]

The 2008 Beeman Commission estimated that nearly 60 percent of person served by the mental health system in the Fairfax-Falls Church Area have incomes under the federal poverty level of $10,400. In comparison, 4.9 percent of all Fairfax County residents fall below the federal poverty level.

Health care is a continuing need in Fairfax County. According to the Consolidated Community Funding Pool Funding Priorities and Data for FY 2005-2006 document, approximately 8.3 percent or 82,100 persons in Fairfax County do not have health insurance, and the figure is closely related to household income. Of persons at or below 200 percent of poverty, 37 percent lacked health insurance. While Medicaid enrollments grew in Fairfax County during the early 2000's, inconsistency and confusion about the renewal process contributed to more than 50 percent of Medicaid recipients dropping after one year to having no health insurance again. The relationship of language minorities and health care statistics is also striking. Nearly 30 percent of persons living in households where no English is spoken have no health insurance coverage. The percentage for English-only households was only 3.3 percent.[26]

---

[24] Consolidated Community Funding Pool Proposed Funding Priorities and Data for FY 2005-2006, FY 2005-FY 2006 Technical Workbook.
[25] Consolidated Community Funding Pool Proposed Funding Priorities and Data for FY 2005-2006, FY 2005-FY 2006 Technical Workbook,
[26] Consolidated Community Funding Pool Proposed Funding Priorities and Data for FY 2005-2006, FY 2005-FY 2006 Technical Workbook.

The document also indicated that there are racial and ethnic disparities in health-related indicators such as incidence of diabetes, heart disease, and breast and prostate cancer. The disparity points out the need for more outreach, education, and acculturation services to help families understand and access health care systems. It also indicates the need for more recruitment, outreach, and cultural training for providers to better serve these populations.[27]

Facilities/Services for Persons with Physical or Mental Disabilities

The 2009 Needs Assessment survey, conducted by the Disability Services Board (DSB), helped determine which services need funding, resources and improvements in order to maximize the independence and quality of life for persons with physical or mental disabilities in the Fairfax area. Of the 42 percent of respondents who use housing services, 47 percent indicated an unmet need for accessible, affordable housing.

Among the reasons for the unmet need include the following:[28]

- 32 percent indicate there is a lack of supply of accessible, affordable housing
- 30 percent are waitlisted for housing
- 14 percent cannot afford housing
- 15 percent need information about housing programs
- 7 percent are ineligible for housing
- 2 percent believe there is not enough funding available to support housing programs

As shown in Table 57 below, there is a shortage in mental health housing. Bed capacity is highest within the supportive apartment programs; accounting for 320 beds. Meanwhile, the mental health housing waitlist demonstrates that adults in need of mental health service account for over half of the total waitlisted persons.

Table 57. Mental Health Housing, 2009

Bed capacity - Mental Health Housing	450 total beds
24 Hour Transitional Group Homes	16
24 Hour Co-Occurring Disorder Programs	30
Long Term 24 Hour Programs	36
Programs with Daily Contact	48
Supportive Apartment Programs	320
Waitlist - Mental Health Housing	1,165 total wait listed
Alcohol and Drug (adult residential)	248
Alcohol and Drug (youth residential)	6
Mental Health Service (adult)	657
Mental Health Service (youth)	1
Mental Retardation Services	260

[27] Consolidated Community Funding Pool Proposed Funding Priorities and Data for FY 2005-2006, FY 2005-FY 2006 Technical Workbook.
[28] Fairfax Area Disability Services Board, 2009 Needs Assessment Findings; http://www.fairfaxcounty.gov/dsb/2009_needs_assessment_findings.htm

Senior Housing

The FCRHA owns and operates 414 units of active senior housing, and a total of 112 beds of assisted living (which are operated by third-party contractors); see Table 58.

Table 58. Senior Housing Residences, Fairfax County	
Active Senior / Independent Living (414 units) *	**Units**
Lewinsville Residences	22 efficiencies
Lincolnia Residences	26 efficiencies
Little River Glen	120 one-bedroom apartments
Gum Springs Glen	60 one- and two-bedroom apartments
Morris Glen	60 one-bedroom apartments
Herndon Harbor House	120 one-bedroom apartments
Saintsbury Plaza	6 two-bedroom apartments
Assisted Living (112 beds)	**Beds**
Braddock Glen Assisted Living	60 beds
Lincolnia Assisted Living	52 beds

*Note: Does not include the FCRHA's 90-unit Olley Glen independent living project, which is expected in FY 2011.

Non-housing Services for Elderly Residents

Non-housing services offered through the Fairfax Department of Family Services for the elderly (see http://www.fairfaxcounty.gov/dfs/olderadultservices) include:

- *Guardians/Conservators*- volunteers serve as court-appointed guardians/conservators dealing with personal and/or financial decisions for at-risk clients in the DFS Adult and Aging Program.

- *Long-Term Care Ombudsman* - volunteers serve as advocates for the rights of residents in long-term care facilities in the five Northern Virginia jurisdictions.

- *Meals on Wheels* - volunteers transport meals to homebound elderly persons Monday through Friday throughout the area. Limited weekend service is also available. These efforts are coordinated by community-based groups driving over 38 routes. Other needs include schedulers, group coordinators and treasurers.

- *Virginia Insurance Counseling and Assistance (VICAP)* - trained volunteers assist clients who are in need of help in filing medical and insurance claim forms and provide counseling when they need help understanding information about Medicare or long-term care insurance.

- *Nutritional Supplement Program* - volunteers pick up nutritional supplement product once a month at a predetermined site for a designated client and deliver supplement to client's home within 2-3 days of pick-up. Six-month minimum commitment (2-3 hours per month).

- *Pets on Wheels* - involves trained volunteers and their pets visiting residents of area nursing homes to provide companionship and affection. Contact may be weekly or monthly.

- *Friendship, Senior* - volunteers serve in a one-to-one match with homebound isolated senior adults. Contact is weekly and ideally is within the same community. A one-year commitment is required.

- *Telephone Reassurance* - volunteers make a weekly social telephone call to elderly persons who live alone. The service is available on a short-term or long-term basis.

- *Volunteer Home Services for Seniors* - volunteers provide a variety of services which may include grocery shopping, light housekeeping, minor home maintenance, transportation (to medical appointments or for groceries or errands), yard work, and various other needed services. Volunteers may commit to short-term projects or be "on call."

The County works in partnership with community organizations such as the Fairfax Area Commission on Aging to provide services to seniors. Fairfax Area Commission on Aging promotes the needs of senior citizens and serves as liaison between the county and other governmental, public, and private groups concerned with aging issues. In addition, the County takes advantage of the Senior Community Services Employment Program, a federally subsidized employment training program that provides temporary part-time work experience and job training in community services activities for people age 55 and over who have limited income. It is often called the Title V Program because it is funded under Title V of the Older Americans Act of 1968.

Domestic Violence Victim Support Services, Fairfax County

- Fairfax County Department of Family Services (DFS), Domestic Violence Unit
- Fairfax County Police Department, Victim Services Section (VSS)
- Fairfax County Victim Assistance Network (VAN)
- Fairfax County Artemis House (formerly the Fairfax County Women's Shelter)
- Asian/Pacific Islander, Domestic Violence Resource Project (DVRP)
- Boat People SOS (BPSOS), Community Against Domestic Violence (CADV)
- Fort Belvoir Military Community, Family Advocacy Program
- Fort Myer Military Community, Family Advocacy Program
- Foundation for Appropriate and Immediate Help (FAITH) The Safe and Peaceful Families Project
- George Mason University, Sexual Assault Services
- Hispanic Committee of Virginia (HCV)
- Inova Fairfax Hospital, Intimate Partner Violence Program
- Jewish Coalition Against Domestic Violence (JCADA)
- Korean Community Services Center (KCSC), Domestic Violence Program
- Northern Virginia Family Services, Multicultural Human Services Division
- Time To Fly (TTF)
- The Women's Center
- The Women's Group of Mt. Vernon

Alcohol and Drug Services

- ADS Entry and Referral Services for Adults
    - Assessment and Referral Center
    - Fairfax Detoxification Center
    - Adult Detention Center and Community Corrections Programs

- ADS Entry and Referral Services for Youth
    - South County Youth Services
    - Falls Church Youth Services
    - Reston Youth Outpatient Services
    - Chantilly Youth Outpatient Services Compass Day Treatment

- ADS Outpatient and Day Treatment Services for Adults
    - Fairfax Adult Services
    - Falls Church Adult Services
    - Reston Adult Services
    - South County Adult Services
    - Recovery Women's Center

- ADS Outpatient and Day Treatment Services for Youth
    - South County Youth Services
    - Falls Church Youth Services
    - Reston Youth Outpatient Services
    - Chantilly Youth Outpatient Services

- ADS Residential Services for Adults and Youth
    - A New Beginning
    - Cornerstones
    - Crossroads
    - Fairfax Detoxification Center
    - New Generations
    - Steps to Recovery

- ADS Community Prevention Services

- ADS Contract Service Providers
    - Alexandria Community Services Board
    - Vanguard Services Unlimited
    - Second Genesis, Inc.

- ADS Volunteer Services

Barriers to Affordable Housing

There are several barriers to the development, preservation, maintenance, and improvement of affordable housing in Fairfax County. These include economic barriers for residents, language and cultural barriers, federal and local funding barriers, and regulatory barriers. Fairfax County strives to address these barriers so that incentives to develop, maintain, and improve affordable housing opportunities are not adversely affected.

The current financial crisis has heightened the impact of economic barriers. Financial stress is felt more intensely by low-income households where any loss of income can be catastrophic. Rents have remained fairly stable or risen slightly over the period, bringing additional cost burden to those low-income households who have experienced income reduction or even job loss. Even with declining prices on homes for purchase, housing affordability continues to be a problem, especially for low- income households, as is shown in the Housing Needs and the Housing Market Analysis sections. While prices for owner housing are down from levels five years ago, obtaining financing to purchase is difficult, especially for first-time homebuyers and for those with limited funds for a down payment.

The Virginia Tech Center for Housing Research created a housing affordability index for all households and for low-income households. The index is the percent of the median household income required to occupy the median cost dwelling unit. For all Fairfax County households, the index for the 3rd quarter 2009 was 25.8 percent of income or under the cost burden threshold of > 30 percent of income for housing. However, a different picture emerges when considering low-income households. In creating the index, low-income households were defined as households whose incomes fall within the bottom quarter of incomes in the area. For Fairfax County, the median household income in the 3rd quarter of 2009 for the bottom quartile of households was $40,064. The housing affordability index was 69.3 percent for the low-income group meaning that nearly 70 percent of household income was needed for the typical housing unit in Fairfax County. Clearly, for these low-income Fairfax County residents, owning or renting is prohibitive without subsidy.

The level of foreign immigration into Fairfax County presents its own specialized barriers. While immigration from foreign countries has slowed some in recent years, the net migration was 11,194 between 2000 and 2007 with 36,993 persons from foreign countries moving into Fairfax County and 25,799 moving out. Foreign immigration is important to the regional and national economies, but many of these immigrants have limited skills in speaking English and rely on low-wage jobs. Affordable housing opportunities are virtually nonexistent for this population.

Inadequate federal funding for rental assistance or for developing affordable housing has become a more significant barrier as housing costs have increased and low-income households have found it increasingly difficult to find affordable housing.

Local programs also have been impacted by the financial crisis. Preservation of affordable housing stock is critical; however, the Board of Supervisors has had to make difficult choices. In the FY 2010 budget, the county's primary local housing fund, commonly known as the "Penny for Affordable Housing Fund", was cut in half. From FY 2006 to FY 2009 this fund produced $85.3 million for the Board's Affordable Housing Preservation Initiative. This initiative has been credited with preserving 2,376 units that might have been bought by developers for condominiums or become more costly to rent. CDBG and HOME funds also are used for matching, but that funding is limited.

Fairfax County's tax policies can enhance rather than inhibit affordability. Fairfax County offers real estate tax relief to special needs groups. To qualify for a Real Estate tax exemption under the Fairfax County Tax Relief Program, the following requirements must be met:

- The applicant must be at least 65 years of age, or permanently and totally disabled. Applicants who turn 65 or become permanently and totally disabled during the year of application may also qualify for tax relief on a prorated basis.
- If the dwelling is jointly owned by an applicant and spouse, either the applicant or the spouse must be at least 65 years of age or older, or permanently and totally disabled
- The gross income from all sources of the owners of the dwelling and any relatives of the owners who reside in the dwelling may not exceed $72,000. Table 60 shows the income limitations and percentage of relief that apply:

Table 59. Tax Relief Income Requirements

Gross Income	Amount of Tax Relief
$52,000 or less	100%
$52,001 to $62,000	50%
$62,001 to $72,000	25%

For each relative (other than spouse) residing in the dwelling, the first $6,500 of income may be excluded. Disabled applicants may exclude the first $7,500 of income. The total combined net assets of owners of the dwelling and of the spouse of any owner who resides in the dwelling may not be greater than $340,000 (not including the value of the home, its furnishings and up to one acre of land). When the property is jointly owned and the co-owner is deceased, a certified copy of the death certificate must be provided.

In addition, the County offers a partial tax exemption as an incentive to improve and maintain the quality of buildings in the County. The Tax Abatement – Revitalization Program (see Article 24, Chapter 4 of the Fairfax County Code, Partial Tax Exemption Ordinance, as amended by the Fairfax County Board of Supervisors on July 23, 2007) provides for the renovation, rehabilitation or replacement of certain multifamily, commercial or industrial properties. Multifamily structures at least 25 years old and located countywide are eligible for the program. Qualifying property owners receive a partial exemption of the taxes associated with the increase in structural value due to renovation, rehabilitation or replacement (i.e. final structural value compared to base structural value), provided all program requirements are met. Owner will receive an exemption over specified time period.

Land use planning and building regulations can impede affordable housing development through overly restrictive land use requirements, the application of extensive fees, and through unnecessary delays. Fairfax County strives to limit such barriers and is a leader in the nation in streamlining the building permitting and construction process through use of computerized databases.

The primary barrier for affordable housing development other than land cost is the limited amount of developable land in Fairfax County and the need for higher density redevelopment. There are extremely limited opportunities for in-fill housing or for affordable renovation of older housing units, as most of the housing in the County was built in the past 30 years. These barriers to development limit opportunities for low-income and

moderate-income renters and owners. Another housing stock-related barrier may be that seniors may not be able to afford to install accessibility upgrades in their homes, which could allow them to more easily "age in place".

In addition, community acceptance can be a challenge to affordable housing. Through its successful Affordable Dwelling Unit (ADU) Program, Fairfax County has incorporated nearly 2,000 units of affordable housing in areas where it may not have been readily accepted. The Fairfax County ADU program effectively avoids such issues by requiring affordable housing to be included in nearly every new residential development in the County and by specifying that the design and placement of affordable units must be properly integrated into the development. Also critical to community acceptance of affordable housing in Fairfax County has been the FCRHA's commitment to the highest standards for the housing it owns and operates.

STRATEGIC PLAN (91.215)

The jurisdiction must produce a strategic plan for a period designated by the jurisdiction that brings needs, priority needs, priorities, specific objectives, and strategies together in a coherent strategic plan. In identifying and describing its needs, the jurisdiction is encouraged to draw relevant information from previous submissions and other reports and studies, as appropriate. The strategic plan must demonstrate how the jurisdiction will provide new or improved availability/accessibility, affordability, sustainability of decent housing, a suitable living environment, and economic opportunities, principally for low- and moderate-income persons.

Time Period of Plan

July 1, 2010 – June 30, 2015

Housing Component

Overview
The Housing Component of this Strategic Plan provides goals and objectives related to a) affordable housing; b) Public Housing; c) homelessness (including chronic homelessness); and d) special needs populations (including those served by HOPWA).

Philosophy
Addressing the housing needs of Fairfax County citizens can only be accomplished through a partnership between the non-profit community, the for-profit development industry, and the public sector. Limited resources pose an obstacle to addressing housing needs and it is through a group effort that priority housing needs for the next 10 years have been established and will be addressed as described in the "Housing Blueprint". The philosophy driving the priority needs is that affordable housing is a continuum ranging from the needs of the homeless to first-time buyers. Included in this range are the diverse housing needs of hard-working, but low paid families; senior citizens; persons with physical or mental disabilities; and the workforce across Fairfax County.

Serving the Greatest Need
The Housing Blueprint addresses the basis for assigning priorities. The Blueprint reflects the consensus that affordable housing priorities have changed and that the emphasis should shift to those with the greatest need. Those identified in the Blueprint as having the greatest need include:

- **Individuals and families who are homeless**
- **Households with low- and extremely low-incomes**
- **Special needs populations including persons with physical or mental disabilities and seniors**
- **The workforce essential to the county's economic health and growth**

Addressing the Pipeline
The Housing Blueprint reflects a desire to complete projects in the pipeline where the need and the community expectation have already been established.

Leveraging the Capacity of the Private Sector
The Housing Blueprint encourages the private development of affordable and workforce housing development.

Goals
As provided for in the Housing Blueprint, there are four key priority housing goals to be addressed in the next 10 years beginning with the time period covered by the Five-Year Consolidated Plan, FY 2011-2015.

1. To End Homelessness in 10 Years
2. To Provide Affordable Housing Options to Those with Special Needs
3. To Reduce the Waiting Lists for Affordable Housing by half in 10 Years
4. To Produce Workforce Housing Sufficient to Accommodate Projected Job Growth

Specific Housing Objectives
Table 60 below shows the specific objectives to meet the four goals outlined above.

Table 60: Consolidated Plan Housing Objectives

Objective Number	Objective Description
1	Provide housing units affordable to homeless individuals and families
2	Provide housing units affordable to persons with physical or mental disabilities, including persons with HIV/AIDS
3	Provide housing units affordable to households with low to extremely-low incomes (<50 percent MFI) and other special needs populations
4	Provide sufficient workforce housing through land use policy
5	Provide sufficient workforce housing through private sector partnerships
6	Preserve existing Public Housing
7	Promote resident self-sufficiency
8	Foster coordination and partnerships

A. Affordable Housing

The affordable housing needs of Fairfax County were identified based on information gathered through the Consolidated Plan process, and are consistent with the Housing Blueprint adopted by the Board of Supervisors on January 26, 2010. Information was collected through a variety of means including input from public forums; meetings of County officials and staff, non-profit and for-profit partners, and housing advocates; interviews with County staff and social service agencies, and analysis of Census and other data.

Fairfax County is a high-income urban county with population of over 1 million. While Fairfax County has one of the highest median household incomes in the nation (estimated $107,448 in 2008), there were an estimated 47,832 persons living below the poverty level in 2008. Although the percent of the population below poverty in Fairfax County (4.8 percent) is among the lowest of Virginia jurisdictions, the number of persons below poverty in Fairfax County is larger than the total population of 99 of the 134 local jurisdictions in Virginia.

Households with low-incomes in a typically high-income area are highly likely to have housing problems. According to the 2009 CHAS tables provided by HUD, 88 percent of Fairfax County renter households with incomes below 50 percent of the area median income (25,133 renters) had what is described as "one or more housing problems". Having a housing problem is defined as having a significant cost burden (meaning over 30 percent of income is used for housing costs), incomplete plumbing facilities, incomplete kitchen facilities, or overcrowding (over 1 person per room).

Households who pay over 50 percent of their income are severely cost burdened and are at high risk of needing housing assistance or services. Over two-thirds of Fairfax County renter households and nearly three-fourths of owner households with incomes <30 percent Area Median Family Income (AMFI) have severe cost burdens based on CHAS 2009 data.

Low-income households must compete with their more affluent neighbors for a limited supply of affordable housing. The affordable housing gap for low-income renters based on 2009 CHAS was about 9,500 units. The gap was worse for extremely-low income renters where there were about 12,000 less units available than affordable. These large gaps contribute to homelessness, with families especially at risk. There is an estimated need for 2,650 additional units/permanent housing for homeless individuals and families over the next 10-year period. For FY 2011, there is a need to provide housing to 196 homeless households (68 individuals and 128 families) along with a range of supportive service needs.

Priority Housing Needs

The priority housing needs identified for the Consolidated Plan are consistent with the priority needs identified in the Housing Blueprint. The Blueprint identifies those with the greatest need as: 1) individuals and families who are homeless; 2) persons with low- and extremely-low incomes; 3) persons with disabilities; and 4) low-income seniors. Table 61 shows the priority needs identified for the Blueprint and the priority unmet needs identified for the Consolidated Plan.

Table 61. Housing Blueprint and Consolidated Plan Priority Needs and Non-Homeless Special Needs	
Housing Blueprint Greatest Need	***Consolidated Plan Priority Unmet Needs and Non-Homeless Unmet Special Needs*** *(categories not mutually exclusive)*
Low-income Seniors	• Elderly persons (aged 62-74 with <80 percent MFI with a mobility or self-care limitation and at least one housing problem)* • Frail Elderly persons (aged 75+ with <80 percent MFI with a mobility or self-care limitation and at least one housing problem)*
Persons with Disabilities	• Persons with severe mental illness and alcohol and substance abuse addition • Persons with intellectual disabilities • Persons with physical disabilities (<80 percent MFI income with a mobility or self-care limitation, includes elderly/frail elderly and also includes some persons with mental disabilities) * • Persons with HIV/AIDS and their families
Individuals or families who are homeless	• Victims of Domestic Violence (those who sought shelter)
Persons with low- and extremely-low incomes	• Households with severe cost burden or those paying over 50 percent of their income for housing (total number of households by income group is provided earlier in Table 51). These severely cost burdened households are vulnerable to bankruptcy, homelessness, and foreclosure.

*Based on average of 2005-2007 from CHAS 2009

Justification for Priority Housing Need Categories

The identified affordable housing priorities respond to three critical elements of the affordable housing crisis in Fairfax County. The first is severity of need. The second is the limited and dwindling supply of affordable housing, in both the owner occupied and renter occupied sectors. The overall shortage of housing is pushing more units out of the affordable supply, through rent and price escalation and conversion of rental units to condominium ownership. The third is the increase in the number of low-income households who need these units. Low-income households with the most need often are unable to find housing because affordable housing is occupied by households with higher incomes.

The severity of the housing problem for the homeless and need for renewed vigor in providing basic shelter warrants placing the highest priority on the homeless.

Low-income households, particularly those below 30 percent MFI (extremely-low income), are the most disadvantaged in finding and keeping housing in the current market. The economic downturn contributes to putting hard-working families at risk of homelessness as

they struggle with multiple jobs and uncertain income. Service providers and housing advocates are being challenged more than ever to prevent homelessness.

The elderly are the fastest growing age segment in Fairfax County and are projected to comprise 11.1 percent of the County's population by the year 2015. Low-income elderly households with housing problems (includes cost burden) include a significant number of homeowners. Cost burdens could be the result of high utilities, property taxes, and insurance costs. Elderly owner households have also been the targets of predatory lending practices and may be at risk of foreclosure.

Persons with physical or mental disabilities require special attention as this group is likely to have both service and housing needs. Over two-thirds of mentally or physically disabled renters and nearly two-thirds of owners with incomes <80 percent AMFI had at least one housing problem (>30 percent cost burden, overcrowded, or lacking complete kitchen or bathroom facilities). In addition, the American Disabilities Act (ADA)[29] and the Olmstead decision[30] provide legal protections for persons with physical or mental disabilities that must be honored.

Finding ways to ensure housing is affordable for all residents is essential to the long term economic health of Fairfax County. An adequate supply of "workforce housing" or housing that is affordable to essential workers is especially critical to meet the demands of projected job growth and to ensure that the County can keep workers that provide services crucial to all citizens.

Obstacles

The following are obstacles to meeting the underserved needs of the priority groups identified in this Plan and are cross-cutting across strategic plan categories:

- Magnitude of needs compared to resources
- Inadequate federal funding
- Increase in low-income housing needs
- Inadequate coordination among agencies
- Design and code requirements make it difficult for low-income homeowners to improve their properties and bring them up to current standards
- The economic and housing crisis
- Community acceptance/Not In My Back Yard (NIMBY)
- Meeting community facility needs for an increasing population both in size and age
- Transportation system
- Lack of child care. Related to this is the lack of affordable child care and child care at hours needed for those working jobs with non-traditional hours
- Language barriers both from the standpoint of immigrants learning how to access services and service agencies reaching the immigrant population
- Diminishing supply of land for development
- Challenges of redevelopment (land assembly, costs, neighborhood resistance)
- Competing demands for public services

[29] See http://www.ada.gov/publicat.htm#Anchor-14210 for in-depth information on ADA.

[30] In *Olmstead*, the Supreme Court ruled that Title II of the Americans with Disabilities Act prohibits the unnecessary institutionalization of persons with disabilities and services to persons with disabilities must be provided "in the most integrated setting possible." The Court ruled that there should be community options.

Table 2A
Priority Housing Needs/Investment Plan Table

PRIORITY HOUSING NEEDS (households)		Priority		Unmet Need
Renter	Small Related	0-30%	H	4,510
		31-	M	1,332
		51-	L	383
	Large Related	0-30%	H	1,052
		31-	M	211
		51-	L	22
	Elderly	0-30%	H	1,951
		31-	H	528
		51-	L	366
	All Other	0-30%	H	3,587
		31-	M	2,479
		51-	L	494
Owner	Small Related	0-30%	H	2,291
		31-	M	3,352
		51-	L	3,816
	Large Related	0-30%	H	705
		31-	M	952
		51-	L	689
	Elderly	0-30%	H	2,022
		31-	H	1,381
		51-	L	1,393
	All Other	0-30%	H	1,777
		31-		1,790
		51-		2,137
Non-Homeless Special Needs	Elderly	0-80%	H	979
	Frail Elderly	0-80%	H	891
	Severe Mental Illness	0-80%	H	484
	Physical Disability	0-80%	H	9,730
	Developmental Disability	0-80%	M	620
	Alcohol/Drug Abuse (included in mental illness)	0-80%	H	
	HIV/AIDS	0-80%	M	84
	Victims of Domestic Violence	0-80%	H	634

Table 2A
Priority Housing Needs/Investment Plan Goals

Priority Need	5-Yr. Goal Plan/Act	Yr. 1 Goal Plan/Act	Yr. 2 Goal Plan/Act	Yr. 3 Goal Plan/Act	Yr. 4 Goal Plan/Act	Yr. 5 Goal Plan/Act
RRenters						
0 - 30 of MFI	1330	490	210	210	210	210
31 - 50% of MFI	560	200	90	90	90	90
51 - 80% of MFI	280	56	56	56	56	56
OOwners						
0 - 30 of MFI	150	30	30	30	30	30
31 - 50 of MFI	170	34	34	34	34	34
51 - 80% of MFI	180	36	36	36	36	36
Homeless*						
Individuals	560	68	106	141	121	124
Families	776	128	141	159	174	174
Non-Homeless Special Needs						
Elderly	331	131	50	50	50	50
Frail Elderly	55	11	11	11	11	11
Severe Mental Illness (including persons with alcohol/drug abuse)	230	46	46	46	46	46
Physical Disability	51	25	8	8	8	2
Developmental Disability	70	14	14	14	14	14
HIV/AIDS	300	60	60	60	60	60
Victims of Domestic Violence	TBD					
TTotal						
TTotal Section 215	275	55	55	55	55	55
215 Renter	100	20	20	20	20	20
215 Owner	175	35	35	35	35	35

* Homeless individuals and families assisted with transitional and permanent housing

Proposed Outcomes/Activities

Through the following proposed activities/outcomes the County will increase the number of housing units available to those most in need including homeless individuals and families, extremely-low income households, and special needs populations such as large families and seniors and persons with physical or mental disabilities; will increase the number of housing units available in order to reduce current waiting lists; and will increase the number of workforce housing units available.

To End Homelessness in 10 Years

The County will address the 10-year need for 2,650 additional units/permanent housing opportunities for homeless individuals and families through several means.

Improved Affordability/Accessibility: Examples of activities beginning in FY 2011 include but are not limited to:

- *Bolster the existing resources,* including providing housing opportunities funded with re-targeted and additional federal resources (such as Continuum of Care units, Project-Based Vouchers, Family Unification Program (FUP) vouchers), the conversion of non-profit owned transitional housing and additional non-profit acquisitions, as well as the use of FCRHA-owned housing.
- *Initiate other efforts to house and serve homeless persons,* including renovating an existing shelter facility, new construction, federal vouchers, and private sector partnerships.
- *Using local resources, if appropriated,* to fund non-profit rental subsidy programs, short-emergency assistance, and non-profit housing acquisition.

To Provide Affordable Options to Special Needs Populations

The County will provide affordable housing options to special needs populations including low to extremely-low income households, seniors, large-families, and persons with physical or mental disabilities through several means.

Improved Affordability/Accessibility: Examples of activities beginning in FY 2011 include but are not limited to:

- *Bolstering the existing resources,* by converting group homes to affordable housing for larger families, a home-sharing referral program for seniors and persons with disabilities, delivery by FCRHA of new 90-unit senior independent living development, and renovation of existing FCRHA housing stock, and the purchase/development of accessible units.
- *Initiate other efforts to house and serve seniors and persons with physical or mental disabilities,* including identifying county surplus land for future affordable housing development, incorporation of Universal Design in FCRHA new construction/rehabilitation, and require projects financed by the FCRHA to provide accessibility where economically feasible. Partnerships with non-profits, completing projects in the pipeline.
- *Provide additional resources to address the needs of extremely-low income households, seniors, large-families, and persons with physical or mental disabilities.* Planned activities include those described above and the renovation of an existing assisted living facility.

To Reduce the Waiting Lists by Half in 10 Years

The County will address the FCRHA waiting list of 12,500 households (includes federal and local programs), the 1,200 on the CSB waiting list, and the 100 on the shelter waiting list and address the FY 2011 rental assistance need for 690 households by several means.

Improved Affordability/Accessibility: Examples of activities beginning in FY 2011 include but are not limited to:

- *Bolster the existing resources,* by ensuring maximum lease-up in FCRHA programs and properties, establishment of a collaborative referral process with non-profit owners, and non-profit acquisitions using federal resources such as the HOME Community Housing Development Organization (CHDO) set-aside, and Neighborhood Stabilization Program (NSP) funds granted to Fairfax County.
- *Initiate other efforts to reduce waiting lists,* such as exploring tax exemption for developers of housing for persons earning extremely low-incomes, completion of FCRHA pipeline projects, and the use of voluntary cash contributions received from developers via the land use rezoning process to develop additional affordable units.
- *Provide additional funding to reduce waiting lists,* including potentially using local resources to complete the FCRHA development pipeline and fund non-profit operate rental subsidy programs and affordable housing development.

To Increase Workforce Housing through Creative Partnerships and Public Policy

The County will address the need for 63,660 net new housing units affordable to households earning up to 120 percent MFI based on projected job growth through 2025 (source: George Mason University, Center for Regional Analysis) through bolstering existing resources and initiating other efforts.

Economic Opportunity and Improved Affordability/Accessibility: Examples of activities beginning in FY 2011 include but are not limited to:

- *Bolstering the existing resources* through units delivered by private developers under the county's Workforce Housing Policy and the county's Affordable Dwelling Unit (ADU) program, as well as the county's homeownership programs and the development of affordable housing on county-owned land.
- *Initiate other efforts to increase workforce housing* via county land use policy and other means, including partnering with non-profits and completing projects in the pipeline.

B. Public Housing Strategy

In setting priorities for the upcoming years, and consistent with the Housing Blueprint, the County will put their emphasis on those identified as having the greatest need including the low to extremely-low income families, elderly families, and those with special needs, including families within these groups that are on the public housing waiting list. Not considering owner households, there are 25,133 renter households in Fairfax County with incomes below 50 percent of the area median income (based on 2009 CHAS). Of those renters, two-thirds pay in excess of 50 percent of their income for housing. As facilities and funding are limited, the County will use a partnership approach to offering alternative forms of housing assistance that will in turn reduce the number on the public housing waiting list. Depending on local funding availability, Fairfax County's most disadvantaged citizens will be provided with a housing "bridge" to stability, recovery and greater self-sufficiency through competitive funding of innovative non-profit solutions, potentially to include rent subsidies and affordable housing development.

Background

The Federal Public Housing Program is administered by the U.S. Department of Housing and Urban Development (HUD) to provide funds for rental housing serving low income households owned and operated by local housing authorities such as the Fairfax County Redevelopment and Housing Authority (FCRHA).

The FCRHA is a political subdivision of the Commonwealth of Virginia. FCRHA is administratively supported by the Fairfax County Department of Housing and Community Development. The mission of FCRHA is to initiate and provide opportunities for Fairfax County residents to live in safe, affordable housing and to help develop, preserve, and revitalize communities through fiscally responsible and open processes.

Federal Public Housing and Housing Choice Vouchers are among the many programs that FCRHA operates. There have been no new federal public housing units in Fairfax County since 1997 and none are anticipated in the future. FCRHA public housing priorities are concentrated on targeting populations most in need, preserving the 1,063 current units in public housing projects, reducing the waiting list for public housing units, and empowering the residents with skills to move beyond public housing.

Eligibility for admission and occupancy to Low-income public housing in Fairfax County requires the applicants to fulfill the following general criteria: (1) qualify as a family, (2) have annual income which does not exceed the income limits for admission to a designated development, and (3) qualify under the Local Preference if head or spouse is employed, attending school or participating in a job training program, a combination thereof at least 30 hours per week; or is 62 or older; or is a primary caretaker of a disabled dependent; or meets HUD's definition of being disabled. Also, applicants must be from households that (1) pay more than 30 percent of gross income for rent and utilities for the past 90 days (excluding telephone and cable costs), or pay less than 30 percent of gross income for rent and utilities but earn less than 50% of area median income and (2) who live or work in Fairfax County, City of Fairfax, City of Falls Church or Town of Herndon.

Fair Housing

The Fairfax County Public Housing Program is a high performing program. Admissions and Occupancy policies for the program are governed by the Quality Housing and Work Responsibility Act of 1998 (which amended the United States Housing Act of 1937) and are consistent with the objectives of Title VI of the Civil Rights Act of 1964. The Fairfax County

Department of Housing and Community Development actively participates as a member of the Fair Housing Task Force and the Fairfax County Human Rights Commission participates in HUD's Fair Housing Assistance Program.

Fairfax County promotes equal opportunity and works to affirmatively further fair housing. Section 504 of the Rehabilitation Act of 1973, as amended, states that entities receiving federal funding must provide services related to securing housing or shelter, including services related to community group living, and supportive of the purposes of this Act and of the titles of this Act, and adaptive housings services (including appropriate accommodations to and modifications of any space used to serve, or occupied by, individuals with disabilities). The County will continue to undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability; to undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability; to undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required; and to ensure compliance with federal, state and local fair housing policies and laws.

Federal regulations issued by HUD governing the Consolidated Plan require jurisdictions to complete an Analysis of Impediments (AI) to fair housing choice. In June 1997, the Board of Supervisors adopted the Fairfax County Fair Housing Analysis of Impediments. In 2007, the Fairfax County Human Rights Commission amended its Fair Housing Plan. The Plan includes a list of past activities implemented to address fair housing, and a summary of current impediments to fair housing. The Board of Supervisors adopted the Fair Housing Analysis of Impediments, as amended, in July 2007.

A Request for Proposals for a consultant to conduct a new Analysis of Impediments was released in October 2009. An award has been made and the AI is being worked on and should be completed in early June. The new AI will be reviewed and it is anticipated to be forwarded to the Board of Supervisors for their review in September 2010.
Please see the Annual Action Plan for a list of actions planned to address impediments to fair housing identified in the AI.

Specific Objectives

There were 10,114 families on the public housing waiting list as of February 2008. Of these, 76 percent are extremely-low income, 21 percent are low-income, and 3 percent are moderate-income families. Elderly families account for 16 percent and families with a person with a disability account for 19 percent. All of these groups have been identified through the Consolidated Plan process as priority needs groups. According to 2005-2007 average data from CHAS 2009, 11,110 or 77 percent of the extremely-low income renters in Fairfax County pay in excess of 50 percent of their income for housing and are most in need of housing assistance. Specific objectives to address the needs of these priority groups are shown on Table 1C.

Proposed Outcomes/Activities

Improved Affordable/Accessible Housing

- FCRHA will exceed HUD federal targeting requirements for families at or below 30 percent of AMI in public housing and exceed HUD federal targeting requirements for families at or below 30 percent of AMI in tenant-based HCV assistance

- In addition to targeting families at or below 30 percent of AMI, the FCRHA will employ an admissions preference aimed at families with economic hardships; this preference is for families that pay more than 30 percent of gross income for rent and utilities for the past 90 days (excluding telephone and cable costs), or pay less than 30 percent of gross income for rent and utilities but earn less than 50% of area median income
- In addition to targeting families at or below 30 percent of AMI, the FCRHA will employ a preference for working families, elderly families, and disabled families
- FCRHA will employ an over-income policy in its Public Housing program that results in the termination of assistance to families above 100 percent of the Area Median Income, thereby making those units available to families in greater need

Improved Affordable/Accessible Housing

- FCRHA will carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing (Currently, there are 100 vouchers specified for persons with physical or mental disabilities under the Mainstream Housing for Persons with Physical or mental Disabilities Program and administered through Medicaid-waiver vouchers)
- FCRHA will draw on partnerships with local non-profit agencies for additional support for families with disabilities
- Within the 5-year period, FCRHA will seek a Resident Opportunity and Self-Sufficiency (ROSS) grant to provide residential support services for households with disabilities and will set-aside public housing units for occupancy for disabled individuals in the Supportive Shared Housing Program administered by the Community Services Board

Improved Affordable/Accessible Housing

Preserve Public Housing

Fairfax County is dedicated to preserving, renovating, and maintaining FCRHA-owned properties and regularly allocates appropriate federal resources for this purpose. With a severe shortage of affordable housing and with market pressures accelerating the shift of units out of the affordable housing supply, it is imperative that the limited supply of deep-subsidy assisted affordable units be preserved whenever possible. Deep-subsidy programs include public housing, privately owned federally assisted housing, and housing vouchers and certificates. The supply of federal Public Housing in Fairfax County has remained steady at 1,063 for more than a decade. In addition to these federal Public Housing units, there are 3,204 tenant-based federally-funded housing choice vouchers (closed since 2007) in Fairfax County. The County is committed to assuring the continued excellent reputation of the FCRHA through fiscally responsible policies, sound business practices, and well-maintained properties that meet the high community standards of Fairfax County. Examples of activities planned to address this goal beginning in FY 2011 include, but are not limited to:

- Improve maintenance and limit the time units are not occupied
  - Over the time period covered by the FY 2011-2015 Plan, the County will continue to employ effective maintenance and management policies to minimize the number of public housing units off-line
  - Measures will be taken to conduct renovation activities efficiently and to reduce turnover time for vacated public housing units. In addition, FCRHA will promote use of on-line applications for housing assistance
- Improve communication practices

- o County will support the quality work and professionalism of the HCD staff and to provide highly effective programs by incorporating and maintaining up-to-date Information Technology solutions in FCRHA/HCD business and communication function
- o County will continue to encourage their citizens to have a sense of ownership in policies and programs through open and two-way communication of ideas and information about housing and community development challenges and opportunities

Improved Affordable/Accessible Housing

Reduce the Public Housing Waiting List

FCRHA will address combined federal Public Housing and Housing Choice Voucher waiting list by providing self-sufficiency programs to current residents that will result in some residents moving on to other housing opportunities. Examples of activities planned beginning in FY 2011 include, but are not limited to:

- Bolster the existing resources, by ensuring maximum lease-up in FCRHA programs and properties, establishment of a collaborative referral process with non-profit owners, and non-profit acquisitions using federal resources such as the HOME Community Housing Development Organization (CHDO) set-aside, and Neighborhood Stabilization Program (NSP) funds granted to Fairfax County.
- Initiate other efforts to reduce waiting lists, such as exploring tax exemption for developers of housing for persons earning extremely low-incomes, completion of FCRHA pipeline projects, and the use of voluntary cash contributions received from developers via the land use rezoning process to develop additional affordable units.
- Provide additional funding to reduce waiting lists, including potentially using local resources to complete the FCRHA development pipeline and fund non-profit operate rental subsidy programs and affordable housing development.

Suitable Living Environment

Promote Family Self-Sufficiency

FCRHA works to empower the residents of public housing with the means to become as self-sufficient as possible. FCRHA encourages and facilitates movement toward financial independence beyond the need for FCRHA services while recognizing the needs and limitations of the mentally and physically disabled, the aged, and infirm. Because the annual unit turnover rate for public housing programs is about 10 percent, the FCRHA will continue to focus in up-coming years on the self-sufficiency and asset development of families living in public housing and HCV households. Examples of activities planned beginning in FY 2011 include, but are not limited to:

- Promote programs that offer public housing residents and housing choice voucher recipients the skills and resources to move beyond assisted housing
- FCRHA will continue to encourage policies that support and encourage work
- FCRHA will continue its Family Self-Sufficiency Program (the FY 2010 capacity is to serve 50 participants each from Public Housing and Housing Choice Voucher Programs)
- Coordinate the Family Self-Sufficiency Program with the Welfare-to-Work and Affordable Housing initiatives, the Family Self-sufficiency Program will
- Promote linkage to homeownership via a ROSS grant program and other incentives

C. Homelessness

Fairfax County uses the results of its homeless inventory and needs assessment, and consultation with service providers and homeless persons to identify the priority needs of prevention and individual support services for all categories of residents. A broad-based community collaborative has come together to adopt strategies that will end homelessness in Fairfax County within the next ten years. The county has adopted a "housing first" homeless strategy to address these priority needs for homeless individuals and families. The specific objectives defined by this 10 year plan to end homelessness will break the cycle of chronic homelessness through an individualized continuum of services for those currently homeless and at imminent risk of homelessness.

Priority Homeless Needs

Community members and organizations highlight the various needs of persons experiencing homelessness and characterize prevention and individualized support as the most pressing needs for homeless persons and families. Participants in the November 6th public input forum identified education access, transportation, affordable housing, immigration issues, childcare, unemployment resources, dental assistance, Alzheimer's, and environmentally sustainable housing access all as needs for housing and services for persons who are homeless. The County will address this vast array of service and shelter needs by focusing on an individualized continuum for those currently or at risk of becoming homelessness.

The November 6th public input forum on Helping Persons with special needs identified prevention through directing funding to maintaining housing, prevention, diversion and rapid re-housing as the most pressing need for supporting homeless persons. Participants in the forum also expressed concern over whether the complex system of services available was able to meet the individual needs of homeless persons and families. Oral testimony of a homeless individual with disabilities affirmed this need for an individualized support. She indicated that she hoped the "safety net" to help persons with the challenges she faced such as program eligibility, access to case managers, housing voucher program access, and support for individuals with disabilities would improve.

The Continuum of Care Housing Gap Analysis (Table 1A, included in the Housing Market Analysis Section under Homeless Facilities and Services) summarizes the current inventory of year round beds for households with and without children. The inventory of facilities and services that assist homeless persons and families suggests that there is a need for an additional 25 beds in safe haven facilities and 132 beds in emergency shelters for households without children. However, the goal under the Plan to Prevent and End Homelessness is to address this shelter need through increasing the availability of permanent housing for this population.

The greatest unmet need is in permanent supportive housing where households with children lack 132 beds and 30 units, and 171 households without children are in need of permanent supportive housing. The Housing Options Task Force used information provided by the Continuum of Care survey and other data to estimate a need for 2,650 additional units/permanent housing for homeless individuals and families over the next 10-year period.

Chronic Homelessness

HUD defines chronic homelessness as an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more or has had at least four episodes of homelessness in the past three years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation, such as living "in the streets", and/or in an emergency shelter during that time. A disabling condition is defined as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual's ability to work or perform one or more activities of daily living.

Homeless Strategy

To End Homelessness in 10 Years is one of four key priority housing goals as set forth in the Housing Blueprint and the Consolidated Plan.

Background:
Throughout 2005-2006, a broad-based community-wide collaborative came together to develop a strategic plan to prevent and end homelessness. This collaboration culminated in a planning framework entitled Strategic Directions for the Plan to Prevent and End Homelessness in the Fairfax-Falls Church Community. On February 26, 2007, the Fairfax County Board of Supervisors endorsed this strategic plan and its Housing First approach and called for the establishment of an implementation committee. The Implementation Committee was established in May 2007 and on March 31, 2008, the Board of Supervisors adopted the Implementation Plan.

The implementation plan identifies the basic actions and commitments necessary to transform the current system and approach to homelessness into a flexible, relationship-based and community-centered system based on the principles of Housing First. This approach creates more housing choices, prevents homelessness and integrates all needed services into a coordinated and flexible support system.

The Implementation Committee also created a management system for the plan implementation. The Fairfax-Falls Church Partnership to Prevent and End Homelessness will provide the essential coordinated and collaborative political, community, and managerial leadership, policy direction, resource development and stewardship.

Through the framework of the plan for Strategic Directions for the Plan to Prevent and End Homelessness in the Fairfax-Falls Church Community, the County has the following objectives:

- Help low-income families avoid becoming homeless;
- Reach out to homeless persons and assessing their individual needs;
- Address the emergency shelter and transitional housing needs of homeless persons;
- Help homeless persons (especially any persons that are chronically homeless) make the transition to permanent housing and independent living

Prevention and individualized support are the highest priority for all categories of persons who are homeless. The County is expanding the Continuum of Care components to address these priority needs.

HOST Team

In FY 2010, Fairfax County initiated Housing Opportunities Support Teams (HOST) which in its first 29 days of operation helped divert 163 people from 58 households from homelessness. The HOST system operates as a partnership of local faith-based and nonprofit organizations, and Fairfax County human services and housing agencies. The program coordinates and manages prevention, housing placement and supportive services for those who are homeless or at risk of becoming homeless. Through HOST, the partner organizations collaborate to identify and coordinate housing opportunities, provide one-stop accessible triage, assessment and referral and deliver client-centered services. This client-centered, individual approach eliminates the need for determining the relative needs of homeless individuals and families based on their priority homeless need category.

Housing First Approach

To meet the goal of ending homelessness, a Housing First approach has been adopted to focus on both preventing homelessness and rapidly moving people from homelessness to permanent housing. Four key strategic actions are required to move to a Housing First approach:

- Place a strong focus on preventing homelessness,
- Provide integrated access to housing and services in the community,
- Increase the availability and choices of permanent housing,
- Create a community-wide partnership to implement the plan.

The Partnership for Permanent Housing, a pilot program in its fourth year, targets homeless families who have the potential to become homeowners. In FY 2010, with homeownership the goal, the Partnership for Permanent Housing program will assist, guide, and offer support services to up to 25 homeless families currently living in Fairfax County homeless shelters and transitional housing units. First, selected families will be moved into stabilized rental housing. Through the provision of rental assistance and family self-sufficiency plan achieved through a regimen of supportive services, the expectation is to assist these families in owning their own home. This program is an important link to the countywide effort to end homelessness in 10 years.

Fairfax County's Housing First Strategy emphasizes prevention of homelessness and permanent supportive housing. "Housing first" places people in stable housing as rapidly as possible; housing becomes the *first* step in moving out of homelessness, not the last. The housing is based on adherence to a lease (payment of rent, upkeep of unit, peaceful and orderly conduct), not compliance with a "service plan". Once in housing, this approach works to link tenants with services and supports to address other needs by developing trusting relationships.

A central tenet of this Housing First approach is that social services to enhance individual and family well-being can be more effective when people are in their own home. This emphasis reflects an individualized continuum that assists homeless individuals and families with a range of services based on their needs. Expansion of the Continuum of Care components of emergency shelters and transitional housing are unnecessary in the context of this Housing First strategy.

Discharge Coordination Policy

Fairfax County recently reevaluated its policy and implementation tools to assure that individuals discharged from institutions or systems of care in Fairfax County are not discharged into a homeless situation. The Plan to Prevent and End Homelessness' Housing

Opportunities Support Team (HOST) Discharge Planning Workgroup was assigned to revise the process to ensure that people in institutions are discharged and released to appropriate housing services. The workgroup identified three types of institutions that fall under the rubric of discharge planning: medical (e.g. hospitals, urgent care centers, assisted living, skilled nursing, and long term care facilities), mental health (e.g. psychiatric hospitals and medical detox facilities), and corrections (e.g. the Adult Detention Center). The Workgroup organized its work into four discrete tasks:

- Identify and review existing discharge planning and release mandates within the three institutional classes (medical, mental health, and corrections).
- Develop discharge planning policies, processes, and tools to ensure immediate identification and integrated case management for individuals who are currently homeless, or at risk to become homeless.
- Develop a process to refer individuals who are identified as homeless, or at risk to become homeless, to the Housing Opportunities Support Team.
- Develop an educational process that maintains and updates discharge planning policies and procedures within the three institutional entities (medical, mental health, and corrections).

The Workgroup identified a set of priorities.

The Need to Assess an Individual's Housing Status
Currently, clients are asked for their address at intake. This method solicits some disclosures. Individuals do not always divulge their living arrangements, instead, providing an incorrect or incomplete address. Unless an individual self-identifies as homeless, there is no reliable way to assess that person's housing status.

Discharge Planning is Inversely Related to the Individual's Length of Stay
An institution has a greater chance of identifying an individual as homeless or at risk only after he or she is admitted or incarcerated. Individuals who access the emergency room or who are briefly detained for a minor infraction are less likely to benefit from discharge planning policies or procedures.

Helping Individuals Navigate and Access Available Services is Dependent on Staff Retention
Particular fields (e.g. case management, social work, etc.) and institutions have a high volume of turnover. Orienting staff to discharge policies and procedures may be secondary to the day-to-day needs of the individuals or even those of the institution.

Based on these findings, the Discharge Planning Workgroup determined that individuals who are exposed, tangentially, to medical, mental health, or corrections institutions are at greatest risk for being overlooked in the discharge planning process. Representatives from the three institutional entities have pledged to reach out and engage these individuals, recognizing that a certain subset will refuse further help or services. Therefore, the Workgroup sees the outcome of its work culminating in the documentation of a client's consent (or refusal) and initiation of a referral to the HOST team.

The HOST team identified policy recommendations in identification, assessment, referral, and process implementation:

- ***Identification* -** The Workgroup concluded that asking an individual for a current address is not a good indicator of homelessness. A better proxy would be to query the individuals' physical environment and their expectations upon discharge or release. To facilitate identification, a standard set of intake questions will be asked during the individuals' point of entry into a medical, mental health, or correctional institution.

- ***Assessment* -** In order to identify and prevent clients from becoming homeless, staff must assess their physical surroundings, including the supports needed for recovery and rehabilitation. An assessment tool will be used to guide the HOST team in making an appropriate referral. Individuals will be flagged if they select one or more answers that are indicators of risk of homelessness. If an individual provides consent for additional services (based on the assessment tool), staff will them complete a referral form and forward it to the Single Accountable Individual (SAI).

- ***Referral* -** The Workgroup recognizes the competing demands on staff working in these facilities, so developing a short and simple referral process was paramount. Individuals' answers, as captured on the referral form, will guide the HOST team or SAI in conducting a more comprehensive assessment and securing appropriate placements.

- ***Process Implementation* -** The unique nature of each institution and their respective mandates necessitated the development of three policies, one each for medical, mental health, and corrections. There will also be some variations in process between different medical or mental health facilities.

    - At Reston Hospital, for example, anyone who is admitted without an address is immediately referred to the Case Management Department. However, incorporating the intake questions into Reston's nursing assessment may expedite the identification of homeless and at-risk individuals and generate faster case management referrals. At Inova Health System Hospitals, the intake screening questions will be added to the initial discharge planning assessment and completed within 24 hours of admission. In most instances, a case manager will complete the assessment, but if the need for a social worker is identified, he or she will be responsible for completing the assessment and a referral to the HOST/SAI if warranted.

    - The Mental Health community — a social worker, case manager, or discharge planner — will assess individuals admitted on either voluntary or involuntary status within 48 hours of admission. The Intake Questions will be completed on each individual as the means of initial identification of homelessness. If an individual is homeless or at risk of homelessness and is willing to accept housing assistance, the social worker, case manager or discharge planner will then complete a referral form as the next step in linkage to the HOST Team.

    - Finally, the Deputy Sheriffs in the Adult Detention Center will use the Intake Questions to identify homeless and at-risk of homelessness individuals during the booking process. If necessary, they will also complete the referral to the HOST/SAI.

Specific Objectives

Per the Housing Blueprint, it is Fairfax County's goal to end homelessness in ten years. The County will address the 10-year need for 2,650 additional units/permanent housing opportunities for homeless individuals and families as described in Table 1C.

Outcomes/Activities

Improved Affordability/Accessibility: Examples of activities planned beginning in FY 2011 include:

- *Bolstering the existing resources*, including providing housing opportunities funded with re-targeted and additional federal resources (such as Continuum of Care units, Project-Based Vouchers, Family Unification Program (FUP) vouchers), the conversion of non-profit owned transitional housing and additional non-profit acquisitions, as well as the use of FCRHA-owned housing.
- *Initiating other efforts to house and serve homeless persons,* including renovating an existing shelter facility, new construction, federal vouchers, and private sector partnerships.
- *Using local resources, as appropriated,* to fund non-profit rental subsidy programs, short-emergency assistance, and non-profit housing acquisition.

Net planned outcomes for FY 2011 through 2015 are a total of 560 additional beds/housing opportunities for at-risk single adults, and 776 additional units/housing opportunities for families.

Improved Affordability/Accessibility

- partner with non-profits
- put funding toward new priorities
- provide rental subsidies
- complete projects in the pipeline

Suitable Living Environment (Objective 2)

- Reduce the recurrence of homelessness through better discharge procedures and coordination

D. Special Needs Populations

Priority Needs of Special Needs Populations

Based on a consensus of stakeholders tasked with determining priority needs for the time period covered by the FY 2011-2015 Consolidated Plan and beyond, and consistent with the Housing Blueprint, those with the greatest need will be the priority in terms of providing housing assistance and services.

The "Non-Homeless Special Needs Table" (Table 1B) appears in the Housing and Homeless Needs section of this document (page 109). This analysis was completed under the assumption that portions of the particular groups shown in Table 62 would require housing or supportive services (categories are NOT mutually exclusive).

Table 62. Housing Blueprint and Consolidated Plan Special Needs Categories

Housing Blueprint Definition of Special Need	***Consolidated Plan***
Low-income Seniors	• Elderly (aged 62-74 with <80 percent MFI with a mobility or self-care limitation and at least one housing problem)* • Frail Elderly (aged 75+ with <80 percent MFI with a mobility or self-care limitation and at least one housing problem)*
Persons with Disabilities	• Persons with severe mental illness and alcohol and substance abuse addition • Persons with intellectual disabilities • Persons with physical disabilities (<80 percent MFI income with a mobility or self-care limitation, includes elderly/frail elderly and also includes some persons with mental disabilities) * • Persons with HIV/AIDS and their families
Individuals or families who are homeless	• Victims of Domestic Violence (those who sought shelter)

*Based on average of 2005-2007 from CHAS 2009

Justification for Priority Selections

Special Needs Populations are especially vulnerable to becoming homeless if unable to receive needed services and affordable housing. Prevention, through targeting at -risk groups or those with the most severe need is the best and most efficient approach for allocating limited resources.

Since 1980, the percentage of residents under the age of 45 has slowly decreased. In addition, the percentage of persons 65 and older increased from 4.5 percent in 1980 to 9.9 percent of the total population in 2008. The elderly are the fastest growing age segment in Fairfax County and are projected to comprise 11.1 percent of the County's population by the year 2015. It should be noted, however, that while the percentage of children and youth under age 20 decreased slightly, the actual number is projected to increase by over 4,900 from 2010 to 2015. (Fairfax County Department of Systems Management for Human Services, 2008)

With an aging population comes the need for assistance with daily living activities. Of those 65 and older, 12,122 persons have independent living difficulties. (ACS 2008)

As the total elderly population increases in Fairfax County so, too, does the need for housing for the elderly. The number of congregate housing units for the elderly stood at 2,768 units in 2000, but the projected need in 2010 is for 4,500 units. Also growing is the need for assisted living beds. Year 2000 figures showed 3,209 beds needed for the elderly, while 2010 figures project a need of 4,200 beds.[31]

In the year 2000, almost 5,000 low-income elderly renters and owners had severe housing cost burdens, paying over 50 percent of their income toward housing costs.[32] Activities such as the provision of tenant-based rental assistance for the elderly as well as acquisition and development of housing and facilities designed specifically for seniors will help address these needs.

Obstacles

Obstacles to meeting underserved needs include:

- Inadequate funding
- Reorganization of space, staff and services following fiscal reductions
- Aging buildings
- Increase population demand
- Increase in low-income housing needs
- NIMBY
- Reduced supply of lands for development
- Challenges of redevelopment (land assembly, costs, neighborhood resistance)

The supportive services needs of Fairfax County's special populations (elderly, persons with physical or mental disabilities and victims of domestic violence) were identified based on information gathered through the Consolidated Plan process. Information was collected

[31] Strategic Plan for Fairfax County, Virginia; Fairfax County Proposed Draft Consolidated Plan Five-Year Plan for FY 2006-2010, Antipoverty Strategy section, Table on Projections for Housing Needs/Long-Term Care Needs for Elderly. The projection for assisted living beds makes the assumption that persons age 75 and over are the individuals most likely to live in assisted living facilities.

[32] Fairfax County Proposed Draft Consolidated Plan Five-Year Plan for FY 2006-2010, Priority Housing Needs section, Elderly Housing Needs subsection.

through a variety of means including input from public forums; meetings of County officials and staff, non-profit and for-profit partners, and housing advocates; interviews with County staff and social service agencies, and analysis of Census and other data. In addition, the severity level and frequency of need was considered in assigning priority to non-homeless supportive services to special needs populations.

Discharge Coordination Policy

As stated earlier in the Homeless section of this Strategic Plan, Fairfax County recently reevaluated its discharge coordination policy and implementation tools to assure that individuals discharged from institutions or systems of care in Fairfax County are not discharged into a homeless situation. The Plan to Prevent and End Homelessness' Housing Opportunities Support Team (HOST) Discharge Planning Workgroup was assigned to revise the process to ensure that people in institutions are discharged and released to appropriate housing services. A description of the outcomes of the workgroup's efforts can be found on page 121.

Specific Objectives

As laid out in the Housing Blueprint, over a 10 year period the County will address reducing the number of households on waiting lists for assisted housing. There are approximately 12,500 households on the FCRHA waiting list, 1,200 on The Community Services Board waiting list, and 100 on shelter waiting lists. The Fairfax-Falls Church Community Services Board (CSB) estimates that as many as 3,000 low-income persons with physical or mental disabilities are in need of housing assistance and/or residential services in Fairfax County. Based on CHAS 2009, there are 9,730 persons with physical or mental disabilities with incomes at or below 80 of AMI who potentially have housing or services needs. Specific objectives to address the housing challenges facing persons with special needs can be found on Table 1C.

Proposed Outcomes/Activities

The County will provide affordable housing options to special needs populations including low to extremely-low income households, seniors, large-families, and persons with physical or mental disabilities through several means. Activities planned beginning in FY 2011 include, but are not limited to:

Improved Affordability/Accessibility

- *Bolstering the existing resources,* by converting group homes to affordable housing for larger families, a home-sharing referral program for seniors and persons with disabilities, delivery by FCRHA of new 90-unit senior independent living development, and renovation of existing FCRHA housing stock, and the purchase/development of accessible units.
- *Initiate other efforts to house and serve seniors and persons with physical or mental disabilities,* including identifying county surplus land for future affordable housing development, incorporation of Universal Design in FCRHA new construction/rehabilitation, and require projects financed by the FCRHA to provide accessible where economically feasible.
- *Provide additional resources to address the needs of extremely-low income households, seniors, large-families, and persons with physical or mental disabilities.* Locate housing resources for special populations in all parts of the County as a way of improving accessibility to employment opportunities, County services, as well as

cultural and recreational amenities. Facilitate the development of single room occupancy residences and other types of permanent housing for homeless persons and families, as well as others in need of these housing options.

- *Enforce fair housing laws and nondiscriminatory practices in the sale and rental of housing to all citizens.*
- *Redesign of Domestic Violence service system making sheltering services community-based.*

Improved Affordability / Accessibility

- Partner with non-profits
- Put funding toward new priorities
- Provide rental subsidies
- Complete projects in the pipeline

Suitable Living Environment

- Reduce the risk of special needs populations becoming homelessness through better discharge procedures and coordination

<u>To Reduce the Waiting Lists by Half in 10 Years</u>

The County will address the FCRHA waiting list of 12,500 households, the 1,200 on the CSB waiting list, and the 100 on the shelter waiting list and address the FY 2011 rental assistance need for 690 households by several means. Examples of activities planned beginning in FY 2011 include, but are not limited to:

Improved Affordability / Accessibility

- *Bolster the existing resources,* by ensuring maximum lease-up in FCRHA programs and properties, establishment of a collaborative referral process with non-profit owners, and non-profit acquisitions using federal resources such as the HOME Community Housing Development Organization (CHDO) set-aside, and Neighborhood Stabilization Program (NSP) funds granted to Fairfax County.
- *Initiate other efforts to reduce waiting lists,* such as exploring tax exemption for developers of housing for persons earning extremely low-incomes, completion of FCRHA pipeline projects, and the use of voluntary cash contributions received from developers via the land use rezoning process to develop additional affordable units.
- *Provide additional funding to reduce waiting lists,* including potentially using local resources to complete the FCRHA development pipeline and fund non-profit operate rental subsidy programs and affordable housing development, in appropriated.

Improved Affordability / Accessibility

- Partner with non-profits
- Put funding toward new priorities
- Provide rental subsidies
- Complete projects in the pipeline

Suitable Living Environment

- Reduce the risk of special needs populations becoming homelessness through better discharge procedures and coordination

Housing Opportunities for People with AIDS (HOPWA)

Priority Areas: Definitions and Rationales

Over the next five years there is a need to assist 180 persons with AIDS/HIV (PWAs) with rental assistance and 120 with short term rent/mortgage utility payments.

Affordability

It is assumed that the current crisis in the housing market will contribute to the continued hardship of finding affordable housing for our clients. While it is anticipated that there will be more houses on the market for rent resulting from an influx of military and civilian personnel moving to the area due to the Base Closing and Realignment (BRAC) project, it is also anticipated that many landlords will be more selective in who they rent to. The availability of affordable housing units will be an issue that will continue to impact HOPWA clients for years to come. One possible method to address the shortage of affordable housing options in Fairfax County for this population will involve the conversion of HOPWA TBRA vouchers to a more permanent housing option. HIV/AIDS client are continuing to survive longer due to improved medical care and drugs and will continue to need housing support over the next ten years. Another trend appears to be that the clients are continually having the same crisis and need for assistance month after month. These clients are exhausting their entire 21 weeks of eligibility upfront and do not have clear plans for once their weeks have run out. Fewer clients are in a situation that would only require assistance one time.

Supportive Services

- Assistance in obtaining access to local, state, and federal benefits/services
- child care
- food assistance
- health care for persons living with HIV / AIDS
- legal assistance
- mental health or substance abuse treatment
- transportation

Obstacles

Eligibility

During FY 2009, HOPWA faced various challenges and barriers in both the TBRA and STRMU programs. One such barrier is the issue of clients, landlords, and referring workers returning the necessary documentation needed to process cases in a timely manner. For both the TBRA and STRMU programs this issue prolongs the application process and causes much distress for all participating parties. Due to this issue, NVFS has assigned a supervisor to manage these HOPWA programs to ensure that difficult situations are resolved, and that service delivery of the HOPWA programs is carried out efficiently and effectively.

Housing Affordability

In Northern Virginia, the cost of rental housing is increasingly high and approval standards are becoming more stringent. It is very difficult for HOPWA clients to obtain affordable housing, as most are on a fixed income. Clients are being turned down for various reasons, such as not meeting the income requirements, having poor credit, and landlords that are not willing to work with the HOPWA program. To remedy this issue HOPWA case managers have reached out to landlords that have and have not accepted our clients, through letters and publications, to educate them on the types of services HOPWA provides for our clients.

Case managers have also compiled a list of rental properties that have worked with current HOPWA clients in the past as well as information resources regarding housing options for our new clients. The goal is to provide as much information regarding affordable housing opportunities so that clients can secure decent, affordable housing and stabilize their health.

Lack of Employment

Lack of available employment is an increasing issue between both the TBRA and STRMU clients. Clients are losing their jobs for various reasons and it is becoming more and more difficult for the clients to regain employment. The direct negative impact on household income has serious repercussions for the clients' ability to remain healthy and independent.

Credit History

Credit issues continue to be a challenge for clients trying to find housing and as a result many clients are being denied access to rental housing. Access to private landlords who do not check a credit history is limited as there is no way to identify or keep a comprehensive list of units available. Clients must be aggressive in finding these and have to compete on the open market for these properties.

Education and Literacy

Another obstacle to the self-sufficiency goals of this population is the need to increase financial literacy skills, e.g., managing monthly budgets while subsiding on fixed incomes. These individuals will need to budget adequately in order to remain financially stable. It may be useful to require that clients enroll in financial literacy classes/training. It would also be helpful for service agencies to share information among themselves about the clients to whom they are providing services.

Table 63. Priority Needs for HOPWA

HOPWA	**Yr. 1 Goal Plan / Act**	**Yr. 2 Goal Plan / Act**	**Yr. 3 Goal Plan / Act**	**Yr. 4 Goal Plan / Act**	**Yr. 5 Goal** Plan/Act
Rental assistance	32	34	36	38	40
Short term rent/mortgage utility payments	20	22	24	26	28
Facility based housing development	NA	NA	NA	NA	NA
Facility based housing operations	N/A	N/A	N/A	N/A	N/A
Supportive services	N/A	N/A	N/A	N/A	N/A

Specific HOPWA Objectives (followed by Activities / Outcomes)

In November of 2004, the Northern Virginia Regional Commission (NVRC), acting as administrative agent for Housing Opportunities for Persons with AIDS (HOPWA) funds in the Virginia portion of the metro Washington Eligible Metropolitan Area (EMA), sought an Applicant or Applicants to provide services to establish and maintain low-income Persons Living with AIDS/HIV (PWAs) in housing who are living in 16 cities/counties in Virginia. Northern Virginia Family Services (NVFS) is the direct recipient of HOPWA funds and Fairfax County works with this agency in addressing the needs of HIV/AID clients. The County will continue to provide affordable housing using HOPWA funds administered through NVFS and other resources for persons with HIV/AIDS and their families through a comprehensive community plan.

1. Assist clients with affordable housing
2. Meet HUD's national goal of increasing the availability of decent, safe, and affordable housing for low-income persons living with HIV/AIDS through community-wide HIV/AIDS housing strategies
3. Promote community partnerships between State and local governments and community-based non-profits to create models and innovative strategies to serve the housing and related supportive service needs of persons living with HIV/AIDS and their families
4. Secure matched HOPWA funding to create comprehensive housing strategies through community-wide strategies Federal, State, local, and other resources
5. Identify and supply community strategies related to supportive services in conjunction with housing to ensure the needs of persons living with HIV/AIDS and their families are met
6. Provide Short-term Rent, Mortgage and Utility Assistance (STRMU)
7. Provide Tenant-Based Rental Assistance (TBRA)

Proposed Outcomes/Activities

HOPWA funds will provide services and housing to HIV / AIDS clients through several means.

Improved Affordability/Accessibility

- Assist 180 PWAs with rental assistance and 120 with short term rent/mortgage utility payments. Table below shows the planned number of households to be assisted with housing units that are considered affordable housing (using local definitions of affordability) or services using HOPWA funding during the 3-5 year period of time designated in the strategic plan

Improved Affordability/Accessibility

- Assist PWAs to assess their eligibility and apply for applicable public and private benefit programs that are funded by sources other than HOPWA or the Ryan White CARE Act,
- Help PWAs who are experiencing short-term needs for housing financial assistance to fund security deposits, first month's rent, and rental, mortgage and utility payments, and
- Administer tenant-based rental assistance (TBRA) to PWAs

Improved Affordability/Accessibility

- Leverage HOPWA funds from a variety of sources which will serve to bolster provision of the Tenant-Based Rental Assistance program, STRMU, and administrative oversight

Improved Affordability/Accessibility

- Allocate funds between families living throughout Fairfax County to provide rental assistance
- Allocate funds to support one part-time position, which monitors the cases and conducts the office interviews for recertification
- Allocate funds on the basis of severity and time of entry of participant onto the waitlist
- Support 180 households over the five-year period to allow PWAs to maintain stable housing and allowing them access to a case manager that helps provide information and referrals to outside sources for benefits, healthcare and other support when requested

- Provide 120 households with Short Term housing support allowing then to maintain their housing and/or maintain utility service and to have access to a case manager that could help provide information and referrals to outside sources
- Keep open the HOPWA waiting list so eligible clients can be added (The HOPWA waiting list, currently administered by the Northern Virginia Regional Commission, estimates that there are 240 persons from the Northern Virginia community on the waiting list.)

Improved Affordability/Accessibility

Short-term Rent, Mortgage and Utility Assistance (STRMU)

Funds are available to provide short-term rent, mortgage and utility (STRMU) assistance and security deposits/first month's rent to HOPWA-eligible PWAs. First month's rent and security deposits are classified as Project- and Tenant-Based Rental Assistance.

The purpose of STRMU is to prevent the homelessness of the tenant or mortgagor of a dwelling. STRMU assistance may be provided for a benefit period of up to 21 weeks in any given year. STRMU provided financial assistance to 17 households, 10 received assistance during FY 2008 and 2 received assistance during FY 2009. With all requests, clients and case managers complete an application for request of assistance. Funds were paid directly to vendors. There was a total of $46,947.27 in HOPWA funds that was expended on this activity. Overall, there were a total of 42 requests for assistance. There were 26 requests for rental assistance, 12 for utilities, and 1 for mortgage assistance. There were a total of 4 clients who received a combination of assistance; i.e. rent/mortgage and utilities. (Caper Draft FY 2009)

The FY 2009 HOPWA STRMU client population consisted of:

Table 64. HOPWA STRMU Client Population, FY 2009

Race/Ethnicity	July 08 – June 09
White	5
Black/African American	10
Asian	0
Hispanic	0
African	2
TOTAL	**17**
Gender	**July 08 – June 09**
Males 18-30	1
Males 31-50	3
Males over 50	3
Females 18-30	0
Females 31-50	8
Females over 50	2
TOTAL	**17**
Monthly Household Income	**July 08 – June 09**
$0-250	5
$251-500	4
$501-1000	1
$1001-1500	0
$1501-2000	5
Over $2000	2
TOTAL	**17**

HOPWA STRMU Client Demographics. Source: Caper Draft FY 2009.

- Prevent homelessness and establish stable housing by providing a limited number of clients with a security deposit and first month's rent and allowing clients access to a case manager that could help with providing information and referrals to outside resources (2 served in 2009)

Improved Affordability/Accessibility

<u>Tenant-Based Rental Assistance (TBRA)</u>

TBRA provides ongoing monthly financial assistance to landlords on behalf of tenants/clients who are enrolled in the program. This program enables low-income clients to pay their rent and utilities and maintain housing stability until there is no longer a need or until they are able to secure other affordable housing options. Northern Virginia Family Service served 30 Fairfax County clients during FY 2009.

The FY 2009 HOPWA TBRA client population consisted of:

Table 65. HOPWA TBRA Client Population, FY 2009

Race/Ethnicity	July 08 – June 09
White	5
Black/African American	22
Asian	1
Hispanic	2
African	0
TOTAL	**30**
Gender	**July 08 – June 09**
Males 18-30	0
Males 31-50	8
Males over 50	7
Females 18-30	1
Females 31-50	9
Females over 50	5
TOTAL	**30**
Monthly Household Income	**July 08 – June 09**
$0-250	2
$251-500	2
$501-1000	15
$1001-1500	5
$1501-2000	1
Over $2000	5
TOTAL	**30**

HOPWA TBRA Client Demographics, Source: Caper Draft FY 2009

- Prevent homelessness and establish stable housing by providing a limited number of clients ongoing monthly financial assistance to landlords on behalf of tenants/clients who are enrolled in the program (30 served in FY 2009)

Table 1C
Summary of Specific Housing/Community Development Objectives: *Housing*

Blueprint Goal	Objective #	Specific Objectives	Sources of Funds	Performance Indicators	Expected Number	Actual Number	Outcome Objective*
		Homeless Objectives					
1	**1, 2, 3; 8**	Provide housing units affordable to homeless individuals	**HOME**, **CDBG**, other federal, local	Number of individuals provided permanent housing opportunities	560		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
1	**1, 2, 3; 8**	Provide housing units affordable to homeless families	**HOME**, **CDBG**, other federal, local	Number of households provided permanent housing opportunities	776		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
		Special Needs Objectives					
2	**2, 3; 8**	Provide housing units affordable to persons with physical disabilities	**HOME**, **CDBG**, other federal	Number of FCRHA-owned units converted to accessibility	51		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
2	**2, 3; 8**	Provide housing units affordable to persons with mental disabilities (including persons with alcohol and drug abuse)	**HOME**, **CDBG**, other federal	Number of persons served	230		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
2	**2, 3; 8**	Provide housing units affordable to low-income elderly persons (independent living units)	**HOME**, **CDBG**, other federal, local	Number of new, unduplicated households served	331		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
2	**2, 3; 8**	Provide housing units affordable to low-income elderly persons (assisted living)	**HOME**, **CDBG**, other federal, local	Number of new, unduplicated individuals served	55		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
2	**2, 3; 8**	Provide housing units affordable to persons with HIV/AIDS	**HOPWA**, other TBD	Long-term clients served; clients served by short-term rental assistance	180 long-term/ 120 short-term		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3
2	**2, 3; 8**	Provide housing units affordable to persons with Developmental Disabilities	**HOME**, **CDBG**, other federal	Number of persons served	70		DH-1, DH-2, DH-3, SL-1, SL-2, SL-3

Table 1C Continued (HOUSING)

Blueprint Goal	Objective #	Specific Objectives	Sources of Funds	Performance Indicators	Expected Number	Actual Number	Outcome Objective*
		Other Objectives					
3	**3 - 8**	Provide affordable *rental* housing units to persons with low and extremely-low incomes	**HOME**, **CDBG**, other federal, local	Number of new, unduplicated households served	1890		DH-1, DH-2, DH-3, EO-1, EO-2, EO-3
3	**3, 4, 5; 8**	Provide affordable *homeownership* opportunities to persons with low and extremely-low incomes	**HOME**, **CDBG**, other federal, state, local	Number of new, unduplicated households served	320		DH-1, DH-2, DH-3, EO-1, EO-2, EO-3
3	**7, 8**	Continue Family Self Sufficiency Program in both Public Housing and Housing Choice Voucher programs	Other federal	New unduplicated households participating in FSS program	50		EO-1, EO-2, EO-3
4	**4, 5, 8**	Provide sufficient workforce housing through 1) land use policy; and 2) private sector partnerships	**HOME**, **CDBG**, other federal, state, local	Number of new units delivered	620		DH-1, DH-2, DH-3, EO-1, EO-2, EO-3

*Outcome Codes

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

Objective codes

Objective Number	Objective Description
1	Provide housing units affordable to homeless individuals and families
2	Provide housing units affordable to persons with physical or mental disabilities, including persons with HIV/AIDS
3	Provide housing units affordable to households with low to extremely-low incomes (<50 percent MFI) and other special needs populations
4	Provide sufficient workforce housing through land use policy
5	Provide sufficient workforce housing through private sector partnerships
6	Preserve existing Public Housing
7	Promote resident self-sufficiency
8	Foster coordination and partnerships

Non-housing Community Development

Fairfax County has identified three broad categories within non-housing community development:

- Community Services
- Employment and Economic Opportunities
- Neighborhood Preservation, Residential and Commercial Revitalization

Consistent with the County's Housing Blueprint, the County's non-housing community development priorities reflect the philosophy of the Board that affordable housing is a continuum ranging from the needs of the homeless to first-time homebuyers. This continuum requires that non-housing community development priorities complement the County's housing priorities.

The County's priorities for non-housing Community Development reflect the goals to:

1. To End Homelessness in 10 Years
2. To Provide Affordable Housing Options to Those with Special Needs
3. To Reduce the Waiting Lists for Affordable Housing by half in 10 Years
4. To Produce Workforce Housing Sufficient to Accommodate Projected Job Growth

Specific Non-Housing Community Development Goals and Objectives

Goal 1: ***Community Services:*** *Maintain and strengthen a safe, healthy and vibrant community through a human service system that is responsive to all populations and their diverse needs including children, the elderly, persons with disabilities, or those with other special needs, with emphasis on benefiting low and moderate income persons and families.*

Objectives:

1.6 Promote healthy, positive child and youth development through a community support system that meets the diverse needs of all children and provides positive alternatives that help in the prevention of gang activity.

1.7 Identify gaps and develop strategies to meet critical current and emerging service needs in the community.

1.8 Encourage and support a coordinated public and private network of community services that fosters stability and maximizes independence of individuals and families.

1.9 Promote a human service system that ensures residents are able to meet basic and emergency human needs, that emphasizes prevention and early intervention to minimize crises and that preserves individual and family stability.

1.10 Encourage best practices, sensitivity to cultural differences and enhanced performances in service delivery to ensure residents receive high quality services as needed.

Goal 2: ***Employment and Economic Opportunities:*** *Reduce poverty and foster self-sufficiency by using public and private resources to provide essential training and support services, and by encouraging employment opportunities and development of business.*

2.6 Strengthen current job skill training and employment programs to prepare potential workers for better job opportunities and strengthen communication and partnerships with employers to remove barriers and to improve access to and increase the number of job placements in enhanced employment, especially for families with low income.

2.7 Promote training and educational opportunities for workers to gain skills necessary for jobs that provide wages for individuals and families to be self-sufficient and that support family stability.

2.8 Strengthen the provision and flexibility of supportive services for individuals to begin new jobs or continue in existing jobs by ensuring they have access to affordable child care, disabled adult and elderly care, transportation, English as a Second Language programs and/or other needed support.

2.9 Support community efforts in the development and assistance to micro-enterprises and small businesses to reduce small business failures and to retain and create more jobs.

2.10 Ensure that the commercial revitalization program serves as a resource to achieve a portion of these objectives.

Goal 3: ***Neighborhood Preservation, Residential and Commercial Revitalization:*** ***In commercial and residential areas that are vulnerable to instability, facilitate reinvestment, encourage business development, promote public and private investment and reinvestment, preserve affordable housing and prevent or eliminate the negative effects of disinvestment and foreclosures.***

3.4 Develop strategies of prevention and early intervention in communities in danger of deterioration to reduce the need for greater community investment and improvements in the future. Continued implementation of Board Foreclosure Strategy.

3.5 Review existing plans for Conservation Areas, Redevelopment Areas, residential Revitalization Areas, Commercial Revitalization Districts and Commercial Revitalization Areas to promote a comprehensive and coordinated approach to meeting community development needs while maintaining the affordable housing stock and the unique character of each community.

3.6 Build on community strengths and involve the residents in decision making on needs, priorities, plans, improvements, and solutions to community concerns; in cooperation with the county's Code Enforcement Strike Team.

Community Services

Priority Area: Safe, Appropriate and Affordable Housing

Falling within the County's commitment to Community Services is the affordable housing goal to preserve existing affordable housing and increase the availability of affordable, permanent and supportive housing, both rental and homeownership, which is accessible and in close proximity to employment opportunities and transportation, and which promotes fair housing throughout Fairfax County. The County is directing resources to address the foreclosure problem. A result of the housing crisis is a rising number of foreclosures. There were 951 net foreclosures in September 2009.

The needs indicator for this priority is the number renters and owners with incomes below 80 percent of the Area Median Income (AMFI) with housing problems in 2005-2007, as reported in the 2009 CHAS data. The needs of homeless families and individuals are also included under this priority. The Housing Options Task Force used information provided by the Continuum of Care survey and other data to estimate a need for 2,650 additional units/permanent housing for homeless individuals and families over the next 10-year period.

Fairfax County's Affordable Dwelling Unit Program (ADU) is open to households earning up to 70 percent of AMI. There were 74,175 households with incomes below 80 percent of AMI with housing problems (35,350 renters and 38,825 owners). Nearly a quarter of extremely-low renter households were elderly households. However, elderly owner households were even more likely to have housing problems. Of all owner households with incomes below the 80 percent AMI threshold with housing problems, 28.7 percent were elderly households. Of the extremely low-income owner households with housing problems, 41 percent were elderly households. Of the 74,175 households with moderate or below incomes with housing problems, 6,355 had mobility and self-care limitations.

The Workforce Housing policy is designed foster private-sector development of a sufficient supply of housing affordable to working households earning up to 120 percent of AMI. There are 11,365 renters and 21,160 owners with incomes between 80 and 120 percent AMI with housing problems. Adding these to households with incomes below 80 percent AMFI brings the total households with housing problems considered under this priority to 106,700. (Note that some households who would be eligible for the Workforce Housing Program do not currently live in the County and therefore would not be represented in these figures.)

Justification for Non-Housing Priority Needs (Cross Cuts throughout this Section)

Providing opportunities for families and individuals to move to stable permanent housing is a priority of the County along with providing programs and services that support that goal. With limited resources, those in the most need should be considered first. Preventing homelessness through programs and services targeted at low-income households with severe cost burdens and persons with a physical or mental disability will reduce the need for greater intervention in the future.

The goals set by Fairfax County for the next five years reflect the understanding that there are numerous advantages to having housing affordable to households of all income levels that is located in close proximity to employment. These advantages include less stress and expense for workers, less commuting resulting in reduced traffic congestion and travel time, and a better quality of life. A critical advantage is that the economic health and vitality of a

community can be enhanced if essential workers (such as first responders, teachers, healthcare and sales workers) can afford to live in the community where they work, or can be hindered if workers cannot afford to live in the community.

Gainful employment and the resulting enhancement of income provide an opportunity for greater self-sufficiency for low-income households. Job training and supportive services can enable those most in need to achieve independence and economic success within the County.

Obstacles (Cross Cuts throughout this Section)

The following are obstacles to meeting underserved needs:

- Language barriers. With new immigrant populations settling in the County, County service providers are learning how to serve them and members of these populations are learning how to access services.
- Transportation system
- Magnitude of needs compared to resources
- Lack of adequate information for clients to access services
- Lack of child care. Related to this is the lack of affordable child care and child care at hours needed for those working jobs with non-traditional hours.
- Increase in low-income housing needs
- Code requirements make it difficult for low-income homeowners to improve their properties and bring them up to current standards
- The economic crisis has had almost no impact on rents while incomes are down or lost
- Not In My Back Yard (NIMBY)
- Meeting community facility needs for an increasing population both in size and age
- Inadequate federal funding
- High rate of foreign immigration
- Diminishing supply of land for development
- Challenges of redevelopment (land assembly, costs, neighborhood resistance)
- Competing demands for public services

Table 2B
(This table serves for all of the Non-housing Community Development section)
Priority Community Development Needs

Priority Need	Priority Need Level	Unmet Priority Need*	Dollars to Address Need*	5 Yr Goal Plan/Act *	Annual Goal Plan/Act *	Percent Goal Completed *
Acquisition of Real Property	X					
Disposition						
Clearance and Demolition						
Clearance of Contaminated Sites						
Code Enforcement	X					
Public Facility (General)	X					
Senior Centers	X					
Handicapped Centers	X					
Homeless Facilities						
Youth Centers						
Neighborhood Facilities	X					
Child Care Centers						
Health Facilities						
Mental Health Facilities						
Parks and/or Recreation Facilities						
Parking Facilities						
Tree Planting						
Fire Stations/Equipment						
Abused/Neglected Children Facilities						
Asbestos Removal						
Non-Residential Historic Preservation						
Other Public Facility Needs						
Infrastructure (General)						
Water/Sewer Improvements	X					
Street Improvements	X					
Sidewalks	X					
Solid Waste Disposal Improvements						
Flood Drainage Improvements						
Other Infrastructure						
Public Services (General)	X					
Senior Services						
Handicapped Services						

Legal Services						
Youth Services						
Child Care Services						
Transportation Services						
Substance Abuse Services						
Employment/Training Services						
Health Services						
Lead Hazard Screening						
Crime Awareness						
Fair Housing Activities	X					
Tenant Landlord Counseling						
Other Services						
Economic Development (General)						
C/I Land Acquisition/Disposition						
C/I Infrastructure Development						
C/I Building Acq/Const/Rehab						
Other C/I						
ED Assistance to For-Profit	X					
ED Technical Assistance	X					
Micro-enterprise Assistance	X					
Other	X					

*****Note: These columns are optional and were intentionally left blank.

The Consolidated Community Funding Pool

The mission of the Consolidated Community Funding Pool (CCFP) is to provide a pool of funds to be awarded on a competitive basis for housing and human service programs offered by community-based agencies. The Department of Housing and Community Development (HCD) and the Department of Administration for Human Services (DAHS) have oversight responsibility for this funding pool.

The formation of the CCFP began in FY 1997, when the Board of Supervisors' approved the development and the implementation of a competitive funding process to fund services best provided by community-based agencies and organizations. These organizations were formerly funded through a contribution or through a contract with an individual County agency. In accordance with the Board's direction, this process was operational in FY 1998 and was guided by the following goals:

- Provide support for services that are an integral part of the County's vision and strategic plan for human services
- Serve as a catalyst to community-based agencies, both large and small, to provide services and leverage resources
- Strengthen the community's capacity to provide human services to individuals and families in need through effective and efficient use of resources
- Help build public/private partnerships and improve coordination, especially within the human services regions of the County

Fund 118 was established in FY 1998 to provide a budget mechanism for this funding process. In FY 2000, Community Development Block Grant (CDBG) funding for community-based organizations was incorporated to form the CCFP. The CCFP process reflects significant strides to improve services to County residents and to usher in a new era of strengthened relations between the County and community nonprofit and faith-based organizations. First, all programs funded through this process are required to develop and track program outcome measures. To aid agencies in meeting this requirement, the County has provided several performance measurement training opportunities for staff and volunteers from all interested community-based agencies. Second, the criteria used to evaluate the proposals explicitly encourage agencies to leverage County funding through strategies such as cash match from other non-County sources, in-kind services from volunteers or contributions from the business community and others. Third, the criteria encourage agencies to develop approaches which build community capacity and involve residents and the individuals and families in the neighborhoods being served. Fourth, the County has provided a nonprofit organizational development initiative to strengthen current and potential CCFP applicant organizations.

Continued efforts have been made to streamline the funding process for both County and community-based agencies. FY 2010 is the eleventh year of a consolidated process for setting priorities and awarding funds from both the CCFP and CDBG processes.

FY 2010 initiatives include:

- Continue utilization of the two-year contract awards cycle for agencies receiving funds through the CCFP.
- Provide ongoing technical assistance and contract management oversight and support to nonprofit recipients of CCFP funds.
- Promote approaches which build community capacity and leadership and the involvement of residents and, where feasible, the population being served in the targeted communities.

- Review documented service needs and demographic trends and continue to gather relevant information from public meetings, reports and studies, and data from County and nonprofit human service agencies.

A major responsibility of the CCFAC is to recommend funding priorities for the CCFP. The CCFAC maintains an ongoing process for the review and analysis of both data and community input that provides the information on which funding priority allocations are based. Community input processes include a variety of citizen and provider input activities conducted throughout the year around the County. Subsequent to the receipt and review of public comments, the CCFAC finalizes the funding priorities and forwards them to the Board of Supervisors for action.

On July 13, 2009, the Fairfax County Board of Supervisors approved the priorities for the Fiscal Year 2011-2012 cycle for the Consolidated Community Funding Pool. Table 64 lists the four priority areas and the target percentage range for each, with a comparison to the proportion of awards in the current FY 2009-2010 CCFP cycle. In response to community input, the CCFAC recommended, and the Board approved, an increase in the target percentages for Crisis Intervention and Ongoing Assistance, which required lowering the target range for Prevention and Self-Sufficiency.

Table 66. Consolidated Community Funding Pool, FY2011-2012 Priorities

Priority	Outcome Statement	Target Funding Percentages	Percentage of Awards in FY 2009-2010
I. PREVENTION	Families and individuals remain independent and have the tools and resources to prevent dependence; communities increase their ability to develop and provide preventive services.	10% to 20%	17%
II. CRISIS INTERVENTION	Individuals, families, or communities in crisis overcome short-term problems and quickly move back to independence.	15% to 25%	13%
III. SELF-SUFFICIENCY	Families, individuals, neighborhoods, and communities address multiple needs to attain self-sufficiency.	45% to 55%	63%
IV. ONGOING ASSISTANCE	People, neighborhoods, and communities that have continuing and long-term needs achieve or maintain healthy, safe, and independent lives to the maximum extent possible.	10% to 20%	7%

The CCFP is funded from federal CDBG funds for Targeted Public Services and Affordable Housing; federal Community Services Block Grant (CSBG) funds; and local Fairfax County General Funds. Although the process for setting priorities and awarding funds has been consolidated, Fund 118 contains only the local Fairfax County General Fund and CSBG portion of the funds. The federal CDBG funds remain in Fund 142, Community Development Block Grant, for grant accounting purposes.

The County's Community Services Goal is to maintain and strengthen a safe, healthy and vibrant community through a human service system that is responsive to all populations and their diverse needs including homeless individuals and families, children, the elderly, persons with physical or mental disabilities, or those with other special needs, with emphasis on benefiting low and moderate income persons and families.

The priorities and associated objectives within the Community Services category help determine how the Consolidated Community Funding Pool resources are allocated.

Long-term Objectives (followed by Proposed Activities/Outcomes)

1. Support the County's goal to preserve the existing housing supply and to increase the supply of affordable housing, including supportive housing and homeownership opportunities, to meet the range of housing needs in the County.

Improved Affordability/Accessibility

- Assist in the preservation of affordable housing to meet the challenge of preserving the County's diminishing supply of affordable housing
- Support housing development and preservation activities and policies that are consistent with the Consolidated Plan household priorities, particularly for publicly-assisted units, and encourage housing developments that are accessible to employment centers and community and transportation services
- Encourage and support strategies that preserve the County's affordable rental housing stock, including Section 8 rental units having the potential to be lost from the affordable housing inventory due to owner's prepayment and opt-out of the Section 8 program
- Support expansion of the successful Housing Choice Voucher Homeownership Program and ensure residents are able to effectively utilize vouchers to purchase units under the County's First Time Homebuyer's Program
- Promote the development of affordable and accessible housing in both mixed-use centers and existing residential areas, as appropriate, in an effort to diversify the housing stock and expand lower cost housing options
- Enhance opportunities for County residents to live in proximity to their workplace and/or in proximity to mass transit
- Encourage the creation of accessory dwelling units as a means of increasing the supply and distribution of safe and decent affordable housing
- Seek proffers from private developers
- Identify county surplus land for future needs

Suitable Living Environment

- Incorporate the principles of universal design in FCRHA renovated and newly constructed units
- Increase the coordination between the housing needs and the supportive service needs of special populations such as the independent elderly, the disabled elderly, non-elderly persons with physical or mental disabilities of all kinds
- Provide public facilities to help those in the greatest need achieve greater independence and economic security

Economic Opportunity

- Emphasize the vital link between having a range of affordable housing and the employment base and economy of the County

Short-term Objectives (followed by Proposed Activities/Outcomes)

1. Support the County's goal to preserve the existing housing supply and to increase the supply of affordable housing, including supportive housing and homeownership opportunities, to meet the range of housing needs in the County (5 years)

Improved Affordability/Accessibility

- Support programs From Subsidies to Homeownership: Implement HUD Resident Opportunity and Self-Sufficiency (ROSS) grant-funded Public Housing Homeownership Program. Target families in the "Flat Rent Program"

and those participating in the Family Self-sufficiency (FSS) program.

- Coordinate access for first-time homebuyers to Fairfax County's allocation of below-market financing from the Virginia Housing Development Authority. Available to both ADU purchasers and first-time buyers purchasing housing in the market.
- Support First-Time Homebuyers Program: Provides financing and access to homeownership training for Fairfax County first-time homebuyers. Administers for-sale ADUs.
- Provide County-owned Land for Affordable Housing: Encourage public/private partnerships for the development of workforce and affordable housing on County-owned land. Includes Kingstowne Library site and potential east and north county government center sites.
- Develop additional and/or alternative resources and strategies to maintain a coordinated system of appropriate accessible housing options, programs and supportive services

Suitable Living Environment

- Provide post-purchase Monitoring and Counseling: Aggressive monitoring of ADU purchasers to ensure continued compliance with covenants, particularly with respect to over-financing. Provide access to enhanced post-purchase education to maximize the number of successful homebuyers and prevent foreclosure.
- Support Housing Information Center: Determine feasibility of expanding the homeownership storefront at Pender Drive, to address the housing information needs of Fairfax County's disabilities community, or to help individuals (disabled/elderly/those facing emergencies) stay in their home.
- Support Partnership for Permanent Housing Program. Assist homeless families currently living in Fairfax County homeless shelters and transitional housing units who, with assistance, guidance and supportive services, have the potential to become homeowners. This program is an important link to the countywide effort to end homelessness in 10 years.
- Support Consolidated Community Funding Pool: Management of CCFP process, including support for the Consolidated Community Funding Advisory Committee
- Adopt SRO/RSU ordinance in FY 2011

Economic Opportunity

- Continue Workforce Housing Initiatives: Implementation of the County's workforce housing policy in coordination with the Department of Planning and Zoning. As of the end of September 2009, 1,070 Workforce Housing Units have been proffered by developers in rezoning actions approved by the Board of Supervisors.

2. Provide foreclosure assistance to homeowners in distress and opportunities for recapturing foreclosed properties (five years)

Improved Affordability/Accessibility

- Coordinate counseling efforts with VHDA
- Continue Silver Lining Programs on a limited basis using HOME funds as NSP funding ends in FY 2010

Suitable Living Environment

- Reduce Foreclosures: Assistance to Homeowners in Distress: As a part of Fairfax County's response to the foreclosure crisis, HCD and other county agencies and nonprofits will coordinate counseling efforts with VHDA
- Improve neighborhoods through reduction of vacant properties

Economic Opportunity

- Continue to provide incentives to non-profits to purchase foreclosure properties
- Continue to provide first-time homebuyer support for purchasing foreclosed properties

3. Increase the number of affordable workforce housing units (five years)

Economic Opportunity

Examples of the activities planned to achieve this goal starting in FY 2011 include:

- *Bolstering the existing resources* through units delivered by private developers under the county's Workforce Housing Policy and the county's Affordable Dwelling Unit (ADU) program, as well as the county's homeownership programs and the development of affordable housing on county-owned land.
- *Initiate other efforts to increase workforce housing* via county land use policy and other means.

4. Provide public facilities in support of those with the greatest need (five years)

Suitable Living Environment

- Operate nine community centers that provide a variety of services to citizens identified with priority needs in the Consolidated Plan, including programs for adults, children, teens, and active seniors, as well as after-school, mentoring, and sports programs.

  - Bailey's Community Center
  - Gum Springs Community Center
  - Huntington Community Center
  - James Lee Community Center
  - Mott Community Center
  - David R. Pinn Community Center
  - Sacramento Neighborhood Center
  - Southgate Community Center
  - Willston Multicultural Center

Priority Area: Creating Quality Living Environments

The needs indicator for this priority is the number households with moderate or below incomes, as reported in the 2009 CHAS data. There were 105,360 households in 2005-2007 with moderate or below incomes. This included 59,760 families and 45,595 non-family households. Within the universe of households, there were 29,200 elderly households and 9,820 households with physical mobility and self-care limitations.

The needs of homeless families and individuals are also included under this priority. The Housing Options Task Force used information provided by the Continuum of Care survey

and other data to estimate a need for 2,650 additional units/permanent housing for homeless individuals and families over the next 10-year period.

Long-term Objectives (followed by Proposed Activities/Outcomes)

1. Support the County's goal to end homelessness in 10 years and help populations with the greatest need through strengthening individual and family stability by providing a range of services and facilities. (10 years)

Improved Affordability/Accessibility

- Develop additional and/or alternative resources and strategies to maintain a coordinated system of appropriate accessible housing options
- Encourage, support and evaluate County strategies and community efforts annually to maximize affordable and fair housing choices for residents and to determine if the County is making progress or losing ground

Suitable Living Environment

- Develop additional and/or alternative resources and strategies to maintain a coordinated system of appropriate programs and supportive services
- Incorporate a goal of self-sufficiency across all supportive programs

Economic Opportunity

- Develop additional and/or alternative resources and strategies to maintain a coordinated system of programs to enhance job training, and employment so that homeless persons can obtain permanent housing and maintain self-sufficiency

Short-term Objectives (followed by Proposed Activities/Outcomes)

1. Support the County's goal to end homelessness in 10 years and help populations with the greatest need through strengthening individual and family stability by providing a range of services and facilities. (5 years)

Improved Affordability/Accessibility

- Require universal design features in new developments when feasible
- Provide funding to the Human Services Commission to investigate and monitor fair housing complaints and issues
- Provide funding to the Human Services Commission for outreach and education on fair housing

Suitable Living Environment

- Implement a communication strategy which educates and raises public awareness, facilitates interagency collaboration and advocates for the needs of homeless persons
- Develop solutions for homeless issues by expanding the level of expertise and coordination within the community through the improved discharge policy
- Develop sufficient and sustainable resources to support homeless services and programs
- Overcome barriers associated with delivery of supportive services to homeless persons (e.g., reliable contact information or coordination of client services among various providers)
- Support prevention efforts, including emergency assistance and crisis intervention to prevent homelessness

- Increase the coordination between the housing needs and the supportive service needs of special populations such as homeless individuals and families, independent elderly, the disabled elderly, non-elderly persons with physical or mental disabilities
- Provide outreach, transportation, and other access services for the frail or persons with physical or mental disabilities
- Provide home-based services - respite and personal care
- Provide health and dental services
- Provide mental health and substance abuse services
- Continue Family Self-Sufficiency Program: Continuation of the program while recognizing the close relationship between Welfare-to-Work and Affordable Housing
- Provide educational services, such as employment-related English-for-speakers-of-other-languages (ESOL) programs
- Provide programs for child care
- Provide case management
- Provide mentoring and parenting programs
- Support life skills oriented literacy programs and non-employment-related ESOL
- Provide child abuse/domestic violence prevention services
- Provide Legal assistance regarding family matters
- Provide opportunities for leisure activities that promote health, well-being, and integration into the community
- Provide cultural adaptation and orientation programs
- Provide immigration assistance and citizenship preparation programs
- Provide activities that increase cultural awareness and improved responsiveness to needs associated with diverse cultures
- Provide emergency assistance
- Provide financial and consumer-related legal assistance
- Provide consumer education to prevent future crises

Employment and Economic Opportunities

Fairfax County's Economic Opportunity goal is to reduce poverty and foster self-sufficiency through county policies and supportive programs including essential training, housing opportunities, and encouraging employment opportunities through business development.

The needs indicator for this priority is the number households with moderate or below incomes, as reported in the 2009 CHAS data. There were 105,360 households in 2005-2007 with moderate or below incomes. This included 59,760 families and 45,595 non-family households. Within the universe of households, there were 29,200 elderly households and 9,820 households with physical mobility and self-care limitations.

Non-elderly households are the most likely to include adults who are in or can enter the labor force. There were 76,155 non-elderly households with moderate or below incomes in 2005-2007 (data are not available for non-elderly household with incomes between 80 percent and 120 percent AMFI).

Another needs indicator for this priority includes groups who may need special training. Ethnic minorities might have special needs for English-for-speakers-of-other-languages (ESOL) programs. The 2009 CHAS reported 17,995 Asians and 19,120 Hispanics with incomes under 80 percent AMFI (data are not available for ethnic minority households with incomes between 80 percent and 120 percent AMFI).

The County will address the need for 63,660 net new housing units affordable to households earning up to 120 percent MFI based on projected job growth through 2025 (source: George Mason University through bolstering existing resources and initiating other efforts.

The Workforce Housing Program is open to households earning up to 120 percent AMFI. There are 19,565 renters and 49,735 owners with incomes between 80 percent and 120 percent AMFI. Adding these to households with incomes below 80 percent AMFI brings the total households considered under this priority to 174,660. (Note that some households who would be eligible for the Workforce Housing Program do not currently live in the County and therefore would not be represented in these figures.)

Priority Area: Workforce Housing

Fairfax County along with the Northern Virginia region has been the economic engine of the Commonwealth of Virginia for the past few decades and is even more so during this time of economic crisis. Fairfax County's economic vitality is directly related to the way in which future job growth and residential growth are accommodated by the County. Fairfax County has set as one of its highest priorities to provide housing for their workforce.

The need for economic growth is recognized in the Fairfax County Comprehensive Plan as fundamental to the health and vitality of the community. Both human service advocates and developers have recognized the advantages of locating housing in proximity to employment opportunities: reduced commuting and traffic congestion, less travel time, stress and expense for workers, opportunities for increased leisure activities and an improved quality of life. The availability of *affordable* housing near employment centers facilitates movement of low-income and homeless people toward greater self-sufficiency. Accessibility of this housing for elderly and persons with physical or mental disabilities increases their potential to earn income and live independently.

The George Mason University Center for Regional Analysis evaluated the future need for affordable and workforce housing in Fairfax County based on projected job growth. In 2007, Fairfax County had approximately 674,000 jobs, rivaling the District of Columbia as a job center. At that time, the Center for Regional Analysis projected that Fairfax County would add nearly 200,000 jobs by 2025 – an increase of 29 percent. The GMU study concluded that Fairfax County's economic vitality is "inextricably tied" to its response to the need for affordable workforce housing, and that the county's continued growth is "highly dependent" on the availability of housing that is "affordable to workers from the full spectrum of the economy". The Center for Regional Analysis further concluded that "failing to plan for a balanced supply of housing in the future will reduce the County's opportunities for economic growth", resulting in the out-migration of businesses, reduced availability of personal and business services, and a decline in "livability. This substantial connection to workforce housing affects all the priorities of community development. New workers in the accommodation and food services, administrative support, waste management, health and social assistance services, and education services sectors were anticipated to "have the most difficulty finding affordable housing" in Fairfax County.

Fairfax County Workforce Housing Policy - In the fall of 2007, the Board of Supervisors took a groundbreaking step toward meeting the challenge of producing the 63,660 new affordable workforce housing units George Mason University estimates that Fairfax County will need by 2025: the Board created Fairfax County's new Workforce Housing Policy, via amendments to the Comprehensive Plan and the Zoning Ordinance.

The amendment to the Comprehensive Plan created a proffer-based incentive system designed to encourage the voluntary development of new housing affordable to a range of moderate-income workers earning up to 120 percent of the Area Median Family Income (AMFI) in Fairfax County's high-rise/high-density areas. The Plan now provides for a density bonus of up to one unit for every workforce unit provided by a developer, with the expectation that at least 12 percent of units in new developments be affordable or workforce housing. The amendment to the Zoning Ordinance accommodates any density bonus associated with the provision of workforce units through proffered rezoning applications. Other amendments to the Comprehensive Plan as a part of this action by the Board included:

- Expanding the definition of "Affordable Housing" to include "Workforce Housing," to recognize that persons living in units produced under the Affordable Dwelling Unit (ADU) program and other Fairfax County housing programs represent a critical segment of Fairfax County's workforce;
- Adding a definition of "Workforce Housing" to include rental and for-sale housing affordable at up to 120 percent of the AMFI, and stating that the intent of the Workforce Housing initiative is to encourage affordable housing in Fairfax County's Mixed-Use Centers (such as Tyson's Corner); and
- Adding a policy that ADUs and Workforce Housing Units shall constitute a minimum of 12 percent of all new residential units.

The Board's actions implemented, as policy, the major recommendations of the Board-appointed High-rise Affordability Panel. The Panel was appointed by the Board to develop policies to promote the development of new affordable housing in projects using high-rise construction. The Panel worked for nearly two years to develop its recommendations, which included the 12 percent affordable/workforce housing expectation, bonus density, and the income range implemented by the Board's actions.

As of September 2009, a total of 1,070 Workforce Dwelling Units had been committed by

private developers in rezoning actions approved by the Board of Supervisors, representing about 1.6 percent of the 63,660 units needed by 2025. It is anticipated that the first of these units will be delivered in FY 2011.

The FCRHA is responsible for implementing and managing the County's workforce housing policy.

Long-term Objectives (followed by Proposed Activities/Outcomes)

One of the highest priorities set by the Housing Blueprint is to expand Workforce Housing through private partnerships.

1. To increase workforce housing through creative partnerships and public policy

   Improved Affordability/Accessibility
   - Produce Workforce Housing sufficient to accommodate projected job growth
   - Reduce the waiting list for affordable housing

   Suitable Living Environment
   - Keep workers vital to the community living in the community making it safer and a better place to live

   Economic Opportunity
   - Provide workers for area employers
   - Bolster the existing resources through units delivered by private developers under the county's Workforce Housing Policy and the county's Affordable Dwelling Unit (ADU) program, as well as the county's homeownership programs and the development of affordable housing on county-owned land.
   - Initiate other efforts to increase workforce housing via county land use policy and other means.

2. Reduce poverty and foster self-sufficiency by using public and private resources to provide essential training and support services, and by encouraging employment opportunities and development of business (10 years)

   Economic Opportunity
   - Provide employment services for all populations, such as skills training, job readiness, job-related life skills, job placement, and job retention
   - Provide services to enable persons with physical or mental disabilities to obtain or retain employment and skill training
   - Small business development
   - Implement programs to increase the economic health and capacity of communities

Short-term Objectives (followed by Proposed Activities/Outcomes)

1. Continue Workforce Housing Initiatives (5 years)

   Economic Opportunity
   - Manage the Workforce Housing Program
     - Bolster the existing resources through units delivered by private developers under the county's Workforce Housing Policy and the county's Affordable Dwelling Unit (ADU) program, as well as the

county's homeownership programs and the development of affordable housing on county-owned land.
- Initiate other efforts to increase workforce housing via county land use policy and other means.

2. Reduce poverty and foster self-sufficiency by using public and private resources to provide essential training and support services, and by encouraging employment opportunities and development of business. (5 years)

Economic Opportunity

- Provide transportation related to employment/education
- Assist individuals in obtaining, maintaining, and increasing employment or language skills necessary to succeed in the workplace, and in finding and maintaining employment that leads to independence
- Assist individuals to acquire knowledge about workplace norms, practices, and expectations
- Enable individuals to be employed or to increase their skills because of the availability of child care assistance or transportation
- Educate, represent, or advise families and individuals regarding financial and consumer legal matters
- Continue support for workforce development as coordinated through the Northern Virginia Workforce Investment Board, a team of private and public sector partners promoting the economic prosperity and long-term growth of Northern Virginia with a mission to advance an integrated, highly responsive workforce investment system that gives businesses and job seekers the tools they need to stay competitive in today's global marketplace by:
  - Equipping businesses with the skilled workers, up-to-the-minute labor market information, and inside resources that help them work smarter and build their bottom lines.
  - Providing job seekers with the skills training, self-exploration tools, and job search resources that put rewarding, sustaining careers well within their reach.
  - Giving youth the opportunities for self-assessment, career exploration, and hands-on work experience.
  - Helping entrepreneurs with knowledge and resources to start new enterprises and expand existing ones

<u>Other Programs Promoting Employment and Economic Opportunities</u>

<u>SkillSource Centers delivering one-stop employment programs</u> partner with agencies such as Fairfax County Public Schools, Virginia Employment Commission, and the Department of Rehabilitative Services to provide services such as: GED preparation and testing, work-readiness training, unemployment insurance filing, and customized computer training. Individuals from every level of the workforce access services at these SkillSource Centers, including families seeking to earn a living wage, dislocated workers from entry-level to highly specialized occupations, and youth looking to enter the workforce.

<u>Workforce Investment Act -- Adults and Dislocated Workers Program Program</u>, under Title I of the Workforce Investment Act of 1998, is designed to provide quality employment and training services to assist eligible individuals in finding and qualifying for meaningful employment, and to help employers find the skilled workers they need to compete and succeed in business.

Workforce Investment Act-Youth Workforce Development Program (YWDP) is designed to assist youth 14 though 21 years of age who are experiencing difficulties that place them at risk of: not completing school, being influenced by a negative environment, and facing difficulties to obtain employment. The YWDP program accepts referrals from school personnel, social services, community organizations, self-referrals and a variety of other sources throughout the year. In addition, the YWDP works in conjunction with local employers to develop a relationship between businesses and participants of the program. This bridge ensures that the business community receives qualified applicants who are assessed and prepared for employment. The program works to develop and maintain a variety of job placement possibilities in the community.

Food Stamp Employment and Training (FSET) provides job search assistance for Food Stamp recipients.

Virginia Initiative for Employment not Welfare (VIEW) participants benefit from an array of employment, training and social services that support their transition to successful employment and independence. These include vocational and educational assessment, intensive job readiness workshops, customized job search guidance, English classes, education and vocational training, and screening and evaluation for hidden disabilities. Frequently used supportive services include transportation assistance, child care assistance, emergency services, clothing and equipment needed for the workplace, and medical services that impact employment such as eyeglasses and dental work that are not covered by Medicaid. VIEW participants also enjoy immediate and full access to the services available at the DFS-operated SkillSource employment centers.

Micro enterprise Programs overall goal within the County is to provide business skills training and access to capital. Specifically, these programs:

- Work with existing service providers in Fairfax County to promote small business development and outreach to individuals and businesses in need;
- Offer business skills training to low-to-moderate income persons and businesses through workshops and one-to-one counseling both prior to and following the receipt of loan funds;
- Provide access to capital, usually direct loans up to $25,000 for startup and expansion of businesses that do not meet the conventional bank lending criteria.

The Ethiopian Community Development Council's Economic Development Group (EDG) is a non-profit organization with a mission of promoting opportunities for self-sufficiency to the underserved population through economic and community development initiatives. EDG's target population is low-to-moderate-income people who desire to start or expand their existing businesses.

The Community Business Partnership is located in southern Fairfax County and was established to promote business and economic growth primarily in the Richmond Highway commercial corridor. The Community Business Partnership is responsible for the operation of the South Fairfax Business Resource Center, whose activities include comprehensive business counseling and training.

The Business Development Assistance Group (BDAG) provides assistance to income-eligible small business entrepreneurs in the forms of start-up planning and market analysis; business start-up assistance such as assistance in obtaining a business license, choosing a business location, and preparing

promotional materials; assistance with business expansion, in the form of assistance with bookkeeping and cash management, applying for a small business loan, and bidding on small government and private contracts; and one-on-one counseling on specific issues related to the small business. Most workshops and instructional materials are in more than one language.

The United Community Ministries (UCM) operates a micro enterprise program that serves low-income, self-employed people. It has four main goals for clients: stabilize income, increase income, increase assets, and increase network of contacts. Services include micro enterprise counseling, case management, basic and advanced business classes, and technical assistance in a variety of areas such as marketing, licensing and linkage to loans. Success is measured by the impact on the family rather than business survival.

The Small and Minority-Owned Business Division of the Fairfax County Economic Development Authority (FCEDA) provides assistance to small, minority and women-owned firms with a goal of facilitating the attraction, growth, development and expansion of these firms in Fairfax County. The program helps them gain access to valuable information, new market opportunities, and financial resources.

The Fairfax County Chamber of Commerce provides resources to assist small and minority businesses. The Chamber provides advocacy, networking opportunities, free professional development programs, free business advice to members from experts, and an Executive Forum program, where business leaders learn from their peers in a confidential setting.

Neighborhood Preservation, Residential and Commercial Revitalization

Since the FY 2006-2010 Consolidated Plan, Fairfax County's revitalization strategy has broadened from a focus on neighborhood revitalization to a focus on commercial revitalization and neighborhood preservation. Many factors contribute to this shift including a dwindling supply of developable land, a stressed transportation system, a need to preserve existing affordable housing stock, and a deficit of affordable housing available near jobs.

Commercial Revitalization

On July 21, 2008, the Board of Supervisors adopted 16 Principles for Public Investment in Support of Commercial Redevelopment ("Principles") in order to provide policy guidance related to requests for public investment in designated redevelopment, revitalization and other strategic areas of the County. The County has various funding methods available that can be used to assist commercial investment. One mechanism by which public investment may be requested is through the establishment of a Community Development Authority (CDA). A CDA is a flexible tool that can be used to address a broad range of infrastructure needs, as well as services. It is funded by ad valorem special taxes or special assessments, as negotiated with the petitioners. No general fund or debt impact is intended, unless the CDA is coupled with tax increment financing.

Commercial Redevelopment: Office of Community Revitalization & Reinvestment

In 2007, the County created a new Office of Community Revitalization and Reinvestment (OCRR) within the Office of the County Executive. The OCRR facilitates strategic redevelopment and investment opportunities within targeted commercial areas that align with the community's vision and that improve the economic vitality, appearance and function of those areas.

The overall goal of the Commercial Revitalization Program is to restore economic vitality to the older business districts, or suburban downtowns, and surrounding residential communities within Fairfax County. Established Commercial Revitalization Districts and Areas include:

- Annandale
- Bailey's Crossroads/Seven Corners
- Lake Anne
- McLean
- Merrifield
- Richmond Highway Corridor
- Springfield

1. Annandale

Located at the junction of two Colonial-era turnpikes (Columbia Pike and Little River Turnpike), the Annandale Commercial Revitalization District (CRD) is a transportation and commercial hub with easy access to the Washington Metro area and Northern Virginia. It consists of Fairfax County Census Block Groups 450702, 450703, 450802, 450803, 452001, 452101, 452102 and 452202.

Today, the Annandale business core is a culturally diverse hub that contains more than 2 million square feet of commercial space, including shops, restaurants, and service businesses that draw customers from throughout the Washington, D.C., Metropolitan Area. Excellent development opportunities exist within Annandale, which is in process of being studied to develop and refine an urban concept, with the goal of creating a town center consisting of a diverse mix of uses.

The Annandale commercial area is located in the heart of the Annandale residential community. The commercial area is oriented to the Little River Turnpike and Columbia Pike corridors, between Medford Drive and Evergreen Lane. At the center of the area are the intersections with Little River Turnpike of Annandale/Ravensworth Roads and Columbia Pike/Backlick Road. The Annandale Revitalization Area is surrounded by numerous older, yet stable residential areas, including four community improvement areas (Accotink Heights, Fairdale, Wilburdale, and Wynfield). These neighborhoods consist predominantly of single-family homes in the east and multifamily housing in the west, and have been improved with public facilities, such as road, storm drainage and sidewalk improvements, in an effort to stabilize and preserve them as affordable residential areas.

2. Bailey's Crossroads/Seven Corners

Located at the eastern edge of Fairfax County, this Commercial Revitalization District includes two dynamic business centers in Bailey's Crossroads and Seven Corners capitalizing on the close proximity to Arlington County, the City of Alexandria, and downtown Washington, DC. Commercial and retail activity is concentrated along Columbia Pike (Route 244) and Leesburg Pike (Route 7). The core of the district

includes Skyline Center, national chains, and a diverse array of locally owned stores and restaurants. Neighborhoods of single-family homes and apartments house the diverse population.

Great development opportunities exist for Bailey's Crossroads and Seven Corners and it is envisioned to become more urban in character. The area is in the midst of a series of studies to develop and refine an urban concept with the goal of increasing density, mixing uses and improving the transportation network.

The Bailey's Crossroads CRD portion includes Fairfax County Census Block Groups 451503, 451504, 451602, 451603, 452701, 452702, 452801, 452802, 452903 and 452804. The Seven Corners CRD portion includes Fairfax County Census Block Groups 450304, 450401, 451302, 451401, 451402, 451501 and 451502. The Seven Corners commercial district surrounds the intersection of three of the region's major commuter routes: Arlington Boulevard, Leesburg Pike (Route 7), and Wilson Boulevard/Sleepy Hollow Drive (Route 613). The coming together of these major routes form the multi-cornered intersection from which the commercial area gets its name.

The Bailey's Crossroads/Seven Corners Revitalization Area is surrounded by numerous older, yet stable residential areas, including two neighborhood improvement areas (Bailey's and James Lee) and four community improvement areas (Bel Air, Courtland Park, Greenway Downs, and Hillwood). Most of these six neighborhoods that consist predominantly of single-family homes have been improved with public facilities, such as road, storm drainage and sidewalk improvements, in an effort to stabilize and preserve them as affordable residential areas.

3. Merrifield

With the Dunn Loring-Merrifield Metro station and proximity to Interstate 495 and 66, Merrifield is one of the most centrally located and easily accessible areas in Fairfax County. Taking advantage of its location, Merrifield is planned to accommodate a new town center envisioned to be a thriving mixed-use area attracting new residents to Merrifield while also supporting the surrounding existing neighborhoods. This evolution is underway as recent mixed-use developments have brought additional residential, retail, and office space while also providing amenities such as improved pedestrian connections and open space with Merrifield Park.

The Merrifield CRD consists of Fairfax County Census Block Groups 440201, 440202, 440203, 461603, 461604 and 461703. The Merrifield Revitalization Area is surrounded by numerous older, yet stable residential areas, none of which has participated in either the community or neighborhood improvement program.

4. Richmond Highway

The Richmond Highway Commercial Revitalization District (CRD) is located along a 7.5 mile segment of Richmond Highway from the Capital Beltway in the north to Fort Belvoir in the south. The Richmond Highway CRD is not continuous throughout the entire 7.5 mile segment. Rather, it consists of six (6) discreet community business centers and other commercial development located along this segment of Richmond Highway. The commercial business centers include: North Gateway, Penn Daw, Beacon/Groveton, Hybla Valley/Gum Springs, South County Center, and Woodlawn. Each commercial area can generally be characterized as predominately local-serving

retail, with a mix of stand-alone retail as well as strip commercial centers. Other uses along Richmond Highway include townhouse style or mid-rise offices and stand alone-hotels. The North Gateway commercial business area also has some high-rise residential uses.

In general, the Richmond Highway corridor has an uncoordinated, strip-commercial appearance. The corridor itself serves a dual purpose of being a Main Street for surrounding residential development as well as a major north-south oriented transportation route, carrying heavy volumes of commuter traffic. The width of the highway varies from four to six lanes and service drives exist sporadically along its length.

The Richmond Highway Commercial Revitalization District consists of Census Block Groups 415101, 415102, 415201, 415301, 415401, 415403, 415501, 415901, 416001, 416002, 416101, 420401, 420503, 420602, 421401, 421402, 421403, 421501, 421502, 421603, 421703, 421801 and 421802 and is surrounded by numerous older, yet stable residential areas, including four neighborhood improvement areas (Fairhaven, Huntington, Gum Springs, and Jefferson Manor) and ten community improvement areas (Bucknell Heights, Calvert Park, Engleside, Groveton, Hybla Valley Farms, Memorial Heights, Mount Vernon Manor, Mount Zephyr, New Alexandria, and Plymouth Haven). Most of these fourteen neighborhoods, which consist predominantly of single-family homes, have been improved with public facilities, such as road, storm drainage and sidewalk improvements, in an effort to stabilize and preserve them as affordable residential areas.

5. Springfield

The Springfield CRD consists of a variety of retail, commercial, office and residential activities clustered at the Franconia Road - I-95 Interchange, accessed via the Old Keene Mill Road, Backlick Road, and Commerce Street roadway network. While there have been some important redevelopment projects in the area such as the Towne Place Suites by Marriott, Waterford Conference Center, and the Marriot Residence Inn, much of the area consists of dated retail and commercial buildings. These sites continue to be rehabilitated over a period of years, creating a Central Business area within Springfield that continues to be functional, busy, and provide opportunities for future expansion and development of a variety of business activity. The presence of the rebuilt I-95 Interchange, ramps, and Metro access at the Franconia-Springfield Transit Station, provide the Springfield CRD area with considerable advantages with respect to location and regional transportation access.

A number of projects are ongoing in Springfield and will provide catalyst for future redevelopment within Springfield. Springfield Mall was recently approved for redevelopment as a lifestyle shopping and entertainment center while adding over 2,000 residential units. In the northwestern area, the newly rebuilt Richard Byrd Library is slated to open in Fall, 2010 and will offer modernized facilities, meeting space, and a larger building than the previous library located at the same location. The library will be part of a walkable village town center convenient to well located and well maintained neighborhoods. Older apartment buildings are expected to be renovated and new luxury and workforce housing will be built. The new vision and redevelopment opportunities are currently under consideration in a Plan Amendment before the public. The Springfield Connectivity Plan Amendment (S09-CW-3CP) includes land use and intensity recommendations within the CRD to spur redevelopment and provides

additional guidance with respect to urban design, streetscape, and placemaking concepts.

The Springfield CRD includes Fairfax County Census Block Group 420101, 430603, 430604 and 431602. The Springfield Community Business Center located in the northwest and southwest quadrants of the intersection of I-95 (Shirley Highway) and Route 644 (Old Keene Mill Road). The portion of the commercial area north of Old Keene Mill Road is linked to the southeast side of I-95 and the commercial uses located there by the Veterans Bridge. The Springfield CRD is surrounded by numerous older, yet stable residential areas, two of which have participated in the Community Improvement Program (Beverly Forest and Shirley Park). These two neighborhoods that consist of predominantly single-family homes have been improved with public facilities, such as road, storm drainage and sidewalk improvements, in an effort to stabilize and preserve them as affordable residential areas.

The Franconia-Springfield Area contains the Fort Belvoir Engineer Proving Ground (EPG), which is proposed for redevelopment as a major mixed-use center. The Engineer Proving Ground site is an approximately 805-acre military reservation located between I-95 and Rolling Road, south of Hooes Road. Through special federal legislation, the former military research and training facility may be converted to a mixed-use development comprised of office, research and development, conference center/hotel, neighborhood retail and residential uses. The development proposed for the Engineer Proving Ground will expand future employment and housing opportunities in the Franconia-Springfield Area.

6. McLean

The McLean Commercial Revitalization District (CRD) is located in the northeast portion of Fairfax County, and is centered at the intersection of Chain Bridge Road, Dolly Madison Boulevard, and Old Dominion Drive; it is in close proximity to 1-495, 1-95, George Washington Parkway and I-66. It includes block groups 470401, 470403, 470504, 470602, 470701, 470702, and 470802. With its small town charm and superior accessibility to the premier commercial markets of the Tysons Corner and the District of Columbia, the McLean CRD provides visitors, residents and businesses a classic combination of the “Best of Both Worlds".

The Mclean area is renowned for its affluent, stable residential neighborhoods and a wide variety of community serving retail uses and businesses. Seeking to preserve and enhance the CRD’s small town environment while stimulating change, the revitalization concept for Mclean centers on the creation of North and South Villages. This balanced reinvestment strategy primes the area for expansion of community serving retail and businesses, additional residential development, public amenities, and entertainment venues that will draw current and future generations to live, work, and play in the McLean CRD.

7. Lake Anne

The Lake Anne Village Center Washington Plaza was the first area developed in the planned community of Reston, and its unique design and sense of place are recognized worldwide by planners, architects and developers. It consists of block groups 482101, 482102 and 482202. Designated a Fairfax County Historic Overlay District, Washington Plaza is located in the heart of the Lake Anne Village Center. Its brick plaza, shops,

and residences surrounding a man-made lake, have the form and feel of a European waterfront community.

The Lake Anne Commercial Revitalization Area (CRA), which includes the Historic Overlay District, is bounded by Baron Cameron Avenue (Rte 606) to the north, Lake Anne to the south, North Shore Drive to the west and Moorings Drive to the east. An integrated planning effort consisting of stakeholder Charette, and Focus Groups; and, planning, parking and transportation studies resulted in an amendment to the Fairfax County Comprehensive Plan on March 30, 2009. These changes reflect community values and perspectives, and position Lake Anne to again become an example of how innovative reinvestment and development can result in a renewed economic future.

Other Revitalization Projects

Springfield Mall - On July 13, 2009, the Board of Supervisors approved a rezoning that will permit the redevelopment of the Springfield Mall into a mixed-use Town Center. The redevelopment of the approximately 80 acre site includes the renovation of the 2.1 million square foot Springfield Mall, as well as the addition of residential, office, retail, and hotel uses throughout the site.

The vision for the Springfield Town Center is for a walkable community where people can live, work, shop, and enjoy entertainment and community activities. Interwoven among the retail, offices, hotels, and residences will be a pedestrian oriented network of sidewalks, multi-use pathways, an abundance of open spaces and recreational facilities, including a Central Plaza, dog park, and indoor and outdoor recreations opportunities which will result in a rich environment where the community can gather for concerts, farmer's markets, events and public exhibits.

Elements of the multi-phased project include a 225+ room hotel, over 2,000 new residential units, several office buildings, additional retail shops along Village Drive, the "Main Street" of the new Town Center. The development of the new Town Center is anticipated to commence in 2009, with a projected 10-15 year build out.

Tysons Corner Urban Center - Fairfax County's vision is to transform Tysons into an urban center that addresses the challenges of sustainable growth, energy conservation, environmental protection, affordable housing, and safe communities. Tysons is a 1,700 acre area located in northeastern Fairfax County, about halfway between downtown Washington, D.C. and Dulles International Airport. It is located at the confluence of Interstate 495 (the Capital Beltway) with the Dulles Airport Access and Toll Roads, Route 7 and Route 123. It is bounded on the southeastern side by Magarity Road and on the southwestern side generally by the limit of commercial development along Gallows and Old Courthouse Roads and the natural areas of Old Courthouse Stream Branch. The residential areas on the western side of Gosnell Road flanking Old Courthouse Road are also part of the Tysons Corner area. The Dulles Airport Access and Toll Roads form the northern boundary of Tysons.

The residential communities surrounding Tysons, which include McLean, Vienna and Falls Church, help to make Tysons a good business location. These communities provide a wide range of housing types and a relatively large supply of housing near Tysons' employers. The communities surrounding Tysons also have many outstanding features, such as excellent public schools and one of the best educated and highly trained labor pools in the nation.

Neighborhood Preservation and Infrastructure

The County focuses preservation efforts in targeted areas and has a variety of programs that promote maintaining safe, livable communities and encourage preservation of existing affordable housing stock.

Conservation and Redevelopment Areas

Conservation and Redevelopment Areas are neighborhoods which have been identified by the Board of Supervisors as in need of preservation, rehabilitation, or reconstruction, and for which a Conservation or Redevelopment Plan has been formally adopted by the Board of Supervisors. The adoption of a Conservation or Redevelopment Plan for a neighborhood enables the County or the Fairfax County Redevelopment and Housing Authority to undertake specific activities in that neighborhood, as outlined in the adopted Plan.

Title 36 of the Code of Virginia provides the legal authority for the establishment of Conservation and Redevelopment Areas. In general, these districts represent a hierarchy of conditions and treatment required addressing those conditions. Establishment of a Redevelopment Area is appropriate for those areas characterized by conditions of blight and deterioration, and other conditions preventing proper development which require major land acquisition, clearance, and reconstruction.

Conservation Areas are those areas characterized by less severe conditions of blight and deterioration than Redevelopment Areas, but may nevertheless require some land acquisition, clearance, and reconstruction. However, the emphasis in a Conservation Area is on preserving and improving most existing land uses and buildings, rather than clearance and redevelopment.

A third designation, Rehabilitation District, may be used for areas adjacent to approved Conservation Areas which are deteriorating or are likely to deteriorate to a condition similar to that which existed in the Conservation Area. The purpose of a Rehabilitation District is to provide public action by the Fairfax County Redevelopment and Housing Authority within the district to prevent further deterioration and the spread of blight.

The primary activity in all three Rehabilitation Districts is the provision of loan funds under the County's Home Improvement Loan Program. No additional public improvement needs were specifically identified when these areas were designated by the Board of Supervisors.

At this time, the County has not established additional Conservation Areas, Redevelopment Areas, or Rehabilitation Districts, since plans for the existing areas are not yet completed. The following are the active conservation areas established in Fairfax County:

Conservation Area	Supervisor District
Bailey's	Mason
Huntington	Mount Vernon
Lincoln-Lewis-Vannoy	Springfield/Sully
James Lee	Providence
Jefferson Village	Providence
Jefferson Manor	Lee
Wiley/Gunston Heights	Mount Vernon
Ordway Road	Sully
Leehigh Village	Sully

A number of improvements have been completed in the various Conservation Areas. Funds have been used from the Home Improvement Loan Program (HILP) to maintain and improve the existing housing stock in these older communities. Other improvements include the construction and/or expansion of community centers in the Huntington, Bailey's, Lincoln-Lewis-Vannoy, James Lee and Gum Springs Conservation Areas. Additional improvements range from the implementation of a sanitary sewer system in a rural neighborhood to the construction of road, storm drainage, sidewalk, and utility upgrade improvements throughout eight of those areas.

Planned improvements as detailed in the adopted Conservation Plans are continuing or pending in three of these areas:

(1)	Bailey's	one of six phases of road and storm drainage improvements
(2)	Fairhaven	one of seven phases of road and storm drainage improvements
(3)	Jefferson Manor	two and a half of four phases of road and storm drainage improvements

Periodic additional improvements have been requested by these communities, and funded by the Board of Supervisors through the annual budget process.

Redevelopment Areas	Supervisor District
Woodley Hills Estates	Mount Vernon
Groveton	Lee
Gum Springs	Mount Vernon

Major activities detailed in the Redevelopment Plan for Woodley Hills Estates and Gum Springs are basically complete. The County-owned site of the former Groveton School was developed as a commercial office building. The project, approved by the Board of Supervisors in early 2000, was a part of a public/private partnership that also included the construction of a new County office building in the Woodlawn area.

Rehabilitation Districts	Supervisor District
Falls Church	Providence/Mason
Route One	Mount Vernon/Lee
Bailey's Crossroads	Mason

The primary activity in all three Rehabilitation Districts is the provision of loan funds under the County's Home Improvement Loan Program, which will continue through the foreseeable future. No additional public improvement needs were specifically identified when these areas were designated by the Board of Supervisors.

Community Improvement Programs

The Community Improvement Program is a cost-sharing program that preserves and improves older, yet stable residential neighborhoods. The Board of Supervisors established the program in 1978 to prevent those areas from becoming blighted and deteriorated by providing needed public improvements, such as roads, curbs and gutters, and storm drainage systems, that were absent in the original development. Incidental improvements include sidewalks, trails, streetlights, streetscape, and utility upgrading. The property owners and the County share the costs of sidewalks, curbs and gutters, and driveway entrances.

Although the steps are simple, the successful implementation of the Community Improvement Program depends largely on the dedication and hard work of the residents in each neighborhood. This program is designed to rely heavily on citizen volunteers to disseminate information to the community, inform the County staff of the neighborhood's concerns, develop consensus among disparate elements, review plans and drawings, and explain the neighborhood's concerns to various public bodies. In most neighborhoods, a core group of citizens is willing to perform these tasks, although all residents are normally involved at one time or another in the meetings about the projects.

The implementation of a community improvement project starts with the expression of interest from the community and moves through six basic stages:

1. Initial Community Screening
2. Project Selection
3. Community Planning
4. Detailed Engineering
5. Construction
6. Billing

To date, 45 project phases have been constructed in 29 neighborhoods throughout the County, and approximately $76 million has been expended since 1979. Funding for the program has been primarily from general obligation bonds for neighborhood improvements.

In addition to the projects mentioned above, there are currently 30 neighborhoods (shown in Table 67) on the waiting list. Preliminary cost estimates prepared a number of years ago indicate that approximately $130 million would be needed to implement all of the projects on the waiting list. However, no new funding has been allocated since approval of the 1989 neighborhood improvement bond.

Table 67. Neighborhoods on the Community Improvement Program Waiting List

Community	District
Annandale Acres	Mason
Braddock Acres	Mason
Braddock Hills	Mason
Broyhill Crest	Mason
Beverly Manor	Dranesville
Byrnley View	Mason
City Park Homes	Providence
Davian Place	Mason
Coveville	Braddock
Fairview	Mount Vernon
Grays	Hunter Mill
Hampton Heights/Kathmoor	Lee
Hollin Hall	Mount Vernon
Indian Spring	Mason
Idylwood Knoll/Shreve	Providence
Lincolnia Park	Mason
Long branch	Mason
Meridian Park	Dranesville
Mount Vernon Woods	Lee
Murmuring Pines	Hunter Mill
Patton Terrace	Dranesville
Rosemary Lane	Providence
Silver Springs	Lee
Springfield Forest	Lee
Springvale/Ben Franklin	Fair Vernon, Lee
Stratton Woods	Hunter Mill
Wakefield	Braddock
Willow Run	Mason
Windsor Estates	Lee
Woodlawn Manor	Mount Vernon
Keyes-Russell	Mount Vernon

Home Improvement Loan Program (HILP)

The Fairfax County Redevelopment and Housing Authority's Home Improvement Loan Program (HILP) assists Fairfax County homeowners in making improvements to their homes. Homeowners are provided technical assistance in determining what improvements need to be made and financial assistance to pay for these improvements through low interest loans.

This program is administered by the Fairfax County Redevelopment & Housing Authority, through the Fairfax County Department of Housing and Community Development. Eligible homes are those that do not meet health and building code requirements and are owned or lived in by low- and moderate-income persons. The primary sources of funding for the HILP program are CDBG funds, public funds from the County, and some private funds as well.

Types of eligible improvements include:

- Correction of health and safety code violation items
- Improvements which will increase energy efficiency
- Replacement items, which will reduce the need for continuous maintenance
- General improvements, which will enhance the overall appearance and livability of the house such as: hook-ups to County sewer or water, installing siding, replacing a roof, etc.

The amount of older housing stock (20-50 years in age) continues to increase in Fairfax County, and the need for HILP loan funds is expected to expand as well. In addition, most septic fields in the County are reaching and surpassing their life expectancies of 30-40 years and are beginning to fail. Many wells are also failing because of lower water tables. As a result, more of the older communities are in need of connections to the public water and sewer systems.

In the current economic and housing market, homeowners are finding it harder than in the past to borrow against their home equity including for home maintenance. This activity contributes to the pattern of deferred maintenance as homes continue to age.

To qualify for a loan through the HILP program, an applicant must

- Be the owner(s) of the property and reside in the property, which must be located within Fairfax County (including the Towns of Clifton, Herndon and Vienna) and the City of Fairfax
- Have a household income which falls below the Fairfax County median income for family size

Table 68. Home Improvement Loan Program Income Requirements

HOUSEHOLD SIZE	***MAXIMUM INCOME***
1 Person	$52,920
2 Persons	$60,480
3 Persons	$68,040
4 Persons	$75,600

It should be noted that as of March 2010, the HILP program had temporarily stopped accepting new applications. The purpose of the suspension of accepting new applications is to: 1) allow staff to complete the pipeline of HILP cases; and 2) redesign the program to operate with fewer resources.

Home Repair for the Elderly Program (HREP)

The Home Repair for the Elderly Program (HREP) is designed to provide minor home repairs to eligible low and moderate income elderly homeowners residing in the property, as well as accessibility modifications for disabled homeowners. Fairfax County will provide the manpower to do up to one week's labor and provide up to $500 in materials to complete necessary repairs and maintenance. Materials are paid for by County and Federal funds. The program also makes minor accessibility modifications that allow disabled homeowners or family members to remain in their homes and is targeted to provide repairs to 110 to 120 homes per year.

The elderly is the fastest growing age group in the County. Even though more facilities for the elderly are being built in Fairfax County, a majority of elderly residents want to remain in their own homes. Typically, elderly residents also live in older homes. The number of residents eligible for HREP funds will continue to increase. Once elderly residents are eligible for HREP funding, they stay eligible on a continuing basis for the remainder of their lives.

The Home Repair Program is open to:

- Residents of Fairfax County, owning and residing in the home needing repair
- Homeowners 62 years of age or older, OR disabled, OR have disabled family members*
  *Disabled family members are only eligible for accessibility modifications
- Maximum income of $42,000 for 1 person
- Maximum income of $48,000 for 2 persons
  *Income maximums are higher for larger families
  *When total family assets (excluding your house) exceed $20,000 either actual or projected earnings are added to your income in considering eligibility
- Monthly housing expenses* must be greater than 25 percent of monthly income
  *Items included in housing expenses are: mortgage, insurance, utilities and real estate taxes Unreimbursed medical expenses may be eligible for inclusion in housing expenses
  *Households with yearly income below $10,000 have no housing expense requirements

Typical services that are provided include

- Interior and exterior painting
- Minor electrical repair and replacement
- Window and door repair
- Minor plumbing repair and replacement
- Screen replacement for windows and doors
- Gutter and walkway repair
- Installation of grab bars, railings and other accessibility devices to assist the elderly and disabled.

Emergency work cannot be provided, but expedited responses may be handled under this program. Types of repairs that are eligible include:

- roof leaks
- broken hot water heaters
- furnace repairs for no heat
- electrical shorts or rewiring
- plumbing leaks

Blight Abatement Program

Prior to 1996, Fairfax County did not have an effective mechanism for addressing residential and commercial properties with structures in a deteriorated condition, abandoned, dilapidated or otherwise kept in an unsafe state. A means for addressing the safety, health, and neighborhood concerns regarding blighted properties was needed.

To be considered for the Blight Abatement Program, a property must meet several requirements.

- Meet the definition of "blighted" under the Spot Blight Abatement Statute established under Va. Code Ann. 36-3 (Supp. 2008) Vacant and/or boarded for at least one year
- Been the subject of complaints
- Is no longer being maintained for useful occupancy
- Is in a dilapidated condition or lacks normal maintenance or upkeep

Through the Blight Abatement Program the County has the right to demolish a blighted structure if the owner chooses not to do so voluntarily. Once a property owner is notified that the property is blighted if the property owner does not remove the blight or present an acceptable plan to cure the blight within a reasonable period of time, under powers granted under the Code of Virginia, the County can declare, by ordinance, any blighted property as a nuisance and then compel the abatement of the nuisance. If the owner or owners fail to abate the nuisance, the County may do so and charge and collect the cost thereof from the owner of the property in any manner provided by law for the collection of state or local taxes.

By law, the County may

- Demolish the blighted structure(s) and charge the owner for the cost thereof
- Acquire blighted properties by eminent domain and then repair, clear or sell properties with the requirement to eliminate the blight

With voluntary cooperation of the property owner(s), eliminating blight can be completed in as few as 60 days. Without cooperation of the property owner, enforcement procedures may become a time-consuming, lengthy legal process.

Throughout the entire process, the Department of Housing and Community Development continues to work with property owners to gain voluntary compliance to eliminate the blight. Other alternatives, offered by the County to assist property owners include:

- Demolition loans
- Rehabilitation loans
- Redevelopment loans
- Tax Abatement for Rehabilitation

Strategies for Revitalization and Preservation

Long-term Objectives (followed by Proposed Activities/Outcomes)

Preserve affordable housing and prevent or eliminate the negative effects of disinvestment in commercial and residential areas that are vulnerable to instability, facilitate reinvestment, encourage business development, and promote public and private investment and reinvestment (10 years)

Improved Affordability/Accessibility

- Develop strategies of prevention and early intervention in communities in danger of deterioration to reduce the need for greater community investment and improvements in the future

- Review existing plans for Conservation Areas, Redevelopment Areas, residential Revitalization Areas, Commercial Revitalization Districts, Commercial Revitalization Areas and Neighborhood Strategy Areas to promote a comprehensive and coordinated approach to meeting community development needs while maintaining the affordable housing stock and the unique character of each community

Suitable Living Environment

- Build on community strengths and involve the residents in decision making on needs, priorities, plans, improvements, and solutions to community concerns; in cooperation with the county's Code Enforcement Strike Team

Economic Development

- Focus efforts toward mixed-use development in high employment commercial areas near residential communities and transportation
  - Improvements in designated Commercial Revitalization Districts
  - Development at Tysons Corner
  - Development at Springfield Mall

Short-term Objectives (followed by Proposed Activities/Outcomes)

Improved Affordability/Accessibility

1. Continue to increase the percentage of low to extremely-low income households served through preservation efforts per the Housing Blueprint.

2. Promote the preservation and production of affordable/workforce housing for low and moderate-income households per the Housing Blueprint.

Suitable Living Environment

3. Support land use policies that are balanced bringing together housing and jobs
   - Support transportation infrastructure
   - Consider regional network of transportation
   - Encourage development of accessible transportation systems
   - Improve sidewalks and walkways as alternate facilities connecting mass transit, high density areas, public facilities, and employment areas

4. Promote activities that ensure the sustainability of neighborhoods
   - Continue public improvement projects in designated Conservation Areas
     - Improve handicap accessibility
     - Improve sidewalk, lighting, drainage
   - Provide community center development and rehabilitation
   - Rehabilitate housing through the Home Improvement Loan Program
   - Continue Silver Lining initiatives to stem foreclosures and encourage purchase of foreclosed properties
   - Encourage and stimulate public and private partnerships and investment to revitalize and rehabilitate the existing housing stock, community facilities, and public improvements in areas whose principal residents are of low and moderate income
   - Provide training to give residents the ability to improve skills and behaviors necessary to manage finances and succeed as tenants and neighbors

- Finalize a course on Home Maintenance (to be offered on a bi-lingual basis) and seek involvement of the home improvement contractor and supplier business community in this educational effort
- Develop a targeted marketing program for the existing Home Improvement Loan Program using direct mail and a door to door approach by a Neighborhood Specialist
- Improve the cooperation of residents with inspection efforts, provide ongoing linkage between the Neighborhood Specialist and inspectors assigned to the target area by Zoning Enforcement and the Health Department and provide for joint inspection efforts
- In coordination with affected Civic Associations, conduct outreach activities for the identified neighborhoods to include annual neighborhood cleanup days and developing standard packages for such improvements as landscaping, replacement windows, siding and doors, etc.

5. Encourage community engagement and communication
   - Improve language access for those contacting the County
   - Continue public meeting opportunities
   - Promote partnerships with community-based organizations
   - Set up booth at the Fairfax Fair to promote programs
   - Improve Internet and media communication
   - Initiate innovative communication techniques
   - Continue open discussion regarding use of funds

Transition Table 2C
(Serves for all of the Non-housing Community Development section)
Summary of Specific Housing/Community Development Objectives
(Table 2A/2B Continuation Sheet)

Obj #	Specific Objectives	Sources of Funds [a]	Performance Indicators	Expected Number[b]	Actual Number[b]	Outcome/ Objective*
	Rental Housing					
1.2-1.5	(See Page 137)	CDBG,HOME & HOPWA	#individuals #households			DH 1-3
2.1 2.3	(See Page 138)	CDBG,HOME & HOPWA	#individuals #households			DH 1-3
	Owner Housing					
1.2 1.5	(See Page 137)	CDBG & HOME	#households #units			DH 1-3
	Community Development :					
	Infrastructure					
3.1-3.3	(See Page 138)	CDBG	#units #persons			SL-1 SL-3
	Public Facilities					
3.1-3.3	(See Pages 137 – 138)	CDBG	#persons			SL-1 SL-3
	Public Services					
1.1-1.5	(See Pages 137 – 138)	CDBG, ESG & HOPWA	#persons #households			DH-1&DH-2 SL 1-3 EO 1-3
	Economic Development					
2.1-2.5	(See Page 138)	CDBG	#persons #jobs			EO 1-3
	Neighborhood Revitalization/Other					
3.1-3.3	(See Page 138)	CDBG & HOME	#persons #households #units			DH 1-3 SL 1-3

***Outcome/Objective Codes**

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

[a] In addition to federal funds under the Consolidated Plan, includes other federal, state, local and private resources
[b] To be determined

Strategies to Address Barriers to Affordable Housing

The Fairfax Board of Supervisors has adopted the following affordable housing goals as part of the Housing Blueprint:

1. To End Homelessness in 10 Years
2. To Provide Affordable Housing Options to Those with Special Needs
3. To Reduce the Waiting Lists for Affordable Housing by half in 10 Years
4. To Produce Workforce Housing Sufficient to Accommodate Projected Job Growth

In implementing these goals, it is the intention that opportunities should be available to all who live or work in Fairfax County to purchase or rent safe, decent, affordable housing within their means. Affordable housing should be located as close as possible to employment opportunities without adversely affecting quality of life standards. It should be a vital element in high density and mixed-use development projects, should be encouraged in revitalization areas, and encouraged through more flexible zoning wherever possible.

The following policies demonstrate the breadth and depth of the County's commitment to creating affordable housing opportunities for its citizens including those groups identified as having priority needs and to removing regulatory impediments.

- Provide bonus densities in exchange for affordable housing and increase community acceptance of affordable housing (details on the Affordable Dwelling Unit program are provided later)
- Residential rezoning should not be approved above the low end of the Plan range unless an appropriate commitment of land, dwelling units, and/or a cash contribution to the Housing Trust Fund is provided
- Capitalize the Housing Trust Fund so that it can be used as a mechanism to fund the development of affordable housing
- Encourage affordable housing as a development option for infill sites, particularly in commercial areas and near employment concentrations
- Give priority for the use of County and other government-owned buildings and land as sites for the provision of affordable housing
- Promote and facilitate innovative site design and construction techniques, as well as encourage the use of manufactured housing and manufactured housing components, when aimed at providing affordable housing
- Support the efforts of the Fairfax County Redevelopment and Housing Authority in producing a portion of these affordable housing units through the provision of County resources and the approval of suitable housing sites
- Encourage and facilitate home sharing as one mechanism for lowering housing costs

The County is committed to encouraging the provision of affordable housing in all parts of the County. Policies implementing this objective include:

- Expand housing opportunities in or near mixed-use Centers as a way of providing the opportunity for persons employed in the County to live near their jobs
- Promote the development of multifamily housing in both mixed-use Centers and existing residential areas, as appropriate, in an effort to diversify the housing stock and expand lower cost housing options (the County has adopted Locational Guidelines for Multifamily Residential Development as part of the Countywide Land Use)
- Promote affordable housing opportunities throughout the County, particularly in areas where existing supply is low

- Encourage the creation of accessory dwelling units as a means of increasing the supply and distribution of affordable housing (details on the County's Accessory Dwelling Unit policy are provided later)

Fairfax County strives to conserve stable neighborhoods and encourage rehabilitation and other initiatives that will help to revitalize and promote the stability of older neighborhoods. Policies implementing this objective include:

- Address the community impacts of foreclosure through Silver Lining Plus and other programs
- Encourage redevelopment through tax abatement (details on the tax-abatement revitalization program are provided later)
- Improve and maintain existing housing and neighborhood quality by upgrading substandard housing and improving physical community facilities (e.g., streets, sidewalks, lighting) in existing neighborhoods
- Maintain housing quality in existing neighborhoods and preserve neighborhood stability through the abatement of "spot" blight
- Facilitate improvement and maintenance of existing neighborhoods by initiating community development programs, in communities where needed, with as little displacement as possible; and incorporating affordable housing units as part of all major housing rehabilitation efforts
- Retain existing below market rental housing through acquisition, rehabilitation assistance and other subsidies
- Facilitate the retention of existing mobile home parks which are identified in the Area Plans as appropriate for mobile home park use (the County has adopted Guidelines for Mobile Home Retention as part of the Countywide Land Use)

To increase the supply of housing available to special populations, including the physically and mentally disabled, the homeless, and the low-income elderly, and large families, the County employs the following policies:

- Locate housing resources for special populations in all parts of the County as a way of improving accessibility to employment opportunities, County services, as well as cultural and recreational amenities
- Facilitate the development of single room occupancy residences and other types of permanent housing for homeless persons and families, as well as others in need of these housing options
- Enforce fair housing laws and nondiscriminatory practices in the sale and rental of housing to all citizens
- Promote multifamily housing for the elderly and the handicapped that is conveniently located to public transportation and community services
- Encourage the creation of handicapped accessible housing units or units that can be easily modified for use by the disabled
- Redesign of Domestic Violence service system making sheltering services community-based

The County will utilize Regional approaches to address the impact of government regulations on the overall supply of housing. Fairfax County advocates "fair growth" within the region, a strategy that requires regional cooperation to assure sufficient land is planned and zoned for residential development and reduces the reliance on land use planning and rezoning as a technique to control development.

Predicted job growth through 2015 will strain the supply of new housing in Fairfax County. The challenge is to identify opportunities for increased housing development despite a decreasing supply of developable "green" land (i.e. vacant land suitable for development), as the County has become more and more "built out". In developing the remaining areas of green land, the County will seek to reduce development cycle times by limiting development in areas that require rezoning and the associated time-consuming processes for approval.

As Fairfax County becomes increasingly built-out, the County is promoting an increased supply of housing through redevelopment. Opportunities for redevelopment will mainly occur in older, commercial corridors, rather than in residential areas. Including mixed-income, transit-oriented residential development and mixed-use commercial redevelopment is a strategy that the County is using to generate a significant number of housing units.

Fair housing and market access for minorities and recent immigrants

The Fairfax County Human Rights Ordinance prohibits discrimination in housing. Any person who refuses to sell, lease, sublease or rent on the basis of race, sex, religion, color, national origin, age, marital status, disability, or familial status may be discriminating. The Human Rights commission monitors complaints has undertaken several enforcement, education, and outreach activities.

Tax Policy

Real Estate Tax Relief

Fairfax County offers real estate tax relief to special needs groups. To qualify for a Real Estate tax exemption under the Fairfax County Tax Relief Program, the following requirements must be met:

- The applicant must be at least 65 years of age, or permanently and totally disabled. Applicants who turn 65 or become permanently and totally disabled during the year of application may also qualify for tax relief on a prorated basis.
- If the dwelling is jointly owned by an applicant and spouse, either the applicant or the spouse must be at least 65 years of age or older, or permanently and totally disabled
- The gross income from all sources of the owners of the dwelling and any relatives of the owners who reside in the dwelling may not exceed $72,000. Currently, the following income limitations and percentage of relief apply:

Table 69. Real Estate Tax Exemption Income Requirements

Gross Income	Amount of Tax Relief
$52,000 or less	100%
$52,001 to $62,000	50%
$62,001 to $72,000	25%

For each relative (other than spouse) residing in the dwelling, the first $6,500 of income may be excluded. Disabled applicants may exclude the first $7,500 of income. The total combined net assets of owners of the dwelling and of the spouse of any owner who resides in the dwelling may not be greater than $340,000 (not including the value of the home, its furnishings and up to one acre of land). When the property is jointly owned and the co-owner is deceased, a certified copy of the death certificate must be provided.

Tax Abatement - Revitalization Program

The Tax Abatement – Revitalization Program (see Article 24, Chapter 4 of the Fairfax County Code, Partial Tax Exemption Ordinance, as amended by the Fairfax County Board of Supervisors on July 23, 2007) provides for the renovation, rehabilitation or replacement of certain multifamily, commercial or industrial properties. This partial tax exemption is an incentive to improve and maintain the quality of buildings in the County. Multifamily structures at least 25 years old and located countywide are eligible for the program. Minimum market value increase due to improvements is 25 percent. Qualifying property owners receive a partial exemption of the taxes associated with the increase in structural value due to renovation, rehabilitation or replacement (i.e. final structural value compared to base structural value), provided all program requirements are met. Owner will receive an exemption over specified time period.

Ameliorating Regulatory Barriers

Affordable Dwelling Unit Program

The Fairfax County Affordable Dwelling Unit (ADU) program effectively avoids NIMBY problems by requiring affordable housing to be included in nearly every new residential development in the County and by specifying that the design and placement of affordable units must be properly integrated into the development. Nearly 2,000 units have been incorporated countywide.

Fairfax County's ADU Ordinance was adopted to assist in the provision of affordable housing for persons of low and moderate income whose income is seventy percent or less of the median income for the Washington Standard Metropolitan Statistical Area. Where the affordable dwelling units differ in design and unit type from the other units in a development the affordable units should be integrated within the development to the extent feasible and where the unit type is the same the affordable units should be dispersed throughout the development.

The ADU Ordinance applies to all developments which are subject to rezoning, special exception, site plan or subdivision plat approval where:

- The site is to be developed at a density greater than one (1) dwelling unit per acre,
- The site yields fifty (50) units or more,
- The site is located within an approved sewer service area.

Residential projects for which these criteria are not applicable may still provide affordable dwelling units at the developer's option in order to take advantage of zoning district regulations applicable to affordable dwelling units. All affordable dwelling units must be of the same structure type as the rest of the units in such developments.

The Fairfax County Redevelopment and Housing Authority have the right to lease 1/3 of the affordable single-family attached or detached units. In multiple family developments, 1/3 of the affordable units are to be leased to eligible households at rents affordable to households with incomes up to 50 percent of the Metropolitan Statistical Area median, with state or local subsidies, and the balance of the affordable units to those who meet program income criteria (70 percent of median). The leasing program provides greater dispersion of affordable renter-occupied housing.

The County augments the ADU program with its First-Time Homebuyers Program (FTHB), the SPARC Program (Sponsoring Partnerships and Revitalizing Communities), operated in conjunction with the Virginia Housing Development Authority).

Accessory Dwelling Units

The County's Accessory Dwelling Unit Policy is to accommodate accessory dwellings in all residential districts that allow single family detached dwellings in order to provide the opportunity and encouragement for the development of a limited number of small housing units designed, in particular, to meet the special needs of persons who are elderly and/or disabled. Furthermore, it is the purpose and intent of this provision to allow for a more efficient use of dwellings and accessory buildings, to provide economic support for elderly and/or disabled citizens and homeowners, and to protect and preserve property values in accordance with the overall objectives of the Fairfax County Comprehensive Plan and Zoning Ordinance.

Streamlining the Building Process

The residential option to the Expedited Building Plan Review Program establishes an optional and separate processing procedure for the review of residential townhouses and detached single family dwellings. The purpose of the residential option is to expedite the County's review of certain qualified residential plans, provided such plans meet the requirements of the Virginia Uniform Statewide Building Code. The residential plans are reviewed by a County-designated residential peer reviewer prior to submission to the County for permit issuance. The County processes these plans on a priority basis cutting the normal review time by at least one-half.

Fairfax County has also been a national leader in the application of innovative approaches to eliminating regulatory overlap and duplication. Not only has the County participated as a member of the National Conference of States on Building Codes and Standards (NCSBCS) Streamlining the Nation's Building Regulatory Process project, the County's One-Stop Shop and Customer Ombudsman program in the Department of Environmental Management (DEM) is promoted by NCSBCS as a national model for streamlined review. DEM coordinated involved departments into a centralized, one-stop shop to improve the speed and efficiency of the regulatory process. An ombudsman position, complete with decision-making authority, was also created to assist customers through the permit process.

The review of all permits applications and plans, coordination of review by other agencies, and issuance of permits are performed through DEM's "one-stop shop," the Permit Application Center. At the Center, staff consolidates review comments, helps with resolution of conflicting requirements, and makes decisions regarding final approval. Permit applications are accepted and reviewed and permits are also issued at the Center. Although there are instances where customers must visit the Health Department or Fire Marshal's Office, the need for such visits is kept to a minimum.

The Permit Application Center is staffed with cross-trained permit technicians who process building, electrical, mechanical, plumbing, and small appliance (household appliance) permits using a computerized permit tracking system. The computer system also provides access to land ownership and addressing records. Most permit review agencies, i.e., contractor licensing, zoning, site approval (for grading, soils, flood plains, easements, etc.), building plan review, and portions of the Fire Marshal's office are located in the Center. Permit review by the Department of Public Works (sewer approval) and the Health Department (septic system and well approval) is available via facsimile although, on occasion, a permit applicant must visit these offices in person to resolve a permit issue. After all permit and plan reviews are complete, the permit technicians record the approvals into the computer system. The permit is issued at the Cashier's Office upon payment of permit and any other related fees.

Other customer service initiatives provided at the Center include an information desk to help customers fill out applications and to provide information on the permit process, a communications desk staffed by a permit technician solely to answer telephone calls, and a "green dot" program to help identify first time customers to staff so they can provide a higher level of service.

DEM also established a customer ombudsman position to assist applicants who, because of the nature of the project or lack of familiarity with the process, require specialized assistance. The ombudsman continually looks for new methods to simplify the process while ensuring that individual projects comply with construction codes. The ombudsman also serves as the Chief of the Permit Application Center, giving the ombudsman authority to make decisions and direct staff in the most beneficial way to resolve customer problems. Freeing the ombudsman from administrative duties to enable him/her to provide a high level of customer service required that the assistant section chief assume some of these tasks. The assistant chief also serves as an ombudsman at times of high traffic or in the absence of the regular ombudsman.

Prior to implementation of the Center, it took an average of 4 hours and 13 minutes to process a building permit for a typical single family dwelling with public sewer and private well. The improved system significantly reduced the number of required steps and, in some cases, reduced permit processing times to 47 minutes. The ombudsman program has resulted in fewer incomplete applications and staff time savings that would otherwise be spent revisiting submissions.

Fairfax County is also a leader in the application of Information Technology to improve the administration of development regulations. LDSnet provides access to information in the Fairfax County Land Development System (LDS). LDSnet is comprised of two systems: the Zoning and Planning System (ZAPS) and the Plan and Waiver System (PAWS). Through LDSnet, it is possible to search for individual zoning applications and or plans and studies submitted to the County to perform land-disturbing activities. In addition, the LDS database can be searched for zoning applications or construction plan submissions meeting any combination of the thirty-one search criteria.

Lead-Based Paint Hazards

Although most of the housing in the County is in relatively good repair (and much of it is of relatively recent construction), there are some cases of lead paint exposure. The protection of public health has always been a primary priority in responding to housing problems.

Abatement of lead-based paint in Fairfax County's Public Housing was completed in the fall of 1997. The County is complying with regulations issued by HUD which require notification, evaluation, and reduction of lead-based paint hazards in federally owned residential properties and other housing receiving federal assistance. Telephone consultation, literature, and referrals to private lead testing companies are provided to citizens who call regarding lead-based paint or other potential environmental lead hazards in the community.

In the summer of 2006, HCD staff attended a Training Seminar on Implementing the Lead Safe Housing Rule in CPD-Funded Programs. The County is implementing procedures for compliance with regulations issued by HUD which established new requirements for notification, evaluation, and reduction of lead-based paint hazards in federally owned residential property and housing receiving federal assistance. All CDBG/HOME funded projects receive Environmental Reviews and as part of the review a determination is made on any potential lead paint hazards and need for testing and abatement.

The Fairfax County Health Department conducts environmental blood lead level evaluations for all reported cases of lead poisoning in children under 6. The evaluation is used to create a Lead Hazard Control Plan for interim lead controls and abatement of lead hazards. An investigation of the source of the contamination takes place including the child's home. If the source is determined to be from the home, siblings will be tested and the Health Department will counsel the family on steps to take to remove the source of contamination. Retesting of the children is required. The Department of Social Services may be asked to intervene if the family does not properly remove the lead contaminants. If necessary, the child or children could be removed from the home until appropriate measures have been taken.

The Fairfax County website displays a lead poisoning prevention page (http://www.fairfaxcounty.gov/hd/eh/lead/). The webpage defines some of the major sources of lead in people's homes: dust from deteriorating lead-based paint primarily due to opening and closing windows in older homes (built pre-1978), residual lead dust in residential soils, and lead pipes. In addition, the Health Department educates the household members about reducing lead exposure. To reduce risk of lead poisoning, the County recommends that residents remove peeling paint and chips from the home, not allow for children to be present when scraping or cleaning up paint chips, minimize dust through frequent damp mopping of floors and using wet cloths to wipe down windows, and discourage children from playing in bare soil surrounding the home. In addition, the Fairfax County lead poisoning prevention website provides links to numerous websites with information on lead exposure. Telephone consultation, literature, and referrals to private lead testing companies are provided to citizens who call regarding lead-based paint or other potential environmental lead hazards in the community.

Institutional Structure

Fairfax County's **institutional infrastructure goal** is to ensure broad community input throughout the development and implementation of the Consolidated Plan, build public/private partnerships to implement the Plan, and monitor and evaluate the goals, strategies and program outcomes.

The following objectives apply to this goal

1. Implement the Citizen Participation Plan and monitor and evaluate the effectiveness of community outreach and education on community needs, plans and priorities; funded programs and results; and the effectiveness of the citizen participation process under the Consolidated Plan.

2. Identify and pursue new resources and partnerships within the community and continue to strengthen capacity and coordination among County agencies and service programs to support the Consolidated Plan goals, objectives, strategies and annual action plans.

3. Emphasize expanding the capacity of private nonprofit agencies to meet community needs through the provision and identification of training, technical assistance, mentoring and leveraging of resources provided by the County.

4. Promote broad assessment, awareness and understanding of community needs. Emphasize outreach efforts to those who may be neediest in the population and least able to access community services. Monitor changes in the community and associated services needs and alter service delivery as warranted.

5. Monitor the performance of programs and projects funded through the Consolidated Community Funding Pool, as well as the overall community impact. Develop and implement strategies for enhanced performance and benefit to the community, such as projects may not be refunded in subsequent years if performance objectives are not achieved.

<u>Consolidated Community Funding Advisory Committee</u>

The primary coordinating group for the Consolidated Plan process is the Fairfax County Consolidated Community Advisory Committee (CCFAC). CCFAC has representation from Fairfax County Redevelopment and Housing Authority (FCRHA), numerous boards, authorities and commissions, the business community, schools community, faith community, children younger than school age community, and youth needs and services community. Members are appointed by the County Executive and serve for a term of three years. CCFAC is responsible for the overall citizen and community input process and for preparation of the Consolidated Plan and the annual update to the One-Year Action Plan, is composed of representatives from the following:

Advisory Social Services Board
Business Community
Community Action Advisory Board
Community Council on Homelessness (formerly Homeless Oversight Committee)
Fairfax Area Commission on Aging

Fairfax Area Disabilities Services Board
Fairfax County Alliance for Human Services
Fairfax County Human Services Council
Fairfax County Public Schools/PTA/Schools Community
Fairfax County Redevelopment and Housing Authority
Fairfax County's Revitalization Areas
Fairfax-Falls Church Community Services Board
Fairfax-Falls Church United Way
Fairfax Partnership for Youth/Youth Community
Health Care Advisory Board
Preschool-Age Community

These groups and the Directors and staff contacts of the respective County agencies or organizations receive copies of the Proposed Action Plan for review and comment to the CCFAC or prepare formal public comment for consideration by the Board of Supervisors.

Participating and Cooperating Jurisdictions

The lead coordinating agency is the Fairfax County Department of Housing and Community Development, working with an inter-agency team that includes the Department of Family Services, the Department of Administration for Human Services, the Department of Systems Management for Human Services, and the Office of the County Executive.

The Consolidated Plan is also furnished to the Towns and Cities which participate in the Fairfax County CDBG and HOME Program, and to the City of Falls Church, which contracts with Fairfax County for emergency shelter and services to the homeless (but does not participate in the County's CDBG and HOME program). The following jurisdictions are included.

Town of Herndon
Town of Clifton
Town of Vienna
City of Fairfax
City of Falls Church

Additional Citizen Organizations and Advisory Groups

Another essential part of the coordination process is support for the efforts of other public, private and nonprofit organizations that seek funding for housing activities and programs from a variety of federal and State funding sources.

The following additional citizen organizations, councils, boards and advisory groups, which are not specified in the Citizen Participation Plan and may not be represented directly on the CCFAC, and/or staff contacts for these groups, are given the opportunity to provide comments and input to the CCFAC or the Board of Supervisors on the Proposed Five-Year Consolidated Plan FY 2011-2015.

Affordable Dwelling Unit Advisory Board
Economic Development Authority
Human Rights Commission
Tenant-Landlord Commission
Commission for Women
Fairfax County Private Industry Council

FCRHA Resident Advisory Council
Planning Commission
Northern Virginia Private Industry Council
Northern Virginia Regional Commission
Therapeutic Recreation Services Advisory Council
Employer Child Care Council
Advisory Social Services Board
Route 1 Task Force for Human Services
Federation of Citizens Associations
Magisterial District Councils
Chambers of Commerce
Fairfax County Athletic Council
Fairfax County Community Center Coalition
Community Improvement Committee
Community Policy & Management Team
Resource Advisory Program
SACC Parent Advisory Council
Head Start Parent Policy Council
Medical Care for Children Project
Juvenile Court Citizens Advisory Board
Commission on Organ & Tissue Donation & Transplantation
Mt. Vernon Mental Health Center Advisory Board
Northwest Center for Community Mental Health Advisory Board
Northern Virginia Mental Health Foundation
SAARA of Northern Virginia

Associations and Nonprofit Organizations

Over 220 associations and nonprofit organizations involved in affordable housing, community development, emergency assistance, homeless services, and supportive housing programs were involved in the development of the Consolidated Community Funding Pool targeted funding priorities and in review of the draft proposal evaluation criteria. These organizations were also given the opportunity to provide comments on the proposed Five-Year Consolidated Plan FY 2011-2015 to the CCFAC or to prepare formal comments for the Board of Supervisors.

Antipoverty

While Fairfax County has one of the highest median household incomes in the nation (estimated $107,448 in 2008), there were an estimated 47,832 persons living below the poverty level in 2008 (based on data from the American Community Survey (ACS). Although the percent of the population below poverty in Fairfax County (4.8 percent) is among the lowest of Virginia jurisdictions, the number of persons below poverty in Fairfax County is larger than the total population of 99 of the 134 local jurisdictions in Virginia.

Persons with extremely-low incomes in a typically high-income area have a high incidence of housing problems. According to the 2009 CHAS tables provided by HUD, 14,516 (87 percent) Fairfax County renter households with incomes below 30 percent of the area median income have what is described as "one or more housing problems" defined as having a significant cost burden (meaning over 30 percent of their income is used for housing costs), incomplete plumbing facilities, incomplete kitchen facilities, or overcrowding (over 1 person per room). (HCD and CHAS 2009).

Based on data from the 2006-2008 ACS, high concentrations of renters with low-incomes (below 50 percent of AMFI based on a family of 3, $46,200) are found in Groveton (50.7 percent of renters are low-income), Baileys/Seven Corners area (47.4 percent), and the town of Herndon (45.9 percent). The northern portion of the County has very few low-income renters.

Agencies in Fairfax County work together and coordinate services to help combat poverty and help low-income residents to become self-sufficient. Funds from the Consolidated Community Funding Pool (CCFP) support programs that target households with incomes below poverty.

One of the funding priorities in the Consolidated Community Funding Pool (CCFP) is to provide the supports people need to be self-sufficient. Programs funded through the CCFP with CSBG funds are specifically targeted toward households with incomes at or below the poverty program guidelines. The Fairfax County Redevelopment and Housing Authority (FCRHA), the Fairfax County Department of Family Services (DFS), and the Community Action Advisory Board (CAAB) share responsibilities in combating poverty.

The Public Housing Authority (PHA) entered into a cooperative agreement with the TANF Agency (DFS), to share information and/or target supportive services. The FCRHA/HCD and the Fairfax County Department of Family Services (DFS) have been collaborators in self-sufficiency programs, such as the Partnership for Permanent Housing, Project Self-Sufficiency, and Operation Bootstrap prior to the current Family Self-Sufficiency (FSS) program. The DFS and HCD are two departments within the Fairfax County government structure and the service collaboration predates cooperative agreements. Representatives of DFS and other agencies sit on the FSS Program Coordinating Committee. FSS participants' service plans include the use of a Release of Information that permits the exchange of information between the agencies.

Other coordination efforts between the PHA and TANF agency include client referrals; Information-sharing regarding mutual clients (for rent determinations and otherwise); coordinate the provision of specific social and self-sufficiency services and programs to eligible families; and jointly administer programs. In addition to this the PHA and TANF

agency administer a special program to award Housing Choice Vouchers (HCV) for homeless families in conjunction with supportive services and the Family Unification Program.

The Community Action Advisory Board (CAAB) serves as an advisory body to the Fairfax County Board of Supervisors. The CAAB advises the Board on the needs, concerns and aspirations of low-income persons and recommends policies that promote meaningful change. The following are goals established by CAAB:

- Identify review and develop policies as they relate to low-income residents
- Support, when possible, increases in programs and services providing the greatest supports to low-income families and individuals and, when necessary, actions that minimize reductions to such programs.
- Maximize opportunities to provide input based on identified priority areas
- Oversee the disposition of Community Service Block Grant funds, to include:
    - Researching and assessing community needs
    - Obtaining public input from facilitating public hearings for low-income families and individuals
    - Allocating funds
    - Approving programs and contracts with community organizations serving low-income persons
- Educate the Board of Supervisors and other County officials, other agencies and civic groups, the low-income community and citizens of Fairfax County in support of the CAAB mission

Community Action Programs (CAPs) are public-private partnerships, locally managed and controlled by volunteer boards of directors, for the purpose of reducing poverty and promoting self-sufficiency of the poor.

Several anti-poverty services and programs are offered to residents and participants in FCRHA programs. The PHA employs several policies to enhance the economic and social self-sufficiency of assisted families. These policies include:

- Public housing rent determination policies
- Public housing admissions policies (Working Preference)
- HCV admissions policies (Working Preference)
- Preference/eligibility for HCV homeownership option participation
- Housing and Community Development Corporation and FCRHA Resolutions
- Implementing Economic Uplift and Self-Sufficiency
- Adoption of Moderate Income Direct Sales (MIDS) Homebuyers Eligibility
- Requirements
- Adoption of Policies and Regulations Concerning the Sale and Rental of Affordable Dwelling Units (First Time Homebuyers' Program)
- Authorization to Establish a New Family Self-Sufficiency Program
- Authorization to Formalize Current Practices for Economic Uplift and Self-Improvement Initiatives
- Partnership for Permanent Housing, a grant funded program to offer homeownership opportunities to Public Housing residents demonstrating the ability to graduate from that program

In analyzing family public housing developments, FCRHA determined that there were concentrations of poverty in some projects. To address this issue, FCRHA is employing waiting list skipping for the following projects to retain or attract higher-income residents.

Villages at Falls Church
Greenwood
Belle View
Barros Circle
The Atrium
Old Mill Gardens
Heritage Woods South

FCRHA is employing waiting list skipping for the following projects to assure access for lower-income residents.

Robinson Square
Heritage Woods North, Colchester Town, Springfield Green
Greenwood II
Barkley Square
Water's Edge
West Ford II
Reston Town Center
Ragan Oaks
West Glade, Copper Mill, Monroe Chase, Virginia Station, Townes at Walney Oaks, Townes at Woodland Glen

Coordination

The Housing Blueprint that sets the strategy for the FY 2011-2015 Plan recognizes that there are three legs of the stool of affordable housing including non-profit partners, the private housing market, and the public sector. The County's Comprehensive Plan places high emphasis on policies that encourage leveraging and coordination. Implementing policies that encourage these principles are a priority strategy for the next five years.

The Consolidated Plan process is an example of the County's commitment to coordinated efforts. The Consolidated Community Funding Advisory Committee (CCFAC) is the primary coordinating group for the Consolidated Plan process. CCFAC has representation from Fairfax County Redevelopment and Housing Authority (FCRHA), numerous boards, authorities and commissions, the business community, schools community, faith community, children younger than school age community, and youth needs and services community. Representatives from the full spectrum of stakeholders provide input into the priorities set for the upcoming years. Working together and setting priorities contributes to better understanding of current policies and services and fosters better coordination among groups.

Coordination of multiple departments, agencies, and services is a difficult task and one that the County is striving to improve. Citizen comments from the public forums held in preparation for the FY 2011-2015 Plan, revealed concern for a lack of coordination in providing services.

One of the goals of the Consolidated Community Funding Pool is to help build public/private partnerships and improve coordination, especially within the human services regions of the County. The CCFP process reflects significant strides to improve services to County residents and to usher in a new era of strengthened relations between the County and community nonprofit and faith-based organizations. First, all programs funded through this process are required to develop and track program outcome measures. To aid agencies in meeting this requirement, the County has provided several performance measurement training opportunities for staff and volunteers from all interested community-based agencies. Second, the criteria used to evaluate the proposals explicitly encourage agencies to leverage County funding through strategies such as cash match from other non-County sources, in-kind services from volunteers or contributions from the business community and others. Third, the criteria encourage agencies to develop approaches which build community capacity and involve residents and the individuals and families in the neighborhoods being served. Fourth, the County has provided a nonprofit organizational development initiative to strengthen current and potential CCFP applicant organizations.

Coordination of County Agencies

Fairfax County's Office of Coordinated Services Planning (CSP) has extensive knowledge of the resources available to Fairfax County citizens. CSP provides Fairfax County residents with information, referral, linkage, and advocacy to the available public and private human services. CSP manages and continually updates Fairfax County's Human Services Resource Guide, a database that contains detailed information on resources that are available to Fairfax County residents. In addition, through partnerships with community-based organizations and other Fairfax County agencies, CSP offers the following services:

- **Basic Needs**: Emergency food, shelter, clothing, furniture, and transportation to medical appointments
- **Financial Assistance**: Rent or mortgage assistance to prevent eviction or foreclosure, security deposit assistance to secure permanent housing, utility payments to prevent disconnection, prescription assistance, and other special needs. Assistance is determined on a case-by-case basis and is generally available only once a year
- **Health Care Services**: Complete enrollment or make referrals for enrollment to the Northern Virginia Dental Clinic based on residents' zip codes. Provide referrals for other health care services—medical, dental, eye glasses, hearing aids, pregnancy, and family planning
- **Referrals to Services and Resources**

CSP staff members are multilingual and CSP also offers interpretive services so that all citizens may be served. When contacted by residents in need of services, CSP assesses individual and family situations and works with citizens to provide a personalized integrated service plan. The goal of the service plan is to help solve crises by coordinating the connection with the services and resources available within the community to address immediate and long-term needs. Services are provided by Fairfax County agencies, state and federal agencies, nonprofit organizations, community-based organizations, faith-based organizations, and some private for-profit organizations. CSP explores prevention and early intervention services and strategies available through community-based organizations and Fairfax County service providers and encourages and promotes self-sufficiency which involves economic independence and social stability.

The Public Housing Authority (PHA) coordinates with CSP in their admission process. CSP helps individuals and families in filling out applications for public housing and/or Housing Choice Vouchers. PHA works closely with other County agencies and has a cooperative agreement with the TANF Agency (DFS), to share information and/or target supportive services. The FCRHA/HCD and the Fairfax County Department of Family Services (DFS) have been collaborators in self-sufficiency programs, such as the Partnership for Permanent Housing, Project Self-Sufficiency, and Operation Bootstrap prior to the current Family Self-Sufficiency (FSS) program. The DFS and HCD are two departments within the Fairfax County government structure and the service collaboration predates current cooperative agreements. Representatives of DFS and other agencies sit on the FSS Program Coordinating Committee. FSS participants' service plans include the use of a Release of Information that permits the exchange of information between the agencies. Project Homes, which also serves families in transitional housing, is another joint venture of DFS and HCD.

Other coordination efforts between the PHA and TANF agency include client referrals; Information-sharing regarding mutual clients (for rent determinations and otherwise); coordinate the provision of specific social and self-sufficiency services and programs to eligible families; and jointly administer programs. In addition to this the PHA and TANF agency administer an allocation of Housing Choice Vouchers (HCV) for homeless families in conjunction with supportive services and the Family Unification Program.

Coordination to Serve Homeless Persons and Families, Persons with Physical or Mental Disabilities

The Fairfax County Redevelopment and Housing Authority (FCRHA) and the Department of Housing and Community Development (HCD) continually works to facilitate more coordination in addressing the housing needs of persons who are homeless and persons

with disabilities. For example, HCD and the Fairfax County Office to Prevent and End Homelessness (OPEH) co-convene the county's "Housing Options Work Group", which is made up of a variety of non-profit groups serving the homeless and staff from the CSB and the Department of Family Services. This group played a key role in the development of the Housing Blueprint. Its on-going charge is to identify housing options to meet the metrics in the Blueprint and the county's Plan to Prevent and End Homelessness in Ten Years.

The Fairfax-Falls Church Community Services Board provides a full array of mental health and substance abuse treatment services to children, youth, adults and families. Services include: outreach, intake and assessment, residential services, outpatient and day treatment services, case management, detox and medication management, emergency services, and day support and vocational services. Services are directly-operated or provided through contracts with community-based partners, including Pathway Homes, PRS Inc., and Service Source. Services are provided at the shelters, at regional mental health centers, and at agency sites. Emergency Shelters have outreach staff who work to connect homeless individuals and families with case management, supportive services and housing. Recent improvements to the discharge policy will improve tracking and coordination between special needs service providers and reduce the risk of homelessness.

Examples of the myriad of nonprofit agencies that partner with the County to coordinate efforts to serve special needs populations are New Hope Housing, Reston Interfaith, and Volunteers of America. FACETS partners with other nonprofits to expand services. Among services and programs partially supported by County funds, FACETS has developed Hypothermia Prevention Programs in the four Human Services Regions of the County through partnerships with dozens of faith communities.

The Fairfax Area Disability Services Board (FA-DSB) is a state-mandated advocacy group that works to improve the lives of persons with mental and physical disabilities. FA-DSB works closely with the Fairfax County Department of Family Services' Disability Services Planning and Development (DSPD) to provide coordinated services to persons with physical or mental disabilities. In addition to representing the needs of persons with mental and physical disabilities to local and state governments and the private sector, FA-DSB works to develop and support linkages between services to improve the coordination and the array of services for persons with disabilities.

Coordination of Government Agencies and the Private Sector

Another essential part of the coordination process is support for the efforts of other public, private and nonprofit organizations that seek funding for housing activities and programs from a variety of federal and State funding sources. When appropriate and feasible, Fairfax County provides financial support to support such efforts.

Fairfax County expands opportunity for providing needed services to its citizens and augments it programs through utilizing both state and federal resources and resources from the private sector (see Table 68).

Table 70. HOUSING AND COMMUNITY DEVELOPMENT RESOURCES EXPECTED TO BE AVAILABLE (FY 2011-2015)
Fairfax County, Virginia

FEDERAL RESOURCES	STATE RESOURCES	LOCAL GOVERNMENT RESOURCES	PRIVATE RESOURCES
Home Investment Partnerships Program (HOME) HOPE for Youth Community Development Block Grant (CDBG) CDBG Section 108 loans Emergency Shelter Grants (ESG) Housing Opportunities for Persons with AIDS (HOPWA) Public Housing Operating Subsidy Capital Fund Grant Program Community Services Block Grant (CSBG) Department of Energy (DOE)/Other Energy Programs Shelter Plus Care Low-Income Housing Tax Credits/ Preservation Programs Housing Choice Voucher Program Housing Choice Voucher/ Homeownership Program Neighborhood Networks Grant (HUD) Supportive Housing for Persons with physical or mental disabilities (Section 811) Supportive Housing of the Elderly (Section 202) Surplus Housing for Use to Assist the Homeless Supportive Housing Program (SHP) Neighborhood Stabilization Program (NSP)	Virginia Housing Development Authority (VHDA) Loans Virginia Housing Partnership Fund Homeless Intervention Program Sponsoring Partnerships and Revitalizing Communities Program (SPARC) State Tax Credit for Elderly/Disabled Housing Virginia Department of Housing and Community Development (VDHCD) Neighborhood Stabilization Program Funds	Consolidated Community Funding Pool (CCFP) County Funds (including Housing Trust Fund) Affordable Housing Partnership Program Fairfax County Rental Program (FCRP) Home Improvement Loan Program Home Repair for the Elderly Program Blight Abatement Program First-Time Homebuyer Program Emergency Housing and Shelter Program Emergency Assistance Program	Financial Institutions Private Developers Other Private Businesses Nonprofit Housing Development Corporations Nonprofit Service Organizations Private Tax Credit Investors

One of the best examples of coordination with other government agencies to provide services is through HOPWA. Fairfax County and 15 other Northern Virginia cities or counties work with the Northern Virginia Regional Commission (NVRC) to address the needs of Persons with AIDS (HOPWA). NVRC acts as the administrative agent for HOPWA funds in the Virginia portion of the metro Washington Eligible Metropolitan Area (EMA). These funds provide services to establish and maintain housing for low-income Persons Living with AIDS/HIV (PWAs). Through a regional approach and community-wide strategies, Fairfax County will continue to provide affordable housing and other resources for persons with HIV/AIDS in coordination with surrounding jurisdictions. The County will continue to promote community partnerships between State and local governments and community-based non-profits to create models and innovative strategies to serve the housing and related supportive service needs of persons living with HIV/AIDS and their families. The County also strives to leverage funding and will continue to identify and supply community strategies related to supportive services in conjunction with housing to ensure the needs of persons living with HIV/AIDS and their families are met.

The County works in partnership with community organizations such as the Fairfax Area Commission on Aging to provide services to seniors. Fairfax Area Commission on Aging promotes the needs of senior citizens and serves as liaison between the county and other governmental, public, and private groups concerned with aging issues. In addition, the County takes advantage of the Senior Community Services Employment Program, a federally subsidized employment training program that provides temporary part-time work experience and job training in community services activities for people age 55 and over who have limited income. It is often called the Title V Program because it is funded under Title V of the Older Americans Act of 1968.

Another example of how the County partners with other entities to provide services is the Fairfax County Community Health Care Network. The Fairfax County Community Health Care Network is a partnership of health professionals, physicians, hospitals and local government. It was formed to provide primary health services for low income, uninsured County residents who cannot afford primary medical care services for themselves and their families.

Coordination of Economic Development Efforts

Fairfax County should maintain its prosperous economic climate and varied employment opportunities by continuing to develop and pursue a broad range of actions, including public/private partnerships, designed to enhance its long-term competitive position in regional, national, and international economic development. At the same time, the County should enhance those systems that support the employability of the population for its economic betterment.

Public-Private partnership efforts have successfully laid the ground-work for two major mixed use developments which will advance area revitalization.

The Northern Virginia Regional Partnership represents more than 1.6 million residents within four counties (Arlington, Fairfax, Loudon, and Prince William), five independent cities (Alexandria, Fairfax, Falls Church, Manassas, and Manassas Park), and four towns (Dumfries, Herndon, Leesburg, and Vienna).[33]

[33] Northern Virginia Regional Partnership, Inc.

The Northern Virginia Regional Partnership collaborated with the Northern Virginia Technology Council, a regional technology industry association with over 1,000 business members. Together, they developed The Northern Virginia Technology Workforce Development Initiative, which has the goal of developing a "world-class, knowledge-based workforce that will attract other businesses to locate in Northern Virginia."[34] The following are some key elements of the Regional Partnership's Strategic Plan that they have acted to implement:[35]

- Attract and train new workers into the region's technology industries
- Expand opportunities to make career transitions toward technology jobs
- Begin to develop the region's future technology workforce

The County's revitalization focus has shifted to investing in mixed-use commercial areas. There is a continued effort to use public funds to leverage private sector investment to improve public infrastructure, promote new business development and jobs, retain existing businesses, reduce blight, enhance livability, and bolster the tax base to ensure the County's ability to provide public services. The result will be the creation of meaningful jobs for the unemployed and low- and moderate-income residents of the area, preservation of affordable housing opportunities for nearby residents, as well as activities to promote the substantial revitalization of the County's neighborhoods.

[34] Northern Virginia Regional Partnership, Inc.
[35] Northern Virginia Regional Partnership, Inc.

Monitoring

The Department of Housing and Community Development monitors and reports to the Consolidated Community Funding Advisory Committee (CCFAC), the FCRHA for some activities, the Board of Supervisors and the public on progress and achievements of programs funded under and covered by the goals of the Consolidated Plan.

For the Consolidated Community Funding Pool (CCFP), which uses CDBG, County General Funds and the Community Services Block Grant (CSBG), funding awards are made by the Board of Supervisors and contracts are executed with the nonprofit sub-grantees. The contracts include each sub-grantee's proposal descriptions, goals, projected outcomes, and budget. These elements form the basis for monitoring each program and for the program's evaluation.

The Department of Administration for Human Services and the Department of Housing and Community Development are responsible for monitoring the performance of CCFP programs funded by CSBG, CDBG, and County General Funds. There are certain standard contract requirements (including federal requirements) which are common to all CCFP performance evaluations. A monitoring checklist is used for these standard contract requirements. In addition, staff also reviews each sub-grantee's annual audit.

The County Department of Housing and Community Development, Department of Systems Management for Human Services, and Department of Administration for Human Services collaborate with various entities to provide training to nonprofit organizations in monitoring and accountability. Outcome measurement is a funding requirement and assists organizations to: (1) focus on their mission, (2) track program results, and (3) develop consistent procedures for reporting services delivered as well as a basis for determining the effectiveness of funded programs.

Appendix A - Public Input Forums

Notes From
Fairfax County Five-Year Consolidated Plan
FY 2011 – 2015 Public Input Forum
Affordable Housing and Community and Economic Development

OCTOBER 28, 2009, 1 p.m.
RESTON COMMUNITY CENTER, HUNTERS WOODS VILLAGE

Affordable Housing

What are Fairfax County's Current Affordable Housing Needs?

- Units for singles
- Units for seniors
- Units for single seniors, particularly those whose monthly social security payment is $1,000 or less on average; nursing homes garnish social security monthly payments and little is left over
- The Endependence Center helps people live independently in the community, helps those with disabilities; SSDI is also eaten up each month by housing alone; need for universally-designed units
- Limited stock; limited affordability
- So few units for people with disabilities of all kinds
- For people with emotional disturbances there is nothing for short-term or long-term housing especially for singles
- October is Domestic Violence Prevention Month. Victims of domestic violence, some emotionally disturbed, are experiencing great difficulty finding available housing on an emergency basis; the victims tend to be married, often with kids, but it is also difficult for women who do not have kids/singles to find affordable housing; need long-term/permanent housing solutions for these women as well
- Permanent Supportive Housing to help special needs residents remain in their affordable housing (disabled, mentally ill, seniors, domestic violence victims)
- There is a need to expand the ways to educate the public about the homeless need and how the public can help.
- Churches are more involved in helping persons who are homeless (such as hypothermia program) but there is a need for training for members of faith community: counseling and assimilating immigrant populations; how to refer immigrant households to appropriate services; service coordinators who know how to access the appropriate service providers; Stephen Ministry model
- Needs to be more exposure on how to capitalize on the interactions with different agencies and nonprofit and church groups
- Need for a coordinated list of organizations that provide services to be distributed countywide so that referrals are made from the same reference guide
- Wiki community bulletin board online, updated by users within the services field, showing nonprofit, church, and County services available; current online resources are fragmented (Human Services Resources Guide is already online, but apparently needs better distribution); 211 number is an underused resource.
- Housing for troubled teens, e.g., emancipated youth, teens who are homeless, teens who do not have the option to return home for whatever reason; Priority should be on stabilizing a child's life; will lead to a more stable and safer community

- Family-sized affordable housing, e.g., 3-4 bedroom units for larger families/households; need to increase the number of these types of units that are affordable to low-income households; occasional need for units for even larger households with more than 5 members; many immigrant and refugee households have this need, even as high as 7 and 8 member households; important to consider where this type of housing is located, e.g., within walking distance to certain amenities and services for households who are otherwise dependent on public transportation
- Rehabilitating/Modernizing the current housing stock, ensuring that low-income households have access to the same quality of housing stock and access to amenities as any other households, e.g., inclusion of modern appliances such as dishwashers and laundry machines, access to the Internet; Make it easier to rehab units since individuals don't know
- Is there a way to create incentive to renovate housing and modernize it? Tax credits go to developers, but some nonprofit developers can also get them.
- Incentivize the market to create affordable units that meet these criteria, not just large real estate developers, but also "mom and pop" property owners with limited, small holdings that are in need of modernization.

What will Likely Be the County's Future Affordable Housing Needs Over the Coming Five- to Ten-Year Period?

- Senior housing will continue to be a growing need.
- Number of seniors who fall through the cracks: not yet receiving social security, too old to begin a different job with greater income, too much income to receive public assistance of any kind
- Retrofitting units to enable residents to age in place, stay in their homes as long as possible
- Understanding how many households work in the county, but do not live here for affordability reasons; or, households who need services/assistance, but do not apply because they are not eligible for annual income eligibility reasons
- Improvements in public transportation services tied to the development of affordable housing options
- Addressing the current foreclosure crisis as its impact will be felt well into the coming years
- Better understanding of future needs requires better understanding of current needs such as what percentage of residents is paying 30% of income for rent, consequences of foreclosure crisis.
- The use of Universal Design for the development of any new units, including rehabilitation and even acquisition

Prioritization Criteria for Which Needs to Address with Limited Resources

- Identifying and meeting the needs of extremely low-income households
- Single-Room Occupancy units (SRO's) to ensure that singles who are homeless have housing, ideally with supportive services
- Chronic homelessness; need to look at root causes of homelessness through data and information
- Persons who are disabled
- People who are currently homeless vs. those who reside in a shelter, those with no viable housing options, households who have an immediate crisis first, in the most

dire need; creating a hierarchy of basic needs and a tiering system of who is served first
- To get persons out of situation
- Children who don't have stable housing (have future additional needs; additional costs)
- Prevention: meeting needs before they actually are manifest

Affordable Housing Solutions and What is Working Well Under the County's Current Affordable Housing Development and Preservation Programs?

- Housing First does work well and rapid re-housing does work well
- County did pass 10-Year Plan for ending homelessness; implement goals
- Wealth of housing advocates in the county
- County has collaboration; County did buy large apartments; County needs to do more advocacy

- Some initiative toward acquiring and preserving housing

- Easy to get Low-Income Tax Credits (LITC) for buying housing; not as many tax credit deals as in the past due to the economy; need additional local resources; with a 30% decrease in value of tax credits in past year, results are a bigger finance gap now for developers
- Where will additional resources come from?

- Maintain tax at current level; diversify taxes
- Allow different zoning to allow permit housing (like university or hospital) on site.
- Zoning and incentives for developing housing
- Incentives for developers to upgrade and rehabilitate housing, like incentives for SRO's to be developed in other places

- Get citizens involved more in transitional housing; use more nonprofits to solve problem
- Make public more aware of how they can help, like hypothermia; why can't we step up as individuals and nonprofits and churches to do more; more buy-in from the community to address the problems
- Mixed-income, mixed-use development; mix of household incomes, housing types and commercial development
- Improved working relationship between Department of Housing and Community Development (HCD) and the Department of Planning and Zoning (DPZ)
- Affordable housing units in the county can help check the rate of increase in the cost of market rate housing.
- Education of general issues needed, and examples and opportunities to help; public must be informed
- Like Arlington, bonus density program could be used in Fairfax County; also mixed-income, mixed-use applied in more places in Fairfax County; Wiehe Avenue train station is an example coming along.
- In Arlington, they asked, regarding the density of one side of a street that was being built on, to get an additional 3-4 units of housing.
- Fairfax County has 7 Revitalization Areas, and affordable housing needs to be part of all of them; example is Cameron Crescent at Lake Anne
- A lot of market rate housing could be made to go lower (lower rents), like through competition; some upgrade of units to encourage competition

- Landlords could encourage code enforcement; many units are in poor state of disrepair; if County put more time into health and safety inspections, it would help the existing housing improve (not enough inspectors)
- To prioritize resources, determine need; if there are numerous violations over the years, then that unit should have priority; don't put money into the housing that needs the least to save money
- Do a cost benefit analysis to help us understand the offset and how it might benefit Fairfax County.
- What is the balance between numbers of housing needing lots of money and people who need housing; Per an Arlington County study: given the amount of resources, this is what we can do with people who are at 50% or 60% of Area Median Income (AMI); the cost went up dramatically; they had an inter-agency buy down to make units affordable
- Consider subsidizing the building and providing affordable housing so that there is a mix of building subsidies and rental subsidies.
- Never enough vouchers, and chronically homeless are not eligible for vouchers (no singles waiting list)
- Have local money and Penny Fund fund some of the gap in housing and subsidizing; hard to get a loan so best option is direct subsidy to residents
- Rehabilitation is much faster and cost effective than building new construction; permits are easier for rehabilitation

Community and Economic Development

What are Fairfax County's Current Community and Economic Development Needs?

- Increased need for access to capital; banks not making loans; more people coming to Enterprise Development Group (EDG) and other groups like them around the county and at a higher income level than have seen in past
- Concerns by people how to take on debt
- Through IDA program, used to have a lot of people saving to buy a house; now people are not doing that but saving for education and vocational training
- Jobs are an issue; people are having hard time finding work
- Some people have jobs, but work has slowed down, so they are applying for a loan for a second job, like buying a taxi or truck.
- Financial literacy training in dealing with refugees; for refugees, it is different here in the United States; financial literacy training is also needed for native-born persons

What will Likely Be the County's Community and Economic Development Needs Over the Coming Five-Year Period?

- Some of those people who would have come to EDG for loans, could go to banks and get them
- Regarding the IDA program, people would go back to saving for houses
- Assumption that economy gets better

Prioritization Criteria for Which Needs to Address with Limited Resources

- People with most dire needs
- Expand people's knowledge and experience level; target those with greatest need
- Target those who have least access.

What is Working Well Under the County's Current Community and Economic Development Services and Resources?

- Not a lot of capital opportunities for businesses besides EDG; The nonprofit group, Boat People, works with Vietnamese and Thai populations and Our Daily Bread does some, too.
- There is more need than what the existing groups can provide.
- EDG would like to serve more people but due to resources and income level constraints they can't (clients' income too high to fit into government programs - but Northern Virginia is in a high cost area).
- Need is greater than capacity due to resource level.
- IDA program underutilized due to artificially low income levels set by State
- IDA program for saving for a house is underutilized, due to persons' fear and not understanding the opportunity; to improve this would be having people understanding better the opportunity, reducing fear and having the market becoming better
- Housing workshops on this could help people understand this better; have County staff partner with nonprofits

Over the Next Five Years, What Do You See as Opportunities for Change and Improvement?

- Facilitation of partnerships and groups working together; so many different groups out there; have the County take a role in facilitating that
- The County continue having events that are useful to the community at large; maybe once a quarter have nonprofits come together - or twice a year
- Topics could be on economic strata of those being served; would help with referrals
- Incorporating suggestions for Five-Year Plan in County legislative priorities that they present to the State (could be for changing how/what income levels are used for IDA program)
- Priorities for strategies – making priorities those that meet Community Development Block Grant (CDBG) legislation
- Prioritize things that are needed the most; the County is nowhere near having the need being met because of lack of resources; prioritize making sure that the most needy people get what is needed

Group Summary

- Microloan, IDA, financial literacy counseling are all working; need more financial resources
- Marketing needs increased support to connect with more geographic areas or population groups, such as language minority groups
- When economy turns back to normal, more people will be interested in buying homes – so County should lay groundwork letting public know there are groups out there to help, such as help with IDA program and saving for a house, and remind people about this.
- If there is increased demand for capital, banks may be a little leery to address it. Could the County encourage banks in some way – show them peers who are doing it or inform them of some programs out there; commend banks for doing that
- Regarding criteria for prioritizing options, the options could all be done at the same priority level.

- Regarding the legislative recommendation, its priority may be dependent on the timing of when the package is done each year; same with the other priorities.

Notes From
Fairfax County Five-Year Consolidated Plan
FY 2011 – 2015 Public Input Forum
Affordable Housing and Community and Economic Development

OCTOBER 29, 2009, 5:30 – 8:50 p.m.
FAIRFAX COUNTY SOUTH COUNTY GOVERNMENT CENTER
8350 Richmond Highway, Alexandria, VA 22309

Affordable Housing

What are Fairfax County's Current Affordable Housing Needs?

- Single Room Occupancy Units (SRO's) with support services (mental health, life skills, etc.)
- Housing for seniors
- Assisted living that is affordable in Fairfax County
- Independent living – what is available
- Resources to prevent homelessness
- Transitional housing (coordination of support services)
- Buy-in from County officials – meaningful efforts to develop more housing
- Housing First concept implementation
- Developer/government accountability
- Purchase of current stock by County
- Zoning restrictions on shared housing
- Historical properties – constraints on development

Population that needs assistance:

- Chronically homeless
- Seniors on fixed income
- Persons who are disabled living independently
- Persons who are disabled transitioning
- Victims of domestic violence
- Substance abusers
- Ex-offenders

What will Likely Be the County's Future Affordable Housing Needs Over the Coming Five- to Ten-Year Period?

- Base Realignment and Closure (BRAC) effects (government accountability)
- Influx of new immigrants (overcrowding, language barriers)
- Walkable communities – less energy consumption
- Rising energy costs – need green building – reduced operation costs
- Economic recovery – increased housing prices
- NIMBY – "not in my back yard" attitude
- Tax increases (in order to provide revenue to build)

- Reduction of social work services due to budget
- Sliding scale for County services (Recreation Centers, etc.)
- Education of public regarding housing needs/awareness
- Crisis of caring (decreased giving in affluent county)
- Development of unused church property

Prioritization Criteria for Which Needs to Address with Limited Resources

- Those who are most in need should be housed first.
- Bigger "bang for buck" by assisting the working poor (housing preservation)
- Look at best practices in other jurisdictions.

Affordable Housing – Resources, Opportunities, and Strategies

Affordable Housing Solutions

- Develop more SRO's with support services (mental health, life skills, etc.)
- Transitional housing (coordination of support services)
- Housing First concept implementation
- Purchase of current stock by County
- Government accountability to develop more affordable housing
- More parcels of land to be developed
- Church properties for use as affordable/low-income housing
- Zoning and policy changing decisions need to be made
- Education of decision makers
- Find ways to promote shared housing while protecting homeowners – address zoning restrictions
- Provide incentives to developers for mixed-income housing that includes units affordable to households with income under 50% Area Median Income (AMI).
- Support housing for the working poor (30-80% of AMI) to expand the middle-class and support a strong tax base
- Social workers in the County and nursing homes work together to service clients or share resources.
- Reopen the assisted living property located in Lorton, VA, and have it service low income elderly citizens.

Solutions for Housing Needs in the Next 5–10 Years

- BRAC (government accountability)
- Add walkable communities – less energy consumption
- Increase green building – reduced operation costs
- Tax increases (in order to provide revenue to build)
- Educate public regarding housing needs/awareness
- Improve crisis of caring (increase giving in affluent county)
- Development of unused church property to use for affordable/low-income housing
- Senior housing on church properties – small, 4 units per building
- Higher-density living and conveniences
- Incentives to build smaller-units housing
- Energy efficient housing means lower operating costs and lower rents

Community and Economic Development

What are Fairfax County's Community and Economic Development Needs?

- Job training (access to and affordability)
- Workforce development
- Small business development "training"
- Engaging the business community
- Community connectedness between residents and business owners
- Corporate/business social responsibility
- Transportation (Metro expansion to Belvoir)
- Access to streets and sidewalks, bus shelters, curb cuts, paths to bus stops
- Diversity of programs at senior centers
- Education/awareness of needs/opportunities for business partnership
- Continue to work on community-building strategies with those communities in need
- Quality of life vs. cost benefit analysis – criteria/measures
- Where will resources/money come from?

Prioritization Criteria for Which Needs to Address with Limited Resources

- Keep present percentages of housing vs. economic development in the Consolidated Plan as is at 85%/15% as long as you have "livable communities".
- Organizations should get points for working with the community.
- Give points to organizations who build up strong partnership with others to leverage County funding.
- Find out how other counties are able to spend money towards affordable housing.
- What kind of qualify of life do we want?
- Penn Daw is an example of community development with living units.
- Let's see some movement, i.e., people getting housing.
- Balance between workforce units preserved vs. persons who are homeless/of super-low income
- Support the mixed community concept - diverse income levels; support in communities
- Priority should be given to organizations that serve minorities, language minorities and immigrants and single parents who are often very low income.
    - Need help in their language skills in order to be able to move ahead and become self-sufficient

Community and Economic Development Solutions

- Job development
- Job training
- Support for small business
- Self-employment through small business ownership is a viable option for job seekers, especially in current economy where there are not enough jobs.
- Bring small business community as stakeholders.
- Community businesses being part of the community and contributing to the community
- Community events/engagement
- Transportation access
- Streets/sidewalk access/curb cuts
- Bus shelters

- Federal government contractors contribute to the community they work in or schools.
- Education of community businesses
- Some businesses are international, others represent the community.
- Empowering "deprived" communities to develop and have a sense of community
- Support community centers.
- Quality of life vs. cost effectiveness/benefits

ITEMS TO KEEP IN MIND

- Senior housing that is local
- Bonds and creation of new housing
- Special interest in those transitioning out of facilities
- Not enough Housing First
- Case coordination

Notes From
Fairfax County Five-Year Consolidated Plan
FY 2011 – 2015 Public Input Forum
Helping Persons with Special Needs

NOVEMBER 6, 2009, 9:30 a.m.
FAIRFAX COUNTY GOVERNMENT CENTER

GROUP A

What are Fairfax County's Current Needs for Housing, Services, or Other Facilities for Persons Who Are Homeless?

- Need to address homelessness facilities that are without transportation; citizens are unable to access services because of this challenge; access to transportation is important
- Ability to get education; Some classes at community colleges are free, e.g., through grants.
- When is homelessness critical? A Fairfax-Falls Church Community Services Board (CSB) representative may say that the client is not at a critical stage. The priorities of different services is a determining factor. One definition for critical: citizen does not have access to go and come as they please
- Addressing delays in the system when the families transfer from one jurisdiction to the other
- The need for affordable housing
- Transferring between programs without losing permanent status
- Immigration issues, which can be barriers to getting entitlement to access federal programs; Also, programs are limited to those with alcoholism and felony charges.
- Identifying child issues as they relate to families
- The need for a flow chart or map, and need for better service integration; System is sometimes confusing, e.g., federal HUD vs. local HUD.
- Community leaders, such as teachers, keeping an eye out for a possible homeless situation

- Shelter wait list is a concern, particularly with folks transitioning.
- Finding affordable child care; Some families can work but must stay home with children.
- Unemployment resource assistance; employment is an issue in a difficult market; There is the challenge of persons who are homeless raising themselves out of homelessness and increasing their income to be self sufficient.
- Dental assistance, particularly if it effects employment
- Outreach/education efforts with landlords
- Organizations' access to data to see what communities to work in, e.g. possible access to an eviction list
- More word of mouth information exchange; personal references to individuals; networking
- Partnering with businesses (Skill Source)
- It's challenging being homeless and the symptoms of an illness can compound the problem. Psychiatric hospitals do not house the homeless long term. There are not enough resources in mental health services.
- Need to ramp up services for the unsheltered – laundry, showers, health checks, set up a center to provide these needs
- Families have ownership in 5 years
- Working with Habitat for Humanity
- At the Kennedy Shelter, crisis care discharges residents who end up at the shelter but there is no space.
- Creating a peer run group house
- A day resource center; a homeless drop-in center like the Lamb Center
- Concerns about a 2 month waiting list
- Childcare and affordable childcare is a barrier to work and also being able to attend financial literacy classes.
- Alzheimer's is an issue. There is no one home to help low-income families pay for the medications that they need and the time off (when caring for an aging parent).
- Structural streamlining problem; Where should people go? They are going everywhere and asking for help and keep getting different answers.
- Need for community awareness, for residents and social workers, regarding shelters; There is a plan to get everyone on the same page.

What Will Likely Be the Important Needs for Persons Who Are Homeless Over the Coming Five- to Ten-Year Period?

- Addressing needs of the aging population with mental health issues
- The need for different levels of care. What happens when clients are in a program and they become stagnate? Where will they be placed?
- Younger generations living with severe disabilities
- Greater understanding of importance of prevention
- Housing First needs to be diverse
- Address environmental impact, sustainability, e.g. incorporating *green design* into family shelters
- Clear understanding of economic cost of services
- Look at existing shelter models; will they work in the future?
- Educate the population on how to maintain services, e.g., managing apartment of young adults.
- Address children not repeating homelessness of prior generations
- Dealing with neighbors
- Staffing

- Address where to place 18 year olds
- What is the path if client has been homeless?
- Effective assessments of clients
- Rapid re-housing program - divert families before they become homeless and fund case management services
- Educate persons on how to keep their apartment and on life skills.
- "Home Sweet Home" curriculum teaches 19-20 year-old single moms. It talks about leases, maintenance, budgeting. Research has shown that that this kind of education results in less property damage.
- They should make life skills an educational requirement like community service in high school; educate on money orders, checks, how to open a bank account
- Educate on how to get along with neighbors- socialization- so they don't complain about you.
- Professionals helping people need to do their jobs and be creative about solutions (not just say sorry, there is no alternative).
- Addressing bed bugs; It's a problem for everyone and there is so much information out there. Maybe the County could offer guidance on the best ways to treat it.
- Once you get an apartment, what is the path for people who are homeless?
- Host Families Program helps children and young adults up to age 23 who are homeless.
- When people get kicked out and put into assisted living they should look for peer to peer support, so they can talk to someone who was homeless before.
- Medical advances are keeping people alive longer but with more care needs.
- In-between housing is really important.
- In 10 years we will be feeling the effects of climate change. We need to promote sustainability and green design in shelters.
- Clear understanding of the economic implications of climate change.
- Green housing is seen as a luxury but you have men living in the woods and there is a desire to "put them in a box" with air conditioning, away from the leaves and the trees. There is a need to tie 'green' living into safe places.
- Do we want emergency shelters or do we just want apartments? Regarding some of the existing models, are they viable. We should bypass shelters and go straight into apartments.

Prioritization Criteria for Which Needs to Address with Limited Resources

- Prevention
- Looking at innovative partnerships
- Keeping homelessness in the feedback loop, particularly with advisory counsel
- Expanding housing options
- County have county-wide policy to increase affordable housing stock
- Work around best practices (models) for shelter procedures

Solutions Summary

- Restore the *Penny for Affordable Housing.*
- Get job hunting support.
- Partnerships, e.g. NOVA Navigator program
- Access to medical benefits and medical respite - beds
- Communication plan
- New developments setting aside affordable housing units; make it an across-the-board mandate (not just in Arlington)

- Leverage competition amongst jurisdictions/counties.
- Education
- Identification and compilation of resources to be available to all in the community (regarding legal information and resources pertaining to disabilities, youth, families); Accessibility (on web and hard copies)
- Recognizing complex multiple needs and building a system that meets those needs for all individuals and families (fill gaps)
- Prevention: focus and activities and funding on maintaining housing, prevention, diversion and rapid re-housing (for families and individuals)
- Increase housing stock in various respects and innovative ways; managing inventory – includes partnerships
- Expand and better align partnerships that maximize resources, opportunities and support services for those who are homeless or at-risk for homelessness leading to more self sufficiency.
- Plans are wonderful but just hearing about plans isn't going to "cut it".
- Regarding Kennedy Shelter, you need to be aware of where you are in the cycle.
- Mental and physical health a bigger consideration
- In Arlington County, affordable housing is mandated.
- Provide more data to the community.
- There should be an interagency work group.
- Regarding refugee groups - should we call the 222 number? Is that the number to call?
- Coordinated Services Planning works with faith-based organizations to distribute funds. Hopefully the stimulus funds will help with this.
- Concern regarding incident when someone had a family call and the operator told them they were not homeless. (Forum response: If the operator says that you are not homeless then you need to call their supervisor.)
- Call 911 when the 222 number doesn't work? Are the police trained to deal with homelessness or are they just going to arrest the person or search them? (Forum response: depends on the situation)
- Build a better integrated system.
- Implementation of prevention as a solution; more activities that lead to keeping housing

Additional Information

- Homelessness Prevention and Rapid Re-Housing Program funds can assist with diversion of persons before they become homeless — those aging out of transitional housing.
- N Street Village in D.C. offers multitude of services.
- DC Central Kitchen offers inclusive training and skill building.

Notes From
Fairfax County Five-Year Consolidated Plan
for Fiscal Year 2011-2015 Public Input Forum
Helping Persons with Special Needs

November 6, 2009, 9:30 a.m. – 4 p.m.
FAIRFAX COUNTY GOVERNMENT CENTER (Rooms 2/3 and 4/5)

GROUP B

Housing, Services and Facility Needs for Other Special Populations

From your perspective, what are the current needs in our community for housing, services, or other facilities for special needs populations?

- Group homes in Fairfax County, especially for individuals who fall outside Community Services Board (CSB) services; for example, those with developmental disabilities waivers (DD Waivers).
- Housing with in-house support services such as counseling for individuals with mental health disabilities and brain injuries.
- Housing for seniors with mental health disabilities.
- Homes with a level of affordability and accessibility that allows residents to remain in them for the long term.
- Public transportation (accessible); for example, signage for the visually impaired, sheltered and covered bus stops, the addition and improvement of sidewalks, etc., as well as transportation accessibility to other counties such as Loudoun and Prince William.

Are there particular special needs for those leaving an institution or at risk of being placed in an institution?

- Nursing homes (affordable and accessible) with both personal assistance and independent living support services in Fairfax County.
- Conduct public hearings (or focus groups) at institutions such as shelters to ensure communication with the "people that matter" and use www.disabilitynavigator.org, a gathering place online, as another way to get people connected to services.
- Rehabilitative group homes for people with mental health and substance abuse issues who do not have a place to go after being released from adult detection centers.
- Transitional housing (supervised) for individuals leaving institutions.
- Accommodate non-English speakers.
- Timely information and access to the stock of affordable and accessible housing; some states require landlords to advertise such units in advance (e.g. information clearinghouse).
- Evaluate compliance regarding accessibility codes to ensure that we are creating a fuller stock of accessible housing rather than just meeting the minimum 5% standard.
- Support services for individuals moving into their homes. (People are not able to exercise their rights to leave institutions.)

Looking ahead, what do you think will be the important needs for special needs populations in the next five-to-ten years? (Consider trends occurring in the county. How do you anticipate the future?)

- New units should be built to be accessible.
- Peer-to-peer positions rather than new mental health staff positions.
- Caregivers who can speak English well.
- Students with disabilities graduating from the LIFE program in public schools should have an opportunity to obtain degrees rather than non-competitive certificates.
- In-house assistance for seniors who are now living longer.
- Better wages and benefits for personal support assistants (PSAs) or direct care workers.
- Support services for people with autism who are graduating from programs and schools and being placed in the community.
- Creative housing along with minimum or total support services, so that people with disabilities can live as whole citizens.
- Back-up support services at short notice; for example, when personal assistant is not available.
- Integrated housing and clusters of support housing for people with cognitive, individual or multiple disabilities.
- Focus on community building in mixed income areas; for example, libraries and schools.
- Partnerships with faith-based and nonprofit organizations; for example, donate land, especially in areas with little available land or services.
- Hyperthermia services needed.
- Integrate individuals with a spectrum of disabilities, so that they can help each other.
- Communication plan; for example, best practices in housing, partnership opportunities, and leveraging of housing and support services.

For the next five year period, what factors do you think the county should use in deciding which needs to address with limited resources?

- First priority to individuals with disabilities not institutionalized to ensure full and enhanced housing accessibility and support services, especially those at risk for homelessness and hitting rock bottom without support, a home, and/or job.
- People at risk for falling ill should be first to receive, for example, H1N1 vaccine.
- People in group homes who are costing more than if they remain at home.
- Change “the have and have-nots perspective” and use non-monetary resources such as energy and time; for example, volunteer groups.
- Priority should be given to those with the most physical needs, specifically institutional and respite care and support and emergency services.
- Look at existing systems, for example, CSB mental services waivers.
- Look at people within the population who are a risk to themselves and others because of needs and behaviors that cannot be met at home. Also, benchmark and see what is out there in Fairfax County and nationwide.
- Look at the gaps preventing people from living in communities independently. (There is a housing waiting list for people with disabilities, but none for people with disabilities who are stuck in nursing homes.)
- Priority should be given to using community development funds to build infrastructure, so that people can stay in their homes.
- Look at people with disabilities who are living at home with their parents, but will eventually be forced into nursing homes.

- Housing and support services for children with disabilities who have been abandoned, as well as individuals with traumatic brain injuries.

Resources, Opportunities and Strategies for Other Special Needs

Comments from the audience on what is working:

- Getting Food – getting good food has enabled me to come and talk today. Meals on Wheels is working. Proper food and proper housing give a person strength (meeting basic needs). There are still hurdles; it can be difficult to locate meal services. Housing is in undesirable and unsafe areas.
- Metro Access works well. It does need to expand how far out it will go. Do not raise fees. There is fear that the price will go up and then people cannot afford it.
- SPARC Program. The SPARC program is wonderful but it needs to extend to five days a week. It is a fantastic program and has saved many lives and it can save more lives. It keeps families together and allows young adults to be out in the community.
- Disabilities Services Board: thank you for doing community outreach, continue to facilitate and participate with meetings like this.
- Grateful for programs that help us get jobs (through Mason).
- Case Management through CSB exists but there are waiting lists. Not all of the information reaches all of the case workers resulting in not all receiving the same information on services. Case Management works well but not all of the needs are being met.
- Real estate tax exemption for persons who are disabled works well.
- Create a program where persons with disabilities can own homes, expand those homes to rent to another person with disabilities (expand capacity), allow people to realize appreciation and do upgrades on homes. Allow people to pool assets together to have a home together (e.g. allow this through Housing Choice Voucher homeownership initiatives)

Comments from the audience on what works but needs to be strengthened:

- Medicare waiver program that provides money that follows the person as they transition to different services is working. Needs improvement: find a way to provide access to housing when the person needs to transition (not a waiting list). There should be a 6 month window to actively work with someone to transition; have transitional living program then on to permanent housing. Increase access to rental subsidies or vouchers.
- Housing developments like Coppermine are working. To improve there needs to be 24 hour coverage for personal assistance. Need the ability to pull or have on call emergency services. Need support service personal to help live in the community. There are not enough SSP, not enough volunteers, not enough funding (pay is too low).
- Housing – Individuals who meet all of the requirements to live in housing can't have someone live with them. There needs to be an allowance for live-in help or a family member who can help. Need to keep people closer to their family.
- Coppermine/Wesley Housing. Loves the opportunity even if not all of the needs are being met. This housing is great, 2 bedrooms and an aide, but it isn't appropriate for all disabilities and doesn't have all the aid one needs.
- Creative Partnerships, Interfaith partnerships. Wesley Housing can look for other partners to provide services. Lessen bureaucratic obstacles to make partnerships work.

- Coppermine – it lacks support services. DC has 24 hour on call services if someone doesn't show. Need a pooling service to cover emergencies. For full independence need service support 24 hours a day. This is a critical component. Full service support can keep people out of nursing homes.
- We live in a multicultural community. Mental health services need to be available in multiple languages. This will reduce domestic violence and dependency on local shelters.
- Languages. Need staff who can speak the person's language. Need continuity of services and not change due to language barriers. More multilingual support with continuity is needed. Multilingual staff must also provide good service to English speakers.
- Deaf/Hard of Hearing and Vision-impaired services – some very good resources in Fairfax County. Not only need the knowledge of services but need to make sure it is being enforced.
- Not all business, emergency services, etc., are fully accessible. An able bodied person may be in an accessible room at a shelter so there isn't a place for the person with disabilities.

Over the next five years what do you see as the greatest opportunity to make changes and improvements:

- In home services – open the door and see how they are living. People often have too much pride to ask for help. Too many people are on the phones, they lack understanding. Either volunteers or Coordinated Services need to get out.
- Money follows the person – this doesn't work with mental health services. If this is the policy then it isn't functioning.
- Make information available in different media; recording of this session would be helpful to the visually impaired. Improve audio and written information (not just PDF format on websites).
- Share information across state and county lines – Arlington has support to keep people in the community and out of the hospital (PACT services).
- Medicaid Waiver for Mental Health – other states such as Colorado use this; VA needs to do more. Need a county advocate with the state.
- PACT teams in CSB. There are currently two PACT teams and there need to be more; plan for more vouchers to get another team.
- People should not judge other people's disabilities.
- Need more partnership with the community.
- Mental Health needs to train more bilingual companions at the community (volunteer?) level.
- Stimulus fund opportunities. Lobby to use stimulus funds for programs and services that keep people in their homes. Things like this often get overlooked. It costs more to institutionalize a person; use funds for preventative housing issues.
- Stimulus fund opportunities. Over the next five years increase the stock of affordable housing. Offer incentives to builders; if they increase the number of accessible units they will get extra "points" towards winning the bid. Offer incentives to contractors to provide more accessible housing in general.
- Stimulus fund opportunities. After 12/31/10 stimulus funds go away. The Commonwealth is talking about cutting Medicaid Waiver services. We should be building those areas up now with stimulus fund money.
- Look for other opportunities to use stimulus funds and other ways of working with CCFAC.

- Improve emergency shelter availability. Increase mixed use development, increase programs like SPARC.
- Communicate information across all lines, look at best practices from other jurisdictions. Social Workers are over worked. Improve networking and communications. Social Workers help those most in need; improve their support and training.

Was there a need that was not covered?

- What can be done to make disabled members feel safer at home? Make housing in safe neighborhoods.
- Provide alternative services/housing while individuals are on a waiting list. Look at supporting individuals more in a way that allows them to stay with their families. Underscore family support.
- Find better ways for consumer and family to take more responsibility for their own treatment rather than just provide services to them. Change the dynamic of mental health to allow/encourage more individual responsibility for care.
- Peer support models work but are underfunded.
- Fully accessible housing works but is not fully integrated into the community.
- Transportation – not enough accessible housing has adequate public transportation. Housing is too isolated; improve access on all areas – bus stops don't have covered areas to wait, no sidewalks at bus stops, etc.

Group Summary of Solutions:

- Identification and compilation of resources available to all
- Build a better integrated system.
- Recognize complex and multiple needs
- Implementation of prevention as a solution, more activities that lead to keeping housing.
- Increase housing stock/capacity
- Expand and better align the resources we have.

Additional Testimony Provided

Oral testimony was received from an individual with physical disabilities who is now receiving housing assistance from the Department of Housing and Community Development (HCD). She indicated that, due to her physical condition gradually deteriorating, she now needs more accessible housing. She indicated that she is not being helped by HCD to obtain appropriate housing even though she has made several inquiries and requests to HCD.

Forum

Closing Session Suggestions

- Put Forum notes in HTML or another form of Word when publishing on web site.
- Blog site for other comments
- Social networking site for requests for assistance.

The CCFAC held an additional public hearing on Housing and Community Needs on December 8, 2009. These comments are summarized below.

Alexa Maroidis, Peer Mentor for the EnDependence Center of Northern Virginia (ECNV), encouraged the use of federal stimulus funding to provide more housing for persons with disabilities, to support accessible transportation and to set aside some Housing Choice Vouchers for persons with disabilities. In response to questions from members of the CCFAC, Ms. Maroidis explained that, while she is not personally aware of cases of housing discrimination against persons with disabilities, she is sure that it exists. As a Peer Counselor, she seeks to determine client needs and to assist in getting resources for clients. Housing providers tend to dedicate specific units which cannot be occupied unless the tenant has a disability. Ms. Maroidis believes that it would be more efficient to have a number or percentage of units set aside, so that persons with disabilities could be housed in any appropriate unit rather than be limited to the availability of a particular unit.

Doris Ray, also on behalf of the ECNV, thanked the CCFAC for the opportunity to give input on the Five-Year Consolidated Plan. She pointed out that there is a lack of both accessible units and affordable units. There also is a lack of compliance with federal accessibility requirements. There is a need for supportive housing for persons with physical and cognitive disabilities. There is a neglect of the need to discuss and set priorities. The census counts and plans concerning persons with disabilities should include the needs of persons in institutional settings as well as those in the community who are at risk of being institutionalized, including seniors. Ms. Ray encouraged the establishment of goals and priorities for providing vouchers for people exiting institutions and transitioning back into the community. The ECNV also would like to see more specifics about compliance with ADA and Section 504. For example, the Mondloch Shelter, which is celebrated for having the first accessible shelter rooms, would have turned away persons with disabilities had it not been for advocacy from the ECNV. Ms. Ray urged Fairfax County to apply for the federal NOFA for accessibility vouchers and that housing providers be monitored to insure compliance. In response to questions from the CCFAC, Ms. Ray said that, based on her communications with Carol Erhard in the Department of Housing and Community Development (HCD), there are plans to apply for the vouchers. She will work on submitting data compiled by the ECNV that may be helpful for the Five-Year Plan. Ms. Ray also reported that HCV Program applicants do self-identify as having a disability and that the information is subsequently verified by HCD. However, HCD no longer maintains a separate list for persons who need wheelchair accessible units.

Written testimony was submitted on behalf of Ann Collet by email. Ms. Collet requested that the County concentrate on those with the greatest need instead of those individuals of moderate income. She noted that the Fairfax-Falls Church Community Services Board was looking at lowering income limits from $50,000 to $30,000 and indicated that rent or home purchase needs a category lower than that, especially for people with very low income.

Ms. Collet indicated that housing should be integrated into the community and that maintaining property values is better where there is a mix. She also indicated that there is a significant need for housing consideration for people with multiple chemical sensitivities (MCS). Regarding individuals with hidden and multiple disabilities, Ms. Collet indicated that they require periodic personal assistants who need good negotiation or management skills to get the needed services for the client. She concluded by indicating that there needs to be a greater focus for specific needs.

COMMENTS ON PLAN FROM PUBLIC HEARING AND 30-DAY COMMENT PERIOD

Board of Supervisors Public Hearing on April 27, 2010.

Pamela Barrett, Chair of the Consolidated Community Funding Advisory Committee (CCFAC), indicated that the CCFAC is grateful that the CCFP was fully funded in the County FY 2011 budget. She indicated that the CCFAC's outreach and approach to targeting community-identified needs enables the County to better address the needs of some of the County's most vulnerable and underserved populations and strengthen and assist nonprofit partners with the services they provide. The CCFAC received some written public comments on the Five-Year Consolidated Plan and addressed certain issues brought to their attention to date. Ms. Barrett indicated that some comments did not specifically apply to the Plan or will require further consideration beyond the time frame for submission of the Plan to HUD. These may be considered for incorporation at a later time through an amendment and after vetting through the appropriate processes. The CCFAC tried to be responsive to those concerns that did apply and could be incorporated now. Ms. Barrett indicated that the CCFAC hopes that the Board will continue to support the work of the CCFAC in gaining public input and participation in the CCFP process, and she acknowledged the effort and care taken in the development of the plan, with many hours of County staff time and great input from the community.

Lynne Crammer, Chair of the Fairfax-Falls Church Community Services Board (CSB), referred to a letter sent to the County's Department of Housing and Community Development (see Written Comments Received below). Ms. Crammer described the CSB clients and commended HCD for drafting Consolidated Plan documents that incorporated the Housing Blueprint. She indicated the need to plan for continued addressing of the needs of the clients that CSB serves and described the four policy and program enhancements she identified in the letter to HCD (described in Written Comments Received below).

Glenn Kamber, Chair, Housing Advocacy Committee of the Fairfax-Falls Church Community Services Board, stated that housing is central to improved services for CSB clients and stated the importance of reducing the CSB waiting list. Mr. Kamber spoke of the need for interagency planning, and that process should be reviewed in how people are taken off of HCD's waiting list and given housing. Mr. Kamber indicated that he thought the process is broken due to factors such as how the mailouts and other processes are handled. He indicated that the process should be more sensitive and person-focused.

Woody Witt, Chair, Intellectual Disability Committee of the Fairfax-Falls Church Community Services Board, supported the letter sent to the County's Department of Housing and Community Development from Lynne Crammer that is referred to above. Mr. Witt indicated concerns about people on the CSB waiting list and that there are responsibilities to be met under the Olmstead Act. He indicated concern regarding those inappropriately housed in institutions and that they should be in smaller housing, such as assisted-living group homes. Mr. Witt saw the Housing Blueprint as a beginning for new group homes, and he thanked the Board of Supervisors for their support of the CSB.

Susan Beeman, Chair, Mental Health Committee of the Fairfax-Falls Church Community Services Board, urged support of the CSB enhancements referred to above. Ms. Beeman mentioned the importance of the reduction of CSB clients on Housing waiting lists and spoke of the Beeman Commission priorities.

Cookie Hymer-Blitz, Chair of the Fairfax Area Disability Services Board (FA-DSB), thanked the CCFAC and HCD for development of the proposed Five-Year Consolidated Plan for FY 2011-2015 and the proposed Consolidated Plan One-Year Action Plan for FY 2011, and indicated that including the Housing Blueprint goals is commendable. Ms. Hymer-Blitz indicated that the goal to reduce the number of persons on waiting lists is critical. She requested the consideration of four items: 1) HCD, the Office to Prevent and End Homelessness, the Housing Opportunity Support Teams, and housing locators should coordinate a list of landlords who accept vouchers and have accessible units. 2) HCD must enhance communication with clients including clear, concise communication and allowing interested third parties to accompany clients on their housing interviews. The FA-DSB asks that the County Executive task staff to develop recommendations for improving communication, outreach, and accommodations for persons with disabilities and utilize the existing inter-agency housing planning committee to coordinate this. 3) Regarding the 50% reduction on wait lists, the FA-DSB recommended a set-aside of at least 10 percent for people with physical or sensory disabilities. 4) Ten percent of the units acquired should be physically accessible. Ms. Hymer-Blitz indicated that written testimony that she submitted (see below) has further details.

David Burds, Representative, Endependence Center of Northern Virginia (ECNV), spoke and described ECNV. Mr. Burds provided information on the Money Follows the Person (MFP) grant and that ECNV has become a transition coordination provider and worked with people with disabilities who want to leave nursing facilities and move into their own homes. Mr. Burds saw the Consolidated Plan planning process as an opportunity for the County to make a commitment and support the MFP grant and indicated that it is imperative that the persons with disabilities population be addressed. Mr. Burds spoke about a Notice of Funding Availability (NOFA) for 5,300 housing choice vouchers and how the MFP grant can be federal match to Virginia's Medicaid program to help fund MFP services. Mr. Burds indicated that ECNV recommended that the Five-Year Plan call for applying for and implementing new housing choice vouchers to benefit, among others, those at risk of institutionalization.

In the written testimony accompanying Mr. Burds' oral testimony, Mr. Burds indicated three broad areas in which ECNV felt the proposed Five-Year Plan could be more detailed and specific in how it addressed the needs of the disability community: 1) Meeting the needs of persons wanting/needing to transition from nursing homes and other institutions back to the community, 2) Ensuring that accessible housing is available in the Fairfax community, and 3) Preventing discrimination on the basis of disability in the rental, sale, or purchase of housing. Regarding the needs of persons wanting/needing to transition from nursing homes and other institutions back to the community, the ECNV recommended three strategies be added to the Five-Year Plan: 1) Apply for and implement, if awarded, the HUD NOFA issued in April 2010 for new housing vouchers targeted for persons with disabilities who are attempting to transition from nursing homes or other institutions, or who are at risk of institutional placement. 2) Under the goal of reducing the waiting list, add a new local preference or special admissions procedure available to persons transitioning from nursing homes or other institutions, particularly those in the MFP Program and/or those attempting to exercise their Olmstead rights. 3) Add a similar preference or admissions procedure available to the same population, for priority on the public housing wait list, and for access to project-based vouchers.

Regarding ensuring that accessible housing is available in the Fairfax community, Mr. Burds wrote that ECNV calls for an enhanced number of accessible units up to 10%. ECNV feels that a goal to merely comply with federal law is not sufficient. Regarding preventing discrimination on the basis of disability in the rental, sale, or purchase of housing, ECNV indicated that it is time to conduct FHAA (Fair Housing Act) testing, that it should be done to

determine whether there is discrimination on the basis of disability, and that the Plan documents should be specific on what type of testing will be done in the upcoming years.

In the written comments, Mr. Burds noted that the County mentions in its draft plan that a barrier to affordable housing is that many seniors may not be able to pay for renovations to make their homes more accessible so that they can more easily "age in place". Mr. Burds indicates that this is an important barrier to raise, but it is not just one that seniors experience. He cited that the high cost of housing in the County, together with the difficulty in locating fully accessible single-family units, presents a barrier to low- and moderate-income persons with disabilities who need to relocate to the County in order to take advantage of employment opportunities. Another concern he raised was that the section on barriers should discuss the lack of accessible housing, the prevalence of FHAA violations, the barriers to persons with disabilities exercising their Olmstead rights, and the lack of accessible pathways to bus stops and to amenities in many County neighborhoods. Mr. Burds concluded by writing that ECNV was ready to assist the County in the achievement of the goals and objectives in the plan.

Alexa Mavroidis, Housing Specialist, Endependence Center of Northern Virginia, thanked the CCFAC and HCD for their work on the Plan documents and for making persons with disabilities a priority. Ms. Mavroidis commented about page 110 of the released proposed Five-Year Action Plan indicating that she was glad to see language regarding the Olmstead Commission and that she wanted to see the County apply for vouchers. She also indicated that on pg. 97 there is reference to it but that it seems to indicate that the Fairfax Area Disability Services Board and the Fairfax-Falls Church Community Services Board apply for them but, according to Ms. Mavroidis, only the Fairfax County Redevelopment and Housing Authority can apply for them.

In the written testimony accompanying Ms. Mavroidis' oral testimony, Ms. Mavroidis provided the following additional comments on the Proposed One-Year Action Plan: ECNV hopes that the County will pay especially close attention to the need for accessible and affordable housing for people transitioning out of institutions; that any federal funds used in the development or renovation of housing has always had the requirement under Section 504 that the County refers to in the Plan (of having 5% of the agency's total housing resources accessible to persons with disabilities and 2% accessible to persons who are sight and/or hearing-impaired); and that the FCRHA should do an assessment of how compliant the County is with Section 504 regulations. Ms. Mavroidis provided the following additional comments on the Proposed Five-Year Consolidated Plan: ECNV wants to be sure that the County plans to apply for the HUD NOFA issued in April 2010 providing vouchers intended for persons transitioning out of institutional settings or at risk of institutionalization; ECNV also wants to see a serious commitment to apply for any other vouchers specifically targeted at people with disabilities over the next five years; and applying for Money Follows the Person vouchers is critical, as ECNV expects an increase in demand for MFP services due to extending the deadline for applying for them.

Written Comments Received

Marge Bleiweis wrote in support of the Consolidated Community Funding Pool and indicated how the funding helped Northern Virginia Mediation Service, a recipient of past CCFP funding.

Lynne Crammer, Chair of the Fairfax-Falls Church Community Services Board (CSB), wrote on behalf of the CSB, commending the development of the proposed One-Year Action Plan and Five-Year Consolidated Plan that incorporated the Housing Blueprint. She indicated that the CSB recommended the incorporation of four policy and program enhancements into both Consolidated Plan documents: 1) CSB-related housing

assistance needs and targets should reflect data CSB provided to achieve the ten-year Board of Supervisors' goal to reduce CSB waiting lists by 50%. 2) The Board should immediately increase or suspend the existing County disability housing threshold of 5% indicated in the Plan documents in order to reflect and achieve the Housing Blueprint waiting list reduction outcomes. 3) The Board should secure maximum allocation of federal and other housing and human resources referenced in the Plan documents to achieve the annual and ten-year HCD and CSB goals for reducing the waiting list. 4) The Board should call for review and improvement in County procedures that identify and provide housing assistance to special needs populations, especially persons with disabilities who are on both the HCD and CSB waiting lists.

Michelle "Cookie" Hymer Blitz, Chair of the Fairfax Area Disability Services Board (FA-DSB), wrote on behalf of the FA-DSB, commending the fact that the Housing Blueprint is one of the main driving forces behind the Consolidated Plan documents' recommendations. She indicated that the FA-DSB recommended that the following policy and program recommendations be included in both Consolidated Plan documents: 1) HCD, the Office to Prevent and End Homelessness, the Housing Opportunity Support Teams and community housing locators should create and coordinate a list of landlords who are currently accepting vouchers and who offer accessible units. 2) HCD should either initiate or enhance current communication efforts with clients. HCD should work with the Board of Supervisors and the Deputy County Executive for human services to develop recommendations for improving communication, outreach and accommodation procedures for persons with disabilities and that the Deputy County Executive utilize the inter-agency housing planning committee to identify and recommend improvements. The FA-DSB should be represented on this committee. 3) The inter-agency housing planning committee should be tasked with identifying specific policy and program recommendations that are needed over the next ten years to achieve 50% reductions in the wait lists. Within the Bridging Affordability Program there should be a set-aside of at least 10% for people with physical or sensory disabilities. A member of the FA-DSB should be added to the planning committee to represent the needs and issues of persons with physical and sensory disabilities, and recommendations of the inter-agency housing planning committee should be forwarded to the Board of Supervisors through its Housing Committee in time to be included in the One-Year Action Plan for FY 2012. 4) The County should ensure that 10% of the units identified and acquired are physically accessible. County policy for universal design should be kept in the forefront of policy planning and program implementation.

Craig Shniderman, Executive Director, Food & Friends, wrote in support of the proposed Consolidated Plan documents. He indicated that Food & Friends has been a grantee of the Consolidated Community Funding Pool that is included in the Consolidated Plan documents and that the service that Food & Friends provides is directly tied to the financial help from the County. Mr. Shniderman indicated that they support any plans that continue the CCFP as a priority for the future.

Ronald F. Christian, Chairman of the Fairfax County Redevelopment and Housing Authority (FCRHA), wrote on behalf of the FCRHA in support of the proposed Five-Year Consolidated Plan for FY 2011-2015 and the proposed Consolidated Plan One-Year Action Plan for FY 2011 and thanked the CCFAC and the joint CCFAC/FCRHA Working Advisory Group for their work in the development of the proposed plans. Mr. Christian indicated that the FCRHA is pleased that, consistent with the Housing Blueprint adopted by the Board of Supervisors, the driving force behind the priority needs in the Five-Year Plan and reflected also in the One-Year Action Plan is the philosophy of affordable housing as a continuum and that included in this continuum are housing needs of hard-working, but low paid families; senior citizens; persons with physical or mental disabilities; and the workforce

across Fairfax County. Mr. Christian also indicated that the FCRHA was pleased to see an increase in the FY 2011 Community Development Block award as compared to FY 2010 that will help support the goals of the Housing Blueprint. Mr. Christian thanked the Board for their continued outstanding leadership and commitment in affordable housing and their stewardship of affordable housing resources.

How the Public Comments were Addressed

The CCFAC considered the first three written public comments on the proposed Five-Year Consolidated Plan for FY 2011-2015 and the proposed Consolidated Plan One-Year Action Plan for FY 2011 indicated above at its meeting on April 26, 2010. There were no changes required to be made to the document regarding the comment in support of the CCFP.

Regarding the CSB comments, for the first policy/program enhancement recommended, the CCFAC observed general consistency between the CSB-related housing assistance needs and targets data and the data provided in the Consolidated Plan documents, noting that the CSB's data was for ten years versus the five years in the Five-Year Consolidated Plan. Regarding recommendation number 2, wording was changed in the proposed One-Year Action Plan to indicate that the FCRHA's housing goal has been to have 5% of the agency's total housing units (versus resources) accessible to persons with physical disabilities. (The word "physical" was added.) The language in the Action Plan regarding also having 2% accessible to persons who are sight and/or hearing impaired remained the same. Regarding recommendation numbers 3 and 4, the CCFAC thought that these did not belong in the Consolidated Plan documents.

Regarding the FA-DSB comments, the CCFAC decided on no additional changes to the Plan documents.

No changes were required to be made to the document regarding Mr. Shniderman's comments in support of the CCFP and Mr. Christian's comments in support of the Consolidated Plan documents.

Regarding comments received at the public hearing, the Chairman of the Board of Supervisors, Sharon Bulova, asked that the recommendations presented by the CSB be forwarded to staff for their review. Supervisor Catherine Hudgins asked that following staff review that those recommendations be considered by the Board of Supervisor's Housing Committee.

Chairman Bulova also asked that the County Executive forward the written testimony from the FA-DSB for consideration by the Board's Housing Committee.

At the conclusion of the public hearing, Supervisor Hudgins instructed that all comments be directed to the Deputy County Executive and incorporated into the Plan, and Chairman Bulova instructed that the items be referred to the County Executive for further discussion.

Appendix B - Citizen Participation Plan

Purpose of the Citizen Participation Plan

As an Urban County, Fairfax County, Virginia is eligible to apply for funds under the federal Community Development Block Grant (CDBG), Emergency Shelter Grants (ESG), HOME Investment Partnerships Program (HOME), and Housing Opportunities for Persons with AIDS (HOPWA) which are provided to the County through the U.S. Department of Housing and Urban Development (HUD). Federal regulations were revised in 1994 to provide for the consolidated submission of documents (the Consolidated Plan) which cover the planning and application aspects of the CDBG, ESG, HOME, and HOPWA programs (federal funding sources).

Beginning Fiscal Year (FY) 2000, the Consolidated Plan will also include local funding sources and federal Community Services Block Grant (CSBG) funds appropriated by the Board of Supervisors. In addition, the Consolidated Plan includes a description of the Continuum of Care for homeless services and programs, and may include federal funding for these programs at such time as these funds are made available through the federal funding allocation process for the Consolidated Plan.

The Fairfax County Citizen Participation Plan provides a guide for public input and participation in the Consolidated Plan process. The purpose of the Citizen Participation Plan is to encourage citizen participation in the definition of housing, community development and public services needs; services to be provided by community-based organizations; the funding priorities for programs and target populations to be served through resources available in the Consolidated Plan, and in any amendments, as well as to the Consolidated Plan and the annual performance report as may be required by HUD.

The Citizen Participation Plan includes the following objectives and describes how each will be met to ensure compliance with federal regulations. The objectives of the Citizen Participation Plan are to:

• Encourage citizen participation by providing citizens with adequate information concerning the amount of funds expected to be available for community development housing activities, public services and services to be provided by community-based organizations through federal and local funding sources, the proposed range of activities that may be undertaken with those funds, including the amount that will benefit very low and low income persons and the plans to minimize displacement and to assist any persons displaced, other important program requirements, and proposed and approved uses of funds;

• Provide for and encourage citizen participation from all sectors of the community, with particular emphasis on participation by persons below the federal poverty line, low and moderate income residents of blighted areas and of areas in which federal funds under federal funding sources are used or are proposed to be used; and for the participation of minority and non-English speaking residents, as well as persons with mobility, visual, speech or hearing impairments;

• Provide citizens, public agencies, and all other interested parties with reasonable and timely access to information and records relating to the County's Consolidated Plan, and the use of assistance provided by federal funding sources included in the Plan for the preceding five (5) years;

• Provide technical assistance to groups representing very low and low income persons and to interested residents that request such assistance in developing proposals for funding assistance under federal and local funding sources covered by the Consolidated Plan, with the level and type of assistance to be determined by the County;

• Conduct public hearings to obtain the views of citizens on housing, community development and public services needs, and needs for services to be provided by community-based organizations, proposed activities, and program performance, which hearings shall be held after adequate notice, at times and locations convenient to potential and actual beneficiaries, with accommodation for persons with disabilities and non-English speaking residents;

• Gather community input, through a variety of methods such as, community meetings, focus groups, surveys and other appropriate forums, regarding funding priorities for services provided by community-based organizations;

• Prepare a summary of comments or views received from citizens in writing or orally through public hearings, focus groups, community meetings and other methods when preparing the final Consolidated Plan, and any amendments to the Plan or the performance report and attach the summary to the final Plan or report. In addition, provide for a timely written answer to written complaints and grievances within fifteen (15) working days, where practicable; and

• Provide criteria for determining what constitutes a substantial change in the planned or actual activities described in the approved Consolidated Plan which would require an amendment to the Plan.

Notice of Consolidated Plan Schedule

The County will encourage citizen participation by providing citizens with adequate information concerning the amount of funds expected to be available for community development and housing activities, public services, and services to be provided by community-based organizations through federal and local funding sources, the proposed range of activities that may be undertaken with those funds, including the amount that will benefit very low and low income persons and the plans to minimize displacement and to assist any persons displaced, other important program requirements, and proposed and approved uses of funds.

The annual Consolidated Plan schedule will be mailed to neighborhoods, groups, associations, nonprofit, ecumenical, business and other community organizations and other interested individuals which have been involved in past funding cycles for each program. Other neighborhoods, groups, associations, organizations, and individuals will be added to the list upon request to the Department of Housing and Community Development.

Information which will be available will include the amount of funding expected to be available under all the federal funding sources and programs in the Consolidated Plan, including estimated program income, program and application requirements, the proposed activities which will benefit very low and low income persons, plans for minimizing displacement caused by proposed activities and assistance opportunities for persons displaced, opportunities for citizen input, submission of project proposals, and schedules for proposed and final applications. This information may be obtained from the Department of Housing and Community Development.

An advertisement of the Proposed Consolidated Plan will be published in a newspaper(s) of general circulation and a copy of the Proposed Consolidated Plan will be available to the public for review and comment at least 30 days prior to submission to HUD. The proposed Consolidated Plan will be available for review 1) at the Department of Housing and Community Development, 2) at the information desk of the County Government Center at 12000 Government Center Parkway, Fairfax, Virginia 22035; and 3) at the information desk of all branches of the Fairfax County Public Library system. The final submission to HUD will also be distributed to these locations.

Citizen Participation Process

The County will provide for and encourage citizen participation from all sectors of the community, with particular emphasis on participation by persons below the federal poverty line, low and moderate income residents of blighted areas and of areas in which federal funds are used or are proposed to be used; and for the participation of minority and non-English speaking residents, as well as persons with mobility, visual, speech or hearing impairments.

The County will provide citizens, public agencies, and other interested parties with reasonable and timely access to information and records relating to the County's Consolidated Plan, and the use of assistance provided by federal funding sources included in the Plan for the preceding five (5) years.

Citizens will have an opportunity to comment on housing, community development, public service needs, and population and program priority needs identified to be addressed by community-based organizations and the proposed Consolidated Plan prior to its submission to HUD at public hearings, meetings, or by directly contacting the appropriate County agency. Information on the Consolidated Plan schedule will be disseminated to local agencies and Nonprofit organizations working with minority, non-English speaking, and physically impaired residents to afford as many people as possible the opportunity for full citizen participation.

The County will work closely with the Fairfax County Redevelopment and Housing Authority (FCRHA) to encourage the participation of residents of public and assisted housing developments in the development and implementation of the Consolidated Plan. The County will apprise the FCRHA of housing and community development activities related to its developments and surrounding communities so the FCRHA can make such information available at the annual public hearing on the Comprehensive Grant program.

Citizen input on housing, community development, and needs for services to be provided by community-based organizations will be received annually at one or more public hearings to be held before the Consolidated Community Funding Advisory Committee. The Committee is composed of one representative each from the Fairfax County Redevelopment and Housing Authority (FCRHA), Human Services Council (HSC), Community Action Advisory Board, Fairfax-Falls Church Community Services Board, Homeless Oversight Committee, Fairfax-Falls Church United Way, Commission on Aging, Advisory Social Services Board, Fairfax Area Disabilities Services Board, Health Care Advisory Board, Fairfax County Alliance for Human Services, representatives from the business community, schools community, faith community, children younger than school age community, and youth needs and services community. Membership may include representation from human services provider groups, consumer and community organizations and Boards, Authorities and Commissions, which relate to the Human Services Community, as appropriate. Members shall be appointed by the County Executive and shall serve for a term of three years. The role and responsibilities of the Consolidated Community Funding Advisory Committee will be to:

- Solicit community input

- Advise the Board of Supervisors on the development and implementation of the federally required Consolidated Plan

- Advise the Board of Supervisors on issues relating to the coordinated funding process:

-- Policy considerations

-- Funding priorities

-- Selection criteria

-- Performance measures

- Coordinate with the Community Action Advisory Board in implementation of the CSBG process

- Implement the combined solicitation process and, if deemed appropriate, make comments on Selection Advisory Committee recommendations forwarded by the County Executive to the Board of Supervisors

- Monitor the Consolidated Plan process and report to the Board of Supervisors on its effectiveness relative to defined goals

- Consider and evaluate the potential for including other County and community processes in the Consolidated Plan process.

Based on the comments received from citizens through needs hearing(s) and other community input strategies from interested Nonprofit, ecumenical, business and other civic organizations and County agencies, the Consolidated Community Funding Advisory Committee will prepare a Proposed Consolidated Plan. The Proposed Consolidated Plan will be submitted for review and comment to organizations and individuals on the mailing list.

Comments received will be addressed by the Consolidated Community Funding Advisory Committee and included with the submission of the Proposed Consolidated Plan to the Board of Supervisors.

A public hearing will be held by the Board of Supervisors on the Proposed Consolidated Plan. Final approval of program priorities and funding recommendations included in the Consolidated Plan will be made by the Board of Supervisors.

Reasonable and timely access will be given to citizens, public agencies, and other interested parties to information and records relating to previous funding applications and allocations for the programs included in the Consolidated Plan for the preceding five (5) years.

Technical Assistance

The County will provide technical assistance to groups representing very low and low income persons, as well as to community-based organizations and interested residents that request such assistance in developing proposals for funding assistance under any of federal or local funding sources covered by the Consolidated Plan, with the level and type of assistance to be determined by the County.

This technical assistance could include activities such as training on grant writing, small/minority business support offered through the Purchasing and Supply Management agency, Internet information links, pamphlets and brochures/information packets on resources available in the community.

County staff will be available upon request to answer any questions concerning the requirements of federal and local funding sources included in the Consolidated Plan, such as available funding amounts, funding priorities, eligible activities, environmental review procedures, equal opportunity requirements, relocation provisions, citizen participation requirements and any other requirements of federal and local funding sources. In cases where staff can not answer questions pertaining to federal HUD funds, assistance will be requested from HUD.

As part of the on-going citizen participation effort, County staff will meet with citizen groups in Fairfax County which represent very low, and low and moderate income residents such as neighborhood conservation and redevelopment areas, and with citizen groups in other areas of the County which express interest in participating in federal and/or local funding sources included in the Consolidated Plan, to explain program and application procedures. These meetings will be held in facilities convenient to the neighborhood or groups requesting the meetings.

County staff will provide technical assistance when requested to neighborhood groups, minority groups, community-based organizations, and other residents interested in participating in federal and local funding sources included in the Consolidated Plan. All such groups, including the disabled and elderly, and those serving non-English speaking ethnic/minority populations, will be encouraged and assisted as requested in submitting their views and proposals. County staff will be available to provide assistance in the development and submission of program funding requests and other input. Any persons

requiring assistance should contact the Division of Real Estate Finance and Grants Management at HCD at 246-5170 or the TTY number 385-3578.

Public Hearings

The County will conduct public hearings to obtain the views of citizens on housing, community development and public services needs, and needs for services to be provided by community-based organizations, proposed activities, and program performance, which hearings shall be held after adequate notice, at times and locations convenient to potential and actual beneficiaries, with accommodation for persons with disabilities and non-English speaking residents.

A minimum of two public hearings will be held prior to the submission of the Consolidated Plan to HUD.

One or more public hearings will be held by the Consolidated Community Funding Advisory Committee at the beginning of the Consolidated Plan process to solicit citizen comments on housing and community development needs, needs for services to be provided by community-based organizations, proposed activities, and program performance. Testimony received at this hearing will be considered by the Consolidated Community Funding Advisory Committee in preparing the Proposed Consolidated Plan. In addition, the Consolidated Community Funding Advisory Committee may gather community input through a variety of means, such as forums and focus groups, in the development of funding priorities and criteria.

Prior to the submission of the Consolidated Plan to HUD, the Board of Supervisors will hold a public hearing on the Proposed Consolidated Plan as recommended by the Consolidated Community Funding Advisory Committee.

Public hearings will be held at times convenient to potential and actual beneficiaries of the programs to be funded. Public hearings will be held in the Fairfax County Government Center Board Auditorium located at 12000 Government Center Parkway, or in other locations which are convenient to potential and actual beneficiaries, and which are accessible to persons with disabilities. At public hearings where a significant number of non-English speaking residents are expected to participate, Fairfax County will address their needs by providing an interpreter.

Notice of public hearings on the Consolidated Plan will be advertised in a newspaper(s) of general circulation and at least one minority and non-English speaking publication 15 days prior to the date of the public hearing. The notice will include sufficient information about the purpose of the public hearing to permit informed comment from citizens.

Notice of public hearings on the Consolidated Plan will also be advertised in all branches of the County Library system and press releases issued by the Fairfax County Office of Public Affairs.

Response to Citizen Comments

The County will prepare a summary of comments or views received from citizens in writing or orally through public hearings, focus groups, community meetings and other methods when preparing the final Consolidated Plan, and any amendments to the Plan or the performance report and attach the summary to the final Plan or report. In addition, provide for a timely written answer to written complaints and grievances within fifteen (15) working days, where practicable.

Written or oral comments received from citizens as a result of public hearings or other activities to gather community input held on the Consolidated Plan will be given serious consideration in the preparation of the final Plan document, amendments to the Plan, or the performance report. A summary of the comments received from citizens, both accepted and not accepted, will be attached to the final Consolidated Plan, Plan amendments, or performance report. Fairfax County Approved Consolidated Plan One-Year Action Plan for FY 2010 99

Comments, complaints, or grievances concerning the Consolidated Plan should be addressed to the Division of Real Estate Finance and Grants Management, Department of Housing and Community Development, 3700 Pender Drive, Suite 300, Fairfax, Virginia 22030.

Every effort will be made to respond in writing to written complaints within 15 working days of receipt of the complaint. If additional time is required, written notice will be provided.

Amendment of the Consolidated Plan

The County will provide criteria for determining what constitutes a substantial change in the planned or actual activities described in the approved Consolidated Plan which would require an amendment to the Plan.

The Consolidated Plan may be amended with the approval of the Fairfax County Board of Supervisors.

The County will amend the approved Plan whenever it makes one of the following decisions representing a substantial change or adjustment:

1) To carry out a project, using funds from any of the four federal HUD programs covered by the Consolidated Plan (including program income) not previously described in the action plan; or

2) To eliminate a project from any of the four federal programs covered by the Consolidated Plan (including program income) for which funds were previously approved by the Board of Supervisors.

In general, any substantial change or adjustment to a Consolidated Plan project budget will be treated as an amendment subject to public notice, review, and comment through the County's quarterly budget review process. Adjustments required to Consolidated Plan project budgets will be included in the third quarter and carryover budget reviews, and will be subject to public comment during the public hearing process held on each of these reviews.

In some circumstances, Consolidated Plan program objectives may be addressed through the appropriation of funds outside of the quarterly budget review process for an activity not previously approved in the Consolidated Plan. In such cases, public notice will be given before the Board of Supervisors is scheduled to take action on such an appropriation.

Substantive amendments to the Consolidated Plan will be publicly advertised at least 30 days prior to consideration of the amendments by the Board of Supervisors to allow time for public comment.

Adoption and Amendment of the Citizen Participation Plan

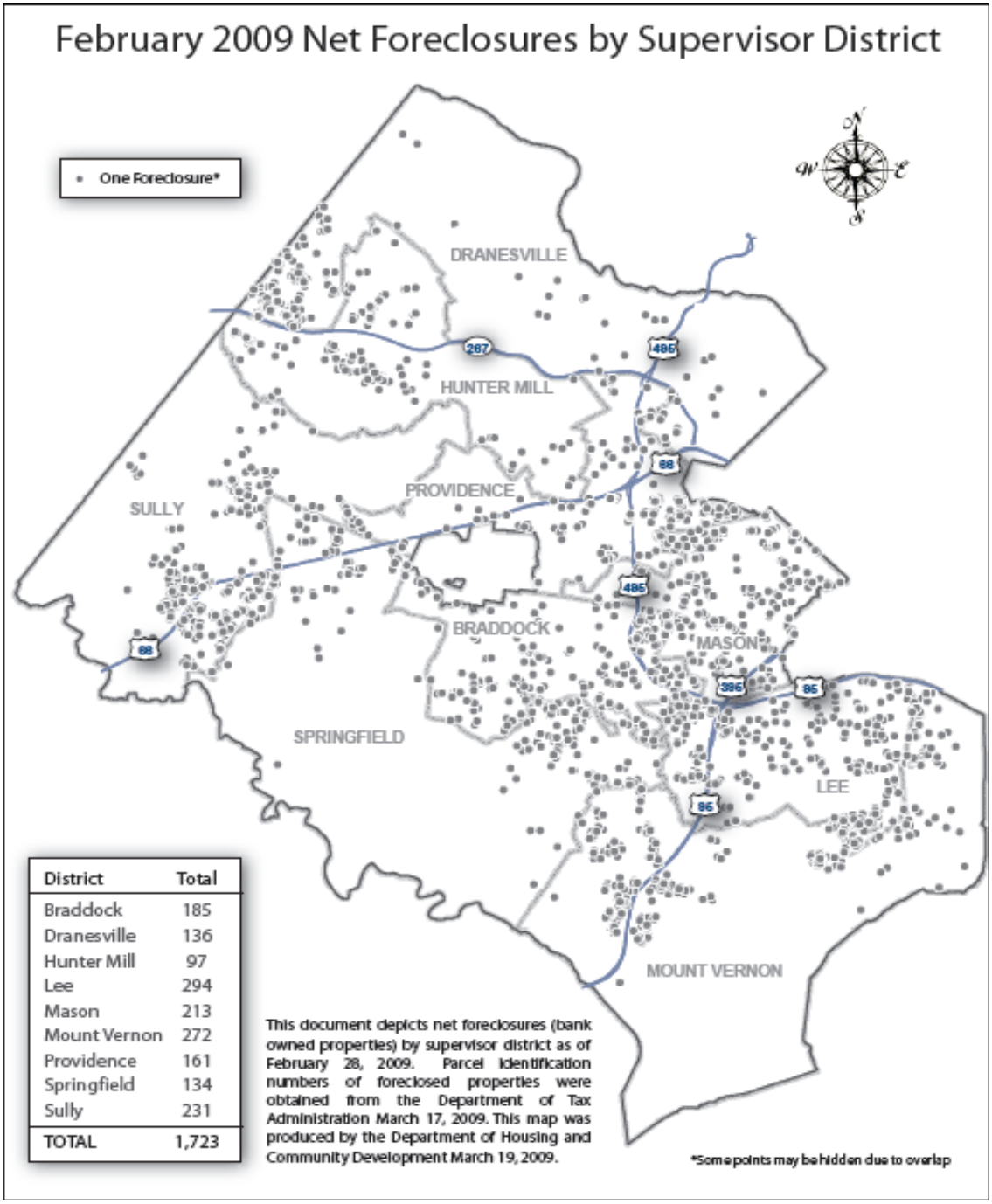
Fairfax County Approved Consolidated Plan One-Year Action Plan for FY 2010 100

Proposed changes to the Citizen Participation Plan will be publicly advertised at least 30 days prior to the adoption or amendment of the Citizen Participation Plan by the Board of Supervisors to allow time for public comment.

The proposed revisions to the Fairfax County Citizen Participation Plan for the Consolidated Plan will become effective upon the date of the Board of Supervisors' approval for the planning and implementation process of the Consolidated Plan.

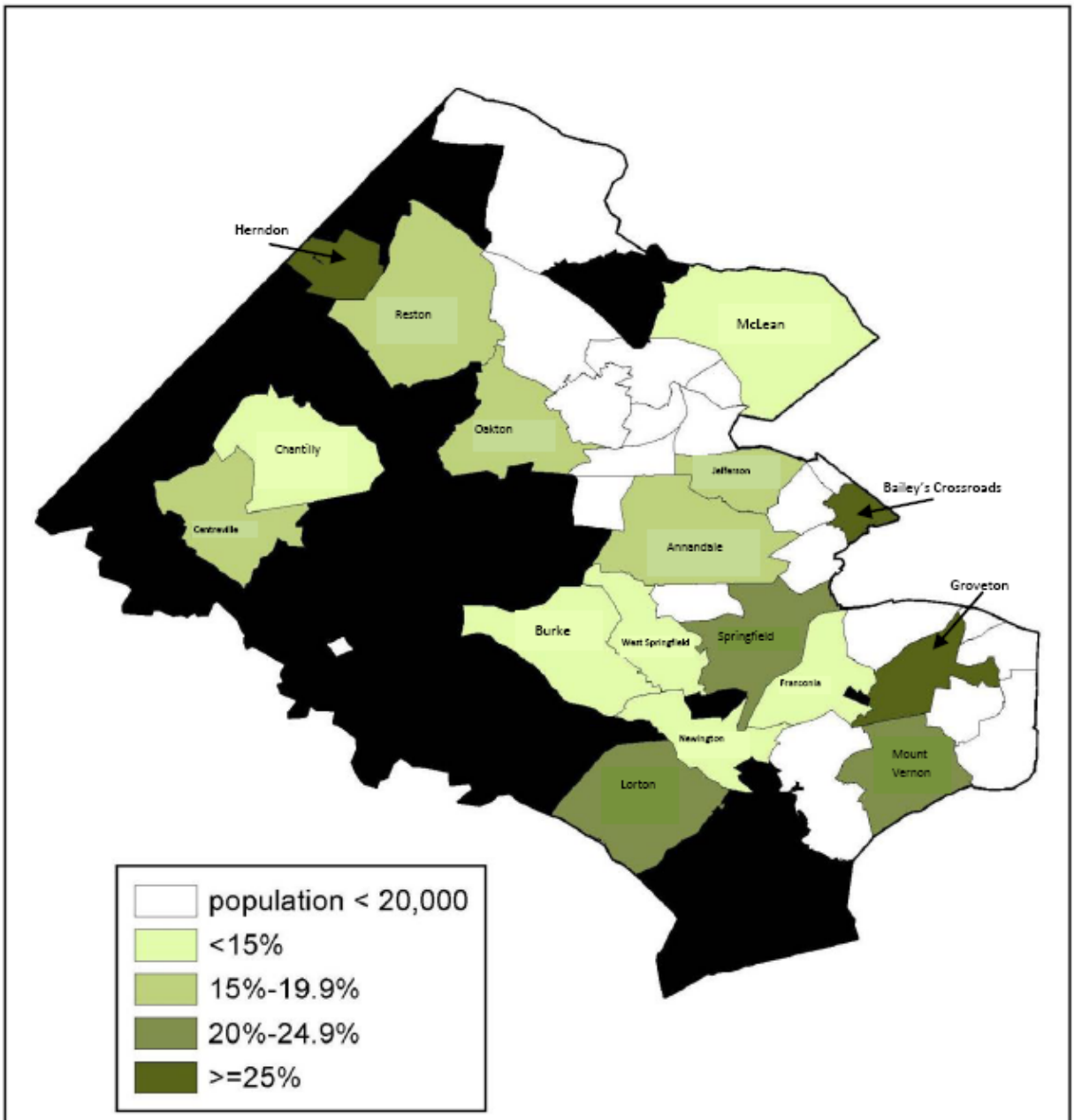
Appendix C - Maps

Map 1: Distribution of Foreclosures, Fairfax County



District	Total
Braddock	185
Dranesville	136
Hunter Mill	97
Lee	294
Mason	213
Mount Vernon	272
Providence	161
Springfield	134
Sully	231
TOTAL	1,723

Map 2: Percent of Low-Income* Households (2006-2008) (Fairfax County places with population of 20,000 or more)

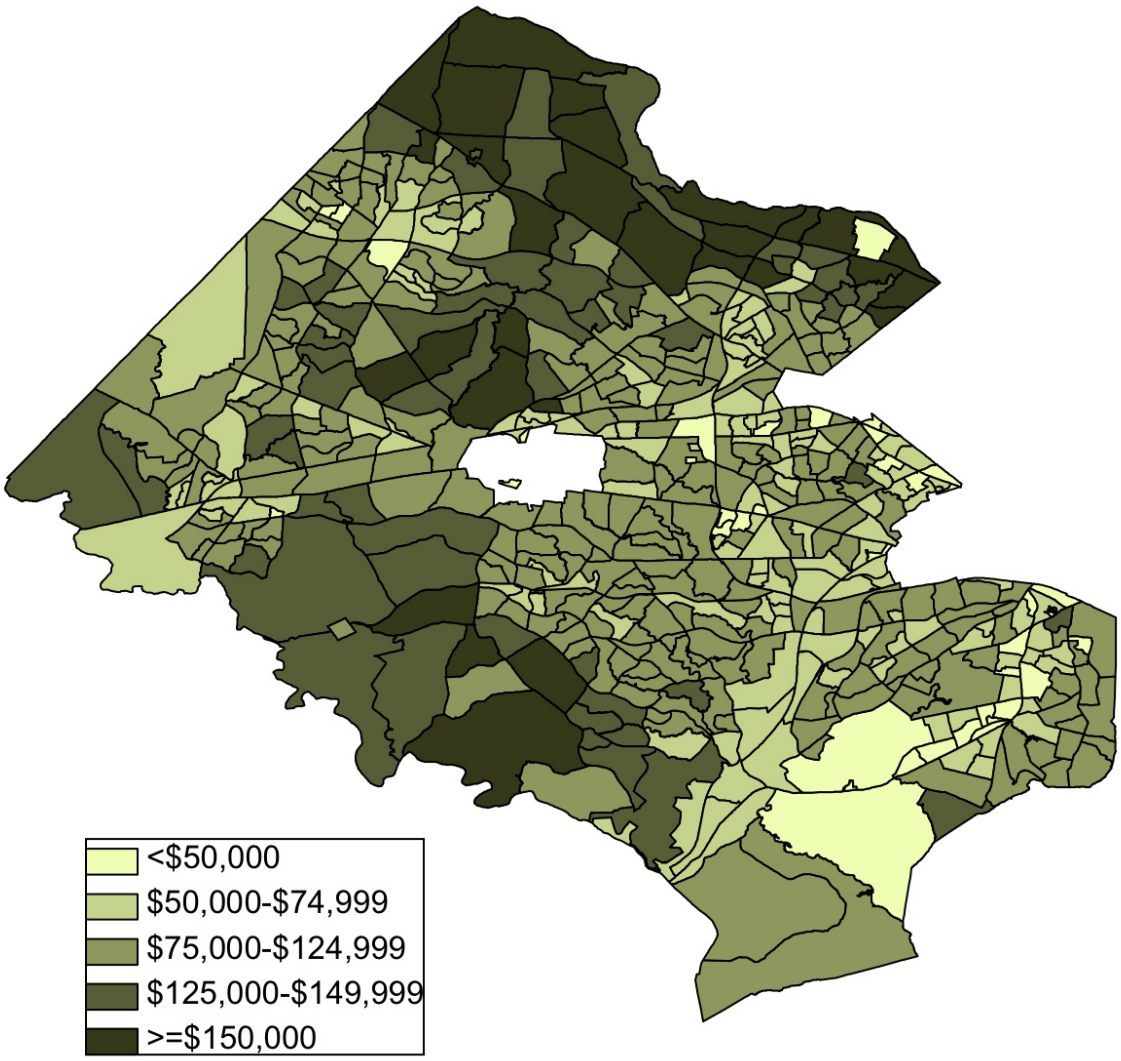


*<50% of Area Median Family Income for a 3-person family.

Source: ACS 2006-2008

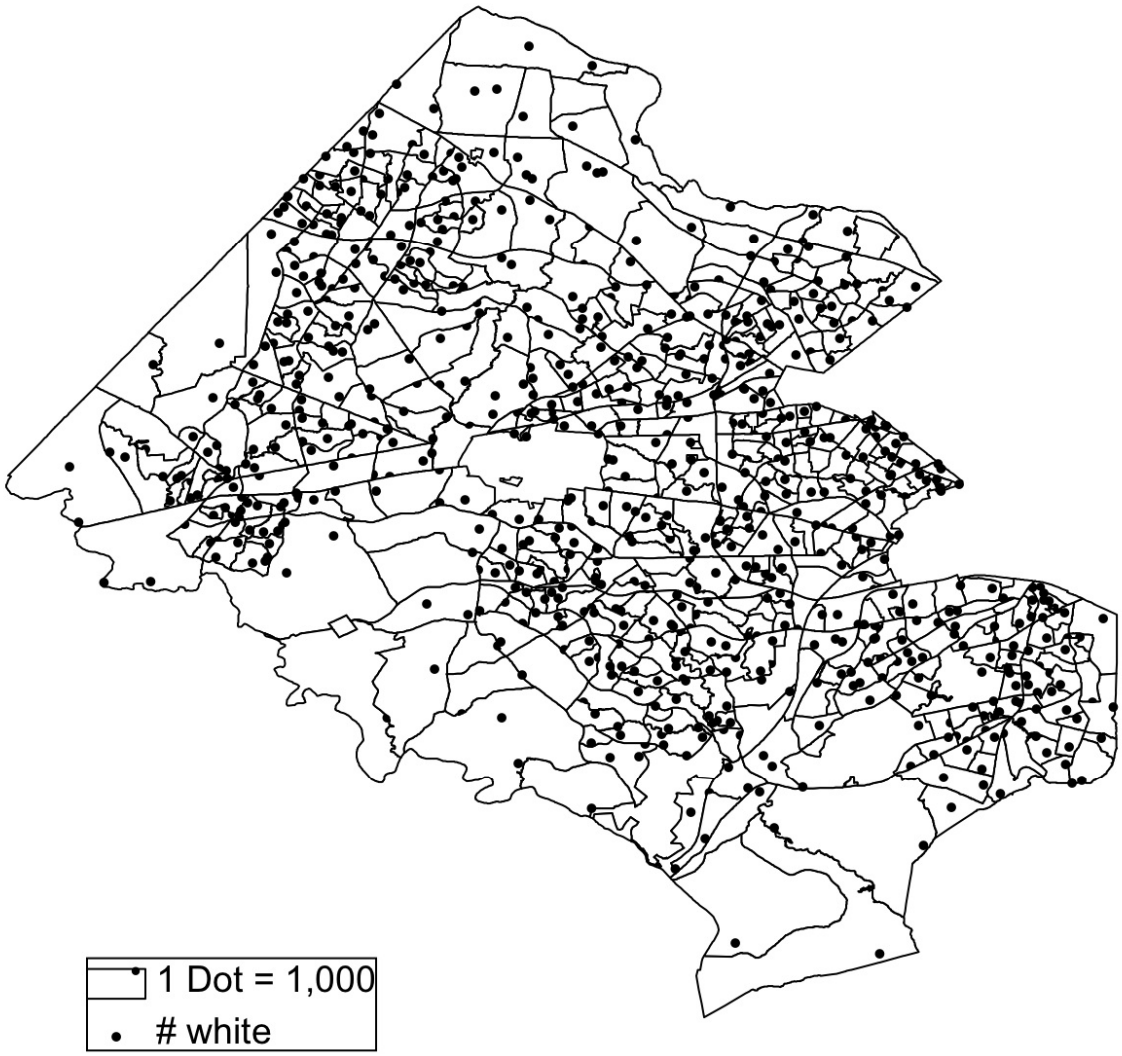
Note: Blackened areas are parts of the County that are not Census designated places (data not available).

Map 3: Median Household Income by Block Group (2007), Fairfax County



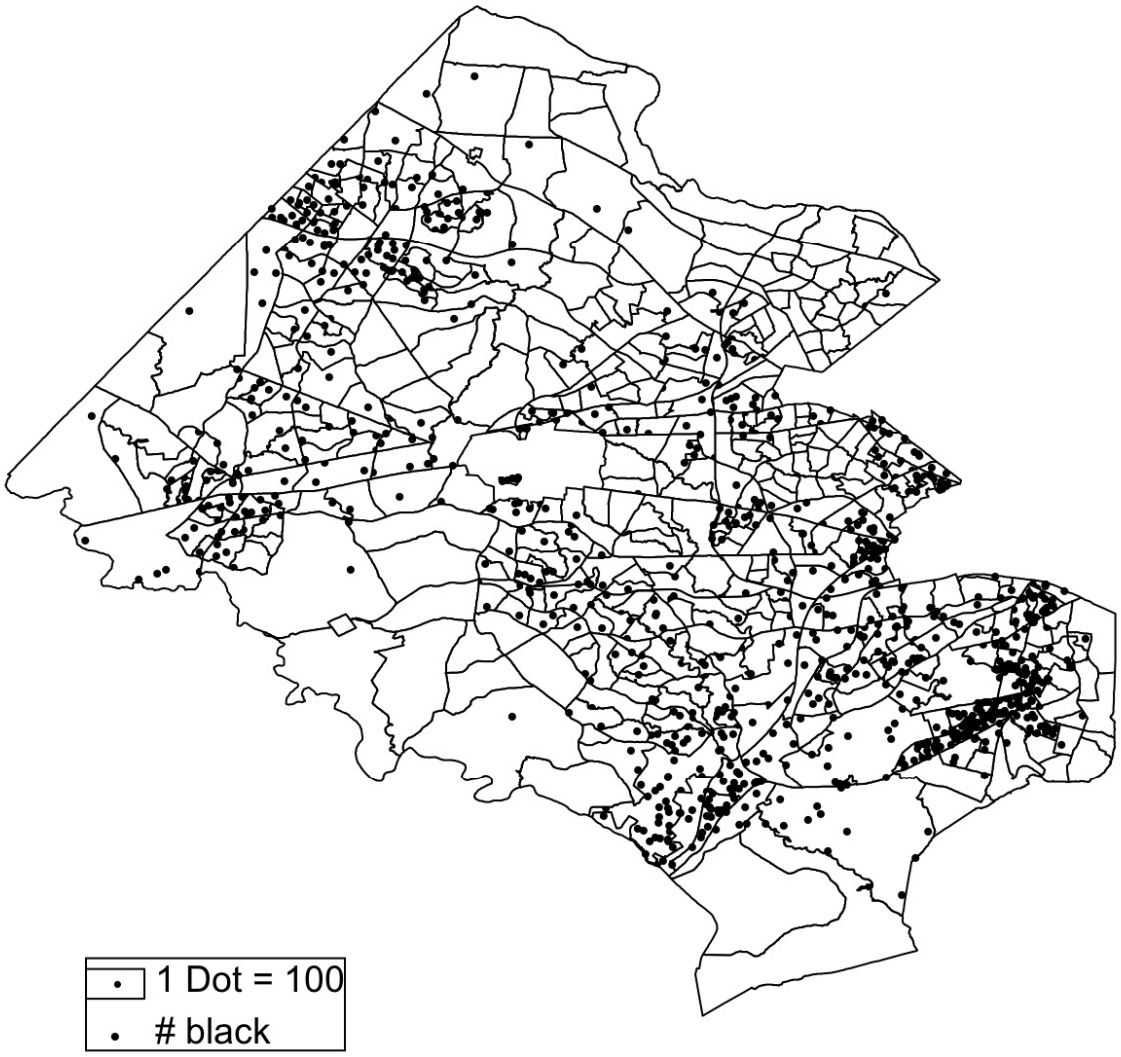
Source: Geolytics 2007 Estimates

Map 4: Number of White Alone Persons by Block Group (2007), Fairfax County



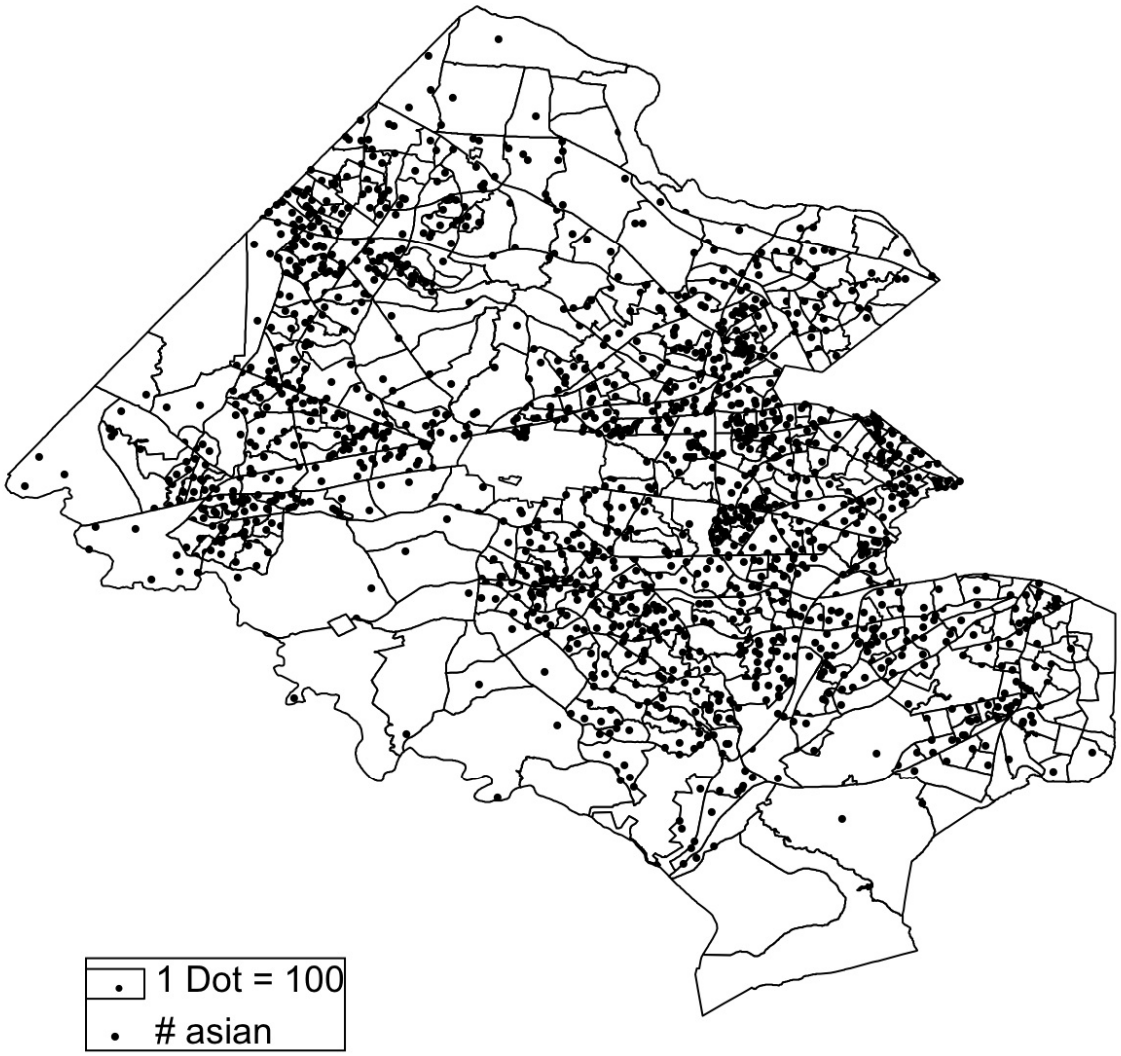
Source: Geolytics 2007 Estimates

Map 5: Number of Black Alone Persons by Block Group (2007), Fairfax County



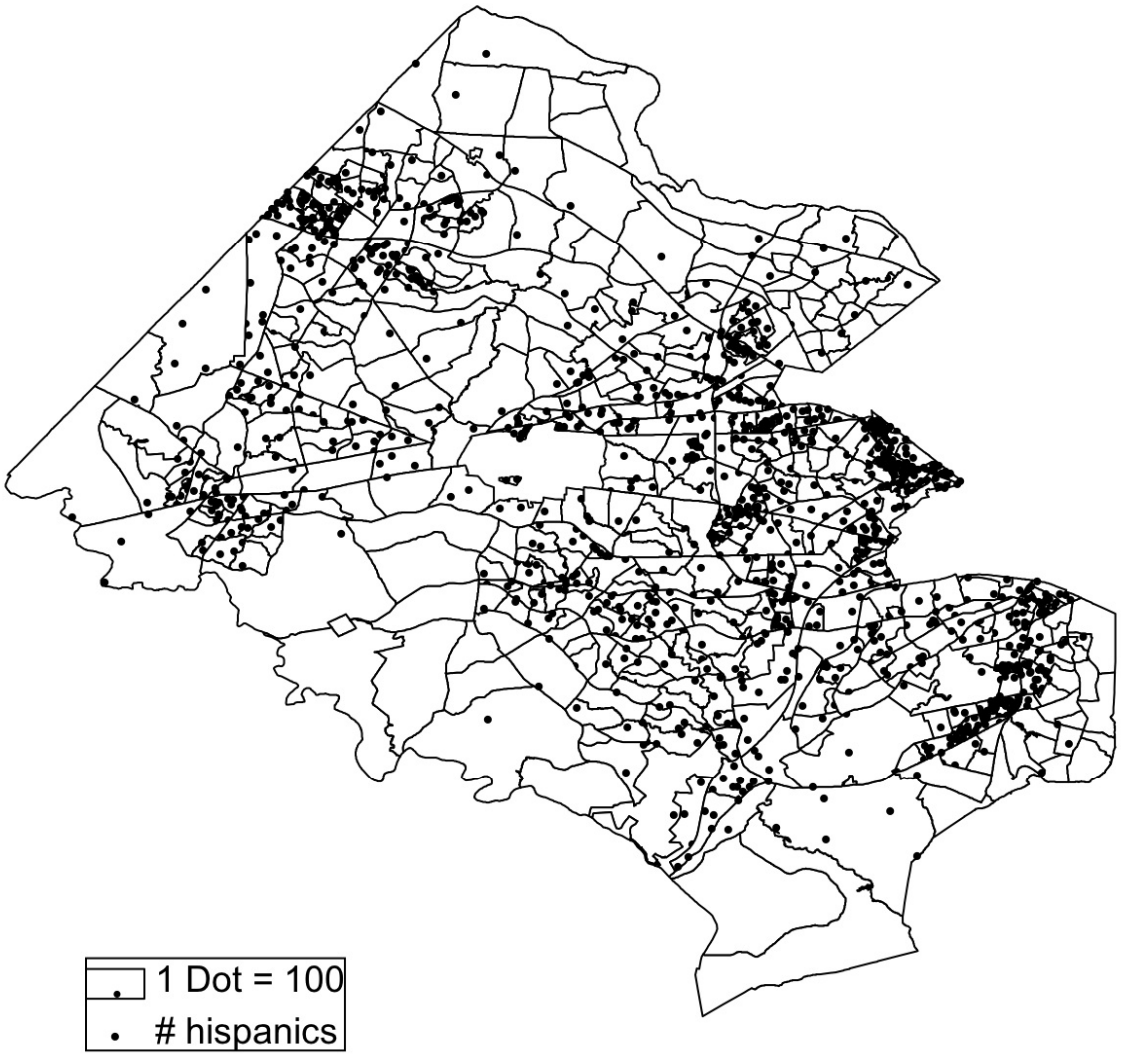
Source: Geolytics 2007 Estimates

Map 6: Number of Asian Alone Persons by Block Group (2007), Fairfax County



Source: Geolytics 2007 Estimates

Map 7: Number of Hispanic Alone Persons by Block Group (2007), Fairfax County



Source: Geolytics 2007 Estimates

Appendix D – Homeless Housing Inventory

See attached

Appendix A - Public Input Forums

Notes From
Fairfax County Five-Year Consolidated Plan
FY 2011 – 2015 Public Input Forum
Affordable Housing and Community and Economic Development

OCTOBER 28, 2009, 1 p.m.
RESTON COMMUNITY CENTER, HUNTERS WOODS VILLAGE

Affordable Housing

What are Fairfax County's Current Affordable Housing Needs?

- Units for singles
- Units for seniors
- Units for single seniors, particularly those whose monthly social security payment is $1,000 or less on average; nursing homes garnish social security monthly payments and little is left over
- The Endependence Center helps people live independently in the community, helps those with disabilities; SSDI is also eaten up each month by housing alone; need for universally-designed units
- Limited stock; limited affordability
- So few units for people with disabilities of all kinds
- For people with emotional disturbances there is nothing for short-term or long-term housing especially for singles
- October is Domestic Violence Prevention Month. Victims of domestic violence, some emotionally disturbed, are experiencing great difficulty finding available housing on an emergency basis; the victims tend to be married, often with kids, but it is also difficult for women who do not have kids/singles to find affordable housing; need long-term/permanent housing solutions for these women as well
- Permanent Supportive Housing to help special needs residents remain in their affordable housing (disabled, mentally ill, seniors, domestic violence victims)
- There is a need to expand the ways to educate the public about the homeless need and how the public can help.
- Churches are more involved in helping persons who are homeless (such as hypothermia program) but there is a need for training for members of faith community: counseling and assimilating immigrant populations; how to refer immigrant households to appropriate services; service coordinators who know how to access the appropriate service providers; Stephen Ministry model
- Needs to be more exposure on how to capitalize on the interactions with different agencies and nonprofit and church groups
- Need for a coordinated list of organizations that provide services to be distributed countywide so that referrals are made from the same reference guide
- Wiki community bulletin board online, updated by users within the services field, showing nonprofit, church, and County services available; current online resources are fragmented (Human Services Resources Guide is already online, but apparently needs better distribution); 211 number is an underused resource.
- Housing for troubled teens, e.g., emancipated youth, teens who are homeless, teens who do not have the option to return home for whatever reason; Priority should be on stabilizing a child's life; will lead to a more stable and safer community

- Family-sized affordable housing, e.g., 3-4 bedroom units for larger families/households; need to increase the number of these types of units that are affordable to low-income households; occasional need for units for even larger households with more than 5 members; many immigrant and refugee households have this need, even as high as 7 and 8 member households; important to consider where this type of housing is located, e.g., within walking distance to certain amenities and services for households who are otherwise dependent on public transportation
- Rehabilitating/Modernizing the current housing stock, ensuring that low-income households have access to the same quality of housing stock and access to amenities as any other households, e.g., inclusion of modern appliances such as dishwashers and laundry machines, access to the Internet; Make it easier to rehab units since individuals don't know
- Is there a way to create incentive to renovate housing and modernize it? Tax credits go to developers, but some nonprofit developers can also get them.
- Incentivize the market to create affordable units that meet these criteria, not just large real estate developers, but also "mom and pop" property owners with limited, small holdings that are in need of modernization.

What will Likely Be the County's Future Affordable Housing Needs Over the Coming Five- to Ten-Year Period?

- Senior housing will continue to be a growing need.
- Number of seniors who fall through the cracks: not yet receiving social security, too old to begin a different job with greater income, too much income to receive public assistance of any kind
- Retrofitting units to enable residents to age in place, stay in their homes as long as possible
- Understanding how many households work in the county, but do not live here for affordability reasons; or, households who need services/assistance, but do not apply because they are not eligible for annual income eligibility reasons
- Improvements in public transportation services tied to the development of affordable housing options
- Addressing the current foreclosure crisis as its impact will be felt well into the coming years
- Better understanding of future needs requires better understanding of current needs such as what percentage of residents is paying 30% of income for rent, consequences of foreclosure crisis.
- The use of Universal Design for the development of any new units, including rehabilitation and even acquisition

Prioritization Criteria for Which Needs to Address with Limited Resources

- Identifying and meeting the needs of extremely low-income households
- Single-Room Occupancy units (SRO's) to ensure that singles who are homeless have housing, ideally with supportive services
- Chronic homelessness; need to look at root causes of homelessness through data and information
- Persons who are disabled
- People who are currently homeless vs. those who reside in a shelter, those with no viable housing options, households who have an immediate crisis first, in the most

dire need; creating a hierarchy of basic needs and a tiering system of who is served first
- To get persons out of situation
- Children who don't have stable housing (have future additional needs; additional costs)
- Prevention: meeting needs before they actually are manifest

Affordable Housing Solutions and What is Working Well Under the County's Current Affordable Housing Development and Preservation Programs?

- Housing First does work well and rapid re-housing does work well
- County did pass 10-Year Plan for ending homelessness; implement goals
- Wealth of housing advocates in the county
- County has collaboration; County did buy large apartments; County needs to do more advocacy

- Some initiative toward acquiring and preserving housing

- Easy to get Low-Income Tax Credits (LITC) for buying housing; not as many tax credit deals as in the past due to the economy; need additional local resources; with a 30% decrease in value of tax credits in past year, results are a bigger finance gap now for developers
- Where will additional resources come from?

- Maintain tax at current level; diversify taxes
- Allow different zoning to allow permit housing (like university or hospital) on site.
- Zoning and incentives for developing housing
- Incentives for developers to upgrade and rehabilitate housing, like incentives for SRO's to be developed in other places

- Get citizens involved more in transitional housing; use more nonprofits to solve problem
- Make public more aware of how they can help, like hypothermia; why can't we step up as individuals and nonprofits and churches to do more; more buy-in from the community to address the problems
- Mixed-income, mixed-use development; mix of household incomes, housing types and commercial development
- Improved working relationship between Department of Housing and Community Development (HCD) and the Department of Planning and Zoning (DPZ)
- Affordable housing units in the county can help check the rate of increase in the cost of market rate housing.
- Education of general issues needed, and examples and opportunities to help; public must be informed
- Like Arlington, bonus density program could be used in Fairfax County; also mixed-income, mixed-use applied in more places in Fairfax County; Wiehe Avenue train station is an example coming along.
- In Arlington, they asked, regarding the density of one side of a street that was being built on, to get an additional 3-4 units of housing.
- Fairfax County has 7 Revitalization Areas, and affordable housing needs to be part of all of them; example is Cameron Crescent at Lake Anne
- A lot of market rate housing could be made to go lower (lower rents), like through competition; some upgrade of units to encourage competition

- Landlords could encourage code enforcement; many units are in poor state of disrepair; if County put more time into health and safety inspections, it would help the existing housing improve (not enough inspectors)
- To prioritize resources, determine need; if there are numerous violations over the years, then that unit should have priority; don't put money into the housing that needs the least to save money
- Do a cost benefit analysis to help us understand the offset and how it might benefit Fairfax County.
- What is the balance between numbers of housing needing lots of money and people who need housing; Per an Arlington County study: given the amount of resources, this is what we can do with people who are at 50% or 60% of Area Median Income (AMI); the cost went up dramatically; they had an inter-agency buy down to make units affordable
- Consider subsidizing the building and providing affordable housing so that there is a mix of building subsidies and rental subsidies.
- Never enough vouchers, and chronically homeless are not eligible for vouchers (no singles waiting list)
- Have local money and Penny Fund fund some of the gap in housing and subsidizing; hard to get a loan so best option is direct subsidy to residents
- Rehabilitation is much faster and cost effective than building new construction; permits are easier for rehabilitation

Community and Economic Development

What are Fairfax County's Current Community and Economic Development Needs?

- Increased need for access to capital; banks not making loans; more people coming to Enterprise Development Group (EDG) and other groups like them around the county and at a higher income level than have seen in past
- Concerns by people how to take on debt
- Through IDA program, used to have a lot of people saving to buy a house; now people are not doing that but saving for education and vocational training
- Jobs are an issue; people are having hard time finding work
- Some people have jobs, but work has slowed down, so they are applying for a loan for a second job, like buying a taxi or truck.
- Financial literacy training in dealing with refugees; for refugees, it is different here in the United States; financial literacy training is also needed for native-born persons

What will Likely Be the County's Community and Economic Development Needs Over the Coming Five-Year Period?

- Some of those people who would have come to EDG for loans, could go to banks and get them
- Regarding the IDA program, people would go back to saving for houses
- Assumption that economy gets better

Prioritization Criteria for Which Needs to Address with Limited Resources

- People with most dire needs
- Expand people's knowledge and experience level; target those with greatest need
- Target those who have least access.

What is Working Well Under the County's Current Community and Economic Development Services and Resources?

- Not a lot of capital opportunities for businesses besides EDG; The nonprofit group, Boat People, works with Vietnamese and Thai populations and Our Daily Bread does some, too.
- There is more need than what the existing groups can provide.
- EDG would like to serve more people but due to resources and income level constraints they can't (clients' income too high to fit into government programs - but Northern Virginia is in a high cost area).
- Need is greater than capacity due to resource level.
- IDA program underutilized due to artificially low income levels set by State
- IDA program for saving for a house is underutilized, due to persons' fear and not understanding the opportunity; to improve this would be having people understanding better the opportunity, reducing fear and having the market becoming better
- Housing workshops on this could help people understand this better; have County staff partner with nonprofits

Over the Next Five Years, What Do You See as Opportunities for Change and Improvement?

- Facilitation of partnerships and groups working together; so many different groups out there; have the County take a role in facilitating that
- The County continue having events that are useful to the community at large; maybe once a quarter have nonprofits come together - or twice a year
- Topics could be on economic strata of those being served; would help with referrals
- Incorporating suggestions for Five-Year Plan in County legislative priorities that they present to the State (could be for changing how/what income levels are used for IDA program)
- Priorities for strategies – making priorities those that meet Community Development Block Grant (CDBG) legislation
- Prioritize things that are needed the most; the County is nowhere near having the need being met because of lack of resources; prioritize making sure that the most needy people get what is needed

Group Summary

- Microloan, IDA, financial literacy counseling are all working; need more financial resources
- Marketing needs increased support to connect with more geographic areas or population groups, such as language minority groups
- When economy turns back to normal, more people will be interested in buying homes – so County should lay groundwork letting public know there are groups out there to help, such as help with IDA program and saving for a house, and remind people about this.
- If there is increased demand for capital, banks may be a little leery to address it. Could the County encourage banks in some way – show them peers who are doing it or inform them of some programs out there; commend banks for doing that
- Regarding criteria for prioritizing options, the options could all be done at the same priority level.

- Regarding the legislative recommendation, its priority may be dependent on the timing of when the package is done each year; same with the other priorities.

Notes From
Fairfax County Five-Year Consolidated Plan
FY 2011 – 2015 Public Input Forum
Affordable Housing and Community and Economic Development

OCTOBER 29, 2009, 5:30 – 8:50 p.m.
FAIRFAX COUNTY SOUTH COUNTY GOVERNMENT CENTER
8350 Richmond Highway, Alexandria, VA 22309

Affordable Housing

What are Fairfax County's Current Affordable Housing Needs?

- Single Room Occupancy Units (SRO's) with support services (mental health, life skills, etc.)
- Housing for seniors
- Assisted living that is affordable in Fairfax County
- Independent living – what is available
- Resources to prevent homelessness
- Transitional housing (coordination of support services)
- Buy-in from County officials – meaningful efforts to develop more housing
- Housing First concept implementation
- Developer/government accountability
- Purchase of current stock by County
- Zoning restrictions on shared housing
- Historical properties – constraints on development

Population that needs assistance:

- Chronically homeless
- Seniors on fixed income
- Persons who are disabled living independently
- Persons who are disabled transitioning
- Victims of domestic violence
- Substance abusers
- Ex-offenders

What will Likely Be the County's Future Affordable Housing Needs Over the Coming Five- to Ten-Year Period?

- Base Realignment and Closure (BRAC) effects (government accountability)
- Influx of new immigrants (overcrowding, language barriers)
- Walkable communities – less energy consumption
- Rising energy costs – need green building – reduced operation costs
- Economic recovery – increased housing prices
- NIMBY – "not in my back yard" attitude
- Tax increases (in order to provide revenue to build)

- Reduction of social work services due to budget
- Sliding scale for County services (Recreation Centers, etc.)
- Education of public regarding housing needs/awareness
- Crisis of caring (decreased giving in affluent county)
- Development of unused church property

Prioritization Criteria for Which Needs to Address with Limited Resources

- Those who are most in need should be housed first.
- Bigger "bang for buck" by assisting the working poor (housing preservation)
- Look at best practices in other jurisdictions.

Affordable Housing – Resources, Opportunities, and Strategies

Affordable Housing Solutions

- Develop more SRO's with support services (mental health, life skills, etc.)
- Transitional housing (coordination of support services)
- Housing First concept implementation
- Purchase of current stock by County
- Government accountability to develop more affordable housing
- More parcels of land to be developed
- Church properties for use as affordable/low-income housing
- Zoning and policy changing decisions need to be made
- Education of decision makers
- Find ways to promote shared housing while protecting homeowners – address zoning restrictions
- Provide incentives to developers for mixed-income housing that includes units affordable to households with income under 50% Area Median Income (AMI).
- Support housing for the working poor (30-80% of AMI) to expand the middle-class and support a strong tax base
- Social workers in the County and nursing homes work together to service clients or share resources.
- Reopen the assisted living property located in Lorton, VA, and have it service low income elderly citizens.

Solutions for Housing Needs in the Next 5–10 Years

- BRAC (government accountability)
- Add walkable communities – less energy consumption
- Increase green building – reduced operation costs
- Tax increases (in order to provide revenue to build)
- Educate public regarding housing needs/awareness
- Improve crisis of caring (increase giving in affluent county)
- Development of unused church property to use for affordable/low-income housing
- Senior housing on church properties – small, 4 units per building
- Higher-density living and conveniences
- Incentives to build smaller-units housing
- Energy efficient housing means lower operating costs and lower rents

Community and Economic Development

What are Fairfax County's Community and Economic Development Needs?

- Job training (access to and affordability)
- Workforce development
- Small business development "training"
- Engaging the business community
- Community connectedness between residents and business owners
- Corporate/business social responsibility
- Transportation (Metro expansion to Belvoir)
- Access to streets and sidewalks, bus shelters, curb cuts, paths to bus stops
- Diversity of programs at senior centers
- Education/awareness of needs/opportunities for business partnership
- Continue to work on community-building strategies with those communities in need
- Quality of life vs. cost benefit analysis – criteria/measures
- Where will resources/money come from?

Prioritization Criteria for Which Needs to Address with Limited Resources

- Keep present percentages of housing vs. economic development in the Consolidated Plan as is at 85%/15% as long as you have "livable communities".
- Organizations should get points for working with the community.
- Give points to organizations who build up strong partnership with others to leverage County funding.
- Find out how other counties are able to spend money towards affordable housing.
- What kind of qualify of life do we want?
- Penn Daw is an example of community development with living units.
- Let's see some movement, i.e., people getting housing.
- Balance between workforce units preserved vs. persons who are homeless/of super-low income
- Support the mixed community concept - diverse income levels; support in communities
- Priority should be given to organizations that serve minorities, language minorities and immigrants and single parents who are often very low income.
    - Need help in their language skills in order to be able to move ahead and become self-sufficient

Community and Economic Development Solutions

- Job development
- Job training
- Support for small business
- Self-employment through small business ownership is a viable option for job seekers, especially in current economy where there are not enough jobs.
- Bring small business community as stakeholders.
- Community businesses being part of the community and contributing to the community
- Community events/engagement
- Transportation access
- Streets/sidewalk access/curb cuts
- Bus shelters

- Federal government contractors contribute to the community they work in or schools.
- Education of community businesses
- Some businesses are international, others represent the community.
- Empowering "deprived" communities to develop and have a sense of community
- Support community centers.
- Quality of life vs. cost effectiveness/benefits

ITEMS TO KEEP IN MIND

- Senior housing that is local
- Bonds and creation of new housing
- Special interest in those transitioning out of facilities
- Not enough Housing First
- Case coordination

Notes From
Fairfax County Five-Year Consolidated Plan
FY 2011 – 2015 Public Input Forum
Helping Persons with Special Needs

NOVEMBER 6, 2009, 9:30 a.m.
FAIRFAX COUNTY GOVERNMENT CENTER

GROUP A

What are Fairfax County's Current Needs for Housing, Services, or Other Facilities for Persons Who Are Homeless?

- Need to address homelessness facilities that are without transportation; citizens are unable to access services because of this challenge; access to transportation is important
- Ability to get education; Some classes at community colleges are free, e.g., through grants.
- When is homelessness critical? A Fairfax-Falls Church Community Services Board (CSB) representative may say that the client is not at a critical stage. The priorities of different services is a determining factor. One definition for critical: citizen does not have access to go and come as they please
- Addressing delays in the system when the families transfer from one jurisdiction to the other
- The need for affordable housing
- Transferring between programs without losing permanent status
- Immigration issues, which can be barriers to getting entitlement to access federal programs; Also, programs are limited to those with alcoholism and felony charges.
- Identifying child issues as they relate to families
- The need for a flow chart or map, and need for better service integration; System is sometimes confusing, e.g., federal HUD vs. local HUD.
- Community leaders, such as teachers, keeping an eye out for a possible homeless situation

- Shelter wait list is a concern, particularly with folks transitioning.
- Finding affordable child care; Some families can work but must stay home with children.
- Unemployment resource assistance; employment is an issue in a difficult market; There is the challenge of persons who are homeless raising themselves out of homelessness and increasing their income to be self sufficient.
- Dental assistance, particularly if it effects employment
- Outreach/education efforts with landlords
- Organizations' access to data to see what communities to work in, e.g. possible access to an eviction list
- More word of mouth information exchange; personal references to individuals; networking
- Partnering with businesses (Skill Source)
- It's challenging being homeless and the symptoms of an illness can compound the problem. Psychiatric hospitals do not house the homeless long term. There are not enough resources in mental health services.
- Need to ramp up services for the unsheltered – laundry, showers, health checks, set up a center to provide these needs
- Families have ownership in 5 years
- Working with Habitat for Humanity
- At the Kennedy Shelter, crisis care discharges residents who end up at the shelter but there is no space.
- Creating a peer run group house
- A day resource center; a homeless drop-in center like the Lamb Center
- Concerns about a 2 month waiting list
- Childcare and affordable childcare is a barrier to work and also being able to attend financial literacy classes.
- Alzheimer's is an issue. There is no one home to help low-income families pay for the medications that they need and the time off (when caring for an aging parent).
- Structural streamlining problem; Where should people go? They are going everywhere and asking for help and keep getting different answers.
- Need for community awareness, for residents and social workers, regarding shelters; There is a plan to get everyone on the same page.

What Will Likely Be the Important Needs for Persons Who Are Homeless Over the Coming Five- to Ten-Year Period?

- Addressing needs of the aging population with mental health issues
- The need for different levels of care. What happens when clients are in a program and they become stagnate? Where will they be placed?
- Younger generations living with severe disabilities
- Greater understanding of importance of prevention
- Housing First needs to be diverse
- Address environmental impact, sustainability, e.g. incorporating *green design* into family shelters
- Clear understanding of economic cost of services
- Look at existing shelter models; will they work in the future?
- Educate the population on how to maintain services, e.g., managing apartment of young adults.
- Address children not repeating homelessness of prior generations
- Dealing with neighbors
- Staffing

- Address where to place 18 year olds
- What is the path if client has been homeless?
- Effective assessments of clients
- Rapid re-housing program - divert families before they become homeless and fund case management services
- Educate persons on how to keep their apartment and on life skills.
- "Home Sweet Home" curriculum teaches 19-20 year-old single moms. It talks about leases, maintenance, budgeting. Research has shown that that this kind of education results in less property damage.
- They should make life skills an educational requirement like community service in high school; educate on money orders, checks, how to open a bank account
- Educate on how to get along with neighbors- socialization- so they don't complain about you.
- Professionals helping people need to do their jobs and be creative about solutions (not just say sorry, there is no alternative).
- Addressing bed bugs; It's a problem for everyone and there is so much information out there. Maybe the County could offer guidance on the best ways to treat it.
- Once you get an apartment, what is the path for people who are homeless?
- Host Families Program helps children and young adults up to age 23 who are homeless.
- When people get kicked out and put into assisted living they should look for peer to peer support, so they can talk to someone who was homeless before.
- Medical advances are keeping people alive longer but with more care needs.
- In-between housing is really important.
- In 10 years we will be feeling the effects of climate change. We need to promote sustainability and green design in shelters.
- Clear understanding of the economic implications of climate change.
- Green housing is seen as a luxury but you have men living in the woods and there is a desire to "put them in a box" with air conditioning, away from the leaves and the trees. There is a need to tie 'green' living into safe places.
- Do we want emergency shelters or do we just want apartments? Regarding some of the existing models, are they viable. We should bypass shelters and go straight into apartments.

Prioritization Criteria for Which Needs to Address with Limited Resources

- Prevention
- Looking at innovative partnerships
- Keeping homelessness in the feedback loop, particularly with advisory counsel
- Expanding housing options
- County have county-wide policy to increase affordable housing stock
- Work around best practices (models) for shelter procedures

Solutions Summary

- Restore the *Penny for Affordable Housing.*
- Get job hunting support.
- Partnerships, e.g. NOVA Navigator program
- Access to medical benefits and medical respite - beds
- Communication plan
- New developments setting aside affordable housing units; make it an across-the-board mandate (not just in Arlington)

- Leverage competition amongst jurisdictions/counties.
- Education
- Identification and compilation of resources to be available to all in the community (regarding legal information and resources pertaining to disabilities, youth, families); Accessibility (on web and hard copies)
- Recognizing complex multiple needs and building a system that meets those needs for all individuals and families (fill gaps)
- Prevention: focus and activities and funding on maintaining housing, prevention, diversion and rapid re-housing (for families and individuals)
- Increase housing stock in various respects and innovative ways; managing inventory – includes partnerships
- Expand and better align partnerships that maximize resources, opportunities and support services for those who are homeless or at-risk for homelessness leading to more self sufficiency.
- Plans are wonderful but just hearing about plans isn't going to "cut it".
- Regarding Kennedy Shelter, you need to be aware of where you are in the cycle.
- Mental and physical health a bigger consideration
- In Arlington County, affordable housing is mandated.
- Provide more data to the community.
- There should be an interagency work group.
- Regarding refugee groups - should we call the 222 number? Is that the number to call?
- Coordinated Services Planning works with faith-based organizations to distribute funds. Hopefully the stimulus funds will help with this.
- Concern regarding incident when someone had a family call and the operator told them they were not homeless. (Forum response: If the operator says that you are not homeless then you need to call their supervisor.)
- Call 911 when the 222 number doesn't work? Are the police trained to deal with homelessness or are they just going to arrest the person or search them? (Forum response: depends on the situation)
- Build a better integrated system.
- Implementation of prevention as a solution; more activities that lead to keeping housing

Additional Information

- Homelessness Prevention and Rapid Re-Housing Program funds can assist with diversion of persons before they become homeless — those aging out of transitional housing.
- N Street Village in D.C. offers multitude of services.
- DC Central Kitchen offers inclusive training and skill building.

Notes From
Fairfax County Five-Year Consolidated Plan
for Fiscal Year 2011-2015 Public Input Forum
Helping Persons with Special Needs

November 6, 2009, 9:30 a.m. – 4 p.m.
FAIRFAX COUNTY GOVERNMENT CENTER (Rooms 2/3 and 4/5)

GROUP B

Housing, Services and Facility Needs for Other Special Populations

From your perspective, what are the current needs in our community for housing, services, or other facilities for special needs populations?

- Group homes in Fairfax County, especially for individuals who fall outside Community Services Board (CSB) services; for example, those with developmental disabilities waivers (DD Waivers).
- Housing with in-house support services such as counseling for individuals with mental health disabilities and brain injuries.
- Housing for seniors with mental health disabilities.
- Homes with a level of affordability and accessibility that allows residents to remain in them for the long term.
- Public transportation (accessible); for example, signage for the visually impaired, sheltered and covered bus stops, the addition and improvement of sidewalks, etc., as well as transportation accessibility to other counties such as Loudoun and Prince William.

Are there particular special needs for those leaving an institution or at risk of being placed in an institution?

- Nursing homes (affordable and accessible) with both personal assistance and independent living support services in Fairfax County.
- Conduct public hearings (or focus groups) at institutions such as shelters to ensure communication with the "people that matter" and use www.disabilitynavigator.org, a gathering place online, as another way to get people connected to services.
- Rehabilitative group homes for people with mental health and substance abuse issues who do not have a place to go after being released from adult detection centers.
- Transitional housing (supervised) for individuals leaving institutions.
- Accommodate non-English speakers.
- Timely information and access to the stock of affordable and accessible housing; some states require landlords to advertise such units in advance (e.g. information clearinghouse).
- Evaluate compliance regarding accessibility codes to ensure that we are creating a fuller stock of accessible housing rather than just meeting the minimum 5% standard.
- Support services for individuals moving into their homes. (People are not able to exercise their rights to leave institutions.)

Looking ahead, what do you think will be the important needs for special needs populations in the next five-to-ten years? (Consider trends occurring in the county. How do you anticipate the future?)

- New units should be built to be accessible.
- Peer-to-peer positions rather than new mental health staff positions.
- Caregivers who can speak English well.
- Students with disabilities graduating from the LIFE program in public schools should have an opportunity to obtain degrees rather than non-competitive certificates.
- In-house assistance for seniors who are now living longer.
- Better wages and benefits for personal support assistants (PSAs) or direct care workers.
- Support services for people with autism who are graduating from programs and schools and being placed in the community.
- Creative housing along with minimum or total support services, so that people with disabilities can live as whole citizens.
- Back-up support services at short notice; for example, when personal assistant is not available.
- Integrated housing and clusters of support housing for people with cognitive, individual or multiple disabilities.
- Focus on community building in mixed income areas; for example, libraries and schools.
- Partnerships with faith-based and nonprofit organizations; for example, donate land, especially in areas with little available land or services.
- Hyperthermia services needed.
- Integrate individuals with a spectrum of disabilities, so that they can help each other.
- Communication plan; for example, best practices in housing, partnership opportunities, and leveraging of housing and support services.

For the next five year period, what factors do you think the county should use in deciding which needs to address with limited resources?

- First priority to individuals with disabilities not institutionalized to ensure full and enhanced housing accessibility and support services, especially those at risk for homelessness and hitting rock bottom without support, a home, and/or job.
- People at risk for falling ill should be first to receive, for example, H1N1 vaccine.
- People in group homes who are costing more than if they remain at home.
- Change “the have and have-nots perspective” and use non-monetary resources such as energy and time; for example, volunteer groups.
- Priority should be given to those with the most physical needs, specifically institutional and respite care and support and emergency services.
- Look at existing systems, for example, CSB mental services waivers.
- Look at people within the population who are a risk to themselves and others because of needs and behaviors that cannot be met at home. Also, benchmark and see what is out there in Fairfax County and nationwide.
- Look at the gaps preventing people from living in communities independently. (There is a housing waiting list for people with disabilities, but none for people with disabilities who are stuck in nursing homes.)
- Priority should be given to using community development funds to build infrastructure, so that people can stay in their homes.
- Look at people with disabilities who are living at home with their parents, but will eventually be forced into nursing homes.

- Housing and support services for children with disabilities who have been abandoned, as well as individuals with traumatic brain injuries.

Resources, Opportunities and Strategies for Other Special Needs

Comments from the audience on what is working:

- Getting Food – getting good food has enabled me to come and talk today. Meals on Wheels is working. Proper food and proper housing give a person strength (meeting basic needs). There are still hurdles; it can be difficult to locate meal services. Housing is in undesirable and unsafe areas.
- Metro Access works well. It does need to expand how far out it will go. Do not raise fees. There is fear that the price will go up and then people cannot afford it.
- SPARC Program. The SPARC program is wonderful but it needs to extend to five days a week. It is a fantastic program and has saved many lives and it can save more lives. It keeps families together and allows young adults to be out in the community.
- Disabilities Services Board: thank you for doing community outreach, continue to facilitate and participate with meetings like this.
- Grateful for programs that help us get jobs (through Mason).
- Case Management through CSB exists but there are waiting lists. Not all of the information reaches all of the case workers resulting in not all receiving the same information on services. Case Management works well but not all of the needs are being met.
- Real estate tax exemption for persons who are disabled works well.
- Create a program where persons with disabilities can own homes, expand those homes to rent to another person with disabilities (expand capacity), allow people to realize appreciation and do upgrades on homes. Allow people to pool assets together to have a home together (e.g. allow this through Housing Choice Voucher homeownership initiatives)

Comments from the audience on what works but needs to be strengthened:

- Medicare waiver program that provides money that follows the person as they transition to different services is working. Needs improvement: find a way to provide access to housing when the person needs to transition (not a waiting list). There should be a 6 month window to actively work with someone to transition; have transitional living program then on to permanent housing. Increase access to rental subsidies or vouchers.
- Housing developments like Coppermine are working. To improve there needs to be 24 hour coverage for personal assistance. Need the ability to pull or have on call emergency services. Need support service personal to help live in the community. There are not enough SSP, not enough volunteers, not enough funding (pay is too low).
- Housing – Individuals who meet all of the requirements to live in housing can't have someone live with them. There needs to be an allowance for live-in help or a family member who can help. Need to keep people closer to their family.
- Coppermine/Wesley Housing. Loves the opportunity even if not all of the needs are being met. This housing is great, 2 bedrooms and an aide, but it isn't appropriate for all disabilities and doesn't have all the aid one needs.
- Creative Partnerships, Interfaith partnerships. Wesley Housing can look for other partners to provide services. Lessen bureaucratic obstacles to make partnerships work.

- Coppermine – it lacks support services. DC has 24 hour on call services if someone doesn't show. Need a pooling service to cover emergencies. For full independence need service support 24 hours a day. This is a critical component. Full service support can keep people out of nursing homes.
- We live in a multicultural community. Mental health services need to be available in multiple languages. This will reduce domestic violence and dependency on local shelters.
- Languages. Need staff who can speak the person's language. Need continuity of services and not change due to language barriers. More multilingual support with continuity is needed. Multilingual staff must also provide good service to English speakers.
- Deaf/Hard of Hearing and Vision-impaired services – some very good resources in Fairfax County. Not only need the knowledge of services but need to make sure it is being enforced.
- Not all business, emergency services, etc., are fully accessible. An able bodied person may be in an accessible room at a shelter so there isn't a place for the person with disabilities.

Over the next five years what do you see as the greatest opportunity to make changes and improvements:

- In home services – open the door and see how they are living. People often have too much pride to ask for help. Too many people are on the phones, they lack understanding. Either volunteers or Coordinated Services need to get out.
- Money follows the person – this doesn't work with mental health services. If this is the policy then it isn't functioning.
- Make information available in different media; recording of this session would be helpful to the visually impaired. Improve audio and written information (not just PDF format on websites).
- Share information across state and county lines – Arlington has support to keep people in the community and out of the hospital (PACT services).
- Medicaid Waiver for Mental Health – other states such as Colorado use this; VA needs to do more. Need a county advocate with the state.
- PACT teams in CSB. There are currently two PACT teams and there need to be more; plan for more vouchers to get another team.
- People should not judge other people's disabilities.
- Need more partnership with the community.
- Mental Health needs to train more bilingual companions at the community (volunteer?) level.
- Stimulus fund opportunities. Lobby to use stimulus funds for programs and services that keep people in their homes. Things like this often get overlooked. It costs more to institutionalize a person; use funds for preventative housing issues.
- Stimulus fund opportunities. Over the next five years increase the stock of affordable housing. Offer incentives to builders; if they increase the number of accessible units they will get extra "points" towards winning the bid. Offer incentives to contractors to provide more accessible housing in general.
- Stimulus fund opportunities. After 12/31/10 stimulus funds go away. The Commonwealth is talking about cutting Medicaid Waiver services. We should be building those areas up now with stimulus fund money.
- Look for other opportunities to use stimulus funds and other ways of working with CCFAC.

- Improve emergency shelter availability. Increase mixed use development, increase programs like SPARC.
- Communicate information across all lines, look at best practices from other jurisdictions. Social Workers are over worked. Improve networking and communications. Social Workers help those most in need; improve their support and training.

Was there a need that was not covered?

- What can be done to make disabled members feel safer at home? Make housing in safe neighborhoods.
- Provide alternative services/housing while individuals are on a waiting list. Look at supporting individuals more in a way that allows them to stay with their families. Underscore family support.
- Find better ways for consumer and family to take more responsibility for their own treatment rather than just provide services to them. Change the dynamic of mental health to allow/encourage more individual responsibility for care.
- Peer support models work but are underfunded.
- Fully accessible housing works but is not fully integrated into the community.
- Transportation – not enough accessible housing has adequate public transportation. Housing is too isolated; improve access on all areas – bus stops don't have covered areas to wait, no sidewalks at bus stops, etc.

Group Summary of Solutions:

- Identification and compilation of resources available to all
- Build a better integrated system.
- Recognize complex and multiple needs
- Implementation of prevention as a solution, more activities that lead to keeping housing.
- Increase housing stock/capacity
- Expand and better align the resources we have.

Additional Testimony Provided

Oral testimony was received from an individual with physical disabilities who is now receiving housing assistance from the Department of Housing and Community Development (HCD). She indicated that, due to her physical condition gradually deteriorating, she now needs more accessible housing. She indicated that she is not being helped by HCD to obtain appropriate housing even though she has made several inquiries and requests to HCD.

Forum

Closing Session Suggestions

- Put Forum notes in HTML or another form of Word when publishing on web site.
- Blog site for other comments
- Social networking site for requests for assistance.

The CCFAC held an additional public hearing on Housing and Community Needs on December 8, 2009. These comments are summarized below.

Alexa Maroidis, Peer Mentor for the EnDependence Center of Northern Virginia (ECNV), encouraged the use of federal stimulus funding to provide more housing for persons with disabilities, to support accessible transportation and to set aside some Housing Choice Vouchers for persons with disabilities. In response to questions from members of the CCFAC, Ms. Maroidis explained that, while she is not personally aware of cases of housing discrimination against persons with disabilities, she is sure that it exists. As a Peer Counselor, she seeks to determine client needs and to assist in getting resources for clients. Housing providers tend to dedicate specific units which cannot be occupied unless the tenant has a disability. Ms. Maroidis believes that it would be more efficient to have a number or percentage of units set aside, so that persons with disabilities could be housed in any appropriate unit rather than be limited to the availability of a particular unit.

Doris Ray, also on behalf of the ECNV, thanked the CCFAC for the opportunity to give input on the Five-Year Consolidated Plan. She pointed out that there is a lack of both accessible units and affordable units. There also is a lack of compliance with federal accessibility requirements. There is a need for supportive housing for persons with physical and cognitive disabilities. There is a neglect of the need to discuss and set priorities. The census counts and plans concerning persons with disabilities should include the needs of persons in institutional settings as well as those in the community who are at risk of being institutionalized, including seniors. Ms. Ray encouraged the establishment of goals and priorities for providing vouchers for people exiting institutions and transitioning back into the community. The ECNV also would like to see more specifics about compliance with ADA and Section 504. For example, the Mondloch Shelter, which is celebrated for having the first accessible shelter rooms, would have turned away persons with disabilities had it not been for advocacy from the ECNV. Ms. Ray urged Fairfax County to apply for the federal NOFA for accessibility vouchers and that housing providers be monitored to insure compliance. In response to questions from the CCFAC, Ms. Ray said that, based on her communications with Carol Erhard in the Department of Housing and Community Development (HCD), there are plans to apply for the vouchers. She will work on submitting data compiled by the ECNV that may be helpful for the Five-Year Plan. Ms. Ray also reported that HCV Program applicants do self-identify as having a disability and that the information is subsequently verified by HCD. However, HCD no longer maintains a separate list for persons who need wheelchair accessible units.

Written testimony was submitted on behalf of Ann Collet by email. Ms. Collet requested that the County concentrate on those with the greatest need instead of those individuals of moderate income. She noted that the Fairfax-Falls Church Community Services Board was looking at lowering income limits from $50,000 to $30,000 and indicated that rent or home purchase needs a category lower than that, especially for people with very low income.

Ms. Collet indicated that housing should be integrated into the community and that maintaining property values is better where there is a mix. She also indicated that there is a significant need for housing consideration for people with multiple chemical sensitivities (MCS). Regarding individuals with hidden and multiple disabilities, Ms. Collet indicated that they require periodic personal assistants who need good negotiation or management skills to get the needed services for the client. She concluded by indicating that there needs to be a greater focus for specific needs.

COMMENTS ON PLAN FROM PUBLIC HEARING AND 30-DAY COMMENT PERIOD

Board of Supervisors Public Hearing on April 27, 2010.

Pamela Barrett, Chair of the Consolidated Community Funding Advisory Committee (CCFAC), indicated that the CCFAC is grateful that the CCFP was fully funded in the County FY 2011 budget. She indicated that the CCFAC's outreach and approach to targeting community-identified needs enables the County to better address the needs of some of the County's most vulnerable and underserved populations and strengthen and assist nonprofit partners with the services they provide. The CCFAC received some written public comments on the Five-Year Consolidated Plan and addressed certain issues brought to their attention to date. Ms. Barrett indicated that some comments did not specifically apply to the Plan or will require further consideration beyond the time frame for submission of the Plan to HUD. These may be considered for incorporation at a later time through an amendment and after vetting through the appropriate processes. The CCFAC tried to be responsive to those concerns that did apply and could be incorporated now. Ms. Barrett indicated that the CCFAC hopes that the Board will continue to support the work of the CCFAC in gaining public input and participation in the CCFP process, and she acknowledged the effort and care taken in the development of the plan, with many hours of County staff time and great input from the community.

Lynne Crammer, Chair of the Fairfax-Falls Church Community Services Board (CSB), referred to a letter sent to the County's Department of Housing and Community Development (see Written Comments Received below). Ms. Crammer described the CSB clients and commended HCD for drafting Consolidated Plan documents that incorporated the Housing Blueprint. She indicated the need to plan for continued addressing of the needs of the clients that CSB serves and described the four policy and program enhancements she identified in the letter to HCD (described in Written Comments Received below).

Glenn Kamber, Chair, Housing Advocacy Committee of the Fairfax-Falls Church Community Services Board, stated that housing is central to improved services for CSB clients and stated the importance of reducing the CSB waiting list. Mr. Kamber spoke of the need for interagency planning, and that process should be reviewed in how people are taken off of HCD's waiting list and given housing. Mr. Kamber indicated that he thought the process is broken due to factors such as how the mailouts and other processes are handled. He indicated that the process should be more sensitive and person-focused.

Woody Witt, Chair, Intellectual Disability Committee of the Fairfax-Falls Church Community Services Board, supported the letter sent to the County's Department of Housing and Community Development from Lynne Crammer that is referred to above. Mr. Witt indicated concerns about people on the CSB waiting list and that there are responsibilities to be met under the Olmstead Act. He indicated concern regarding those inappropriately housed in institutions and that they should be in smaller housing, such as assisted-living group homes. Mr. Witt saw the Housing Blueprint as a beginning for new group homes, and he thanked the Board of Supervisors for their support of the CSB.

Susan Beeman, Chair, Mental Health Committee of the Fairfax-Falls Church Community Services Board, urged support of the CSB enhancements referred to above. Ms. Beeman mentioned the importance of the reduction of CSB clients on Housing waiting lists and spoke of the Beeman Commission priorities.

Cookie Hymer-Blitz, Chair of the Fairfax Area Disability Services Board (FA-DSB), thanked the CCFAC and HCD for development of the proposed Five-Year Consolidated Plan for FY 2011-2015 and the proposed Consolidated Plan One-Year Action Plan for FY 2011, and indicated that including the Housing Blueprint goals is commendable. Ms. Hymer-Blitz indicated that the goal to reduce the number of persons on waiting lists is critical. She requested the consideration of four items: 1) HCD, the Office to Prevent and End Homelessness, the Housing Opportunity Support Teams, and housing locators should coordinate a list of landlords who accept vouchers and have accessible units. 2) HCD must enhance communication with clients including clear, concise communication and allowing interested third parties to accompany clients on their housing interviews. The FA-DSB asks that the County Executive task staff to develop recommendations for improving communication, outreach, and accommodations for persons with disabilities and utilize the existing inter-agency housing planning committee to coordinate this. 3) Regarding the 50% reduction on wait lists, the FA-DSB recommended a set-aside of at least 10 percent for people with physical or sensory disabilities. 4) Ten percent of the units acquired should be physically accessible. Ms. Hymer-Blitz indicated that written testimony that she submitted (see below) has further details.

David Burds, Representative, Endependence Center of Northern Virginia (ECNV), spoke and described ECNV. Mr. Burds provided information on the Money Follows the Person (MFP) grant and that ECNV has become a transition coordination provider and worked with people with disabilities who want to leave nursing facilities and move into their own homes. Mr. Burds saw the Consolidated Plan planning process as an opportunity for the County to make a commitment and support the MFP grant and indicated that it is imperative that the persons with disabilities population be addressed. Mr. Burds spoke about a Notice of Funding Availability (NOFA) for 5,300 housing choice vouchers and how the MFP grant can be federal match to Virginia's Medicaid program to help fund MFP services. Mr. Burds indicated that ECNV recommended that the Five-Year Plan call for applying for and implementing new housing choice vouchers to benefit, among others, those at risk of institutionalization.

In the written testimony accompanying Mr. Burds' oral testimony, Mr. Burds indicated three broad areas in which ECNV felt the proposed Five-Year Plan could be more detailed and specific in how it addressed the needs of the disability community: 1) Meeting the needs of persons wanting/needing to transition from nursing homes and other institutions back to the community, 2) Ensuring that accessible housing is available in the Fairfax community, and 3) Preventing discrimination on the basis of disability in the rental, sale, or purchase of housing. Regarding the needs of persons wanting/needing to transition from nursing homes and other institutions back to the community, the ECNV recommended three strategies be added to the Five-Year Plan: 1) Apply for and implement, if awarded, the HUD NOFA issued in April 2010 for new housing vouchers targeted for persons with disabilities who are attempting to transition from nursing homes or other institutions, or who are at risk of institutional placement. 2) Under the goal of reducing the waiting list, add a new local preference or special admissions procedure available to persons transitioning from nursing homes or other institutions, particularly those in the MFP Program and/or those attempting to exercise their Olmstead rights. 3) Add a similar preference or admissions procedure available to the same population, for priority on the public housing wait list, and for access to project-based vouchers.

Regarding ensuring that accessible housing is available in the Fairfax community, Mr. Burds wrote that ECNV calls for an enhanced number of accessible units up to 10%. ECNV feels that a goal to merely comply with federal law is not sufficient. Regarding preventing discrimination on the basis of disability in the rental, sale, or purchase of housing, ECNV indicated that it is time to conduct FHAA (Fair Housing Act) testing, that it should be done to

determine whether there is discrimination on the basis of disability, and that the Plan documents should be specific on what type of testing will be done in the upcoming years.

In the written comments, Mr. Burds noted that the County mentions in its draft plan that a barrier to affordable housing is that many seniors may not be able to pay for renovations to make their homes more accessible so that they can more easily "age in place". Mr. Burds indicates that this is an important barrier to raise, but it is not just one that seniors experience. He cited that the high cost of housing in the County, together with the difficulty in locating fully accessible single-family units, presents a barrier to low- and moderate-income persons with disabilities who need to relocate to the County in order to take advantage of employment opportunities. Another concern he raised was that the section on barriers should discuss the lack of accessible housing, the prevalence of FHAA violations, the barriers to persons with disabilities exercising their Olmstead rights, and the lack of accessible pathways to bus stops and to amenities in many County neighborhoods. Mr. Burds concluded by writing that ECNV was ready to assist the County in the achievement of the goals and objectives in the plan.

Alexa Mavroidis, Housing Specialist, Endependence Center of Northern Virginia, thanked the CCFAC and HCD for their work on the Plan documents and for making persons with disabilities a priority. Ms. Mavroidis commented about page 110 of the released proposed Five-Year Action Plan indicating that she was glad to see language regarding the Olmstead Commission and that she wanted to see the County apply for vouchers. She also indicated that on pg. 97 there is reference to it but that it seems to indicate that the Fairfax Area Disability Services Board and the Fairfax-Falls Church Community Services Board apply for them but, according to Ms. Mavroidis, only the Fairfax County Redevelopment and Housing Authority can apply for them.

In the written testimony accompanying Ms. Mavroidis' oral testimony, Ms. Mavroidis provided the following additional comments on the Proposed One-Year Action Plan: ECNV hopes that the County will pay especially close attention to the need for accessible and affordable housing for people transitioning out of institutions; that any federal funds used in the development or renovation of housing has always had the requirement under Section 504 that the County refers to in the Plan (of having 5% of the agency's total housing resources accessible to persons with disabilities and 2% accessible to persons who are sight and/or hearing-impaired); and that the FCRHA should do an assessment of how compliant the County is with Section 504 regulations. Ms. Mavroidis provided the following additional comments on the Proposed Five-Year Consolidated Plan: ECNV wants to be sure that the County plans to apply for the HUD NOFA issued in April 2010 providing vouchers intended for persons transitioning out of institutional settings or at risk of institutionalization; ECNV also wants to see a serious commitment to apply for any other vouchers specifically targeted at people with disabilities over the next five years; and applying for Money Follows the Person vouchers is critical, as ECNV expects an increase in demand for MFP services due to extending the deadline for applying for them.

Written Comments Received

Marge Bleiweis wrote in support of the Consolidated Community Funding Pool and indicated how the funding helped Northern Virginia Mediation Service, a recipient of past CCFP funding.

Lynne Crammer, Chair of the Fairfax-Falls Church Community Services Board (CSB), wrote on behalf of the CSB, commending the development of the proposed One-Year Action Plan and Five-Year Consolidated Plan that incorporated the Housing Blueprint. She indicated that the CSB recommended the incorporation of four policy and program enhancements into both Consolidated Plan documents: 1) CSB-related housing

assistance needs and targets should reflect data CSB provided to achieve the ten-year Board of Supervisors' goal to reduce CSB waiting lists by 50%. 2) The Board should immediately increase or suspend the existing County disability housing threshold of 5% indicated in the Plan documents in order to reflect and achieve the Housing Blueprint waiting list reduction outcomes. 3) The Board should secure maximum allocation of federal and other housing and human resources referenced in the Plan documents to achieve the annual and ten-year HCD and CSB goals for reducing the waiting list. 4) The Board should call for review and improvement in County procedures that identify and provide housing assistance to special needs populations, especially persons with disabilities who are on both the HCD and CSB waiting lists.

Michelle "Cookie" Hymer Blitz, Chair of the Fairfax Area Disability Services Board (FA-DSB), wrote on behalf of the FA-DSB, commending the fact that the Housing Blueprint is one of the main driving forces behind the Consolidated Plan documents' recommendations. She indicated that the FA-DSB recommended that the following policy and program recommendations be included in both Consolidated Plan documents: 1) HCD, the Office to Prevent and End Homelessness, the Housing Opportunity Support Teams and community housing locators should create and coordinate a list of landlords who are currently accepting vouchers and who offer accessible units. 2) HCD should either initiate or enhance current communication efforts with clients. HCD should work with the Board of Supervisors and the Deputy County Executive for human services to develop recommendations for improving communication, outreach and accommodation procedures for persons with disabilities and that the Deputy County Executive utilize the inter-agency housing planning committee to identify and recommend improvements. The FA-DSB should be represented on this committee. 3) The inter-agency housing planning committee should be tasked with identifying specific policy and program recommendations that are needed over the next ten years to achieve 50% reductions in the wait lists. Within the Bridging Affordability Program there should be a set-aside of at least 10% for people with physical or sensory disabilities. A member of the FA-DSB should be added to the planning committee to represent the needs and issues of persons with physical and sensory disabilities, and recommendations of the inter-agency housing planning committee should be forwarded to the Board of Supervisors through its Housing Committee in time to be included in the One-Year Action Plan for FY 2012. 4) The County should ensure that 10% of the units identified and acquired are physically accessible. County policy for universal design should be kept in the forefront of policy planning and program implementation.

Craig Shniderman, Executive Director, Food & Friends, wrote in support of the proposed Consolidated Plan documents. He indicated that Food & Friends has been a grantee of the Consolidated Community Funding Pool that is included in the Consolidated Plan documents and that the service that Food & Friends provides is directly tied to the financial help from the County. Mr. Shniderman indicated that they support any plans that continue the CCFP as a priority for the future.

Ronald F. Christian, Chairman of the Fairfax County Redevelopment and Housing Authority (FCRHA), wrote on behalf of the FCRHA in support of the proposed Five-Year Consolidated Plan for FY 2011-2015 and the proposed Consolidated Plan One-Year Action Plan for FY 2011 and thanked the CCFAC and the joint CCFAC/FCRHA Working Advisory Group for their work in the development of the proposed plans. Mr. Christian indicated that the FCRHA is pleased that, consistent with the Housing Blueprint adopted by the Board of Supervisors, the driving force behind the priority needs in the Five-Year Plan and reflected also in the One-Year Action Plan is the philosophy of affordable housing as a continuum and that included in this continuum are housing needs of hard-working, but low paid families; senior citizens; persons with physical or mental disabilities; and the workforce

across Fairfax County. Mr. Christian also indicated that the FCRHA was pleased to see an increase in the FY 2011 Community Development Block award as compared to FY 2010 that will help support the goals of the Housing Blueprint. Mr. Christian thanked the Board for their continued outstanding leadership and commitment in affordable housing and their stewardship of affordable housing resources.

How the Public Comments were Addressed

The CCFAC considered the first three written public comments on the proposed Five-Year Consolidated Plan for FY 2011-2015 and the proposed Consolidated Plan One-Year Action Plan for FY 2011 indicated above at its meeting on April 26, 2010. There were no changes required to be made to the document regarding the comment in support of the CCFP.

Regarding the CSB comments, for the first policy/program enhancement recommended, the CCFAC observed general consistency between the CSB-related housing assistance needs and targets data and the data provided in the Consolidated Plan documents, noting that the CSB's data was for ten years versus the five years in the Five-Year Consolidated Plan. Regarding recommendation number 2, wording was changed in the proposed One-Year Action Plan to indicate that the FCRHA's housing goal has been to have 5% of the agency's total housing units (versus resources) accessible to persons with physical disabilities. (The word "physical" was added.) The language in the Action Plan regarding also having 2% accessible to persons who are sight and/or hearing impaired remained the same. Regarding recommendation numbers 3 and 4, the CCFAC thought that these did not belong in the Consolidated Plan documents.

Regarding the FA-DSB comments, the CCFAC decided on no additional changes to the Plan documents.

No changes were required to be made to the document regarding Mr. Shniderman's comments in support of the CCFP and Mr. Christian's comments in support of the Consolidated Plan documents.

Regarding comments received at the public hearing, the Chairman of the Board of Supervisors, Sharon Bulova, asked that the recommendations presented by the CSB be forwarded to staff for their review. Supervisor Catherine Hudgins asked that following staff review that those recommendations be considered by the Board of Supervisor's Housing Committee.

Chairman Bulova also asked that the County Executive forward the written testimony from the FA-DSB for consideration by the Board's Housing Committee.

At the conclusion of the public hearing, Supervisor Hudgins instructed that all comments be directed to the Deputy County Executive and incorporated into the Plan, and Chairman Bulova instructed that the items be referred to the County Executive for further discussion.

Appendix B - Citizen Participation Plan

Purpose of the Citizen Participation Plan

As an Urban County, Fairfax County, Virginia is eligible to apply for funds under the federal Community Development Block Grant (CDBG), Emergency Shelter Grants (ESG), HOME Investment Partnerships Program (HOME), and Housing Opportunities for Persons with AIDS (HOPWA) which are provided to the County through the U.S. Department of Housing and Urban Development (HUD). Federal regulations were revised in 1994 to provide for the consolidated submission of documents (the Consolidated Plan) which cover the planning and application aspects of the CDBG, ESG, HOME, and HOPWA programs (federal funding sources).

Beginning Fiscal Year (FY) 2000, the Consolidated Plan will also include local funding sources and federal Community Services Block Grant (CSBG) funds appropriated by the Board of Supervisors. In addition, the Consolidated Plan includes a description of the Continuum of Care for homeless services and programs, and may include federal funding for these programs at such time as these funds are made available through the federal funding allocation process for the Consolidated Plan.

The Fairfax County Citizen Participation Plan provides a guide for public input and participation in the Consolidated Plan process. The purpose of the Citizen Participation Plan is to encourage citizen participation in the definition of housing, community development and public services needs; services to be provided by community-based organizations; the funding priorities for programs and target populations to be served through resources available in the Consolidated Plan, and in any amendments, as well as to the Consolidated Plan and the annual performance report as may be required by HUD.

The Citizen Participation Plan includes the following objectives and describes how each will be met to ensure compliance with federal regulations. The objectives of the Citizen Participation Plan are to:

• Encourage citizen participation by providing citizens with adequate information concerning the amount of funds expected to be available for community development housing activities, public services and services to be provided by community-based organizations through federal and local funding sources, the proposed range of activities that may be undertaken with those funds, including the amount that will benefit very low and low income persons and the plans to minimize displacement and to assist any persons displaced, other important program requirements, and proposed and approved uses of funds;

• Provide for and encourage citizen participation from all sectors of the community, with particular emphasis on participation by persons below the federal poverty line, low and moderate income residents of blighted areas and of areas in which federal funds under federal funding sources are used or are proposed to be used; and for the participation of minority and non-English speaking residents, as well as persons with mobility, visual, speech or hearing impairments;

• Provide citizens, public agencies, and all other interested parties with reasonable and timely access to information and records relating to the County's Consolidated Plan, and the use of assistance provided by federal funding sources included in the Plan for the preceding five (5) years;

• Provide technical assistance to groups representing very low and low income persons and to interested residents that request such assistance in developing proposals for funding assistance under federal and local funding sources covered by the Consolidated Plan, with the level and type of assistance to be determined by the County;

• Conduct public hearings to obtain the views of citizens on housing, community development and public services needs, and needs for services to be provided by community-based organizations, proposed activities, and program performance, which hearings shall be held after adequate notice, at times and locations convenient to potential and actual beneficiaries, with accommodation for persons with disabilities and non-English speaking residents;

• Gather community input, through a variety of methods such as, community meetings, focus groups, surveys and other appropriate forums, regarding funding priorities for services provided by community-based organizations;

• Prepare a summary of comments or views received from citizens in writing or orally through public hearings, focus groups, community meetings and other methods when preparing the final Consolidated Plan, and any amendments to the Plan or the performance report and attach the summary to the final Plan or report. In addition, provide for a timely written answer to written complaints and grievances within fifteen (15) working days, where practicable; and

• Provide criteria for determining what constitutes a substantial change in the planned or actual activities described in the approved Consolidated Plan which would require an amendment to the Plan.

Notice of Consolidated Plan Schedule

The County will encourage citizen participation by providing citizens with adequate information concerning the amount of funds expected to be available for community development and housing activities, public services, and services to be provided by community-based organizations through federal and local funding sources, the proposed range of activities that may be undertaken with those funds, including the amount that will benefit very low and low income persons and the plans to minimize displacement and to assist any persons displaced, other important program requirements, and proposed and approved uses of funds.

The annual Consolidated Plan schedule will be mailed to neighborhoods, groups, associations, nonprofit, ecumenical, business and other community organizations and other interested individuals which have been involved in past funding cycles for each program. Other neighborhoods, groups, associations, organizations, and individuals will be added to the list upon request to the Department of Housing and Community Development.

Information which will be available will include the amount of funding expected to be available under all the federal funding sources and programs in the Consolidated Plan, including estimated program income, program and application requirements, the proposed activities which will benefit very low and low income persons, plans for minimizing displacement caused by proposed activities and assistance opportunities for persons displaced, opportunities for citizen input, submission of project proposals, and schedules for proposed and final applications. This information may be obtained from the Department of Housing and Community Development.

An advertisement of the Proposed Consolidated Plan will be published in a newspaper(s) of general circulation and a copy of the Proposed Consolidated Plan will be available to the public for review and comment at least 30 days prior to submission to HUD. The proposed Consolidated Plan will be available for review 1) at the Department of Housing and Community Development, 2) at the information desk of the County Government Center at 12000 Government Center Parkway, Fairfax, Virginia 22035; and 3) at the information desk of all branches of the Fairfax County Public Library system. The final submission to HUD will also be distributed to these locations.

Citizen Participation Process

The County will provide for and encourage citizen participation from all sectors of the community, with particular emphasis on participation by persons below the federal poverty line, low and moderate income residents of blighted areas and of areas in which federal funds are used or are proposed to be used; and for the participation of minority and non-English speaking residents, as well as persons with mobility, visual, speech or hearing impairments.

The County will provide citizens, public agencies, and other interested parties with reasonable and timely access to information and records relating to the County's Consolidated Plan, and the use of assistance provided by federal funding sources included in the Plan for the preceding five (5) years.

Citizens will have an opportunity to comment on housing, community development, public service needs, and population and program priority needs identified to be addressed by community-based organizations and the proposed Consolidated Plan prior to its submission to HUD at public hearings, meetings, or by directly contacting the appropriate County agency. Information on the Consolidated Plan schedule will be disseminated to local agencies and Nonprofit organizations working with minority, non-English speaking, and physically impaired residents to afford as many people as possible the opportunity for full citizen participation.

The County will work closely with the Fairfax County Redevelopment and Housing Authority (FCRHA) to encourage the participation of residents of public and assisted housing developments in the development and implementation of the Consolidated Plan. The County will apprise the FCRHA of housing and community development activities related to its developments and surrounding communities so the FCRHA can make such information available at the annual public hearing on the Comprehensive Grant program.

Citizen input on housing, community development, and needs for services to be provided by community-based organizations will be received annually at one or more public hearings to be held before the Consolidated Community Funding Advisory Committee. The Committee is composed of one representative each from the Fairfax County Redevelopment and Housing Authority (FCRHA), Human Services Council (HSC), Community Action Advisory Board, Fairfax-Falls Church Community Services Board, Homeless Oversight Committee, Fairfax-Falls Church United Way, Commission on Aging, Advisory Social Services Board, Fairfax Area Disabilities Services Board, Health Care Advisory Board, Fairfax County Alliance for Human Services, representatives from the business community, schools community, faith community, children younger than school age community, and youth needs and services community. Membership may include representation from human services provider groups, consumer and community organizations and Boards, Authorities and Commissions, which relate to the Human Services Community, as appropriate. Members shall be appointed by the County Executive and shall serve for a term of three years. The role and responsibilities of the Consolidated Community Funding Advisory Committee will be to:

- Solicit community input

- Advise the Board of Supervisors on the development and implementation of the federally required Consolidated Plan

- Advise the Board of Supervisors on issues relating to the coordinated funding process:

-- Policy considerations

-- Funding priorities

-- Selection criteria

-- Performance measures

- Coordinate with the Community Action Advisory Board in implementation of the CSBG process

- Implement the combined solicitation process and, if deemed appropriate, make comments on Selection Advisory Committee recommendations forwarded by the County Executive to the Board of Supervisors

- Monitor the Consolidated Plan process and report to the Board of Supervisors on its effectiveness relative to defined goals

- Consider and evaluate the potential for including other County and community processes in the Consolidated Plan process.

Based on the comments received from citizens through needs hearing(s) and other community input strategies from interested Nonprofit, ecumenical, business and other civic organizations and County agencies, the Consolidated Community Funding Advisory Committee will prepare a Proposed Consolidated Plan. The Proposed Consolidated Plan will be submitted for review and comment to organizations and individuals on the mailing list.

Comments received will be addressed by the Consolidated Community Funding Advisory Committee and included with the submission of the Proposed Consolidated Plan to the Board of Supervisors.

A public hearing will be held by the Board of Supervisors on the Proposed Consolidated Plan. Final approval of program priorities and funding recommendations included in the Consolidated Plan will be made by the Board of Supervisors.

Reasonable and timely access will be given to citizens, public agencies, and other interested parties to information and records relating to previous funding applications and allocations for the programs included in the Consolidated Plan for the preceding five (5) years.

Technical Assistance

The County will provide technical assistance to groups representing very low and low income persons, as well as to community-based organizations and interested residents that request such assistance in developing proposals for funding assistance under any of federal or local funding sources covered by the Consolidated Plan, with the level and type of assistance to be determined by the County.

This technical assistance could include activities such as training on grant writing, small/minority business support offered through the Purchasing and Supply Management agency, Internet information links, pamphlets and brochures/information packets on resources available in the community.

County staff will be available upon request to answer any questions concerning the requirements of federal and local funding sources included in the Consolidated Plan, such as available funding amounts, funding priorities, eligible activities, environmental review procedures, equal opportunity requirements, relocation provisions, citizen participation requirements and any other requirements of federal and local funding sources. In cases where staff can not answer questions pertaining to federal HUD funds, assistance will be requested from HUD.

As part of the on-going citizen participation effort, County staff will meet with citizen groups in Fairfax County which represent very low, and low and moderate income residents such as neighborhood conservation and redevelopment areas, and with citizen groups in other areas of the County which express interest in participating in federal and/or local funding sources included in the Consolidated Plan, to explain program and application procedures. These meetings will be held in facilities convenient to the neighborhood or groups requesting the meetings.

County staff will provide technical assistance when requested to neighborhood groups, minority groups, community-based organizations, and other residents interested in participating in federal and local funding sources included in the Consolidated Plan. All such groups, including the disabled and elderly, and those serving non-English speaking ethnic/minority populations, will be encouraged and assisted as requested in submitting their views and proposals. County staff will be available to provide assistance in the development and submission of program funding requests and other input. Any persons

requiring assistance should contact the Division of Real Estate Finance and Grants Management at HCD at 246-5170 or the TTY number 385-3578.

Public Hearings

The County will conduct public hearings to obtain the views of citizens on housing, community development and public services needs, and needs for services to be provided by community-based organizations, proposed activities, and program performance, which hearings shall be held after adequate notice, at times and locations convenient to potential and actual beneficiaries, with accommodation for persons with disabilities and non-English speaking residents.

A minimum of two public hearings will be held prior to the submission of the Consolidated Plan to HUD.

One or more public hearings will be held by the Consolidated Community Funding Advisory Committee at the beginning of the Consolidated Plan process to solicit citizen comments on housing and community development needs, needs for services to be provided by community-based organizations, proposed activities, and program performance. Testimony received at this hearing will be considered by the Consolidated Community Funding Advisory Committee in preparing the Proposed Consolidated Plan. In addition, the Consolidated Community Funding Advisory Committee may gather community input through a variety of means, such as forums and focus groups, in the development of funding priorities and criteria.

Prior to the submission of the Consolidated Plan to HUD, the Board of Supervisors will hold a public hearing on the Proposed Consolidated Plan as recommended by the Consolidated Community Funding Advisory Committee.

Public hearings will be held at times convenient to potential and actual beneficiaries of the programs to be funded. Public hearings will be held in the Fairfax County Government Center Board Auditorium located at 12000 Government Center Parkway, or in other locations which are convenient to potential and actual beneficiaries, and which are accessible to persons with disabilities. At public hearings where a significant number of non-English speaking residents are expected to participate, Fairfax County will address their needs by providing an interpreter.

Notice of public hearings on the Consolidated Plan will be advertised in a newspaper(s) of general circulation and at least one minority and non-English speaking publication 15 days prior to the date of the public hearing. The notice will include sufficient information about the purpose of the public hearing to permit informed comment from citizens.

Notice of public hearings on the Consolidated Plan will also be advertised in all branches of the County Library system and press releases issued by the Fairfax County Office of Public Affairs.

Response to Citizen Comments

The County will prepare a summary of comments or views received from citizens in writing or orally through public hearings, focus groups, community meetings and other methods when preparing the final Consolidated Plan, and any amendments to the Plan or the performance report and attach the summary to the final Plan or report. In addition, provide for a timely written answer to written complaints and grievances within fifteen (15) working days, where practicable.

Written or oral comments received from citizens as a result of public hearings or other activities to gather community input held on the Consolidated Plan will be given serious consideration in the preparation of the final Plan document, amendments to the Plan, or the performance report. A summary of the comments received from citizens, both accepted and not accepted, will be attached to the final Consolidated Plan, Plan amendments, or performance report. Fairfax County Approved Consolidated Plan One-Year Action Plan for FY 2010 99

Comments, complaints, or grievances concerning the Consolidated Plan should be addressed to the Division of Real Estate Finance and Grants Management, Department of Housing and Community Development, 3700 Pender Drive, Suite 300, Fairfax, Virginia 22030.

Every effort will be made to respond in writing to written complaints within 15 working days of receipt of the complaint. If additional time is required, written notice will be provided.

Amendment of the Consolidated Plan

The County will provide criteria for determining what constitutes a substantial change in the planned or actual activities described in the approved Consolidated Plan which would require an amendment to the Plan.

The Consolidated Plan may be amended with the approval of the Fairfax County Board of Supervisors.

The County will amend the approved Plan whenever it makes one of the following decisions representing a substantial change or adjustment:

1) To carry out a project, using funds from any of the four federal HUD programs covered by the Consolidated Plan (including program income) not previously described in the action plan; or

2) To eliminate a project from any of the four federal programs covered by the Consolidated Plan (including program income) for which funds were previously approved by the Board of Supervisors.

In general, any substantial change or adjustment to a Consolidated Plan project budget will be treated as an amendment subject to public notice, review, and comment through the County's quarterly budget review process. Adjustments required to Consolidated Plan project budgets will be included in the third quarter and carryover budget reviews, and will be subject to public comment during the public hearing process held on each of these reviews.

In some circumstances, Consolidated Plan program objectives may be addressed through the appropriation of funds outside of the quarterly budget review process for an activity not previously approved in the Consolidated Plan. In such cases, public notice will be given before the Board of Supervisors is scheduled to take action on such an appropriation.

Substantive amendments to the Consolidated Plan will be publicly advertised at least 30 days prior to consideration of the amendments by the Board of Supervisors to allow time for public comment.

Adoption and Amendment of the Citizen Participation Plan

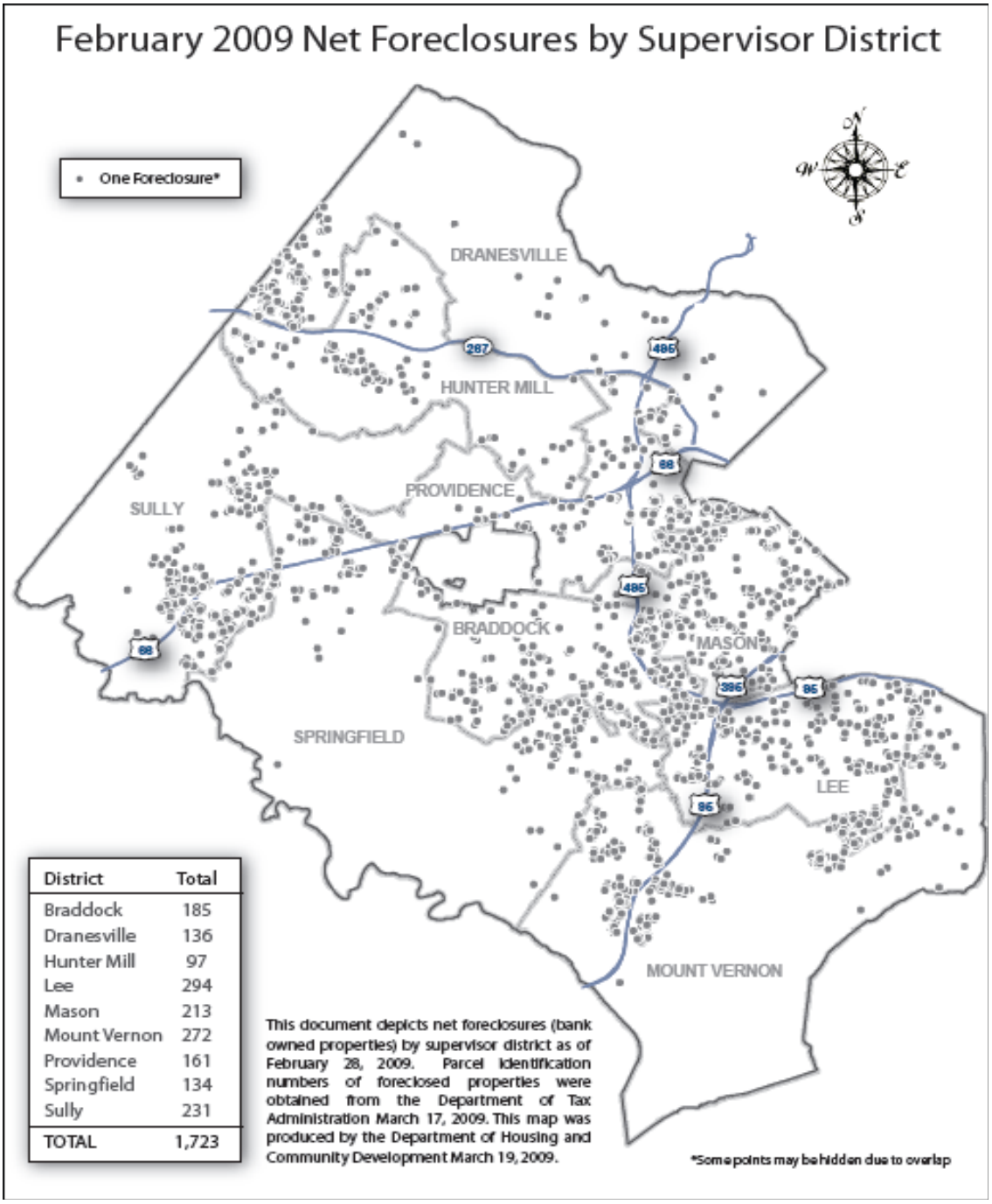
Fairfax County Approved Consolidated Plan One-Year Action Plan for FY 2010 100

Proposed changes to the Citizen Participation Plan will be publicly advertised at least 30 days prior to the adoption or amendment of the Citizen Participation Plan by the Board of Supervisors to allow time for public comment.

The proposed revisions to the Fairfax County Citizen Participation Plan for the Consolidated Plan will become effective upon the date of the Board of Supervisors' approval for the planning and implementation process of the Consolidated Plan.

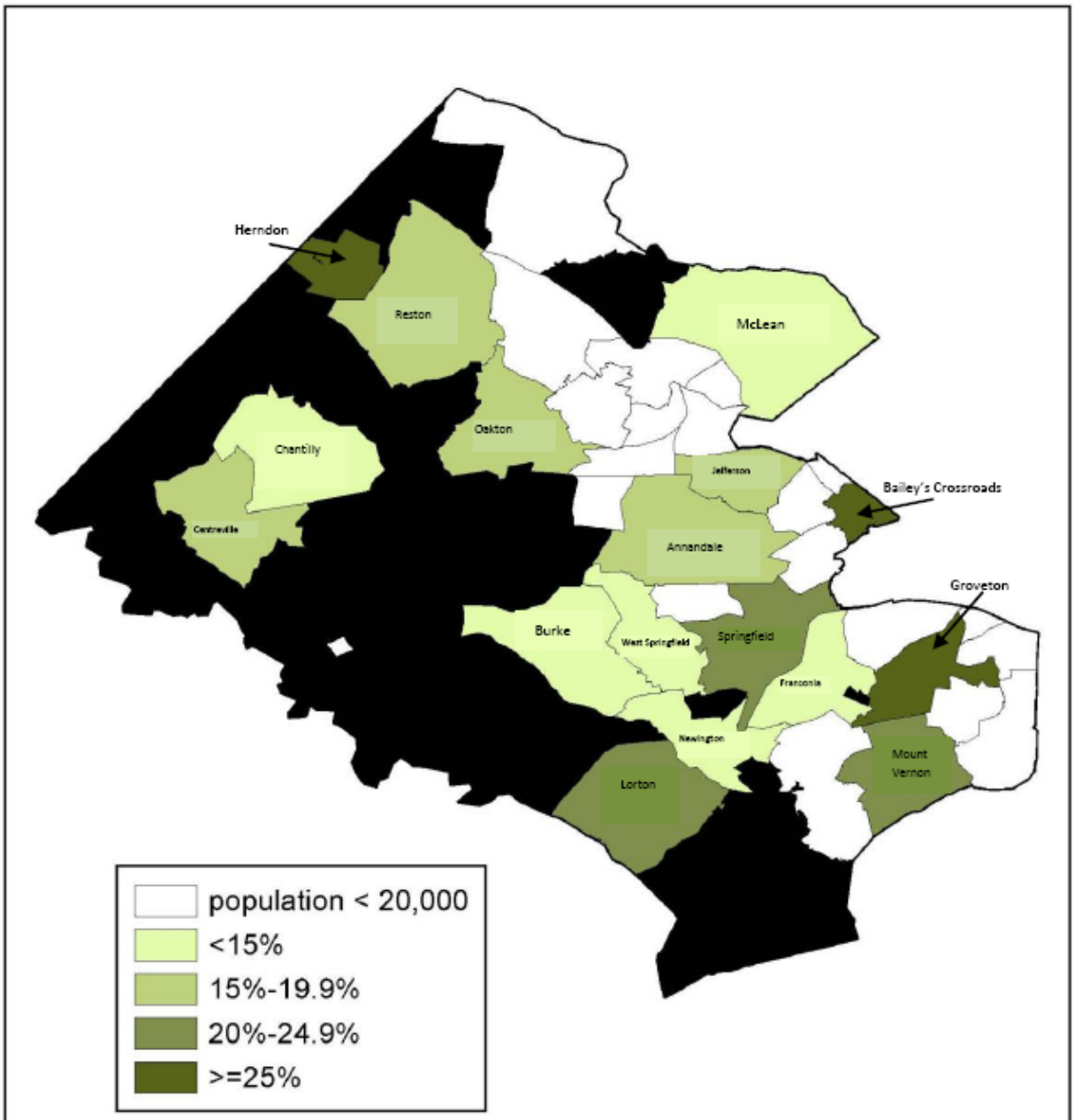
Appendix C - Maps

Map 1: Distribution of Foreclosures, Fairfax County



District	Total
Braddock	185
Dranesville	136
Hunter Mill	97
Lee	294
Mason	213
Mount Vernon	272
Providence	161
Springfield	134
Sully	231
TOTAL	1,723

Map 2: Percent of Low-Income* Households (2006-2008) (Fairfax County places with population of 20,000 or more)

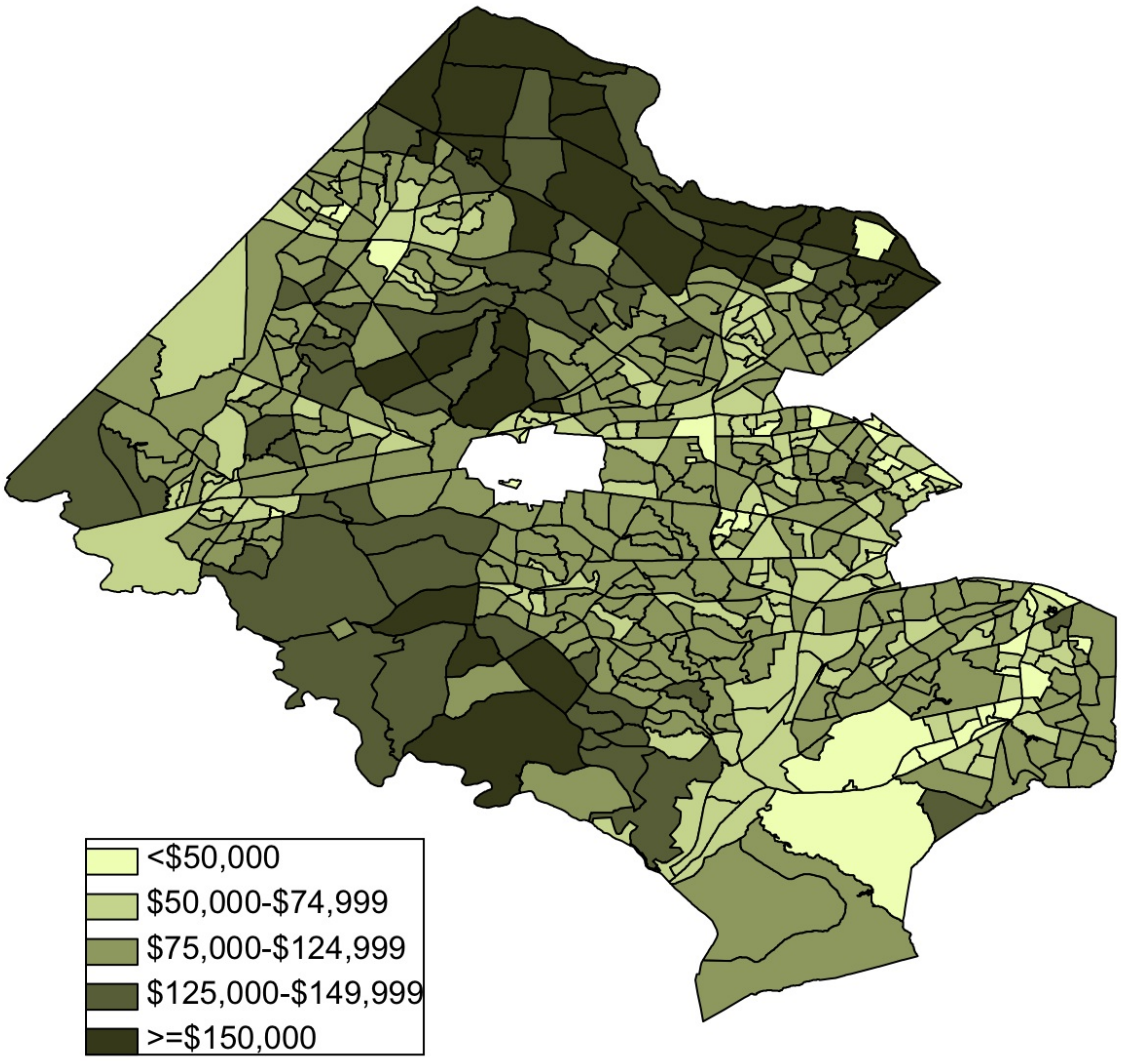


*<50% of Area Median Family Income for a 3-person family.

Source: ACS 2006-2008

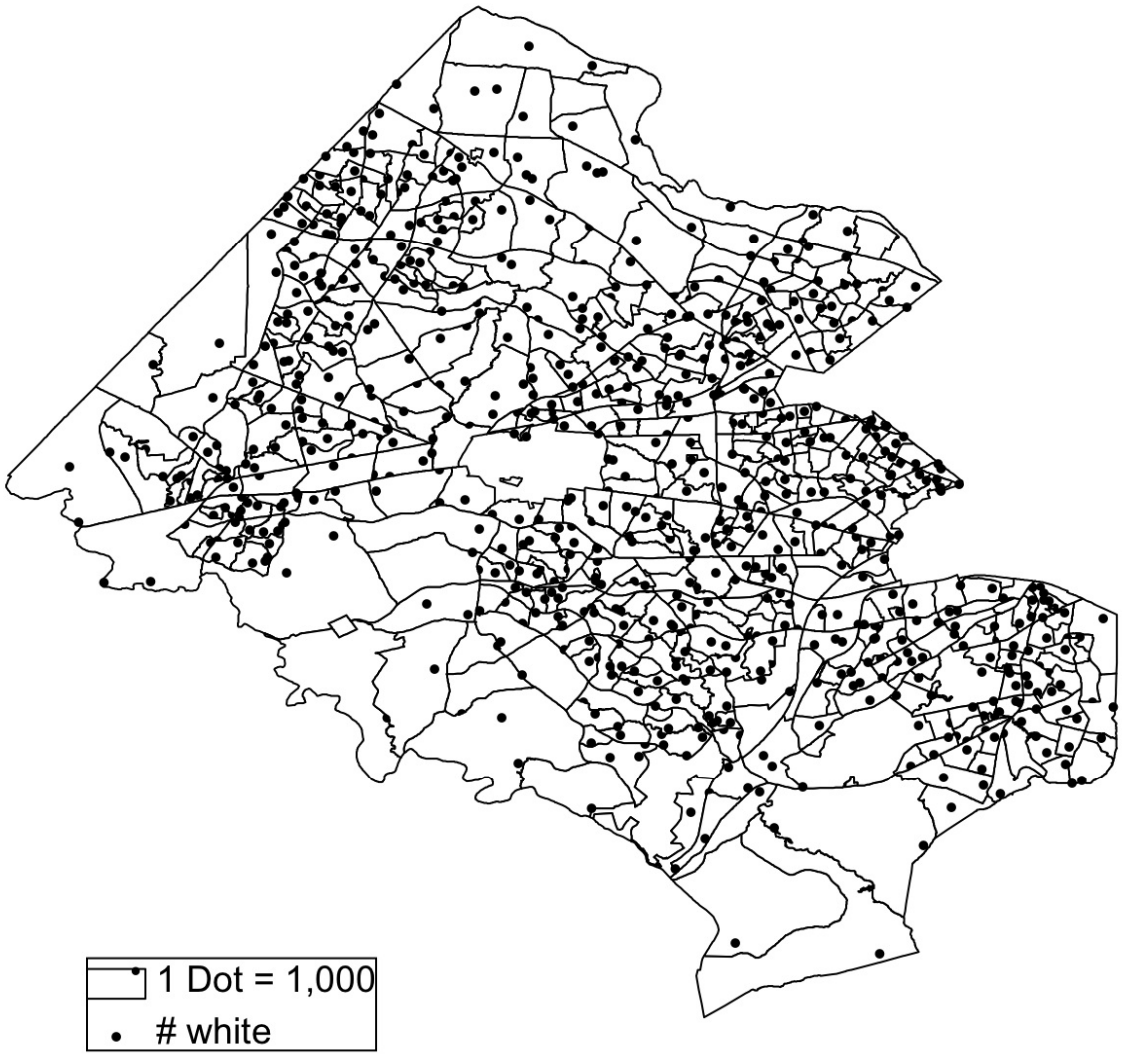
Note: Blackened areas are parts of the County that are not Census designated places (data not available).

Map 3: Median Household Income by Block Group (2007), Fairfax County



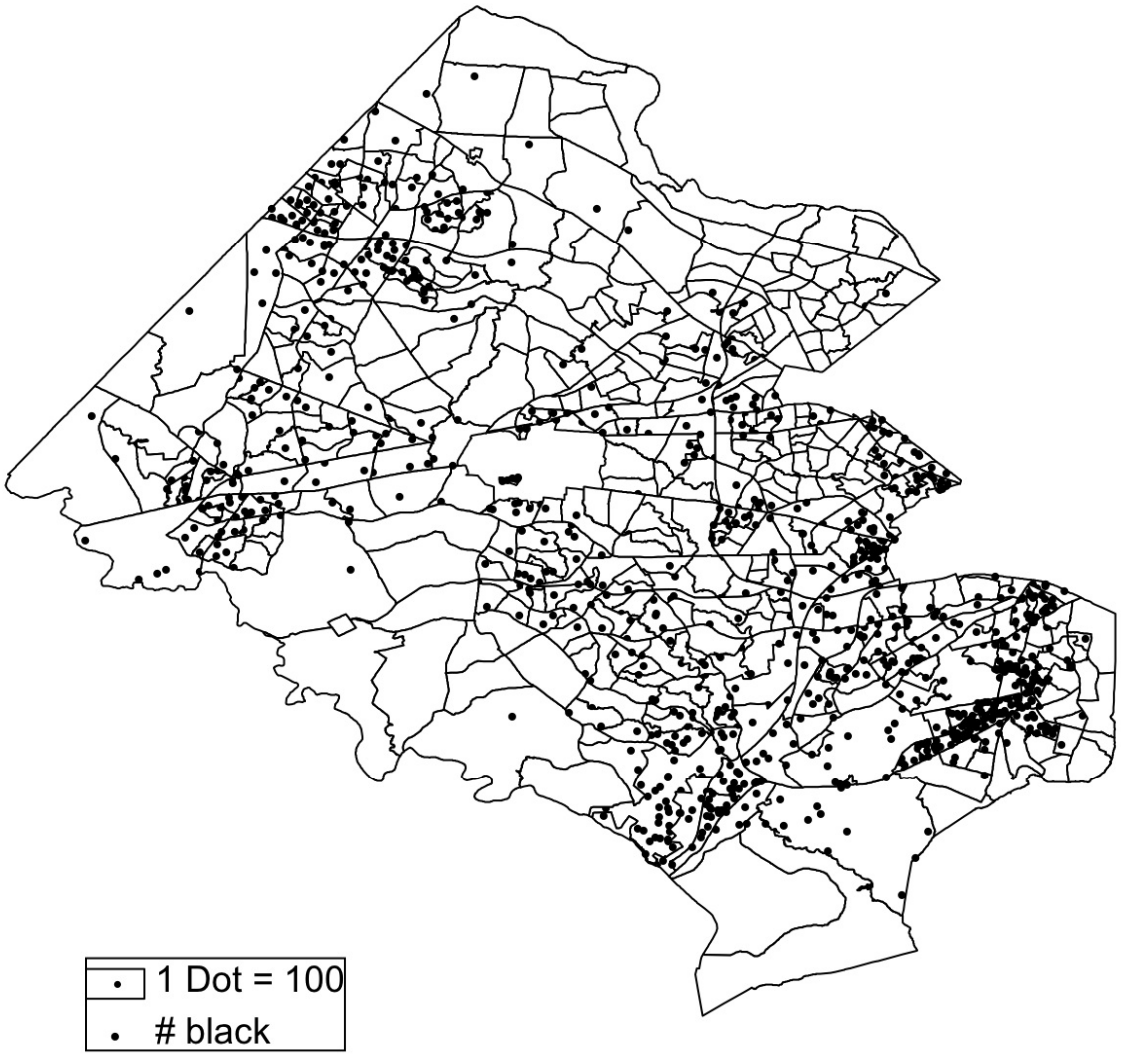
Source: Geolytics 2007 Estimates

Map 4: Number of White Alone Persons by Block Group (2007), Fairfax County



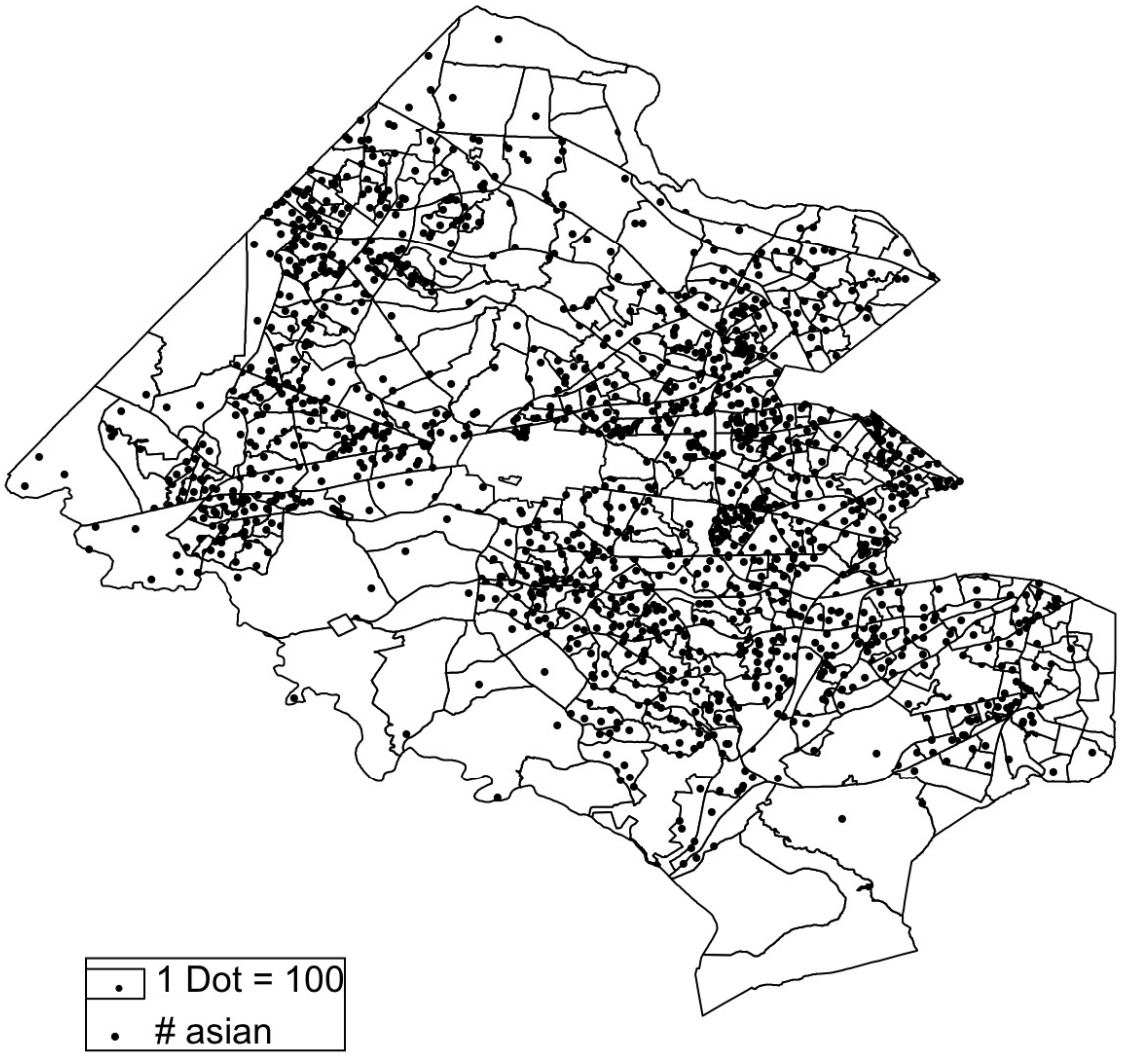
Source: Geolytics 2007 Estimates

Map 5: Number of Black Alone Persons by Block Group (2007), Fairfax County



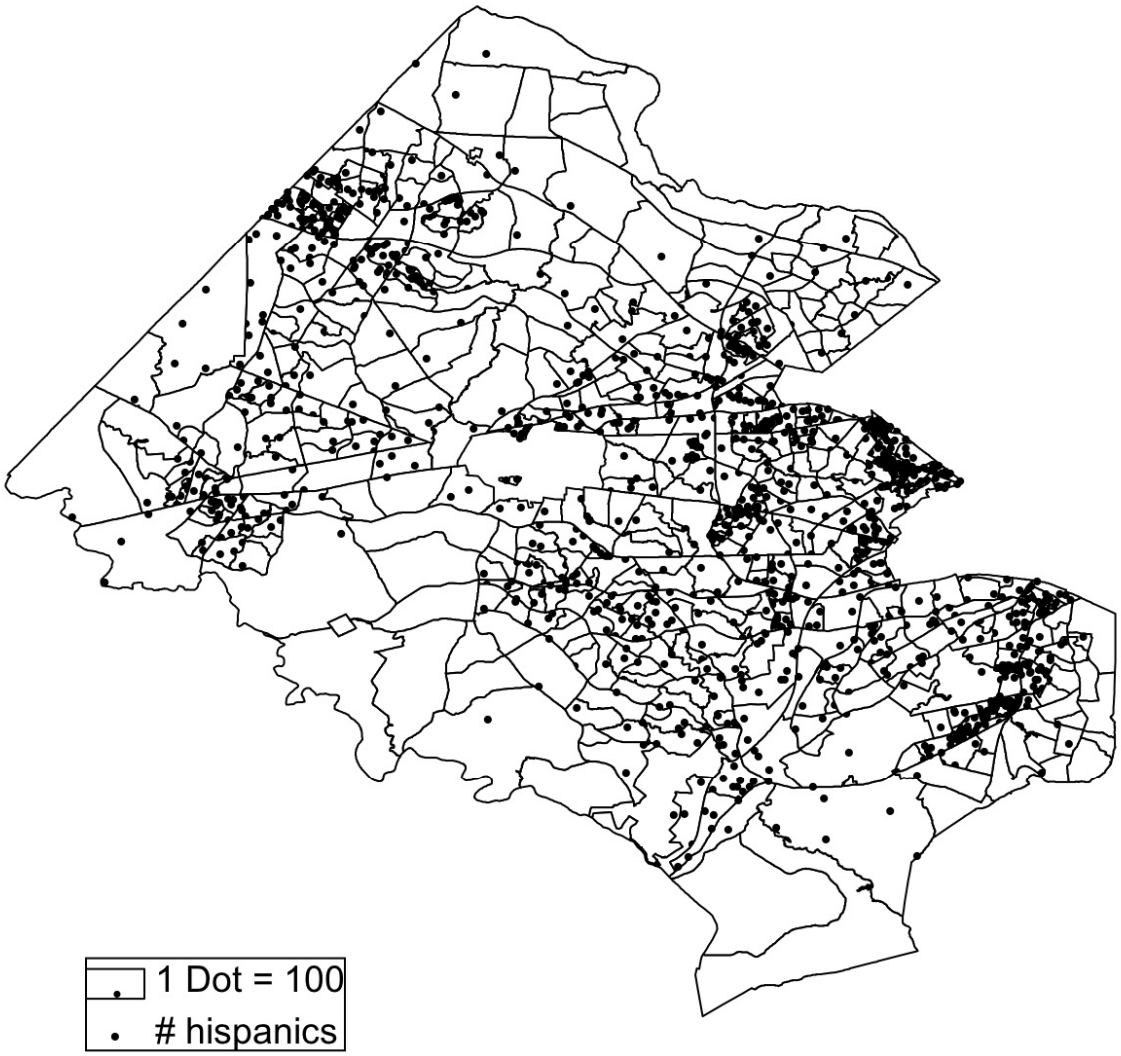
Source: Geolytics 2007 Estimates

Map 6: Number of Asian Alone Persons by Block Group (2007), Fairfax County



Source: Geolytics 2007 Estimates

Map 7: Number of Hispanic Alone Persons by Block Group (2007), Fairfax County



Source: Geolytics 2007 Estimates

Appendix D – Homeless Housing Inventory

See attached

Housing Inventory Chart: Emergency Shelter

Total Year-Round Beds - Household without Children	
1. Current Year-Round Emergency Shelter (ES) Beds for Households without Children	165
1A. Number of DV Year-Round ES Beds for Households without Children	10
1B. Subtotal, non-DV Year-Round ES Beds for Households without Children	155
2. New Year-Round ES Beds for Households without Children	13
3. Under Development Year-Round ES Beds for Households without Children	0
4. Total Year Round ES HMIS Beds for Households without Children	147
5. HMIS Bed Coverage: ES Beds for Households without Children	95%

Total Year-Round Beds - Households with Children	
6. Current Year-Round ES Beds for Households with Children	206
6A. Number of DV Year-Round ES Beds for Households with Children	24
6B. Subtotal, non-DV Year-Round ES Beds for Households with Children	182
7. New Year-Round ES Beds for Households with Children	3
8. Under Development Year-Round ES Beds for Households with Children	0
9. Total Year-Round ES HMIS Beds for Households with Children	182
10. HMIS Bed Coverage: ES Beds for Households with Children	100%

KEY: Target Population A
CO: couples only, no children
HC: households with children
SF: single females
SFHC: single females and households with children
SM: single males
SMHC: single males and households with children
SMF: single males and females
SMF + HC: Single male and female plus households with children
YF: youth females (under 18 years old)
YM: youth males (under 18 years old)
YMF: youth males and females (under 18 years old)

KEY: Target Population B
DV - Domestic Violence victims only
VET - Veterans only
HIV - HIV/AIDS populations only

KEY: Inventory type
C: Current Inventory
N: New Inventory
U: Under development

Error Messages
ERROR MSG: PROGRAM DETAILS None
ERROR MSG: FAMILY BEDS/UNITS None
ERROR MSG: DV HMIS COVERAGE None

Program Information					Target Population		HUD Funding Information	All Year-Round Beds/Units				Year-Round Beds in HMIS				Seasonal Beds				O/V Beds	PIT Counts	Utilization Rates
#	Organization Name	Program Name	Geo Code	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for Households with Children	Units for Households with Children	Beds for Households without Children	Total Year-Round Beds	HMIS Beds for Households with Children	HMIS Beds for Households without Children	Percentage of HMIS Beds for Households with Children	Percentage of HMIS beds for Households without Children	Total Seasonal Beds	Number of Seasonal Beds Available in HMIS	Availability Start Date	Availability End Date	O/V Beds	Point-in-Time Homeless Count	Program Utilization Rate
ES1	Office for Women/DSVS	Artemis House	519059	C	SFHC	DV	No	21	7	8	29	0	0	0%	0%	0	0			0	29	100%
ES2	Office for Women/DSVS	Artemis House-Cottage	519059	N	SFHC	DV	No	3	1	2	5	0	0	0%	0%	0	0			0	4	80%
ES3	New Hope Housing	Eleanor Kennedy Shelter Annex	519059	N	SMF		No	0	0	11	11	0	11		100%	0	0			0	11	100%
ES4	New Hope Housing	Eleanor Kennedy Shelter	519059	C	SMF		Yes	0	0	50	50	0	50		100%	10	10	November-08	April-09	6	66	132%
ES5	New Hope Housing	Mondloch I	519059	C	SMF		Yes	0	0	8	8	0	8		100%	0	0			0	8	100%
ES6	New Hope Housing	Mondloch II	519059	C	HC		Yes	47	17	0	47	47	0	100%		0	0			0	47	100%
ES7	New Hope Housing	Falls Church Winter Shelter	519059	C	SMF		No	0	0	0	0	0	0			12	12	December-08	April-09	0	12	
ES8	New Hope Housing	Ventures in Community Hypothermia Response	519059	C	SMF		No	0	0	0	0	0	0			25	25	December-08	April-09	0	25	
ES9	Reston Interfaith	Embry Rucker Community Shelter	519059	C	SMF+HC		Yes	33	10	28	61	33	28	100%	100%	10	10	November-08	April-09	33	103	169%
ES10	Reston Interfaith	Hypothermia Response Program	519059	C	SMF		No	0	0	0	0	0	0			25	25	December-08	March-09	0	25	
ES11	Shelter House	Shelter House (Patrick Henry Drive)	519059	C	HC		Yes	37	7	0	37	37	0	100%		0	0			0	37	100%
ES12	Shelter House	Katherine K. Hanley Family Shelter	519059	C	HC		No	65	20	0	65	65	0	100%		0	0			0	65	100%
ES13	The Alternative House	Alternative House	519059	C	YMF		No	0	0	8	8	0	0		0%	0	0			0	3	38%
ES14	Volunteers of America-Chesapeake	Baliley's Crossroads Community Shelter	519059	C	SMF		Yes	0	0	50	50	0	50		100%	10	10	November-08	April-09	0	60	120%
ES15	Volunteers of America-Chesapeake	Bailey's Crossroads East County Hypothermia Program	519059	N	SMF		No	0	0	0	0	0	0			58	58	December-08	April-09	0	58	
ES16	FACETS	Hypothermia Response Program	519059	C	SMF		No	0	0	0	0	0	0			55	55	November-08	March-09	0	55	
ES17	Fairfax County DFS with FACETS	Last Resort Housing	519059	C	HC		No	0	0	0	0	0	0			0	0			22	22	
	Insert organization name										0											
	Insert organization name										0											
	Insert organization name										0											

Housing Inventory Chart: Transitional Housing

Total Year-Round Beds - Household without Children	
1. Current Year-Round Transitional Housing (TH) Beds for Households without Children	143
1A. Number of DV Year-Round TH Beds for Households without Children	5
1B. Subtotal, non-DV Year-Round TH Beds for Households without Children	138
2. New Year-Round ES Beds for Households without Children	2
3. Under Development Year-Round TH Beds for Households without Children	0
4. Total Year Round TH HMIS Beds for Households without Children	61
5. HMIS Bed Coverage: TH Beds for Households without Children	44%

Total Year-Round Beds - Households with Children	
6. Current Year-Round TH Beds for Households with Children	969
6A. Number of DV Year-Round TH Beds for Households with Children	109
6B. Subtotal, non-DV Year-Round TH Beds for Households with Children	860
7. New Year-Round TH Beds for Households with Children	22
8. Under Development Year-Round TH Beds for Households with Children	0
9. Total Year-Round TH HMIS Beds for Households with Children	465
10. HMIS Bed Coverage: TH Beds for Households with Children	54%

KEY: Target Population A
CO: couples only, no children
HC: households with children
SF: single females
SFHC: single females and households with children
SM: single males
SMHC: single males and households with children
SMF: single males and females
SMF + HC: Single male and female plus households with children
YF: youth females (under 18 years old)
YM: youth males (under 18 years old)
YMF: youth males and females (under 18 years old)

KEY: Target Population B
DV - Domestic Violence victims only
VET - Veterans only
HIV - HIV/AIDS populations only

KEY: Inventory type
C: Current Inventory
N: New Inventory
U: Under development

Error Messages
ERROR MSG: PROGRAM DETAILS None
ERROR MSG: FAMILY BEDS/UNITS None
ERROR MSG: DV HMIS COVERAGE None

Program Information					Target Population		HUD Funding Information	All Year-Round Beds/Units				Year-Round Beds in HMIS				PIT Counts
#	Organization Name	Program Name	Geo Code	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for Households with Children	Units for Households with Children	Beds for Households without Children	Total Year-Round Beds	HMIS Beds for Households with Children	HMIS Beds for Households without Children	Percentage of HMIS Beds for Households with Children	Percentage of HMIS beds for Households without Children	Point-in-Time Homeless Count
TH1	Bethany House of Northern Virginia	Family Assistance Program	519059	C	SFHC	DV	No	22	10	3	25	0	0	0%	0%	20
TH2	Christian Relief Services Charities with partners	Homes for the Homeless - Families	519059	C	HC		Yes	15	5	0	15	15	0	100%		15
TH3	Christian Relief Services Charities with partners	Homes for the Homeless - Families/Disabled	519059	C	SMF+HC		Yes	18	6	3	21	18	3	100%	100%	14
TH4	Christian Relief Services Charities with partners	Homes for the Homeless - Disabled	519059	C	SMF		Yes	0	0	10	10	0	10		100%	6
TH5	Christian Relief Services Charities with partners	Homes for the Homeless - Share Shelter Grant - SSG	519059	C	SMF+HC		No	4	1	22	26	0	22	0%	100%	22
TH6	Christian Relief Services Charities with partners	Homes for the Homeless - SSG - TANF (Safe Places)	519059	C	HC	DV	No	8	2	0	8	0	0	0%		3
TH7	Christian Relief Services Charities with partners	Homes for the Homeless - Safe Places	519059	C	HC	DV	Yes	30	8	0	30	0	0	0%		20
TH8	Christian Relief Services Charities with partners	Homes for the Homeless - STRIDE	519059	C	HC		Yes	29	9	0	29	29	0	100%		27
TH9	Dept. of Family Services with partners	Community Housing Resource Program	519059	C	HC		Yes	118	36	0	118	118	0	100%		99
TH10	Dept. of Family Services with partners	RISE	519059	C	HC		Yes	80	20	0	80	80	0	100%		64
TH11	FACETS	Home Connections Transitional Housing	519050	C	HC		No	16	4	0	16	16	0	100%		16
TH12	Family PASS	Family PASS	519059	N	HC		No	20	7	0	20	0	0	0%		20
TH13	Fairfax-Falls Church Community Services Board (CSB)	CSB-ADS Steps to Recovery	519059	C	SMF		Yes	0	0	16	16	0	16		100%	7
TH14	Fairfax-Falls Church Community Services Board (CSB)	Transitional Therapeutic Apartment Program - NWC, Mt. Vernon, & Woodburn	519059	C	SMF		No	0	0	3	3	0	0		0%	3
TH15	Fairfax-Falls Church Community Services Board (CSB)	New Generations	519059	C	HC		No	12	6	0	12	0	0	0%		12
TH16	Fairfax-Falls Church Community Services Board (CSB)	A New Beginning	519059	C	SMF		No	0	0	15	15	0	0		0%	15
TH17	Fairfax-Falls Church Community Services Board (CSB)	Cornerstones	519059	C	SMF		No	0	0	4	4	0	0		0%	4
TH18	Fairfax-Falls Church Community Services Board (CSB)	Franconia Road Programs	519059	C	SM		No	0	0	8	8	0	0		0%	8
TH19	Fairfax-Falls Church Community Services Board (CSB)	Crossroads	519059	C	SMF		No	0	0	4	4	0	0		0%	4
TH20	Fairfax-Falls Church Community Services Board (CSB)	CSB-MHS Intensive Transitional Programs	519059	C	SMF		No	0	0	12	12	0	0		0%	12

TH21	Fairfax-Falls Church Community Services Board (CSB)	CSB-MHS Group Transitional Programs	519059	C	SMF		No	0	0	3	3	0	0		0%	3
TH22	Good Shepherd Housing and Family Services	A-B-C Program	519059	C	SMF+HC		No	154	47	19	173	0	0	0%	0%	168
TH23	Good Shepherd Housing and Family Services	Beth El House Transitional Housing	519050	C	HC		No	14	4	0	14	0	0	0%		6
TH24	Homestretch	SUCCESS	519059	C	HC		Yes	44	6	0	44	44	0	100%		39
TH25	Homestretch	Transitional Housing	519059	C	HC		No	186	58	0	186	23	0	12%		167
	Insert organization name										0					
TH27	Homestretch	The Ives House	519059	C	SF		No	0	0	6	6	0	0		0%	5
TH28	Kurdish Human Rights Watch	Transitional Housing and Supportive Services for Families	519059	C	HC		Yes	97	20	0	97	97	0	100%		97
TH29	New Hope Housing	Stepping Out I	519059	C	HC		No	6	2	0	6	6	0	100%		6
TH30	New Hope Housing	Turning Point I	519059	C	SM		No	0	0	4	4	0	4		100%	4
TH31	NOVACO	Transitional Housing for Victims of Domestic Abuse	519059	C	HC	DV	Yes	22	7	0	22	0	0	0%		22
TH32	Residential Youth Services	Lift One	519059	C	SMF		No	0	0	3	3	0	0		0%	0
TH33	RPJ Housing Development Corporation	Families in Transition	519059	C	HC		No	20	6	0	20	0	0	0%		0
TH34	Shelter House	Off-site Program	519059	C	HC		No	19	4	0	19	19	0	100%		13
TH35	The Alternative House	A Young Mother's Program	519059	C	HC		No	8	4	0	8	0	0	0%		8
TH36	United Community Ministries	Journeys Program	519059	C	HC	DV	Yes	25	9	0	25	0	0	0%		25
TH37	Fairfax-Falls Church CSB with United Community Ministries	Bridge Program	519059	C	SMF		No	0	0	6	6	0	6		100%	5
TH38	NOVACO	Open Doors (DOJ Grant)	519059	N	SFHC	DV	No	2	1	2	4	0	0	0%	0%	4
	Insert organization name										0					
	Insert organization name										0					
	Insert organization name										0					

Utilization Rates
Program Utilization Rate
80%
100%
67%
60%
85%
38%
67%
93%
84%
80%
100%
100%
44%
100%
100%
100%
100%
100%
100%
100%

APPENDIX D: Homeless Housing Inventory Chart

100%
97%
43%
89%
90%
83%
100%
100%
100%
100%
0%
0%
68%
100%
100%
83%
100%

Housing Inventory Chart: Safe Haven

Total Year-Round Beds - Household without Children	
1. Current Year-Round Safe Haven (SH) Beds for Households without Children	8
1A. Number of DV Year-Round SH Beds for Households without Children	0
1B. Subtotal, non-DV Year-Round SH Beds for Households without Children	8
2. New Year-Round ES Beds for Households without Children	0
3. Under Development Year-Round SH Beds for Households without Children	0
4. Total Year Round SH HMIS Beds for Households without Children	8
5. HMIS Bed Coverage: SH Beds for Households without Children	100%

Total Year-Round Beds - Households with Children	
6. Current Year-Round SH Beds for Households with Children	0
6A. Number of DV Year-Round SH Beds for Households with Children	0
6B. Subtotal, non-DV Year-Round SH Beds for Households with Children	0
7. New Year-Round SH Beds for Households with Children	0
8. Under Development Year-Round SH Beds for Households with Children	0
9. Total Year-Round SH HMIS Beds for Households with Children	0
10. HMIS Bed Coverage: SH Beds for Households with Children	

KEY: Target Population A
CO: couples only, no children
HC: households with children
SF: single females
SFHC: single females and households with children
SM: single males
SMHC: single males and households with children
SMF: single males and females
SMF + HC: Single male and female plus households with children
YF: youth females (under 18 years old)
YM: youth males (under 18 years old)
YMF: youth males and females (under 18 years old)

KEY: Target Population B
DV - Domestic Violence victims only
VET - Veterans only
HIV - HIV/AIDS populations only

KEY: Inventory type
C: Current Inventory
N: New Inventory
U: Under development

Error Messages
ERROR MSG: PROGRAM DETAILS None
ERROR MSG: FAMILY BEDS/UNITS None
ERROR MSG: DV HMIS COVERAGE None

Program Information					Target Population		HUD Funding Information	All Year-Round Beds/Units				Year-Round Beds in HMIS				PIT Counts	Utilization Rates
#	Organization Name	Program Name	Geo Code	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for Households with Children	Units for Households with Children	Beds for Households without Children	Total Year-Round Beds	HMIS Beds for Households with Children	HMIS Beds for Households without Children	Percentage of HMIS Beds for Households with Children	Percentage of HMIS beds for Households without Children	Point-in-Time Homeless Count	Program Utilization Rate
SH1	New Hope Housing	Max's Place	519059	C	SMF		Yes	0	0	8	8	0	8		100%	8	100%
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						
	Insert organization name										0						

Housing Inventory Chart: Permanent Supportive Housing

Total Year-Round Beds - Household without Children	
1. Current Year-Round Permanent Housing (PH) Beds for Households without Children	243
1A. Number of DV Year-Round PH Beds for Households without Children	0
1B. Subtotal, non-DV Year-Round PH Beds for Households without Children	243
2. New Year-Round ES Beds for Households without Children	32
3. Under Development Year-Round PH Beds for Households without Children	13
4. Total Year Round PH HMIS Beds for Households without Children	217
5. HMIS Bed Coverage: PH Beds for Households without Children	89%

Total Year-Round Beds - Households with Children	
6. Current Year-Round PH Beds for Households with Children	24
6A. Number of DV Year-Round PH Beds for Households with Children	0
6B. Subtotal, non-DV Year-Round PH Beds for Households with Children	24
7. New Year-Round PH Beds for Households with Children	0
8. Under Development Year-Round PH Beds for Households with Children	9
9. Total Year-Round PH HMIS Beds for Households with Children	24
10. HMIS Bed Coverage: PH Beds for Households with Children	100%

KEY: Target Population A
CO: couples only, no children
HC: households with children
SF: single females
SFHC: single females and households with children
SM: single males
SMHC: single males and households with children
SMF: single males and females
SMF + HC: Single male and female plus households with children
YF: youth females (under 18 years old)
YM: youth males (under 18 years old)
YMF: youth males and females (under 18 years old)

KEY: Target Population B
DV - Domestic Violence victims only
VET - Veterans only
HIV - HIV/AIDS populations only

KEY: Inventory type
C: Current Inventory
N: New Inventory
U: Under development

Error Messages
ERROR MSG: PROGRAM DETAILS None
ERROR MSG: FAMILY BEDS/UNITS None
ERROR MSG: DV HMIS COVERAGE None

Program Information					Target Population		HUD Funding Information	All Year-Round Beds/Units					Year-Round Beds in HMIS				PIT Counts	Utilization Rates
#	Organization Name	Program Name	Geo Code	Inventory type	A	B	Does this program receive HUD McKinney-Vento funding?	Beds for Households with Children	Units for Households with Children	Beds for Households without Children	CH Beds	Total Year-Round Beds	HMIS Beds for Households with Children	HMIS Beds for Households without Children	Percentage of HMIS Beds for Households with Children	Percentage of HMIS beds for Households without Children	Point-in-Time Homeless Count	Program Utilization Rate
PH1	FACETS	Home Connections Housing First Apartments	519059	N	SMF		No	0	0	10	10	10	0			0%	8	80%
PH2	Fairfax-Falls Church CSB Adult Residential Services	Community Treatment Team North	519059	C	SMF		No	0	0	11	0	11	0	0		0%	11	100%
PH3	Fairfax-Falls Church CSB with Fairfax County DHCD	Private Nonprofit partnership (with TBRA)	519059	C	SM		No	0	0	5	5	5	0	0		0%	4	80%
PH4	New Hope Housing	Milestones	519050	C	HC		Yes	24	5	0	0	24	24	0	100%		22	92%
PH5	New Hope Housing	Milestones (expansion)	519059	U	HC		No	9	2	0	0	9	0	0	0%		0	0%
PH6	New Hope Housing	Housing First Apartments	519059	C	SMF		No	0	0	7	7	7	0	7		100%	7	100%
PH7	New Hope Housing	Gartlan House	519059	N	SM		Yes	0	0	8	8	8	0	8		100%	8	100%
PH8	New Hope Housing	Housing First Apartments	519059	N	SMF		No	0	0	7	7	7	0	7		100%	6	86%
PH9	Pathway Homes	McKinney SHP	519059	C	SMF		Yes	0	0	44	1	44	0	44		100%	44	100%
PH10	Pathway Homes	2007 Permanent Supportive Housing Program	519059	N	SMF		Yes	0	0	7	7	7	0	7		100%	7	100%
PH11	Pathway Homes with CSB	McKinney-Mt. Vernon SHOP	519059	C	SMF		Yes	0	0	12	3	12	0	12		100%	12	100%
PH12	Pathway Homes with Fairfax County DHCD and CSB	Shelter Plus Care	519059	C	SMF		Yes	0	0	114	38	114	0	114		100%	111	97%
PH13	PRS	Supported Housing Program	519059	C	SMF		Yes	0	0	12	6	12	0	12		100%	12	100%
PH14	PRS	PRS Intensive Supportive Housing	519059	C	SMF		Yes	0	0	6	3	6	0	6		100%	6	100%
PH15	FACETS	HUD Samaritan Project	519059	U	SMF		Yes	0	0	9	9	9	0	0		0%	0	0%
PH16	New Hope Housing	Housing First Program for Single Women	519059	U	SF		No	0	0	4	4	4	0	0		0%	0	0%
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						
	Insert organization name											0						

Housing Inventory Chart: Unmet Need Totals

All Year-Round Beds/Units				Seasonal Beds	Overflow Beds
Beds for Households with Children	Units for Households with Children	Beds for Households without Children	Total Year-Round Beds	Total Seasonal Beds	Overflow Beds
Emergency Shelter					
0	0	132	132	129	0
Transitional Housing					
0	0	0			
Safe Haven					
0	0	35	35		
Permanent Supportive Housing					
115	30	171	286		

APPENDIX E

Revised April 2010

Continuum of Care

A System of Programs and Services

OUTREACH/INTAKE ASSESSMENT

Coordinated Services Planning
- Prevention-oriented assessments

Community Based Organizations
Ecumenical Groups and Churches
Victims' Assistance Network
CSB Mental Health/Alcohol and Drug Services
- Outreach Workers
- Shelter Services (MH & ADS)
- Emergency & Mobile Crisis Unit
- ADS Detox & MH Jail Diversion

Lamb Center
FACETS
Community Drop-in programs
Alternative House Outreach
LIFT Outreach Worker
Route One Community Kitchen
All Emergency Shelters
Temporary Last Resort Housing
Medical Respite Homeless Program (respite health care services)
Homeless Healthcare Program (health care outreach services)

REGIONAL HOST's

Assessment and Coordination
Housing Locator Program
Prevention and Re-housing

PREVENTION SERVICES

Coordinated Services Planning with Community Based Organizations and Ecumenical Groups:
- Homeless Prevention Services
- Emergency Housing Assistance
- Information & referral
- Emergency assistance including food, counseling, advocacy and financial assistance
- Advocacy and linkage with service providers

Dept. of Family Services
- Employment, Medical Assistance, Public Assistance
- Social work services

Legal Aid:
- Advocacy
- Representation
- Information & referral

EMERGENCY SHELTERS

Alternative House-adolescents
Embry Rucker-families and singles
Bailey's Crossroads-singles
Eleanor Kennedy-singles
Shelter House-families
Artemis House-domestic violence
Someplace Safe-domestic violence
Mondloch I-chronically homeless
Mondloch II-families
Katherine K. Hanley-families

WINTER PROGRAMS

Overflow at Singles Shelters
Falls Church Winter Shelter
Hypothermia Prevention Programs

TRANSITIONAL HOUSING

Residential Youth Services-LIFT
Alternative House Transitional Living
Dept. of Family Services (DFS)
- RISE Program
- Comm. Housing Resources Prog.

Homes for the Homeless (CRSC)
- Safe Places Residential Program

Shelter House Off-site Program
ADS Self Sufficiency
Bethany House
NOVACO
New Hope Housing - Turning Point and Stepping Out Programs
Homestretch
United Community Ministries
BRIDGE Program
Reston Interfaith
Northern Virginia Family Service
CSB MH & ADS Residential
Kurdish Human Rights Watch
Families in Transition Program
Good Shepherd Housing & Family Svc.
FACETS
Family PASS Program

PERMANENT SUPPORTIVE HOUSING

Pathway Homes
PRS, Inc.
Stevenson Place Assisted Living
Shelter Plus Care and Supported Housing Options Program
New Hope Housing
- Milestones
- Gartlan House
- Max's Place Safe Haven

FACETS Samaritan Project
Public Housing/SSHP
Housing Choice Vouchers/SNHI
Project Homes
HOPWA
Housing First Apartments

PERMANENT HOUSING

Dept. of Housing & Comm. Developm't
- Public Housing
- Tenant-Based Housing Vouchers
- Project-Based Housing Vouchers
- Coan Pond for Working Singles
- Moderate Income Rental Program
- Homeownership Assistance Program

Partnership for Permanent Housing
Non-Profit Housing
Private Assisted Housing
Habitat for Humanity
Oxford Houses

MAINSTREAM RESOURCES (SUPPORT SERVICES)

EDUCATION
Adult Education
GED
Education for Independence
Head Start
ESOL
Citizenship Classes
Housing Counseling Training
Parenting Center
Homeownership Training and Assistance

EMPLOYMENT/TRAINING
Training Futures
Virginia Employment Commission
Job Corps
Department of Rehabilitation Services
Service Source
PRS, Inc.
Laurie Mitchell Employment Center
Community-based Job Training & Placement
Microenterprise Business Development
SkillSource One-Stop Job Centers

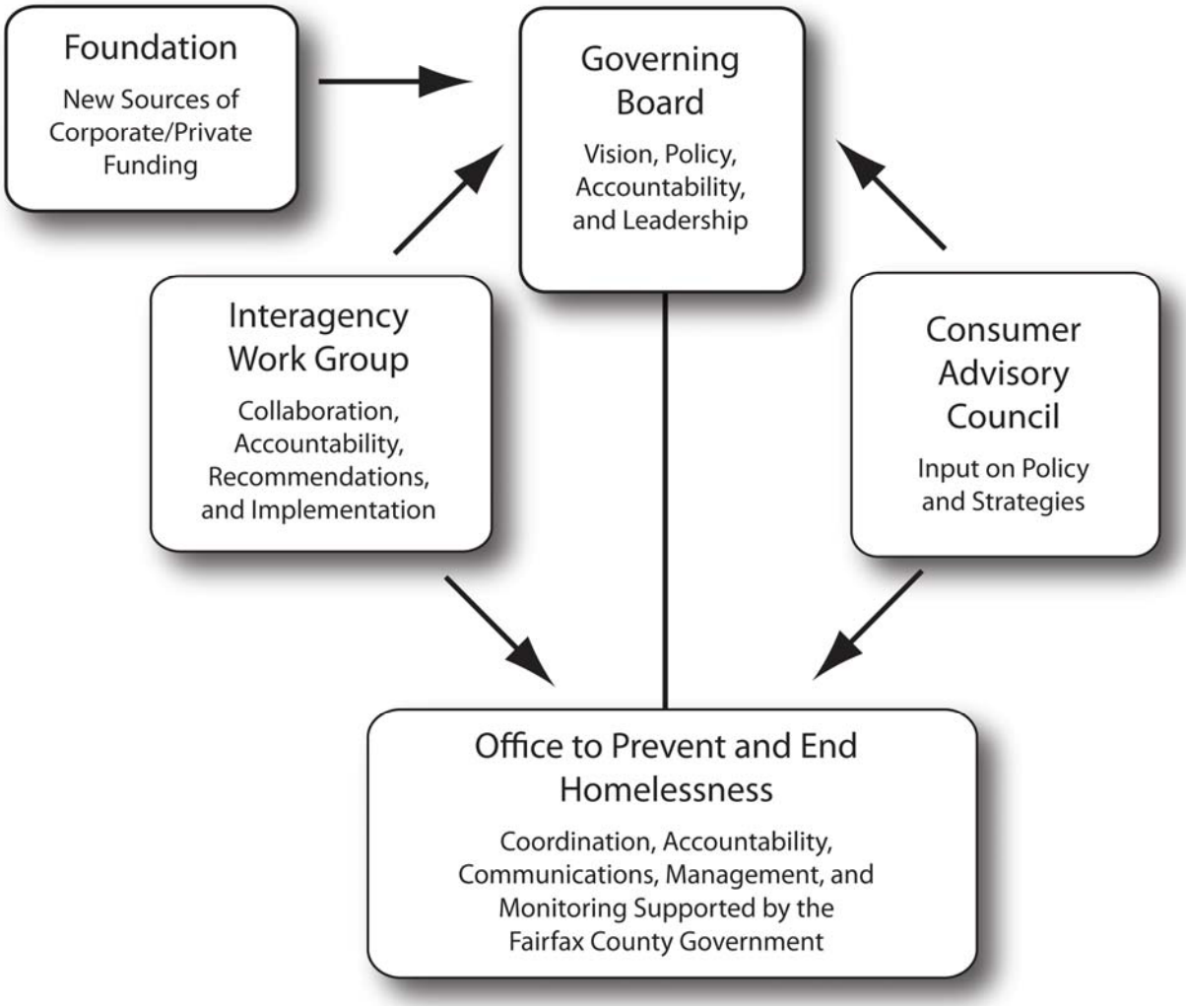
HEALTH CARE
Public Health Department
RNs & NPs to Shelters
Community Healthcare Network
Mental Health Services
Substance Abuse Treatment
Hospitals
The Women's Support Center
Program for Assertive Community Treatment (PACT)

SOCIAL
Veterans Support Services
Representative Payees
Case Management
Housing Counseling
Housing Placement Services
Life Skills Training
Child Care
Immigration/Legal Services
Refugee Services
Multi-cultural Services
Volunteers

TRANSPORTATION
Fairfax Connector
Bus Tokens
Metro Passes
Cab/Taxi Vouchers
FASTRAN
Ride Serve
County Cars

Services utilize many funding sources, including local, State, CoC or other federal grants, and private funds.

The Fairfax-Falls Church Community Partnership to Prevent and End Homelessness



The Governing Board and Office to Prevent and End Homelessness were formed late in FY 2009 and became fully operational in FY 2010. The Interagency Work Group and Consumer Advisory Council are expected to be operating in FY 2011, and planning is beginning to eventually develop a Foundation to support the overall partnership approach.