CITY OF GLENDALE
CONSOLIDATED PLAN
FISCAL YEARS 2010-2015

REV. 1

CITY OF GLENDALE
CONSOLIDATED PLAN
FY 2010-2015

TABLE OF CONTENTS

Section **Page**

EXECUTIVE SUMMARY i

PART I. INTRODUCTION AND GENERAL REQUIREMENTS.....1

1. Introduction 3
2. General Requirements 6

PART II. COMMUNITY PROFILE 11

1. Demographic Analysis 14
2. Economic Analysis 29
3. Housing Market Analysis 33

PART III. COMMUNITY NEEDS ASSESSMENT 57

1. Community Development Needs 60
2. Economic Development Needs 64
3. Homeless and Homeless At-Risk Needs Assessment 68
4 Non-Homeless Persons with Special Needs 75
5. Housing Needs 92
6. Development of Target Area 107

PART IV. CONSOLIDATED PLAN PRIORITIES/STRATEGIES 121

1. Community Development Priorities/Strategies 127
   a. Social Service 128
   b. Neighborhood and Capital Improvement 134
   c. Economic Development 139
   d. Planning.....142
2. Homeless and Homeless At-Risk Priorities/Strategies.....143
3. Housing Priorities/Strategies 152
4. Public Housing Strategy 163
5. Persons with Special Needs Priorities/Strategies 164
6. Anti-Poverty Strategy 167

PART V. OTHER ACTIONS 175

1. Removal of Barriers to Affordable Housing 177
2. Lead-Based Paint Hazard Reductions 179
3. Obstacles to Meeting Underserved Needs 179
4. Institutional Structure 180
5. Delivery System and Strategy to Overcome Gaps 185
6. HOME Program Elements 186
7. Monitoring 188
8. Public Comments 189

TABLES

1. Anticipated Funds 2010-2015 4
2. Income Definitions 5
3. Groups Consulted for Homeless Needs and Programs 8
4. Population Trends: Glendale and Surrounding Areas 14
5. City of Glendale Racial/Ethnic Composition 15
6. Immigration and Year of Entry, 2000 and 2007 16
7. Age Characteristics of Glendale Population, 1990, 2000 and 2007.....17
8. Household Income Profile 18
9. Changes in Household Type 1990 and 2000 18
10. Poverty and Employment, 2000 and 2007 20
11. Poverty by Race/Ethnicity and Household Type 21
12. Largest Major Glendale Industry Sectors, June 2007 30
13. Top Armenian Owned Businesses in Glendale, 1999 31
14. Housing Trends: Glendale and Surrounding Areas, 1990 -2009.....34
15. Changes in Housing Stock, 1990, 2000 and 2009 35
16. Housing Tenure, 1990 and 2000.....35
17. Tenure by Age of Householder, 1990 and 2000.....36
18. Single Family and Condominium Sales Prices by Zip Code 39
19. Rents by Unit Type and Size, 2003 and 2009.....40
20. Large Rental Properties Surveyed 41
21. Housing Affordability for Income Groups by Household Size 42
22. Housing Age 44
23. Persons per Room in Occupied Housing Units.....46
24. Licensed Community Care Facilities 47
25. Senior Apartments that Accommodate Persons with Disabilities.....48
26. Section 8 Waiting List by Race/Ethnicity.....49
27. Affordable Housing Units Under Construction or in Pre-Development 51
28. Inventory of Affordable Rental Housing Units with Restrictions 52
29. Inventory of Affordable Ownership Housing Units with Restrictions 54
30. Affordable Housing Development Covenant Expiration Dates 55

31. Continuum of Care Homeless Population and Subpopulations Chart 69
a. Chart 1: Family Composition 70
b. Chart 2: Adults, Children and Seniors 70
c. Chart 3: Chronically Homeless Persons.....71
d. Chart 4: Domestic Violence Results.....71
e. Chart 5: Sub-Population Special Needs 72
32. Definition of Terms Used in Housing Needs Assessment.....93
33. Housing Problems of Extremely Low-Income Households 94
34. Housing Problems of Very Low-Income Households.....97
35. Housing Problems of Low-Income Households 99
36. Housing Problems by Race/Ethnicity 101
37. Hispanic Population Concentration in Glendale by Census Tract, 2000 108
38. Asian Population Concentration in Glendale by Census 106Tract, 2000.....111
39. Concentration of Low Income Households by Census Tract 113
40. Priority Needs: Community Development, Homeless, Non-Homeless Persons with Special Needs, and Housing 120
41. Social Service Program Strategies.....131
42. Neighborhood and Capital Improvements.....137
43. Economic Development Program Strategies 141
44. Homeless Program Strategies 150
45. Housing Program Strategies 162
46. Division Realignment.....182

MAPS

1. Persons per Square Mile in Glendale south of the 134 Freeway 62
2. Percent Hispanics by Block Group, 2000 109
3. Percent Asians by Block Group, 2000.....112
4. Low Income Populations (<50% MFI).....115
5. Population below Poverty Level.....117
6. Low/Moderate Income Areas.....119

APPENDIX A: Consolidated Plan Management Process - Needs Tables & Assumptions
APPENDIX B: Citizen Participation Plan
APPENDIX C: Public Notice

CITY OF GLENDALE
CONSOLIDATED PLAN 2010-2015
EXECUTIVE SUMMARY

The City of Glendale is home to over 200,000 people and is the third largest city in Los Angeles County. With its central location near downtown Los Angeles, a major airport, and four major freeways, the city has proven to be an attractive region for new residents and new businesses. However, steady population growth, increasing ethnic diversity, reduction of easily developed land, increasing urban sprawl and increasing scarcity of affordable housing have all had major impacts on the quality of life in Glendale, particularly for low-income residents.

The Consolidated Plan for the City of Glendale seeks to address some of the more significant housing, neighborhood, and economic challenges facing this population over the next five-year period from July 1, 2010 to June 30, 2015.

Purpose

The intent of the Consolidated Plan is to develop a collaborative process whereby a community establishes a unified vision for community development and housing actions. Specifically, the purpose of the Consolidated Plan is to:

- Provide residents, public and private agencies, social service agencies, and City departments, the opportunity to develop local priority needs and objectives with effective, coordinated neighborhood and community development strategies;
- Apply a comprehensive approach to helping the homeless in a Continuum of Care system for moving individuals and families from homelessness to permanent housing;
- Promote the development of a one-year action plan that establishes clear priority needs and specific objectives.
- Encourage consultation with public and private agencies, including those outside the City, to identify shared needs and solutions.

It also sets forth the goals and funding allocations for the following three specific federal programs administered through the City of Glendale:

- **Community Development Block Grant (CDBG)**: Developing viable urban communities by providing decent housing and a suitable living

environment, and by expanding economic opportunities, principally for low- and moderate-income persons.

- **HOME Investment Partnership Program (HOME):** Funding a wide range of activities that build, buy, and/or rehabilitate affordable housing for rent or homeownership or that provide direct rental assistance to low-income people.

- **Emergency Shelter Grant (ESG):** Providing homeless persons with basic shelter and essential supportive services.

For the first year of this five-year period, the City will be in the second year of a two year **Homeless Prevention and Rapid Re-housing Program (HPRP)** allocation from the federal government through the American Reinvestment and Recovery Act (ARRA) one-time stimulus funds.

This Consolidated Plan also contains references to other funding sources available to the City that are used for similar or related community and housing purposes. For example, federal **Supportive Housing Program (SHP)** funds also serve the City's homeless population; **Redevelopment Housing Set-aside (Set-Aside)** funds also provide affordable housing; and **Workforce Investment Act (WIA)** funds assist in economic development.

The anticipated revenues available to the City total approximately $215 million. This includes approximately $30 million in federal CDBG, ESG and HOME funds and assumes that the funding will remain stable over the next five years. The City also anticipates receiving approximately $185 million in other community and housing funds over the next five years. The Table below provides a summary of the funding sources available.

Funding Source	Five Year Projected Allocation
CDBG	$18,000,000
ESG	$725,000
HOME	$11,500,000
Subtotal	*$30,225,000*
Redevelopment Set-Aside	$43,131,000
BEGIN (State Home Buyer Program)	$5,200,000
Supportive Housing Program	$9,000,000
Shelter Plus Care	$2,000,000
HPRP (Homeless Prevention Funds)	$670,000
Section 8	$110,000,000
Workforce Investment Act	$15,000,000
Subtotal	*$185,001,000*
TOTAL	**$215,226,000**

Citizen Participation

Citizen participation is a highly valued component of the Consolidated Plan and Annual Action Plan preparation process, and the City created a wide variety of opportunities to invite extensive feedback from the community. The formal Community Needs Assessment and Outreach Strategy involved responses from approximately 1,318 residents and business and community agency stakeholders and included:

- Two Community Public Hearings
- Five Community Events
- Internet Community Needs Survey
- Community Needs Assessment Survey
- Social Service Focus Group
- Homeless Focus Group
- Economic Development Focus Group
- Citizen Advisory Group

Outreach also included extensive informal consultation with public and private agencies, City departments, social service agencies, agency coalitions, community

residents, and neighboring cities, including organizations that provide housing and supportive services to special needs populations.

Data and Trend Analysis

The needs assessment also involved a review of available demographic data and trends impacting Glendale. The information below comes from a variety of sources, including the U.S. Census American Community Survey (ACS) which has updated some demographic information through random sampling on an annual basis. Several of these factors are highlighted below:

- 112,349 Glendale residents are foreign born, representing 55.9% of the total population (the majority are from Russia, Iran, and Armenia). This compares to 35.8% in the County of Los Angeles. (ACS 2007 and ACS 2005-2007)
- From 1990 to 2007, Glendale's population grew by 15% from 180,000 to 207,000 persons. The Glendale population is expected to grow only minimally through 2010, due to the limited availability of land for residential housing. (California Department of Finance)
- Until 1980, Glendale had a predominantly White population (91.7 percent); however, the proportion of White persons in Glendale decreased to 64 percent in 1990 and decreased again to 54 percent in 2000. (2000 Census)
- Young Adults (age 25 – 44) comprise the largest segment of the population, followed by Middle Age Adults (age 45 – 64). Although the proportion of elderly persons increased only slightly from 1990 to 2000, it is anticipated that this age category will only grow as Middle Age Adults age. (2000 Census)
- Health care, retail, manufacturing, and finance/insurance, and educational services are the top five major industry sectors in Glendale. (Verdugo Job Center)
- Some of the fastest growing major Glendale industry sectors include Information Technology (especially as it relates to motion pictures), Health Care, and Professional/Scientific/Technical services industries. (Verdugo Job Center)
- The current unemployment rate as of September 2009 in Glendale is 11% which is a 6.7% increase from 2007 (4.3%) and a 3.6% increase from 2008 (7.4%). This does not include those persons whose unemployment benefits have run out. This compares to 12.6 % in Los Angeles County currently. (California Labor Market Information, 2009)

- Glendale continues to have a diverse mix of housing types, with the majority of the units consisting of multifamily units (59 percent) and approximately 40 percent of units consisting of single-family homes.
- In 2000, almost 62 percent of Glendale households were renters while 38 percent of households owned their home. In 2007, 38.9% of housing dwellings in Glendale were owner occupied and 61.1% were renter occupied. (2000 Census; ACS 2007)
- Average rents from 2007 – 2009 for single, 1bdr and 2bdr units increased by 19%. As of 2009, average rents are $904, $1090, and $1361 respectively. (City of Glendale, Community Redevelopment and Housing, Housing Division[1])
- The median home price in Glendale in June 2007 was $670,000, and in September 2009 the price declined to $440,000 (includes single family detached homes and condos, resale and new construction). This is a 35% decrease in 2 years. (City of Glendale, Community Redevelopment and Housing, Housing Division)
- Approximately 24 percent of all households were overcrowded in Glendale, an increase from 18 percent of households in 1990.
- In Glendale, there are 44 public parks, recreation facilities and historic sites, totaling approximately 280 acres. This represents 1.4 acres per 1,000 people, compared to the average of all southern California cities of 2.18 per 1,000 and the national average of 10 acre per 1,000 persons. (Community Services and Parks Department[2])
- According to the 2000 Census, 15.5 percent of Glendale's population lives below the poverty level.
- On any given night in Glendale there are 306 homeless persons, of which 57 (19%) are children, compared to the 2007 homeless count which found that on any given night there were 296 homeless persons in Glendale of which 85 (28%) were children. (City of Glendale 2009 Point-In-Time Homeless Count) (2007 Homeless Assistance Application)
- The Housing Authority of the City of Glendale administers 1,592 Section 8 vouchers funded directly by HUD, as well as approximately 1,350 portable vouchers funded by other Housing Authorities. There are currently about 7,000 people on the wait list for Section 8 assistance with an approximate wait list time of 7 years. (City of Glendale, Community Redevelopment and Housing, Housing Division)
- There are 29,267 (14.6%) persons over 65 years of age in Glendale. Of these 15,263 (52%) have disability status and 3,512 (12%) are below the poverty

[1] The Housing Division was previously part of the Community Development and Housing Department.
[2] Previously the Parks, Recreation and Community Services Department.

line, compared to LA County which has 10.2% persons over 65 years, 42.7% with a disability and 10.2% below the poverty line. (ACS 2007 and ACS 2005-2007)

- Glendale ranks eleventh nationally in safety, based on the FBI's Uniform Crime Rates Report in a comparison of Part I crimes, among cities with a population of 100,000 in 2008. Glendale was ranked 7th in 2007. (FBI Uniform Crime Report)

Priority Needs

The combined outreach and data analysis resulted in a community expression of the following priorities for uses of federal funds in each of the specified categories.

Social Services:

- At-risk Youth programs including youth counseling, gang and drug prevention, after-school programs, youth employment services, and youth recreation programs
- Employment programs including job counseling, job training, job development, and English as a Second Language (ESL) classes
- Crime, and public safety programs such as neighborhood watch programs and emergency preparedness
- Child care for pre-school and school aged children
- Senior services including transportation, in-home support, and recreation and social service centers
- Health services
- Mental health services
- Fair housing services
- Services for the developmentally and physically disabled

Neighborhood Improvements

- Health facilities
- Libraries
- Parks, community centers and open space
- Trash and debris abatement
- Street lights
- Street, curb and sidewalk improvements
- Handicapped accessibility
- Parking
- Code enforcement and Graffiti removal

Housing

- Home ownership assistance

- Affordable rental housing
- Multi-family housing rehabilitation

Homeless

- Emergency shelters
- Intake and case management
- Homeless prevention
- Supportive services
- Street outreach
- Service gaps

Specific five-year strategies and numerical objectives are being developed to address these priority needs in Glendale.

Strategies

Glendale's five-year strategic plan for community development, economic development, homeless, and housing programs aligns with the City's overall Strategic Plan, touching on all strategic directions: public safety; quality of life; character and design; families and youth; resources and the environment; economic development; transportation; service delivery; financial resources; human resources; and information and communication. The Community Services and Parks Department, which has the primary responsibility of carrying out the five-year plan, is fully committed to coordination of efforts with all City departments and the community.

The following is a summary of the strategies for addressing the community needs and growth using the federal resources available.

Social Service Strategy

- **Youth:** Provide after school/recreational/employment/educational activities to 2,500 at-risk youth, including summer employment, after-school programs, youth and family counseling, gang and drug prevention, teen centers and recreation. Serve 2,500 duplicated patrons with library services.
- **Employment and Training**: Provide targeted employment, assessment, training, referrals, and placement services to 350 low-income residents through coordinated efforts with the Verdugo Job Center.
- **Crime & Public Safety:** Provide crime awareness /prevention programs to serve 385 at-risk youth in coordination with local police.
- **Childcare:** Coordinate and leverage pre-school and after-school childcare programs to serve 725 individuals with childcare.

- **Senior Services:** Provide in-home assessment, care planning, housing assistance, and social service referrals to serve 900 low-income seniors.
- **Fair Housing and Health Services:** Assist non-profits to serve 5,000 very low and low-income persons with legal assistance/immigration, health services, services to the disabled, ESL/basic skills, tenant/landlord, and fair housing information. Continue to provide funding for graffiti abatement, community education and outreach, neighborhood pride and volunteer clean up activities to abate 15,000 locations.

Neighborhood and Capital Improvement Strategy

- **Targeted Neighborhood Improvements:** Complete the East Garfield Neighborhood Improvement Projects and initiate planning activities for one new project in southern or western Glendale. Continue to target neighborhoods for comprehensive revitalization including construction of public improvements and infrastructure, and involve residents in the planning of these revitalization efforts.
- **Code Enforcement:** Conduct 5,000 inspections (1,000 annually) to ensure that homes in low and moderate-income areas meet regulations for code compliance in southern Glendale.
- **Community Centers/ Libraries:** Continue to rehabilitate and expand existing non-profit and city-owned community centers and recreational facilities including libraries, childcare centers, youth centers, health centers, homeless facilities, and neighborhood service centers with the goal of improving and/or developing 5 non-profit or city-owned youth centers and upgrading 10 existing non-profit community centers or city-owned libraries.
- **Parks/Recreation:** Fund development and/or rehabilitation of two neighborhood parks.
- **Section 108 Loan:** Complete repayment of the Section 108 loan for the Edison Pacific project. Apply for a new Section 108 loan from HUD in order to fill a funding gap for a homeless access center and year round permanent emergency shelter.

Economic Development Strategy

- **Rehabilitation of Commercial Buildings and Public Improvements:** Identify one targeted commercial zone for coordinated City efforts to plan and implement design and rehabilitation services to commercial building and fund public improvements. Assist 12 projects for a total of 36 storefronts. Provide funds to implement bike paths/bikeways in low/moderate income area(s).

- **Job Creation/Employment:** Continue to fund social service programs which support, leverage and coordinate employment, ESL and basic skills programs with WIA programs and the VJC. Provide job center satellites at libraries and neighborhood centers. These efforts will create or retain 75 targeted jobs for low and moderate-income persons and serve 50 persons at two new satellite job centers.
- **Business and Technical Assistance:** Contact at least 500 businesses regarding business assistance services. Provide small business technical assistance programs to 50-targeted businesses, and facilitate the development of a business assistance service to help local businesses with technical and strategic support.

Homelessness Strategy

- **Outreach:** Provide street outreach services 1,500 homeless persons and connect clients to the continuum of care.
- **Intake, Assessment, Case Management, Supportive Services:** Provide intake, assessment, specialized case management and supportive services to help clients address barriers contributing to homelessness. Enroll 4,000 persons into specialized case management at PATH ACHIEVE Access Center. Expand Homeless Management Information System to two new social service providers. Provide childcare services to 100 homeless families.
- **Medical Discharge Counseling:** Assist 400 recently hospital discharged homeless with specialized medical and nutritional counseling, along with referrals to homeless services, with temporary housing, transportation, and medication assistance as necessary. Program leveraged by Glendale Adventist Medical Center.
- **Emergency Shelter:** Provide 40 year-round emergency shelter beds and 10 year-round domestic violence crisis shelter beds to serve 1,000 homeless persons.
- **Transitional Housing:** Provide transitional housing for 610 persons, including individuals and families.
- **Permanent Supportive Housing:** Provide permanent supportive housing assistance to 34 households with disabilities; 21 chronically homeless individuals; and refer 5 family households.
- **Homeless Prevention:** Provide case management to 1,000 households, and direct financial assistance to 400 households at risk of homelessness to help them maintain/obtain housing. Serve 80 households with Homeless Prevention and Rapid Re-Housing Program (HPRP) funds through 2011.

Housing Strategy

- **Increase Affordable Home Ownership Opportunities:** Provide funding for the construction of 62 units. Provide homeownership education courses to approximately 750 individuals. Assist 5 first time home buyers to purchase homes.
- **Increase Affordable Rental Opportunities:** Provide funds for the construction of 35 new family rental units and 40 senior rental units. Complete the construction and loan repayment for 70 new rental units. Serve 150 households with rental subsidies.
- **Preserve and Maintain the City's Existing Affordable Housing Stock:** Improve 175 existing housing units through the Single Family Rehabilitation and Multifamily Rehabilitation Programs. Conduct 5,000 inspections for code compliance.

Special Needs Strategy

- **Seniors:** Provide funding for care management services and meals to 900 seniors. Provide funding to specifically target frail seniors.
- **Mentally Ill:** Coordinate services with existing County funded mental health service providers to address community needs.
- **Developmentally Disabled:** Provide funding to begin implementations of an ESL program for developmentally disabled adults with limited English skills.
- **Physically Disabled:** Improve public facilities to make them accessible to persons with disabilities.
- **Substance Abuse:** Provide capital improvement funding to maintain facilities of organizations that serve persons with substance abuse issues.
- **HIV/AIDS:** Coordinate services with the AIDS Service Center.

I. INTRODUCTION AND GENERAL REQUIREMENTS

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INTRODUCTION

The Consolidated Plan is a planning document identifying the City's housing and community development needs and outlining strategies to address those needs. The FY 2010-2015 Consolidated Plan for the City of Glendale covers the period of July 1, 2010 through June 30, 2015 and satisfies the requirements of three Community Planning and Development (CPD) programs offered by the U.S. Department of Housing and Urban Development (HUD):

- **Community Development Block Grant (CDBG**): Developing viable urban communities by providing decent housing and a suitable living environment, and by expanding economic opportunities, principally for low- and moderate-income persons.

- **HOME Investment Partnership Program (HOME):** Funding a wide range of activities that build, buy, and/or rehabilitate affordable housing for rent or homeownership or that provide direct rental assistance to low-income people.

- **Emergency Shelter Grant (ESG):** Providing homeless persons with basic shelter and essential supportive services.

For the first year of this five-year period, the City will be in the second year of a two year **Homeless Prevention and Rapid Re-housing Program (HPRP)** allocation from the federal government through the American Reinvestment and Recovery Act (ARRA) one-time stimulus funds.

This Consolidated Plan also contains references to other funding sources available to the City that are used for similar or related community and housing purposes. For example, federal **Supportive Housing Program (SHP)** funds also serve the City's homeless population; **Redevelopment Housing Set-aside (Set-Aside)** funds and the **Housing Choice Vouchers (Section 8)** program also provide affordable housing; and **Workforce Investment Act (WIA)** funds assist in economic development.

The anticipated revenues available to the City total approximately $215 million. This includes approximately $30 million in federal CDBG, ESG and HOME funds and assumes that the funding will remain stable over the next five years. The City also anticipates receiving approximately $185 million in other community and housing funds over the next five years. Table 1 provides a summary of the funding sources available.

TABLE 1
Anticipated Funds
2010-2015

Funding Source	**Five Year Projected Allocation**
CDBG	$18,000,000
ESG	$725,000
HOME	$11,500,000
Subtotal	*$30,225,000*
Redevelopment Set-Aside	$43,131,000
BEGIN (State Home Buyer Program)	$5,200,000
Supportive Housing Program	$9,000,000
Shelter Plus Care	$2,000,000
HPRP (Homeless Prevention Funds)	$670,000
Section 8	$110,000,000
Workforce Investment Act	$15,000,000
Subtotal	*$185,001,000*
TOTAL FUNDS	**$215,226,000**

The Glendale City Council is the lead agency for the Consolidated Plan and has charged the Community Services and Parks Department with the preparation of the Consolidated Plan, since this Department now houses the CDBG and ESG staff, as well as the Workforce Investment Act staff. The other primary local public agency involved in the Consolidated Plan is the Glendale Housing Authority. Historically, the Council oversees the CDBG funds while the Authority oversees the HOME and ESG funds. The Community Redevelopment and Housing Department now houses the HOME program and other Housing Authority administered funds (Redevelopment Set-Aside). These two departments have been working closely together on the preparation of this Consolidated Plan.

The Glendale Homeless Coalition is the primary body that oversees the preparation of the Homeless Continuum of Care (CoC) application every year. The Coalition's work on the CoC application and the homeless count is reflected in the homeless section of this Consolidated Plan as well as the Action Plan. Because the Coalition is composed of the public and private agencies that implement the programs, their guidance combines policy recommendations to the Housing Authority with practical application of those policies to potential programs assisting homeless persons.

Income Definitions

For purposes of the Consolidated Plan, income definitions were drawn from the Housing and Community Development Act of 1974. In some cases, these may differ from definitions used for other federal or state programs, and are indicated as such throughout this document. Table 2 shows the income limits for a four-person household in 2010. Income limits are adjusted for household size and published annually by HUD.

TABLE 2
City of Glendale
Income Definitions

TERMS	DEFINITIONS	2010 INCOME LIMITS*
Extremely Low Income	0-30% of Area MFI	$0-$24,850
Low Income	31-50% of Area MFI	$24,851-$41,400
Moderate Income	51-80% of Area MFI	$41,401-$66,250

* Income Limits shown for 4-person households in L.A. County using the 2010 HUD Median Family Income of $63,000 effective May 14, 2010.

Definitions in the Housing Section are slightly different (presented in Table 32.)

GENERAL REQUIREMENTS

Consistent with federal requirements, the Community Services and Parks Department conducted a Community Needs Assessment and Outreach Strategy to identify needs and establish program priorities for use of CDBG, ESG, and HOME funds. These priorities apply to the five year Consolidated Plan as well as the annual Action Plan for FY 2010-11.

Citizen Participation

The 2010-2015 Consolidated Plan and FY 2010-11 Needs Assessment process included consultation and input from community residents, community coalitions, and social service agencies. This process included:

1) One Public Hearing held on September 17, 2009 at Mann Elementary School that featured citizen focus groups who were asked to identify community needs and priorities concerning housing, community development, homeless, economic development, and citizen participation. Forty-two (42) residents participated in the focus groups.

2) A Community Needs Assessment Survey mailed out randomly to approximately 6,000 Glendale residents in zip codes 91204 and 91205. As of October 8, 2009, 853 completed surveys were received, representing a 14.2% response rate. Survey questions were sought to determine the level of concern and priority for social service, neighborhood improvement, and community facilities categories.

3) A Community Needs Assessment Survey administered through the City's web page. Visitors to the Department's web page were invited to participate in the survey through a box that appeared on the screen. Between May 2009 and October 20, 2009, a total of 159 on-line surveys were completed by residents. The survey requested residents to identify specific needs for social service, neighborhood improvement, and housing programs.

4) Five community events including the Great Community Cleanup on May 6, Palmer Park Movie Night on June 26, Pacific Park Movie Night on July 10, and Cruise Night on July 18. These activities involved distributing and collecting Community Needs Assessment Surveys from residents participating in these events and providing information on community development programs. Approximately 226 persons participated in the surveys.

5) A Homeless Focus Group discussion with homeless service providers held on September 16. This interactive focus group discussion asked for specific needs for homeless program needs and priorities from a social service agency provider perspective. Thirteen (13) social service and community agencies, plus four public agencies participated in the focus group.

6) A Youth Focus Group discussion with Glendale middle school and high school students held on August 12. Twenty-five students provided direct input on the needs and priority for youth services in Glendale.

7) An analysis of housing and population characteristics from the 2000 Census and updated 2007 American Community Survey.

Appendix A provides summaries of the public hearing comments, focus group discussions, and survey comments.

Consultation with Stakeholders and Local Government

Outreach also included extensive informal consultation with public and private agencies, City departments, social service agencies, agency coalitions, community residents, and neighboring cities including organizations that provide housing and supportive services to special needs populations. Table 3 provides a list of Glendale Homeless Coalition members consulted regarding homeless needs and programs to address those needs.

In accordance with federal regulations, the City also consulted with its closest local unit of government, the City of Pasadena, for input on regional community development, homeless, and housing needs. Information sharing between the two cities led to an identification of similar community needs and dialogue regarding regional solutions. A draft copy of the Consolidated Plan Executive Summary was also sent to other neighboring cities and public agencies for comments, including:

- City of Los Angeles - Community Development Department
- Community Development Commission Los Angeles County - Community Development Block Grant Division
- City of Pasadena - Housing and Development Department
- City of Burbank - Housing and Grants Division
- State of California - Department of Housing and Community Development

TABLE 3
Groups Consulted for Homeless Needs and Programs

Glendale Homeless Coalition agencies and individuals participating in the development of the Consolidated Plan include:

AIDS Services Center	Glendale Presbyterian Church
American Red Cross, Glendale La-Crescenta Valley Chapter	GUSD Healthy Start and Health Kids
Antelope Valley Domestic Violence Council	GUSD Integrated Health Programs
Armenian Relief Society	Holy Family Catholic Church
California National Guard	Housing Rights Center
California Community Care	International Families Association
Catholic Charities of Los Angeles	L.A. Church of Christ
City of Glendale, City Attorney	LA Family Housing Corp
City of Glendale, Community Redevelopment and Housing	Neighborhood Legal Services
City of Glendale, Library	New Life Community Outreach
City of Glendale, Community Services and Parks	Presbyterian Community Church
City of Glendale, Community Planning	PATH Achieve Glendale
City of Glendale, Police, COPPS Unit	PATH Ventures
Center for Community & Family Services-Head Start	Project Safe Place
County Supervisor Antonovich	Salem Lutheran Church
Department of Public Social Services	Shelter Partnership
Door of Hope	Social Security Administration
EDD	Southern California Housing Rights Center
Euclid Villa	Southern California Presbyterian Homes
First Lutheran Church	Street Outreach Team
First United Methodist Church	Urban Initiatives
Food for Body & Soul	The Salvation Army
Glendale Adventist Hospital	Union Station Foundation
Glendale Association of Realtors	Unitarian Universalist Church of Verdugo
Glendale Chamber of Commerce	U.S. Vets, Westside Residence Hall
Glendale Community College	Verdugo Housing Corporation
Glendale Community Foundation	Verdugo Jobs Center
Glendale Family YMCA	Verdugo Mental Health Center
Glendale Fire Department	West Hollywood Community Housing Corporation
Glendale Housing Authority	YWCA of Glendale
Glendale Memorial Hospital	

Citizen Notification Process

To encourage public participation, reasonable and timely notification of all Consolidated Plan related meetings and comment periods was provided as follows:

- At least ten days notice was provided for all public hearings and local Consolidated Plan meetings.
- A community public hearing was held April 1, 2010 at the Pacific Park Community Center to receive input on the proposed program funding levels and strategies. Attendees received information regarding strategies, priorities and objectives that address the housing and community development needs of low and moderate income households, housing market characteristics, the projected amount of funds the City expects to receive, the range of activities that may be undertaken, target areas, and the Citizen Participation Plan. Notice was given to Glendale residents through outreach flyers, through advertisements published in the local newspaper, and through the City's internet web page.
- A public notice providing for a 30-day citizen comment period on the proposed Consolidated Plan was published in the Glendale News Press on May 10, 2010.
- The Housing Authority and the City Council reviewed the proposed Consolidated Plan on May 25, 2010 during a special joint meeting. The public was invited to attend the meeting and make final comments on the Plan. No comments were received.

No oral or written comments were received from the public throughout the Consolidated Plan process.

Request for Proposals (RFP) and Proposal Review Process

For the FY 2010-11 program year, the Department employed a formal RFP process for submission of funding proposals for CDBG City and community social service proposals, CDBG capital projects, and ESG proposals. The CDBG Advisory Committee, comprised of citizen representatives appointed by the City Council, plays a critical role in reviewing the CDBG proposals, while three members of the Glendale Homeless Coalition were selected to review ESG proposals. The proposal review process took approximately six months as described below:

- October 21, 2009: The CDBG Advisory Committee approved the needs assessment findings, program priorities and a proposed Preliminary Funding Plan by Funding Category.
- November 20, 2009: An RFP was issued to the community and City Departments for CDBG and ESG social service and capital improvement projects based on identified needs, program priorities and the City Council approved Preliminary Funding Allocation Plan.
- November 25, 2009: A mandatory bidder's conference provided information and technical assistance to all prospective funding applicants interested in developing proposals for funding assistance through the CDBG and ESG programs.
- December 16, 2009: A non-mandatory technical assistance workshop provided clarification on issues and questions that all prospective applicants identified in the process of preparing their proposals. Additional technical assistance was available to all social service funding applicants when requested.
- December 22, 2009: All funding proposals were due
- February 25, 2010: A three-member proposal review committee for the ESG program, whose members were chosen from the Glendale Homeless Coalition, met to hear presentations from social service providers, and make funding recommendations to the City Council.
- February 26, 2010: The CDBG Advisory Committee interviewed community agencies and City departments that submitted social service proposals, and deliberated and developed funding recommendations.
- March 4 2010: The CDBG Advisory Committee interviewed community agencies and City departments that submitted funding proposals for capital projects, and deliberated and developed funding recommendations for capital projects.

Citizens are provided access on an on-going basis, to information and records relating to the Consolidated Plan, performance report and use of funds during the preceding five years. These documents are maintained at the of Community Services and Parks Department Community Development Block Grant Division office. Furthermore, it is the City's policy to provide timely written responses to citizen complaints and grievances relating to the Consolidated Plan, program amendments and the City's performance report within 15 working days.

PART II. COMMUNITY PROFILE

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COMMUNITY PROFILE

The economic and demographic landscape of Southern California has changed significantly since 1990. Steady population growth, increasing ethnic diversity, reduction of easily developed land, increasing urban sprawl and increasing scarcity of affordable housing have all had major impacts on the quality of life for residents in the region, and particularly in Glendale.

Glendale is a diverse community with households of varied socioeconomic, racial, and cultural backgrounds. Identifying Glendale's demographics as they relate to population, race/ethnicity, age of householders, and particularly economic and housing realities provides a framework for determining future community needs.

Various sources of information are used to prepare the demographic information for the Consolidated Plan. The primary source of population and household characteristics is the U.S. Decennial Census, 1990 and 2000. Housing income data is derived from the Comprehensive Housing Affordability Strategy (CHAS) prepared by HUD. Information from the American Community Survey (2005-2007 and 2007) is presented when the margin of error is not significant. The Glendale application for Continuum of Care funds in 2009 was used to provide the status of existing facilities and services. Also used are the State of California Department of Finance population and housing estimates; housing market information from DataQuick and newspaper and internet rent surveys; the Verdugo Jobs Center; the Glendale Redevelopment Agency; the Glendale Housing Authority; and various departments within the City of Glendale.

DEMOGRAPHIC ANALYSIS

Population

As reflected in Table 4 below, Glendale's population grew by 15 percent from 180,000 to 207,000 between the years of 1990 and 2009. This is slightly less than the 17 percent growth rate observed in the County of Los Angeles overall. In contrast, newer cities, such as Palmdale and Santa Clarita, grew at much faster rates – 120 percent and 60 percent, respectively.

TABLE 4
Population Trends
Glendale and Surrounding Areas
1990-2009

JURISDICTION	1990	2000	2009	GROWTH RATE (1990-2000)	GROWTH RATE (2000-2009)
Burbank	93,693	100,316	108,082	7.07%	7.74%
Glendale	**180,038**	**194,973**	**207,303**	**8.30%**	**6.32%**
La Canada Flintridge	19,378	20,318	21,218	4.85%	4.43%
Pasadena	131,591	133,936	150,185	1.78%	12.13%
Palmdale	68,917	116,573	151,346	69.15%	29.83%
Santa Clarita	110,642	151,088	177,150	36.56%	17.25%
Los Angeles County	8,863,164	9,519,338	10,393,185	7.40%	9.18%

Source: U.S. Department of Commerce, Bureau of the Census, 1990 and 2000 Reports and CA Dept of Finance Population Estimates Jan. 2009.

The Glendale population is expected to grow only minimally over the next five years due to the limited availability of land for residential housing. Despite the slower population growth, Glendale represents the third largest municipality in the County of 88 total city jurisdictions.

Race and Ethnicity

The racial and ethnic composition of a population affects housing and community development needs based on the unique household characteristics of different groups and household sizes. Until 1980, Glendale had a predominantly White population (91.7 percent); however, the ethnic composition of the City has changed significantly since that time. This follows changes occurring in Los Angeles County and Southern

California as a whole. The proportion of White persons in Glendale decreased to 64 percent in 1990 and decreased again to 54 percent in 2000.

The proportion of Hispanic residents in Glendale has remained relatively stable; comprising approximately 20 percent of the population in both 1990 and 2000. The Native American and Black population figures have also remained static at approximately 1 percent of the City's population in both 1990 and 2000. The only group to see a moderate population increase was the Asian/Pacific Islander population, which increased from 13.7 percent to 16 percent between 1990 and 2000. In Glendale, the Asian/Pacific Islander group consists primarily of Korean, Filipino, Chinese, Japanese and Vietnamese residents.

TABLE 5
City of Glendale
Racial/Ethnic Composition
1990-2000

RACE/ETHNICITY	1990		2000	
	POPULATION	PERCENT OF TOTAL	POPULATION	PERCENT OF TOTAL
Race, Not of Latino or Hispanic Origin *				
White	133,270	74.0%	123,960	63.6%
Black	2,334	1.3%	2,468	1.3%
Asian/Pacific Is.	25,453	14.1%	31,750	16.3%
Other Race	18,352	10.2%	16,715	8.6%
Two or More races	Not Available	----	19,614	10.1%
Hispanic Origin *	37,731	21.0%	38,452	19.7%
Total	180,038	100.0%	194,973	100.0%

Sources: U.S. Census, 1990 and 2000.
* Origin is defined as the ancestry, nationality group, lineage or country in which the person's ancestors were born before their arrival to the United States. Persons of Hispanic Origin can be of any of the seven racial categories.

"Two or more races" is a new category introduced in the 2000 Census, allowing respondents to indicate affiliation with more than one race. According to the U.S. Census Bureau, many people reporting more than one race were Latino or Asian who marked both "White" and "Some Other Race."

Within these broader categories of racial origins, Glendale's population is comprised of dozens of ancestral groups. While the majority of Glendale residents described their primary ancestral group as being one of many European identities, the two largest ancestral groups in 2000 were Armenian at 27.6 percent of the City's population and Mexican at 10.7 percent of the City's population.

The 2000 Census indicated that approximately 105,000 persons in Glendale were foreign born, representing 54 percent of the population. In the 2007 American Community Survey the number of foreign born persons in Glendale rose to approximately 112,349 persons, representing 55.9 percent of the population. These immigrants include persons of Armenian, Iranian, Russian, Korean, Filipino, Mexican, and Lebanese heritage. Among the foreign born residents a majority of the immigrants are of Middle Eastern and Russian ancestry. According to the 2000 Census, in southern Glendale, over 22,000 residents listed a foreign language as the primary language spoken at home. In addition, approximately 26 percent of persons living in southern Glendale are fairly recent immigrants.

TABLE 6
City of Glendale
Immigration and Year of Entry
2000 and 2007

	2000		2007 (estimate)	
Population Type	**Number of Persons**	**Percentage of population**	**Number of Persons**	**Percentage of population**
Total Population	195,047	100.0%	200,859	100.0%
Total Population Born Outside of US	**106,119**	**54.4%**	**113,792**	**56.7%**
Native Born	88,928	45.6%	88,510	44.1%
Foreign Born	**106,119**	**54.4%**	**112,349**	**55.9%**
Entered 2000 or After			28,071	25.0%
Entered Before 2000			84,278	75.0%

Source: US Census Bureau, Census 2000; US Census Bureau, American Community Survey 2007.

According to Glendale Unified School District (GUSD) survey data regarding student ethnicity, 33.1 percent of students reported Middle Eastern backgrounds in 2001, up slightly from 31.7 percent in 1999. This represents the largest minority student group. Hispanics were the second largest minority student group in Glendale schools. In 2008, the proportion of students identifying as Hispanic was 21.6 percent, slightly down from 23.6 percent in 2001. Students identified as Asian were approximately 19.2% in 2008, reflecting the increase of Asians in the Glendale population. In 2010, there are approximately 64 languages and dialects currently represented among the students attending Glendale schools.

Age Characteristics

The age distribution of a population is an important factor shaping the planning and development of future housing, neighborhoods, schools, parks and social services. Table 7 shows that the proportion of youth in Glendale under the age of 18 was relatively stable at approximately 22 percent between 1990 and 2000 but has decreased

to approximately 19 percent by 2007. This corresponds with decreased school enrollment in the Glendale Unified School District.

Middle Age Adults (age 45-64) now comprise the largest segment of the population, closely followed by Young Adults (age 25–44). Seniors (65+) and School Age Children (age 5-17) are similar percentages of the population. The Senior population has continued to increase in both numbers and percentage of population since 1990; while the population and percentage of School Age Children has decreased since 2000. Trends indicate that the Senior population will continue to grow, as the Middle Age Adults age.

TABLE 7
Age Characteristics of Glendale Population
1990, 2000 and 2007

AGE RANGE	1990		2000		2007	
	NUMBER OF PERSONS	PERCENT OF TOTAL POP	NUMBER OF PERSONS	PERCENT OF TOTAL POP	NUMBER OF PERSONS	PERCENT OF TOTAL POP
Pre-school (0-4)	11,910	6.6%	11,088	5.7%	9,259	4.6%
School Age (5-17)	27,167	15.1%	32,538	16.7%	28,693	14.3%
College Age (18-24)	18,066	10.0%	16,310	8.4%	19,476	9.7%
Young Adults (25-44)	64,080	35.6%	62,866	32.2%	54,468	27.1%
Middle Age (45-64)	34,838	19.4%	45,057	23.1%	59,696	29.7%
Seniors (65+)	23,977	13.3%	27,114	13.9%	29,267	14.6%
Total	**180,038**		**194,973**		**200,859**	
Male	86,606	48.1%	93,074	47.7%	95,449	47.5%
Female	93,432	51.9%	101,899	52.3%	105,410	52.5%
Median Age	34.3		37.5		41.4	

Source: U.S. Census, 1990 and 2000; American Community Survey, 2007

Income Characteristics

Household income is an important consideration when evaluating housing and community development needs because a low income typically constrains people's ability to obtain adequate housing or services.

According to the 2000 Comprehensive Housing Affordability Strategy (CHAS) Data book, 13 percent of the City's total households were considered Extremely Low Income (30% or less MFI), 11 percent were Low Income (31-50% MFI) and 13 percent were Moderate Income (51-80% MFI). Overall, 39 percent of all households in Glendale were Low and Moderate Income (earning 80% or less MFI) compared to 61 percent of all households were Middle and Upper Income (81% and above MFI) in 2000.

TABLE 8
Household Income Profile

	Percent of Total Households			
Total Households	**Extremely Low Income (0-30%)**	**Low Income (31-50%)**	**Moderate Income (51-80%)**	**Middle/ Upper Income (81%+)**
71,805	13.4%	11.5%	13.9%	61.1%

Source: 2000 Comprehensive Housing Affordability Strategy (CHAS) Data book

Household Characteristics

Changes in household characteristics can help to determine the need for services and housing in the community. The Census Bureau defines a household as all persons occupying a housing unit. Family households are those where the head of the household is related to one or more others in the home by blood, adoption, or marriage; the Census Bureau defines any other household arrangement as non-family.

According to the 2000 Census, 71,805 households resided in Glendale, an increase of 3,201 new households since 1990. As shown in Table 9, between 1990 and 2000, the household composition in Glendale experienced some noticeable changes. The number of family households in Glendale increased from 65 percent in 1990 to 70 percent in 2000, or over 4,700 more family households. Conversely, the number of unrelated persons or single persons ("non-family households") living together decreased by over 6 percent. "Other families", which include single parent families, increased by 15 percent.

TABLE 9
Changes in Household Type
1990 and 2000

Household by Type	1990		2000		Percent Change
	Households	Percent	Households	Percent	
Family Households	**44,838**	**65.4%**	**49,636**	**69.1%**	**+10.7%**
Married – With Children	16,989	24.8%	18,877	26.3%	+11.1%
Married – No Children	17,359	25.3%	18,689	26.1%	+7.7%
Other Families	10,490	15.3%	12,070	16.8%	+15.1%
Non-Family Households	**23,766**	**34.6%**	**22,169**	**30.9%**	**-6.7%**
Singles	19,062	27.8%	18,440	25.7%	-3.3%
Others	4,704	6.8%	3,729	5.1%	-20.7%
TOTAL	**68,604**	**100.0%**	**71,805**	**100.0%**	**+4.7%**
Average Household Size	2.59		2.68		
Average Family Size	3.22		3.27		

Source: U.S. Census, 1990 and 2000

The average household size also increased over the 10-year period between 1990 and 2000. In 2000, the average household size in Glendale was 2.68 persons, an increase from 2.59 persons in 1990. Glendale households are smaller than those in Los Angeles County, where the average household size is 2.98.

Poverty

According to the 2000 Census, 15.5 percent of Glendale's population lives below the poverty level. At the time of the 2000 Census, a four-person family was considered to be living below the poverty line if their annual income was less than $16,700. On a census tract basis, the proportion of persons living in poverty throughout the City varies from a low of 2 percent to a high of 33.5 percent. On a citywide basis, the highest poverty concentrations can be found in the southern portion of the City (generally south of Broadway Avenue) where 24.5 percent of the households were reported as living below the poverty line. The 2007 American Community Survey estimates that approximately 13.9% of the population lives in poverty, a decrease from the 2000 Census. All other population categories reflect a similar reduction. Another indicator is the percentage of students enrolled in the free and reduced price lunch program which provides subsidies for children in households earning 130 percent or 185 percent of poverty level ($22,050 for a household of four). In 2008, 41.3 percent of students in the Glendale Unified School District were enrolled in this program.

TABLE 10
City of Glendale
Poverty and Employment
2000 and 2007

	2000		2007 (estimate)	
Population Category	**Number of Persons Below Poverty Line**	**Percent Below the Poverty Level**	**Number of Persons Below Poverty Line**	**Percent Below the Poverty Level**
Total Population Living Below Poverty Level	**29,927**	**15.5%**		**13.9%**
All Families	6,802	13.6%		10.8 %
Married Families				9.5 %
Female Headed Households	1,512	17.9%		14.8 %
Female Headed Households w/ children under 18 years	1,102	26.1%		36.1%
All Persons 18+	20,921	15.5%		13.0 %
Persons Under 18				18.1 %
EMPLOYMENT	**Number of Persons**	**Percentage of Population**	**Number of Persons**	**Percentage of population**
Unemployed	6,559	4.2%	4,938	2.9%
Employed	85,113	54.5%	95,393	56.5
Not in labor force	64,553	41.3%	68,607	40.6%
Armed Forces	26	-	-	0.0%
Total Population above 16 yrs.	**156,251**	**100.0%**	**168,938**	**100.0%**

Source: US Census Bureau, Census 2000; US Census Bureau, American Community Survey 2007.

Poverty as it relates to household type, race/ethnicity, language/nationality, and education/skills is further discussed below. Other factors which contribute to the number of poverty-impacted households in Glendale are special needs such as advanced age, disability, substance abuse, homelessness and domestic violence. A detailed discussion of these needs in Glendale, the services currently available, and the strategy to continue to address these special needs is provided in the Anti-Poverty section of this report.

Poverty and Household Type

Female-headed households with children tend to have lower incomes and experience a disproportionately higher rate of poverty than other segments of the population. Approximately 26 percent of the City's female-headed households with children under 18 years of age were living below the poverty level in 1999. By 2007, this had increased to approximately 36 percent. For female-headed households with

children under five years of age, the percentage of those impacted by poverty was estimated at 36 percent in 2007.

Of families with related children under age 18, approximately 18.6 percent were living below the poverty level. Single-parent households not only experience higher rates of poverty, but the presence of only one adult in the household also limits resources that can be devoted to raising household income.

Poverty and Race/Ethnicity

For all racial and ethnic groups, a higher percentage of female-headed households lived in poverty. And, with the exception of White persons, a lower percentage of married couples with children lived in poverty than other household types as shown in Table 11 below.

TABLE 11
Poverty by Race/Ethnicity and Household Type

Race / Ethnicity	Percentage of Female-Headed Households in Poverty	Percentage of Male-Headed Households in Poverty	Percentage of Married Couples with Children in Poverty
White	16%	12%	12%
Asian	14%	23%	6%
Hispanic	23%	21%	14%
Some Other Race	22%	26%	17%

Source: US Census Bureau, Census 2000

Poverty and Language/Nationality

Immigration status can pose a significant barrier to income/career development, particularly as it relates to English-language ability. Although, there is no inherent relationship between impoverished socioeconomic conditions and language capability, there is often a correlation between low socioeconomic status and membership in a language or dialect minority group. As discussed previously, in 2007 an estimated 112,349 persons living in Glendale were foreign born representing 56 percent of the population. In comparison, within the County of Los Angeles, only 36 percent of the population was foreign born. Forty-nine percent of the foreign-born in Glendale were naturalized citizens in 1999, compared to 38 percent countywide.

Overall, a notable portion of Glendale's population faces language barriers. Approximately 33 percent of residents say they speak English "less than very well". The language barriers can be traced to sizable immigration into the city during the 1990's primarily from the Soviet Union. Approximately 43,870 or 21.8 percent of Glendale's

population entered the country during the 1980's and 1990's. This has important implications for employment and training opportunities.

The extent to which the English language is a barrier to employment/career development is reflected in statistics provided by the Los Angeles Department of Public Social Services for December 2005. In Glendale, 74 percent of the recipients of government aid had a primary language other than English. Out of 31,634 cases served during a one-month period, only 8,235 (26%) had English as their primary language. The highest numbers of non-English speaking cases were Armenian (59% of all cases) and Spanish (9% of all cases).

Poverty and Education/Skills

According to the 2000 Census, Glendale residents have achieved slightly higher levels of education than the population of Los Angeles County as a whole. For Glendale residents 25 years of age or older, 79 percent held a General Equivalency Diploma (GED), high school diploma and/or had attended post-high school education, as compared to 70 percent of the countywide population. Nearly 60 percent of Glendale residents had attended school beyond high school, as compared to 51 percent of residents countywide.

Homelessness – Focus on Existing Facilities and Services

This section of the Community Profile chapter focuses on facilities and services currently available to homeless individuals and families as required by CFR 91.210(b). This summary provides some context when the more detailed information about the number and subpopulations of homeless persons are discussed more fully in the next chapter of the Consolidated Plan.

The City of Glendale is one of only three cities in the County of Los Angeles that operates its own homeless continuum of care and is eligible to receive SHP funds directly from HUD. The other two cities are Pasadena and Long Beach. All other communities in the County fall under the jurisdiction of the Los Angeles Housing Services Authority (LAHSA). The Glendale Housing Authority and Homeless Coalition have worked hard over the past fifteen years to develop strategies and put programs and projects into place to fill gaps in the continuum of care that will successfully move homeless persons through the different points in the continuum and onto self-sufficiency. This has never been an easy task. The continuum is primarily designed for persons willing to participate in structured programs. However, the future trend and direction being given by the federal administration is to do more to help the traditionally service resistant, chronic homeless population.

The following is a summary of the current Glendale Continuum of Care services and facilities, including coordination of services; street outreach; one-stop access center, intake, assessment, and case management; emergency services; emergency shelters; transitional housing; and permanent supportive housing.

1. Coordination of Services: Because Glendale is outside of the LAHSA regional system, it has complete control and responsibility to plan and coordinate its own programs and strategies. In anticipation of this, the Glendale Homeless Coalition was formed in 1995. The Coalition is comprised of social service providers, public agencies, City departments, business representatives, and formerly homeless persons, and meets every two months to provide input into the planning and oversight of the Continuum of Care system and to ensure that homeless services are coordinated. In addition, sub-committees are formed to address specific program areas such as the Winter Shelter sub-committee to address issues related to the impact of the Winter Shelter Program. All homeless service providers participate in the Homeless Management Information System (HMIS). The City anticipates that additional service providers new to Glendale will need to be added to the system. Agency participation in HMIS has aided the Coalition in identifying needs and evaluating the success of homeless programs.

2. Street Outreach: Currently, the most basic level of service for homeless persons in the continuum is street outreach. The street outreach program is operated by People Assisting the Homeless (PATH) Achieve Glendale and operates out of the PATH Achieve Glendale Access Center located at 437 Fernando Court. The Street Outreach Program is targeted to respond to the challenge of chronic homelessness. The Street Outreach Program consists of two components: (1) homeless case management on the streets, and (2) community education, response and mediation. Currently, the street outreach program consists of one Mental Health Street Outreach Case Manager, and two general outreach case managers. The street outreach case managers provide responsive case management, community education, transportation for emergency shelters and supportive services. In addition, the street outreach program is available to any business or community member to call and request assistance. PATH Achieve Glendale has expanded the street outreach hours to evenings and weekends. The goal is to steer homeless persons to access services in the continuum.

   The street outreach program will make approximately 300 unduplicated contacts and 1000 duplicated contacts on an annual basis.

3. One-Stop Access Center, Intake, Assessment and Case Management: Currently, Glendale's continuum of care is comprised of two entry-points for homeless individuals and families: one through the YWCA of Glendale for victims of domestic violence and one through People Assisting the Homeless (PATH) Achieve Glendale. The goal of these entry-points is to engage homeless persons in an individualized case management program that will not only meet their emergency needs, but that will deal with the root causes of their homelessness. Supportive services available through the continuum include: street outreach, including mental health services and veteran's outreach; a domestic violence hotline; domestic violence counseling; needs assessment; benefits assistance; childcare assistance; a health clinic; mental health assessment and assistance; and housing placement services. In addition, New Horizons provides five slots for child care to families in continuum.

   Approximately 1,000 duplicated persons receive these services on an annual basis.

4. Emergency Services: A number of agencies provide services designed to meet the emergency needs of homeless persons, such as food, clothing, and transportation and short-term shelter. These include Catholic Charities Loaves and Fishes' Homeless Prevention Program, and the Winter Shelter Program operated by the Union Rescue Mission (URM). The City continues to support a Winter Shelter Program, coordinating with the City of Burbank regarding site, and appropriate pick-up and drop-off locations in each city.

The City has also received Homeless Prevention and Rapid Re-Housing (HPRP) funds through the 2009 American Recovery and Reinvestment Act (ARRA). The grant of approximately $1.3 million is being used for rental and utility assistance provided in conjunction with intensive case management.

Approximately 150 households receive utility and or rental assistance annually provided by Catholic Charities, and approximately 757 unduplicated clients (in 2009-10) referred through the Winter Shelter Program.

5. Emergency Shelters: There are two year-round shelters that provide intensive case management in Glendale's continuum of care: the YWCA's Sunrise Village, comprised of a 10-bed facility for victims of domestic violence and PATH's Achieve Glendale's 40-bed shelter for homeless individuals and families. The PATH Achieve Glendale emergency shelter is a structured program where residents are engaged in 60-90 day emergency shelter program. Residents must commit to follow a case management plan with benchmarks to work toward transitioning into either transitional or permanent housing upon program completion. The shelter serves an average of 220 individuals per year, including single men, single women, and families with children. The emergency shelters provide case management and residential services, including housing, meal, transportation and shower facilities. Families are connected to mainstream resources and save money to pay toward housing costs when exiting the emergency shelter programs. Ultimately clients are referred to transitional housing programs or permanent supportive housing programs.

   The lease for the PATH Achieve Glendale operations at 437 Fernando Court expires in June 2010. The Access Center and the 40-bed emergency shelter have been housed at that location for the past 10 years. The PATH Board has set a goal to acquire and rehabilitate a property rather than continue leasing. As a result, PATH has submitted a request for a Section 108 Guarantee Loan to the City of Glendale. The Loan would provide assistance by considering the designation of CDBG funds for acquisition and rehabilitation of a facility to replace the operations at 437 Fernando Court. Due to the high priority of the services provided at both the Access Center and the emergency shelter, the City is working with PATH to fund their Section 108 Loan request.

   Approximately 300 unduplicated persons receive emergency shelter services on an annual basis. Approximately 74 percent (74%) of clients are placed in transitional or permanent supportive housing programs.

6. Transitional Housing: Transitional housing refers to housing with a maximum stay of 24 months with ongoing case management to enable clients to live independently and to transition to self-sufficiency and permanent housing. Four transitional

housing programs provide homeless families and families who are domestic-violence victims with long-term housing and case management: the Door of Hope's Hamilton Court (13-units, 40-beds). PATH's Family Transitional Housing (12-units, 30-beds), the Salvation Army's Nancy Painter House (4-units, 18-beds), and Union Station's Euclid Villa (7-units, 14-beds). Families pay a portion of their adjusted income in rent, and receive intensive case management services to help them build their income, save money, and move into permanent housing.

In total, approximately 60 families receive transitional housing annually.

7. Permanent Supportive Housing: Permanent housing is long term housing without timeframes, but still tied to case management and supportive services. Most permanent housing programs are targeted for persons with disabilities, or special needs. There are tree permanent supportive housing projects that exclusively serve homeless persons that are currently in operation. PATH's Next Step Project provides 8 scattered-site units of permanent housing for chronic homeless persons recovering from substance and/or alcohol abuse or co-occurring diagnoses with mental illness. The Glendale Housing Authority through the Shelter Plus Care housing voucher program provides 32 units of permanent housing for disabled individuals and families, including 3, targeting chronic, disabled individuals. PATH Ventures provides 13 scattered-site units of permanent supportive housing for chronic homeless persons. In addition, on an as needed/as available basis, Section 8 Housing Choice Vouchers are available to homeless families who qualify; and when openings become available, eligible homeless families have priority admission to the 24-unit Orange Grove affordable housing project.

   A new project came on line in May 2010. The Chester Street Permanent Supportive Housing Project is operated by the Salvation Army and provides four units (16 beds) of permanent housing for families. The new development project has been funded using federal Supportive Housing Program and HOME funds provided to the City and the Housing Authority.

   In total, approximately 60 individuals and two families receive permanent housing annually.

Strategy for Addressing the Needs of Persons At Risk for Homelessness

The City of Glendale recognizes the high need for ongoing supportive services and development of affordable housing to prevent homelessness, particularly for extremely low-income households. Recent reports from service providers demonstrate a large homeless at-risk population in Glendale. Households at-risk are comprised of families with children, seniors, and single adults living below the poverty level.

Provision of social services is one key to addressing barriers to self-sufficiency and providing support to households who continue to need services throughout their lives. Catholic Charities operates a homeless prevention, case management program through which families and disabled or elderly individuals who have received an eviction or utility disconnect notice are eligible for one-time direct financial assistance. The Salvation Army Glendale Corps also provides limited services to families in poverty. The Authority's Emergency Rental Assistance Program (ERAP) can also prevent eviction when otherwise self-sufficient, low-income households experience a housing crisis of limited duration. ERAP is funded through Redevelopment Set-Aside, and provides assistance with rental and utility subsidies in the event of an eviction or utility shut-off due to a catastrophic event (illness, sudden job loss, etc.). This program provides assistance for a longer period of time (3-6 months) than the Catholic Charities program described above. These programs serve approximately 310 families per year.

Glendale was granted over $1.3 million in Homeless Prevention and Rapid Re-housing (HPRP) funds through the 2009 American Recovery and Reinvestment Act (ARRA). These funds, available for three years, are being used to provide temporary rent and utility assistance; and financial, legal and tenant/landlord counseling to families. Eligible families have experienced a sudden and significant loss of income due to the current economic crisis, have received a utility disconnection notice and/or an eviction notice; and are willing to meet with a case manager. Services are provided through a variety of social service providers including the Salvation Army, PATH Achieve Glendale, the Department of Public Social Services, the Employment Development Department, and the Verdugo Jobs Center.

The Senior Care Management Program through the Community Services and Parks Department will also continue provision of senior services for those who are at-risk of losing their home due to loss of independent living skills.

The Section 8 Housing Choice Voucher program as well as the development of affordable rental and ownership projects discussed elsewhere in this Consolidated Plan prevents homelessness through the provision of long-term affordable housing and in some cases linkages to on-going supportive services. Permanent Supportive Housing, including Shelter Plus Care, also provides affordable housing along with intensive case management to serve disabled homeless persons who would not otherwise be able to maintain housing. Fair housing education is a supplemental resource that will be provided to educate renters about their rights and responsibilities.

City Views, a quarterly newspaper produced by the City and distributed to all Glendale residents, is a resource for disseminating information about grant funded social service programs, as well as articles about other City projects and services, including opportunities for affordable housing projects. City Views is also frequently used to

provide outreach regarding the Verdugo Jobs Center, which provides employment counseling, job training, and English as Second Language (ESL) classes.

ECONOMIC ANALYSIS

With an estimated population of 207,000 in 2009 and an annual average labor force of approximately 104,200 (50 percent of population), Glendale represents approximately 2.1 percent of Los Angeles County's population and workforce. With its central location near downtown Los Angeles, a major airport, and four major freeways, the City has proven to be an attractive region for new residents and new businesses.

Economic Characteristics

According to State Employment Development Department Unemployment Insurance Data (excluding self-employed, contract or freelance workers), Glendale's monthly average labor force in 2000 was 100,400[3]. Approximately 95,700 persons were employed monthly in 2000 with an unemployment rate of 4.7. The 2009 monthly average labor force was 104,200, with approximately 93,700 persons employed and an unemployment rate of 10.1. Though the labor force increased by approximately 2,800 persons since June 2009, the number of persons employed has decreased by approximately 2,000 persons. Between June and December 2009, the monthly unemployment rate has been between 10.2 and 11.5; a significant increase from the average rate of 6.5 in 2008.

Table 12 below indicates that health care, retail, manufacturing, and finance/insurance, are the top four major industry sectors in Glendale as of June 2007. Health care in the City is in a long-term growth trend based on strong demographic trends in the City; with approximately 1,700 new jobs added since 2003. The retail trade also added jobs between 2003 and 2007, with additional jobs resulting from the opening of the Glendale Americana project in May 2008. The manufacturing and finance/insurance industries remained relatively stable from 2003 through 2007.

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[3] This information is not adjusted for seasonal employment. "Seasonally adjusted" is a process whereby normal seasonal changes are removed or discounted from monthly data. Taking employment as an example, we know that some industries show large fluctuations in employment because they need more or less employees at certain times of the year. Employment in education fluctuates greatly at the beginning and the ending of the school year. Retail businesses typically hire more employees during the holiday season late in the year.

By seasonally adjusting employment, statisticians attempt to adjust the influences of predictable seasonal patterns to reveal how employment and unemployment change from month to month. The adjustment consists of either raising or lowering the actual employment reported by a certain percentage to reflect the normal seasonal increases or decreases that historically occur.

TABLE 12
Largest Major Glendale Industry Sectors
June 2007

Industry Sector	Number of Workers
Health care	13,211
Retail	10,671
Manufacturing	8,357
Finance/insurance	6,983
Professional/scientific/technical services	5,926
Educational services	5,741
Admin. Support/waste mgt.	5,700
Accommodations/food services	5,441
Construction	4,691
Other Services	3,845
Wholesale Trade	3,209
Information (including Motion pictures/TV)	2,484
Public Administration	1,555
Transportation, Warehousing	1,554
Management of Companies & Enterprises	1,444
Arts, Entertainment, Recreation	1,068
Utilities	482
Mining	20
Agriculture, Forestry, Fishing and Hunting	10

Source: Verdugo Jobs Center, June 2007
*A major entertainment company employment data was not included in this information

During the 2000's, Glendale has been the beneficiary of the spillover of entertainment businesses from the City of Burbank, which aggressively pursued the recruitment of entertainment companies to its region throughout the 1990's. Major entertainment company operations from DreamWorks, Disney, and ABC moved into Glendale in the 2000's, resulting in significant growth in the City's entertainment industry sector. With the continued development of the Disney Creative Campus, Glendale can be expected to emerge as one of the leading entertainment centers in Southern California and the state in future years.

Impact of Armenian Businesses

Some of the fastest growing major Glendale industry sectors include Information Technology (especially as it relates to motion pictures), Health Care, and Professional/Scientific/Technical services industries. Many of these Professional/Scientific/Technical services related businesses are linked to the large Armenian community in the City. The most recent study of Armenian businesses was conducted in 1999 by the Verdugo Workforce Investment Board. The study found Glendale to be a regional hub for professional services businesses, such as law firms, accountants, doctor/dental offices, and financial service/mortgage companies. A total of 1,207 Armenian businesses in Glendale were identified in the study, and many of the businesses drew Armenian clients from throughout the Southern California region. T able 13 below shows that auto repair related businesses, restaurants, and medical offices were the top three Armenian-owned/managed businesses in Glendale at the time of this study:

TABLE 13
Top Armenian Owned Businesses in Glendale
1999

Business Sector	Number of Armenian-Owned Businesses
Auto repair, detailing, service stations	82
Restaurants, fast food, bakery	68
Doctor, medical offices	68
Mini-mart, liquor store, meat market	50
Dentist, dental office	47
Beautician, barber, wigs	42
Financial services, mortgages	36

Source: Verdugo Workforce Investment Board Study

Immigrants

According to the 2000 Census, approximately 54 percent of Glendale residents were born outside of the United States. These immigrants include persons of Armenian, Iranian, Russian, Korean, Filipino, Mexican and Lebanese heritage. Among the foreign born residents, approximately 22,000 Armenian immigrants of Middle Eastern and Russian ancestry entered the City over the last ten years. The Armenian population in Glendale grew by 71.5 percent from 1990 to 2000, now accounting for approximately 27.6 percent of Glendale's population. Among the 51,000 Armenian residents over five years of age, 98 percent primarily speak a foreign language in the home.

Overall, a notable portion of Glendale population faces language barriers. About 34.4 percent of residents say they speak English "less than very well". About 67 percent of residents primarily speak a language other than English at home. The language barriers can be traced to sizable immigration into the City during the 1990's, primarily from the former Soviet Union. Approximately 43,870 or 22.5 percent of Glendale's population entered the country during the 1980's and 1990's. This has important implications for employment and training opportunities.

Glendale's Economic Strengths

Glendale enjoys a number of economic strengths including a strong public education system and community college, excellent public safety environment, and a strong resident educational/workforce background. Commercial real estate leasing and sales activity is also improving in Glendale.

The City's lack of dependence on a single industry for its economic vitality insulates it from major economic upheaval. The City's economy is further diversified through a large Armenian economy, which is not as dependent on general economic trends but more dependent on the economic health of Armenian consumers, a group whose population was estimated at 152,910 in Los Angeles County by the U.S. Census Bureau. Glendale is considered the regional center of professional services to the greater Los Angeles Armenian community.

HOUSING MARKET ANALYSIS

In spite of Glendale's diverse economy which enables it to better withstand fluctuations in any given industry, it is still necessary to consider other factors - high housing costs, aging baby boomer populations, and future labor shortages – that will be shaping Glendale over the next decade. Housing in particular will play a key role in Glendale's health over the long term. This Housing Market Analysis describes the significant characteristics of Glendale's housing market, including information on:

- Availability
- Affordability
- Adequacy
- Accessibility
- Assisted Housing Stock

It also describes the housing stock available to serve persons with disabilities and persons with HIV/AIDS and their families, and identifies and describes areas having concentrations of racial/ethnic minorities and/or low-income families.

Availability

This discussion of housing availability is categorized by Housing Growth, Housing Type, Tenure, and Vacancy Rate.

Housing Growth

As reflected in Table 14, Glendale and its surrounding communities have experienced a relatively low rate of construction since 1990. This is largely reflective of the built-out status of many older communities within Los Angeles County. From 1990 to 2000, the housing stock in Glendale increased just over two percent, which is similar to the housing growth rate of Pasadena. However, from 1980 to 2000 Glendale had the highest growth of housing units compared to surrounding communities and the County as a whole. From 1980 to 2000, Glendale's housing stock increased by 19 percent. Among all nearby communities, the City of Pasadena experienced the highest growth rate, 12.13 percent, from 1990 to 2000, balancing out the lowest growth rate, less than one percent, from 1990 to 2000. According to Department of Finance estimates, Glendale's housing stock increased to 74,911 units as of 2009, an increase of 1.6 percent since 2000.

TABLE 14
County of Los Angeles Housing Trends:
Glendale and Surrounding Areas
1990-2009

JURISDICTION	1990	2000	2009	GROWTH RATE (1990-2000)	GROWTH RATE (2000-2009)
Burbank	41,216	42,847	44,111	3.96%	2.95%
Glendale	**72,114**	**73,713**	**74,911**	**2.22%**	**1.63%**
La Canada – Flintridge	6,918	6,989	7,072	1.03%	4.43%
Los Angeles County	3,163,343	3,270,900	3,418,698	3.40%	9.18%
Pasadena	54,032	54,132	58,135	0.19%	12.13%

Source: U.S. Department of Commerce, Bureau of the Census, 1990 and 2000 Reports and CA Dept of Finance Population Estimates Jan. 2009.

Housing Type

Table 15 provides a summary of housing types within Glendale and Los Angeles County in 1990 and 2000. As shown, only minor changes have occurred with the composition of the housing stock in Glendale since 1990. Glendale continues to have a diverse mix of housing types, with the majority of the units consisting of multi-family units (59 percent) and approximately 40 percent of units consisting of single-family homes. These proportions have remained relatively static since 1990. Among multi-family homes, the vast majority (84 percent) consists of complexes with five or more units while most single-family homes are detached units (87 percent).

Table 15 indicates that mobile homes, also typically considered a source of affordable housing, have decreased by 640 units between 1990 and 2000. However, this discrepancy is based on two definitions in the 1990 Census. The first is the 1990 Census definition of a "mobile home" which included trailers. In addition, in 1990, the "other" category was greatly overstated, and has been replaced with "Boat, RV, van, etc." in the 2000 Census. The Department of Finance (DOF) estimates for 2009 use a definition similar to the 2000 Census.

In comparison to Los Angeles County, Glendale had a higher proportion of multifamily housing and a lower proportion of single-family homes. Countywide, approximately 56 percent of all housing units were comprised of single-family and 42 percent were multi-family units. An estimated two percent of all homes in Los Angeles County were comprised of mobile homes and other types of housing.

TABLE 15
Changes in Housing Stock
1990, 2000, and 2009

Housing Type	1990		2000		2009	
	Number	Percent	Number	Percent	Number	Percent
Single Family	**28,889**	**40.1%**	**29,849**	**40.5%**	**29,942**	**40.0%**
Detached	25,729	88.5%	26,035	87.2%	26,128	87.3%
Attached	3,160	11.5%	3,814	12.8%	3,814	12.7%
Multi-Family	**42,488**	**58.9%**	**43,767**	**59.4%**	**44,872**	**59.9%**
2-4 Units	6,850	16.1%	6,917	15.8%	6,938	15.5%
5+ Units	35,638	83.9%	36,850	84.2%	37,934	84.5%
Mobile Homes & Other	**737**	**1.0%**	**97**	**0.1%**	**97**	**0.1%**
Total Units	**72,114**	**100%**	**73,713**	**100%**	**74,911**	**100%**

Source: U.S. Census 1990 and 2000; State of California DOF Housing Estimates 2009

Tenure

The tenure distribution (owner versus renter) of a community's housing stock influences several aspects of the local housing market. Residential mobility is influenced by tenure, with ownership housing evidencing a much lower turnover rate than rental housing. Housing cost burden is generally more prevalent among renters than among owners. Tenure preferences are primarily related to household income, composition, and age of the householder.

The tenure of Glendale's households has remained relatively constant since 1990. As shown in Table 16, Glendale is a predominately renter-occupied community, which is reflective of the high proportion of multi-family housing in the community. In 2000, almost 62 percent of Glendale households were renters while 38 percent of households own their home. Countywide, approximately 52 percent of all households were renters compared to 48 percent of homeowners.

TABLE 16
Housing Tenure
1990 and 2000

Housing Tenure	1990		2000	
	Number	Percent	Number	Percent
Owner-Occupied	26,554	38.7%	27,557	38.4%
Renter-Occupied	42,050	61.3%	44,248	61.6%
Total Occupied Units	68,604	100%	71,805	100%

Source: U.S. Census 1990 and 2000

As is true in most communities, the rate of home ownership in Glendale increases with the age of the householder. Table 17 displays the age of the householder in Glendale by tenure in both 1990 and 2000. The highest rate of homeownership is among householders aged 65 and older (27 percent) and householders aged 45 to 54 (23.5 percent).

In 2000, the largest age category of renter-occupied households were comprised of householders aged 35 to 44 (26.6 percent) and householders aged 25 to 34 years (22.1 percent). Since 1990, the number and proportion of owner- and renter-occupied housing units among adults aged 25 to 34 has decreased. This is largely due to the reduced number of young adults in Glendale, the region and the nation.

TABLE 17
Tenure by Age of Householder
1990 and 2000

Housing Tenure	1990		2000	
	Number	Percent	Number	Percent
Owner-Occupied				
15 to 24 years	203	0.8%	202	0.7%
25 to 34 years	2,705	10.2%	2,397	8.7%
35 to 44 years	5,545	20.9%	6,116	22.2%
45 to 54 years	5,513	20.8%	6,461	23.5%
55 to 64 years	4,966	18.7%	4,945	17.9%
65 years and over	7,622	28.7%	7,436	27.0%
Total Owner-Occ'd Units	***26,554***	***38.7%***	***27,557***	***38.4%***
Renter Occupied Units				
15 to 24 years	2,896	6.9%	1,949	4.4%
25 to 34 years	12,897	30.7%	9,795	22.1%
35 to 44 years	10,226	24.3%	11,752	26.6%
45 to 54 years	5,777	13.7%	8,796	19.9%
55 to 64 years	3,933	9.4%	4,596	10.4%
65 years and over	6,321	15.0%	7,360	16.6%
Total Renter-Occ'd Units	***42,050***	***61.3%***	***44,248***	***61.6%***
Total Occupied Units	**68,604**	**100%**	**71,805**	**100%**

Source: U.S. Census 1990 and 2000

Vacancy Rate

The vacancy rate measures the overall housing availability in a community and is often a good indicator of how for-sale and rental housing units are meeting the current demand for housing. Vacancy rates of five percent for rental housing and two percent for ownership housing are generally considered healthy and suggest a balance between the demand and supply of housing. A higher vacancy rate may indicate an excess supply of units, while a lower vacancy rate may indicate that households have difficulty finding housing. Low vacancy rates tend to drive up the prices, leading to other problems such as housing cost burden and/or overcrowding. A tight housing market also offers incentives for discriminatory practices.

According to the 2000 Census, the vacancy rate for ownership units was 0.9 percent while the vacancy rate for rental housing was 1.9 percent. In comparison, the 1990 Census reported the vacancy rate at 2.1 percent for owner units and 4.5 percent for renter units. This extremely low vacancy rate indicates that a high "pent-up" demand for housing exists and that finding housing in Glendale is becoming challenging for many households. The 2009 vacancy rate for all housing was estimated in the State Department of Finance population and housing estimates at 2.59 percent, with approximately 2.8 persons per household.

Future Residential Development in Glendale

Overall, the escalation in housing prices in the region discussed in this section is attributed to the substantial population growth. California's population growth is anticipated to continue due to several factors – the natural increase of the existing population and continued immigration from other states and countries. Even with potential interest rate hikes, real estate professionals are not anticipating a major correction in prices due to increasing demand. The affordability gap is likely to persist, requiring lower and moderate-income households to make significant sacrifices in order to obtain housing.

Similar to other communities throughout Southern California, Glendale experienced significant decreases in housing prices during the recent recession. Between 2008 and 2009, the median price of single-family homes in Glendale decreased in most areas of the City. Most areas experienced decreases of 10 percent or less. Two areas, however, experienced slight increases of one to almost four percent (further described below). Though the prices have generally decreased since 2007, prices remain relatively high and homeownership is still a challenging goal for many. Therefore, the City continues to experience low vacancy rates in rental units, contributing to continued high rents. With limited remaining vacant land for future residential development, Glendale will be faced with development decisions that may include:

- Accommodating growth in strategic locations where increased density is appropriate and can partially off-set land and development costs
- Emphasizing infill developments to optimize the use of existing infrastructure and services
- Concentrating growth along major corridors and mixed use areas to reduce the impact of residential development on the transportation system

Affordability

Many housing problems such as housing overpayment or overcrowded housing are directly related to the cost of housing in a community. If housing costs are high relative to household income, a correspondingly high prevalence of housing problems occurs. This section evaluates the affordability of the housing stock in Glendale to low and moderate- income households.

Owner-Occupied Housing Costs

Glendale generally commands a strong housing market due to a number of factors including regional housing market demand, Glendale's strong local employment base, relatively convenient freeway access to employment centers, and Glendale's role as a center for Armenian-based businesses and community/cultural services. Table 18 provides a summary of single family and condominium homes sold during 2009 by zip code. The table displays the number of homes sold, median price, and percent change of price from 2008.

Median single family housing prices in Glendale during 2009 ranged from $363,000 (zip code 91203) to $740,000 (zip code 91207). In two areas, single family home prices represented an increase from 2008 prices, but generally prices decreased anywhere from three to twenty percent. Condominium prices in 2009 ranged from $285,000 to $385,000 and were also generally lower than in 2008, with two exceptions (zip codes 91207 and 91214). Sales activity for 2009 increased from 2008, with total sales increasing from 1,176 homes to 1,278 homes, or approximately 8.7 percent. Condominiums showed the greatest increase, from 307 units to 371 units, representing an increase of 20.8 percent. This is most likely due to lower condominium prices coupled with low interest rates and a more stable lending environment.

Housing prices reflect location and housing type with higher priced homes generally located north of the 134 freeway, especially within hillside areas. The highest single family homes were located in zip code area 91207, the Rossmoyne and Greenbriar neighborhoods. This area, comprised of primarily custom built single family homes, has a solid residential base that has been consistent popular over the past 30-50 years, with areas of some historic significance. This area experienced an increase in prices for both single family and condominiums from 2008 to 2009. The 91202 zip code to the

northwest also experienced an increase in single family homes between 2008 and 2009 to a median sales price of $666,000.

The lowest median single family home sales price recorded in Glendale was $363,000 (zip code 91203) in western Glendale bordered by Broadway, San Fernando Road, Glenoaks Boulevard and Brand Boulevard. The other lower priced single family homes were found in zip codes 91204 and 91205, also in southern portion of Glendale. Lower condominium prices were also found in zip codes 91203, 91204 and 91205. However, zip code 91208 in the area just north of Glendale Community College, nearer the convergence of the 210 and 2 freeways, also had a lower median sales price for condominiums.

TABLE 18
Single Family and Condominium Sales Prices by Zip Code
2009

Zip Code	Number Single Family Homes Sold	Median Single Family Home Price	% Price change from 2008	Number Condos Sold	Median Condo Price	% Price change from 2008
91201	110	$578,000	-7.6%	8	$340,000	-5.6%
91202	95	$666,000	+3.7%	61	$320,000	-9.9%
91203	21	$363,000	-20.3%	48	$299,000	-16.3%
91204	12	$397,000	-10.8%	17	$295,000	-17.8%
91205	62	$400,000	-5.9%	32	$285,000	-13.6%
91206	105	$636,000	-5.2%	130	$303,000	-13.6%
91207	76	$740,000	+1.1%	21	$334,000	+15.0%
91208	154	$696,000	-3.4%	18	$287,000	-9.6%
91214*	272	$560,000	-8.9%	36	$385,000	+5.5%

Source: DQNews.com, Annual Charts, LA Times 2009 Chart
* This zip code is the La Crescenta area with approximately half of the area in Glendale and the other half in unincorporated Los Angeles County.

Though foreclosures are prevalent throughout Los Angeles County, Glendale has not had significant foreclosure rates. RealtyTrac shows that in March 2010, approximately 1,100 units are in the foreclosure process (defaults, auction, bank owned, and up for sale). This represents approximately 1.5 percent of Glendale's current housing stock.

Renter-Occupied Housing Costs

Information on rental rates in Glendale was obtained during a four-week period (November – December 2009) from advertisements on the internet and in local papers. Information was also obtained from property owners and Housing Authority staff. The information, representing 434 units, is summarized in Table 19.

The majority of apartment units advertised for rent were one- and two-bedroom units, along with a limited number of three- or more bedroom apartments. The overall median price for advertised apartments was $1,225, with the median rental price ranging from $800 for a studio up to $2,000 for a three-bedroom unit.

A portion of the advertised rental units were comprised of condominiums. Rental prices for condominiums were typically higher than for the apartment rentals, largely due to the larger size of the units, and higher degree of amenities (private parking, balconies, and pool) that are often included in this type of property. The median rental price for all condominium units was $2,200, with rents ranging from a median price of $950 for a one-bedroom unit up to $1,750 for a three-bedroom unit.

Rents for single-family homes varied quite significantly based on size, amenities and location. Rents ranged from a median price of $700 for a one-bedroom home up to $3,800 for a three-bedroom home. The majority of the single-family home rentals were higher end, as evidenced by a median rent for all single-family homes of $3,500.

TABLE 19
Rents by Unit Type and Size
2003 and 2009

Unit type	No Bedrooms	Rent Range 2009	Rent Range 2003	Median Rent 2009	Median Rent 2003
Apartments	0	$550-$1925	$495-$725	$ 800	$ 650
	1	$850 - $2299	$650 - $1,225	$ 1,050	$ 895
	2	$1,050 - $3,700	$750 - $2,600	$ 1,425	$1,163
	3	$1,650 - $2,300	$1,400 - $3,600	$ 2,000	$ 1,500
	Total	$550 - $2,300	$495 - $3,600	$ 1,225	$ 975
Condominiums	1	$950 - $1,495	$1,050	$ 1,000	$ 1,050
	2	$1,400 - $2,950	$1,000 - $1,275	$ 2,000	$ 1,175
	3	$1,825 - $4,250	$1,500 - $1,750	$ 2,400	$ 1,625
	Total	$950 - $1,495	$1,000 - $1,750	$ 2,200	$ 1,200
SF Homes	1	--	$700 - $1,095	--	$ 925
	2	$1,600 - $3,000	$850	$ 2,253	--
	3	$1,925 - $4,500	$1,600 - $3,800	$ 2,900	$ 2,495
	Total	$1,600 - $4,500	$700 - $3,800	$ 3,500	$ 1,175
All Types	**TOTAL***	**$550 - $5,950**	**$495 - $3,800**	**$ 1,400**	**$ 995**

Source: 4rentinla.com; Westsiderentals.com; Owners; Authority Staff; Glendale Newspress

Table 19 also compares median rents from 2003 (the last Consolidated Plan information) to 2009 median rents. Median apartment rents have increased by approximately $250 for all sizes; median condominium rents have increased by $1,000; while the median single-family home rent has almost tripled, with an increase of $2,325. Of note is that that there are fewer single-family homes and condominiums for rent at lower cost in 2009 as compared to 2003. This may be due to people staying in place leading to fewer such units available in the rental market. Since 2006, there has also been an increase in the number of new construction, higher end condominiums with greater square footage than existing units. Many of these units are being rented, but not sold by the developer, probably due to the decreased sales prices during the current recession.

The City has been tracking rental housing costs over time in five large rental properties with 100 or more units representing 839 units (see Table 20). Since these apartments were larger in size, had a larger degree of amenities and commanded a higher price than the smaller rentals surveyed, these properties are displayed separately from the other rental property surveyed and summarized in the previous table.

The five large properties surveyed had between 112 and 264 units per property. The year the property was built ranged from 1970 to 2003. The age of the large apartment complexes is generally younger than the overall housing stock in the City.

TABLE 20
Large Rental Properties Surveyed

Name	Address	Zip	Built	Units
Archstone Glendale	201 West Fairview	91202	1988	264
Avalon Glendale	1137 N. Glendale Ave.	91202	2003	223
El Patio	321 East Fairview	91207	1973	108
Hampton Plan Apartments	245 West Lorraine	91202	1970	132
James Terrace	611 Howard Street	91206	1978	112
Total				**839**

Source: REALFACTS 2003

As of December 2009, base advertised rents in these complexes ranged from $1,170 to $1,795 for a one-bedroom; $1,440 to $2,299 for a two-bedroom; and $2,300 to $2,695 for a three-bedroom unit. Rents are generally higher than the rental prices of the smaller properties advertised through the newspapers and Internet. This may be due to the fact that the larger rental properties include more amenities and luxury features such as pools, recreation facilities, on-site managers, and security parking and can therefore command a higher price per unit. The Residences at The Americana at Brand, built in 2008, is another large rental property with 238 new units. Rents at The Americana at Brand range from $1,925 for a one-bedroom unit, to $3,390-$3,700 for a two-bedroom unit. The location, amenities offered, and age of these units all contribute to the higher rents commanded.

Overall Affordability

Housing affordability can be inferred by comparing the cost of housing in Glendale with the maximum housing costs affordable to households of different income levels. This information can provide a picture of who can afford what size and type of housing, as well as indicate the type of households that would likely experience overcrowding or burden on housing cost.

Housing affordability for each income group is calculated below, at no more than 30 percent of the gross household income expended on housing costs. The groups include singles, small families and large families.

TABLE 21
Housing Affordability for Income Groups by Household Size

Income Group	Annual Income	Monthly Housing Payment	Utility Allowances	Taxes and Insurance	Affordable House Price	Max. Affordable Monthly Rent
Very Low*						
Single	$27,750	$621	$64	N/A	N/A	$557
Small Family	$35,700	$699	$82			$617
Large Family	$42,800	$838	$119			$719
Low*						
Single	$44,400	$745	$64	N/A	N/A	$681
Small Family	$57,100	$838	$82			$756
Large Family	$67,050	$1,006	$119			$887
Moderate**						
Single	$52,150	$1,594	$104	$390	$184,000	$1,271
Small Family	$67,050	$1,793	$108	$440	$209,000	$1,439
Large Family	$80,450	$2,152	$135	$505	$253,000	$1,854

Incomes Effective April 2, 2009
*Very Low and Low Income: Monthly Housing Payment based on 30% of 50% AMI for Very Low and 30% of 60% AMI for Low Income households; Affordable Monthly Rent assumes renter pays utilities in a multi-family rental development
**Moderate Income: Monthly Housing Payment based on 35% of 110% AMI for ownership and 30% of 110% AMI for rental; Taxes and Insurance based on affordable purchase price; Affordable House Price based on 6.5% interest and 5% downpayment; the Affordable House Price and the Affordable Monthly Rent assumes a resident household's utility payment for a single-family residence.

Moderate Income: The majority of moderate-income households in the Los Angeles County area cannot afford the median price of most single-family homes and condominium units in Glendale. A limited number of smaller condominiums are within the price range of moderate-income households; however, this size of housing would not be suitable for larger families. Within the rental market, moderate-income households are able to afford rents of up to $1,854 per month. The rental prices of most apartments listed in Table 19, the "Rents by Unit Size" table, are within this

affordability level, as are almost half of the condominiums. However, most of the rental listings for units at larger apartment complexes and single-family homes in Glendale are not within this affordability level.

Low and Very Income: With a maximum purchase price ranging from $100,000 to almost $135,000, low-income households cannot afford the median price of any single-family homes or condominiums without experiencing a significant cost burden. In the rental market, low-income households can afford some guest homes, one-bedroom and studio units. However, low-income households cannot afford the rental costs of condominiums, larger apartments, and single-family homes.

Very low income households are not able to afford any for-sale single-family homes or condominiums. With the exception of a limited number of studio units, very low-income households cannot afford to rent a home in Glendale without a significant cost burden.

Adequacy of Housing

Housing Age

Housing age is frequently used as an indicator of housing condition. Most residential structures over 30 years of age will require minor repair and modernization improvements, while units over 50 years of age are more likely to require major rehabilitation such as roofing, plumbing, and electrical system repairs. A unit is generally deemed to have exceeded its useful life after 70 years of age.

In 2000, approximately 61 percent of housing in the City was at least 30 years old (constructed prior to 1970). This relatively high proportion of older homes might indicate an ongoing need for maintenance and repairs on a significant portion of the housing stock. However, many of the older units are custom built single-family homes and have been well maintained due to generally higher incomes of the homeowners. One general exception may be homes owned by elderly homeowners. Despite having great equity in their homes, elderly households may have limited incomes and have difficulty maintaining their homes.

In 2010, an additional 11,290 units will be 30 years of age, with another 12,526 becoming this age between 2010 and 2020. Many of these housing units are apartments and have not been as well-maintained as the older single-family housing stock.

TABLE 22
Housing Age

Year Structure Built	Number of Units	Percent of Total Units
1990-2000	4,929	6.6%
1980-1989	12,526	17.0%
1970-1979	11,290	15.3%
1960-1969	10,471	14.2%
1940-1959	20,371	27.6%
1939 or earlier	14,226	19.3%
Total	**73,713**	**100.0%**

Code Enforcement

Glendale's Community Planning Department operates a code enforcement program that is both complaint-driven and pro-actively staff-initiated. In addition, a small unit-by-unit voluntary inspection program is operated in the multi-family neighborhoods. The Division currently employs seven full-time Compliance Inspectors and six full-time Field Representatives that work to correct code violations and respond to complaints from residents. Several of the staff members are fluent in Spanish and Armenian, facilitating understanding and cooperation between residents, property owners, and the City. The Department typically receives between 1,200 and 1,400 housing-related code enforcement cases per year. The primary complaints are related to trash in yards, exterior issues such as paint or roof repairs, and interior improvements such as plumbing repairs. About half of these cases focus on minor issues.

In conjunction with inspecting and noticing property owners regarding a violation, Neighborhood Services staff generally advises property owners to contact the City's Department of Community Redevelopment and Housing for information on the City's rehabilitation programs.

Overcrowding

Overcrowding occurs when housing costs are so high (relative to income) that families have to reside in small units or double-up to devote income to other basic needs such as food and medical care. Overcrowding also tends to result in increased traffic and a shortage of on-site parking in a particular area. Deterioration of a housing unit may also accelerate due to overcrowding. Maintaining a reasonable level of occupancy and alleviating overcrowding is an important contributor to quality of life.

As indicated in Table 23, approximately 24 percent of all households were overcrowded in Glendale, an increase from 18 percent of households in 1990. Severely overcrowded households are households with more than 1.5 persons per room. In 2000, 13 percent of households were severely overcrowded compared to 11 percent in 1990.

The overall rate of overcrowding is slightly higher in Glendale than the County as a whole. Approximately 23 percent households throughout Los Angeles County were overcrowded, an increase from 19 percent in 1990. However, the rate of severe overcrowding was slightly higher Countywide, with 15 percent of households experiencing severely overcrowded housing conditions.

Overcrowding in the City varies considerably by tenure. A higher proportion of renter-households (32 percent) experienced overcrowded living conditions compared to owner-households (9 percent). Renter-households also experienced the highest degree of severely overcrowded living conditions. Approximately 20 percent of renter-households were severely crowded compared to 3 percent of owner-households.

A higher rate of overcrowded living conditions among renter households also occurred Countywide. In 2000, 31 percent of renter households were overcrowded compared to 13 percent of owner households. Within the County as a whole, 22 percent of renters were severely overcrowded compared to 7 percent of owner households.

TABLE 23
Overcrowding in Occupied Housing Units by Tenure
1990 and 2000

Tenure/Overcrowding	1990		2000	
	Households	Percent	Households	Percent
Owner Households				
Moderately Overcrowded (1.01-1.5 persons/room)	1,020	3.8%	1,622	5.8%
Severely Overcrowded (>1.5 persons/room)	771	2.9%	981	3.6%
Total Owner Overcrowded (>1.0 persons/room)	*1,791*	*6.7%*	*2,603*	*9.4%*
Renter Households				
Moderately Overcrowded (1.01-1.5 persons/room)	3,759	8.9%	5,614	12.7%
Severely Overcrowded (>1.5 persons/room)	7,012	16.6%	8,825	19.9%
Total Renter Overcrowded (>1.0 persons/room)	*10,771*	*25.6%*	*14,439*	*32.6%*
Total Households				
Moderately Overcrowded (1.01-1.5 persons/room)	4,779	6.9%	7,236	10.1%
Severely Overcrowded (>1.5 persons/room)	7,783	11.3%	9,806	13.6%
Total Overcrowded (>1.0 persons/room)	*12,562*	*18.3%*	*17,04,*	*23.7%*

Source: U.S. Census 1990 and 2000

Accessibility

Licensed Community Care Facilities

Persons with special needs such as the elderly and those with disabilities must also have access to housing in a community. According to the 2000 Census, 42,481 persons in Glendale had a disability, comprising approximately 23 percent of the population five years and older. Disabilities are defined as mental, physical or health conditions that last over six months. The proportion of individuals with disabilities increases with age. A community care facility is any building or location where non-medical care and supervision is provided to residents. Community care facilities provide a supportive housing environment to persons with special needs in a group situation. In California,

these facilities are licensed by the Department of Social Services, Community Care Licensing Division.

According to the State of California Department of Social Services Community Care Licensing Division, 26 licensed community care facilities are located in Glendale. The capacity of these facilities ranges from as few as two to as many as 200 beds. The largest proportion of beds (1,342) is for residential elderly care. Several facilities accommodate persons with developmental disabilities. Care for non-ambulatory persons is offered primarily at residential facilities for the elderly. Community care facilities tend to be distributed evenly throughout different neighborhoods of the community, with a small concentration in the southern portion of the community below Chevy Chase Drive.

TABLE 24
Licensed Community Care Facilities

Facility Type	Facilities	Capacity	Type of Disability*	
			Developmental	Non-Ambulatory
Adult Day Care	2	75	75	30
Adult Residential	10	63	57	6
Group Home	1	2	2	
Residential – Elderly	13	1,342		700
Total	**26**	**1,482**	**134**	**736**

Source: State of California Department of Social Services, Community Licensing Division, 2010
*Categories are not mutually exclusive

Three of the Adult Residential facilities are owned and managed by a local non-profit agency, the Glendale Association for the Retarded (GAR). These three homes - Hamilton House (10-beds), Alma House (6-beds), and David Gogian Housing (6-beds) - provide supportive housing exclusively for low-income developmentally disabled adults. All three homes were purchased and rehabilitated with financial assistance from the City. GAR's homes are handicap accessible and continually staffed with a live-in resident manager to provide supportive services that enable residents to develop independent living skills and integrate into the community. The David Gogian House is fully handicapped accessible to non-ambulatory developmentally disabled adults.

In addition to the facilities listed in Table 24, there are also three apartment buildings for persons with disabilities. Two buildings are managed by Abilities First (formerly Crippled Children's Society). One building is Ivy Glen Apartments, consisting of 21 one-bedroom and 4 two-bedroom apartments for very low-income persons with developmental and/or physical disabilities. The units and common living areas are fully handicapped accessible for non-ambulatory disabled persons. The second building is Maple Park Apartments, consisting of 25 one-bedroom apartments for very low-income persons with developmental and/or physical disabilities. A third building, recently constructed, is Casa De La Amistad. It is an apartment building owned and

managed by United Cerebral Palsy of Los Angeles, Ventura and Santa Barbara Counties. There are 23 affordable units (17 one bedroom and 5 two bedroom untis) that serve extremely low income persons with developmental disabilities. The units and common living areas are also handicapped accessible.

There are also seven apartment buildings in Glendale specifically for very low- and low-income seniors that are accessible/adaptable to persons with disabilities. Accessibility features include elevators, ramps, wide doorways and grab bars. The accessible apartments for low-income seniors are included in Table 25 below.

TABLE 25
Senior Apartments that Accommodate Persons with Disabilities

Project	Number of Units / Bedrooms		Population Served
Casa de la Paloma	166	One-bedroom units	Very low and low-income seniors
Park Paseo	97	One-bedroom and efficiency units	Very low-income seniors
The Gardens	74	One-bedroom units	Very low-income seniors
Palmer House	21	One-bedroom units	Very low-income seniors
Otto Gruber	40	One-bedroom units	Very low-income seniors
Monte Vista	9	One-bedroom units	Very low and low-income seniors
Silvercrest	74	One-bedroom units	Very low income seniors
Heritage Park	52	One-and two-bedroom units	Very low income seniors

The City also offers housing rehabilitation grants to persons with disabilities. Grants are available to low-income households to improve the property for handicapped accessibility.

Assisted Housing Stock

Public Housing

The City of Glendale has no public housing units.

Rental Assistance through Section 8 Housing Choice Voucher Program

Established in 1976, the Glendale Housing Authority contracted with the Department of Housing and Urban Development (HUD) to operate the Section 8 Housing Choice Voucher program for residents in Glendale and small portion of La Crescenta and

Montrose. The Community Redevelopment and Housing Department serves as staff to the Housing Authority of the City of Glendale.

Recipients of Section 8 assistance receive a housing voucher and can use it to rent a dwelling in the private market. The housing voucher covers a portion of the rent and the tenant is expected to pay the balance. The tenant's share of rent is an affordable percentage of their income, which is generally between 30 and 40 percent of their monthly gross income for rent and utilities.

In October 2009, a total of 1,592 Glendale households received Section 8 vouchers from the Glendale Housing Authority. Included in the total are five vouchers used by participants in the Family Self Sufficiency Program.

The Section 8 waiting list was last opened for new applicants in January 2001. The Glendale Housing Authority received over 12,000 applications during a two week period. There are currently 6,481 households on the current active waiting list. The Glendale Housing Authority does keep track of the racial/ethnic makeup of households on the Section 8 active waiting list. Of the 6,481 households on the list, 5,470 (84.4%) are identified as White. This category includes White/Armenian households, estimated in the last Consolidated Plan as approximately 63 percent of the waiting list. Hispanic households, defined under more than one category, are approximately 11.1 percent of the current waiting list; Black/African Americans are 8.04 percent and Asians are 2.9 percent. Based on the overall ethnic and racial makeup of the City, both Hispanic and Asian householders appear to be underrepresented among persons on the waiting list.

TABLE 26
Section 8 Waiting List by Race/Ethnicity

Race	Number	Percent
American Indian/Alaska Native	22	0.34%
Asian	186	2.87%
White	5,470	84.40%
Black/African American	521	8.04%
Not Assigned	202	4.35%
Ethnicity	**Number**	**Percent**
Hispanic or Latino	720	11.11%
Not Hispanic or Latino	5,761	88.89%

Source: Glendale Housing Authority, 2010

As mentioned previously, there are currently 6,481 households on the waiting list. This represents a wait time of between two to six years depending on a combination of factors such as waiting list preferences and budget authority. The preferences are based on a point system as follows:

- 12 points – homeless, referred by Glendale's Continuum of Care

- 6 points – veterans
- 1 point- live/work in Glendale
- 1 point- single person over 62 years
- 1 point- working family
- 1 point- disabled/unable to work
- 1 point- extremely low income

Other Rental Housing Assistance Programs

Other additional households are provided with monthly rental assistance payments through the Housing Authority's Redevelopment Set-Aside funded programs including LAFERAP (20 families), ERAP (5 families) and the federally funded Shelter Plus Care (32 households) program.

Housing Stock Available to Serve Persons with HIV/AIDS

According to the Los Angeles County Department of Health Services, 1,233 HIV/AIDS cumulative cases were reported for Glendale and 56,091 cases for all of Los Angeles County from 1982 through December 31, 2009. Among the County population diagnosed with AIDS, 44 percent are White, 33 percent are Hispanic, 20 percent are African American, and 3 percent are composed of other racial/ethnic groups and unknown racial/ethnic groups. The County's fatality/morbidity rate is approximately 56 percent; and has significantly decreased since 1997. When applied to the Glendale population, this translates into an estimated 542 Glendale residents currently alive and living with AIDS. The City of Glendale has no housing at this time to exclusively serve persons with HIV/AIDS, however, a number of local agencies within Los Angeles County administer Housing Opportunities for People With AIDS (HOPWA) tenant based rental assistance vouchers.

Assisted Housing

While there are no publicly owned housing projects in Glendale, the City's strategy has been to assist in the development and rehabilitation of privately owned, for-profit and non-profit, affordable rental and ownership housing using federal, state and local resources.

Table 27 provides a list of six projects currently under construction (two projects) or in pre-development (four projects). The City has an open submittal of developer statement of interest in developing affordable housing. Therefore, new projects may be added to this list at any time.

TABLE 27
Affordable Housing Units
Under Construction or in Pre-Development

Projects Under Construction		
Development Address	**Target Population**	**Affordable Units**
Vassar City Lights/1814 Vassar Avenue	Very Low, Low and Moderate Rental Housing	70
Projects in Pre-Development		
Development Address	**Target Population**	**Tentative Affordable Units**
Doran Gardens/339-343 Doran Street	Low and Moderate Income First Time Home Buyer Families	57 estimated
Central City Lights/327-331 Salem Street	Affordable Rental Housing	35 estimated
Habitat for Humanity/624-630 Geneva Street	Low Income First Time Home Buyer Families	5 estimated
5th and Sonora	Unknown at this time	n/a

Tables 28 and 29 provide a detailed list of these projects, by type (rental or owner) and then population served (families, developmentally/physically disabled adults, and seniors). Within each type, the list is organized alphabetically.

TABLE 28
Inventory of Affordable Rental Housing Units
with Occupancy and/or Affordability Restrictions

				Units Reserved for Seniors			Units Restricted by Income Only				
Project Type Owner/ Renter	**Development Name**	**Address**	**Aff. Units**	**Very Low**	**Low**	**Moderate**	**Very Low**	**Low**	**Moderate**	**Population Served**	**Financing***
R	615 Chester Street/ Salvation Army	615 Chester Street	4					4		Families in Transition	HOME/ SHP
R	910 East Wilson Avenue	910 East Wilson Ave	2					2		Family	DB
R	Alma House	1123 Alma St.	1					1		Dev. disabled	RDA
R	Casa de la Amistad	6206 San Fernando Road	23				23			Dev. Disabled	
R	David Gogian House	1239 Alma St.	1					1		Dev. disabled	HOME / RDA
R	Euclid Villa	154 - 160 Euclid Ave.	7				7			Families in transition	HOME/TC
R	Gardens on Garfield	303 E. Garfield	29				21	8		Family	HOME/ RDA/TC
R	Glendale City Lights	3673 San Fernando Road	67				48	19		Family	HOME/ RDA/TC
R	Hamilton Court	Confidential	13				13			Families in transition	HOME/ RDA
R	Hamilton House	739 W. Glenoaks Blvd.	1					1		Dev. disabled	CDBG / HOME
R	Ivy Glen Apartments	113 N. Cedar St.	24				24			Phys./Dev disabled	RDA / HUD 811
R	Maple Park	711 E. Maple St.	24				24			Phys./Dev disabled	CDBG / HUD 811
R	Metro Loma Apartments	328 Mira Loma Ave	43				43			Family	HOME/ RDA/TC
R	Metropolitan City Lights	1760 Gardena Ave	64				64			Family	HOME/ RDA/TC
R	Orange Grove Apts.	700 E. Orange Grove Ave.	23				5	18		Family	HOME/TC
		FAMILY RENTAL TOTAL	***326***				***272***	***54***	***0***		

* DB = Density Bonus; RDA = Redevelopment Housing Set-Aside funds; TC = Tax Credits

TABLE 28 (cont'd)
Inventory of Affordable Rental Housing Units
with Occupancy and/or Affordability Restrictions

				Units Reserved for Seniors			Units Restricted by Income Only				
Project Type Owner/ Renter	Development Name	Address	Aff. Units	Very Low	Low	Moderate	Very Low	Low	Moderate	Population Served	Financing*
R	Casa de La Paloma	133 S. Kenwood St.	166	166						Seniors	CDBG / HUD 221(d)3 / RDA
R	Fairmont Apartments	700 Fairmont Ave.	38		6	32				Seniors	DB
R	The Gardens	333 E. Monterey Road	74	74						Seniors	RDA / HUD 202
R	Heritage Park	420 E. Harvard St.	51	16	35					Seniors	HOME / RDA/TC
R	Honolulu Manor Apartments	2500 Honolulu Ave.	22		13	9				Seniors	DB
R	Monte Vista Apartments	714 E. Elk Ave	10	4	6					Seniors	HOME / RDA/TC
R	Otto Gruber	143 S. Isabel St.	39	39						Seniors	HOME / HUD 202
R	Palmer House	555 E. Palmer Ave.	21	10	11					Seniors	RDA/TC
R	Park Paseo	123 S. Isabel St.	96	96						Seniors	CDBG / HUD 202
R	Silvercrest	323 W. Garfield Ave.	73		73					Seniors	RDA / CDBG / HUD 202
R	Twin Oaks Senior Apartments	2840 Honolulu Ave.	25		15	10				Seniors	DB
		SENIOR RENTAL TOTAL	***615***	***405***	***159***	***51***					
		TOTAL RENTAL	**941**	**405**	**159**	**51**	**272**	**54**	**0**		

* DB = Density Bonus; RDA = Redevelopment Housing Set-Aside funds; TC = Tax Credits

TABLE 29
Inventory of Affordable Ownership Housing Units with Occupancy and/or Affordability Restrictions

				Units Reserved for Seniors			Units Restricted by Income Only				
Project Type Owner/ Renter	Development Name	Address	Aff. Units	Very Low	Low	Moderate	Very Low	Low	Moderate	Population Served	Financing*
O	Doran Villas	423 W. Doran Street	13						13	Family	RDA
O	Elk Avenue Townhomes	415-417 E Elk Ave	4						4	Family	RDA
O	Habitat for Humanity – Allen	531 Allen Ave	4				4			Family	RDA
O	Habitat for Humanity – Gardena	1830 Gardena Ave	3					3		Family	HOME
O	Habitat for Humanity– Orange	1256 S. Orange Street	4					4		Family	HOME
O	Habitat for Humanity – Vine/Pacific	401, 405, 407, 411 S. Pacific Street	4					4		Family	RDA
O	Vine Street Walk	333-337 W. Vine Street	3						3	Family	RDA
O	Habitat for Humanity – Palmer	900, 902 E. Palmer St & 1201 Cottage Grove	3					3		Family	RDA
O	Habitat for Humanity – Kenwood	711 – 717 N. Kenwood Street	11					11		Family	HOME
		OWNER TOTAL	**49**				**4**	**25**	**20**		

* RDA = Redevelopment Housing Set-Aside funds

Units that may be Lost from the Assisted Housing Inventory

During the Consolidated Plan five-year period, City of Glendale affordability covenants will expire for only one affordable housing project. Although the City's covenants will no longer be enforceable, based on discussions with the non-profit owner, it is anticipated that the project will continue to use the facility to provide affordable housing. A list of affordable housing projects with their corresponding covenant expiration dates is provided in Table 30.

TABLE 30
Affordable Rental Housing Development Covenant Expiration Dates

Development Name	Address	Affordability Covenants Expiration Date
Alma House	1125 Alma St.	2013
Maple Park	621 - 711 E. Maple St.	2024
Park Paseo	123 S. Isabel St.	2024
David Gogian House	1239 Alma St.	2028
The Gardens	333 E. Monterey Road	2032
Ivy Glen Apartments	119 N. Cedar St.	2035
Silvercrest	311 W. Garfield Ave.	2038
Otto Gruber	143 S. Isabel St.	2039
Palmer House	555 E. Palmer Ave.	2046
Monte Vista Apartments	714 E. Elk Ave	2047
Euclid Villa	154 – 160 Euclid Ave.	2054
Orange Grove	700 E. Orange Grove Ave.	2055
Heritage Park	420 E. Harvard St.	2057
Metro City Lights	1760 Gardena Ave	2063
Metro Loma	328 Mira Loma St.	2064
Gardens on Garfield	307 E. Garfield St.	Not yet avail
Glendale City Lights	3673 San Fernando Rd	2066
Casa De La Amistad	6203 San Fernando Rd	2065
615 Chester Street	615 Chester St.	Not yet avail
Vassar City Lights	1814 Vassar Ave.	Not yet avail
904 East Wilson Avenue	904 East Wilson Avenue	In perpetuity
Fairmont Apartments	700 Fairmont Ave.	In perpetuity
Honolulu Manor Apartments	2500 Honolulu Ave.	In perpetuity
Twin Oaks Senior Apartments	2840 Honolulu Ave.	In perpetuity

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PART III. COMMUNITY NEEDS ASSESSMENT –

- **COMMUNITY DEVELOPMENT**
- **ECONOMIC DEVELOPMENT**
- **HOMELESS**
- **NON-HOMELESS PERSONS WITH SPECIAL NEEDS**
- **HOUSING**

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COMMUNITY NEEDS ASSESSMENT

This chapter provides an assessment of Glendale's community development, economic development, homeless, housing and non-homeless special needs. The needs are derived from a combination of direct community input and data analysis. Direct community input was obtained from 1,318 residents and 23 business and community agency stakeholders through community meetings and small discussion groups; interactive surveys at community events; a questionnaire mailed to 6,000 resident; an internet survey; and stakeholder focus group discussions. As part of the surveys that were completed by residents, the City received 152 written comments.

The Community Needs Survey (direct mail and internet) requested residents to indicate to indicate the priority level (high, medium, low priority or no such need) for specific programs within ten topic areas. The ten topics were: business/jobs; community facilities; crime and public safety; housing; infrastructure; neighborhood improvements; other social services; seniors; special needs/homeless; and youth.

Outreach also included extensive informal consultation with public and private agencies, City departments, social service agencies, agency coalitions, community residents, and neighboring cities. The Glendale Homeless Coalition, formed in 1995, comprised of 100 individuals representing over forty public/private agencies, community groups, residents and formerly homeless persons was included through the City's Continuum of Care application process. The City's CDBG Advisory Committee, comprised of five Glendale residents appointed annually by the City Council, was integrally involved in the CDBG program planning process and makes CDBG planning and funding recommendations to the City Council and Housing Authority.

The following sections focus on each area of need: community development, including social services, neighborhood and capital improvements; economic development; homeless; housing; and non-homeless special needs. The direct community input and pertinent data for each area of need is presented and provides a base for the program strategies.

COMMUNITY DEVELOPMENT NEEDS

Social Service Needs

At-risk youth programs, including gang and drug prevention programs, tutoring, after-school programs, youth employment services, and youth counseling were a high priority according to the Community Needs Survey. At the Public Hearing, residents listed the need for additional recreational space for youth and quality after school programs as a program priority. Residents also identified youth employment services, recreational programs, and park facilities for youth in the comment section of the Community Needs Survey. The results of the youth focus group meeting showed that gang and drug prevention, youth employment, and recreation and leisure programs for youth were high priorities.

Crime and public safety programs such as neighborhood watch and other crime prevention programs were identified by community residents as social service priorities in the Community Needs Survey (direct mail and internet responses). Community Needs Survey written responses centered on providing more gang and drug prevention programs, at-risk youth employment services, and youth recreation programs to prevent juvenile crime. Comments about crime and public safety at the Public Hearing focused on neighborhood watch programs and physical improvements, which deter crime such as a street lighting, graffiti removal, and code enforcement.

Employment programs including job counseling, job training, job search and placement assistance, basic skills training, and English as A Second Language (ESL) classes were a common social service priority identified by community residents at the Public Hearings and on the Community Needs Survey. Affordable child care for pre-school and school aged children for participants in job training programs was also identified as a priority social service need at the Public Hearing.

Senior services such as transportation, in-home services, and recreational and social service centers were identified as high priorities by community residents in the Community Needs Assessment Survey.

Neighborhood and Capital Improvement Needs

The Public Hearing participants ranked improved street lighting; graffiti removal; trash and debris abatement; parking; and traffic calming as the most important neighborhood improvement issues. The Community Needs Survey identified Trash/Debris Removal; Street, Curb and Sidewalk Improvements;

Street Lighting Improvements as high priority improvements needed in their neighborhoods. Written comments on the Community Needs Survey also centered around street improvements; speed bumps; street lights; traffic calming; graffiti removal; and trash and debris removal.

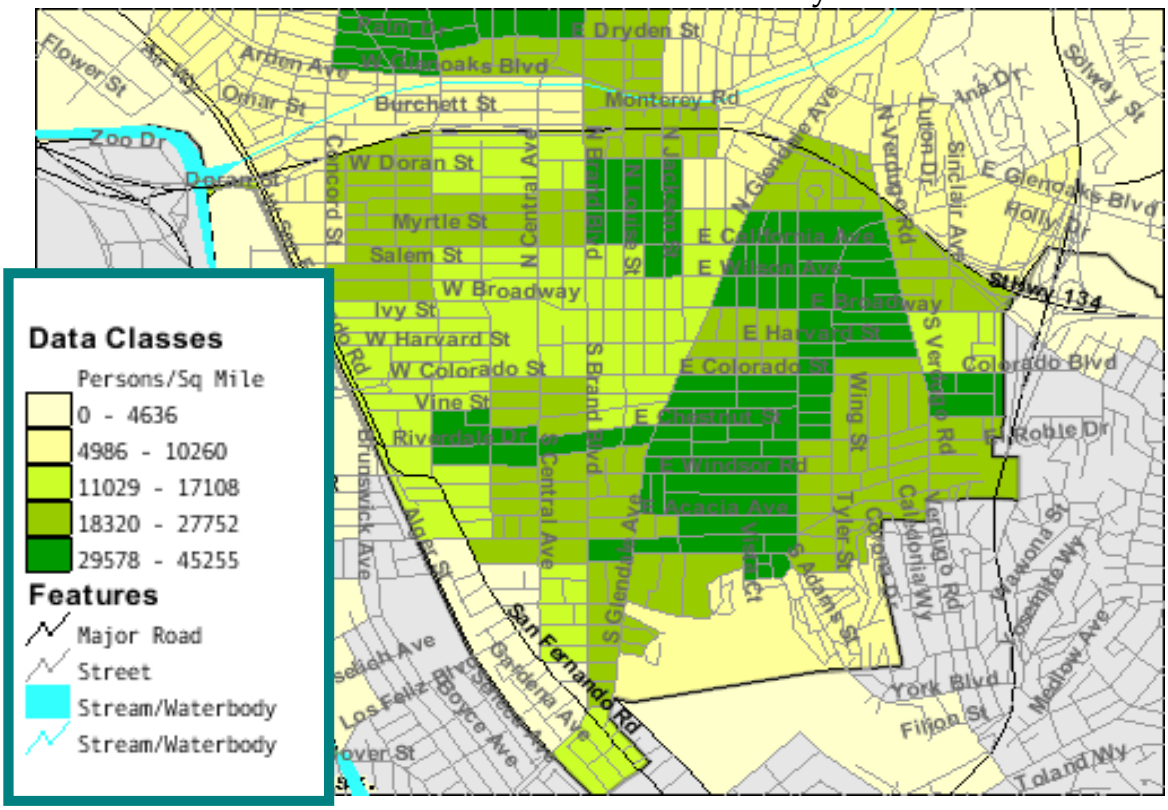
Park safety features such as lighting, and improved park recreational facilities were identified by Public Hearing participants as the most important community facility needs. The Community Needs Survey identified health centers, libraries, parks and recreational facilities, and youth centers as high priorities.

Public Parks: The Community Services and Parks Department conducted a survey in 2004 which compared other southern California cities' park standards with the City's standards. The survey found Glendale deficient of developed acres of parkland per 1,000 residents. Glendale averaged of 1.36 acres / 1,000 residents, less than the overall average of 2.18 acres / 1,000 residents in the other southern California cities surveyed and well below the national average of 10 acres / 1,000 persons. In 2004, Glendale had 35 public parks, totaling approximately 275 acres. For a city of over 200,000, Glendale fell 168 acres short of the average developed park acreage per resident as compared to the other cities. Since 2004 approximately one acre of park land has been added in southern Glendale, the Cedar mini-park and the Cerritos School park.

Public Recreational Facilities: In the same survey, the City measured amenities, such as public swimming pools and soccer/football fields per 100,000 residents and found that the City also lacked a sufficient number of pools (8 would meet the current need) and playing fields. This is due in part to the City having some of the most densely populated areas in the state (30,000 persons per square mile) and the high cost of land (approximately $3 million per acre). The City is currently designing a pool for Pacific Park in the southern Glendale area. Construction on this pool is anticipated to be completed in summer 2011.

Although 30 percent of Glendale's current population resides in the southern portion of the City, only 9 percent (25 acres) of the total 275 acres of developed parkland in the City are located in that area. This is also where most families with children and larger families live, as well as where the most multifamily residential development is located. Most residents in this area are apartment dwellers with virtually no private yards or recreational space. The following map displays the concentration of population in the area south of the 134 freeway, and the darker green areas show where the census block groups density is most concentrated.

MAP 1
Persons per Square Mile
Glendale South of the 134 Freeway



To respond to this parks deficiency, a 1995 Neighborhood Task Force report studied schoolyard area use that could be used to supplement park space. However, since that time, schoolyard area has been reduced to make way for new buildings and portable classrooms. The report suggested that the School District and the City collaborate to create school-parks, where schoolyards spill onto open park space. These school yard-parks could then shared between school and public use.

The Pacific Edison project is an excellent example of collaboration between the City and the Glendale Unified School District. The one block project included renovation of Pacific Park along with the development of a new school, library and community facility complex. The Pacific Edison complex is well used and an integral part of the neighborhood.

In addition to a parks deficiency, there are also very few multi-purpose, community centers in southern and western Glendale areas to serve all residents, and particularly the high concentration of low income and minority families in the area. Parks and schools have attempted to serve as community centers, but they are limited in their scope of reach. Social service agency facilities are also

limited to serve as community centers in that they are more specialized and offer single purpose services. Their physical locations are also scattered throughout the City.

With regard to libraries, the City's Library division reported that there are three branches, Central (south of Broadway), Pacific Park at the Pacific Community Center and Adams Square Library to service the entire population of southern Glendale, approximately 60,000 persons as of 2009. Only one small neighborhood library, Grandview Branch, is available for western Glendale. In addition, the Library's Bookmobile stops for one hour each week at Cerritos Elementary School and three 15-minute stops at retirement homes in Southern Glendale area.

ECONOMIC DEVELOPMENT NEEDS

The primary objective of the CDBG economic development program is to facilitate creation of jobs for low-income families; retain and expand the viability of business activity within the City's identified low-income target areas; meet the community development strategic direction of neighborhood development; provide commercial rehabilitation in low income areas to stimulate economic growth and assist businesses; and stimulate activities to bridge the gap between the skill level of low and moderate income persons and local jobs. Economic development programs in Glendale have traditionally been geared towards property and business owners who provide jobs, goods and services to the community and towards activities which bridge the gap between the skill level of low and moderate-income persons and local jobs.

As part of the Consolidated Plan, cities are required to perform an economic analysis and to develop an economic development strategy. The City has analyzed the assets of the local and regional economy in order to plan activities to capitalize on these community strengths to help meet the objectives cited above. As discussed in the Community Profile, some of those assets include the City's excellent public education system, a generally strong public safety environment, a centralized geographic location, good education and workforce credentials of a significant proportion of its population, and future job-creating development projects.

Economic Concerns in Glendale

As mentioned under social service needs, employment programs were considered a high priority at the Public Hearings and on the Community Needs Survey. The Workforce Investment Board's priorities for Glendale focus on the following industries: entertainment; healthcare; green jobs; and manufacturing. Entertainment is considered the biggest job producing industry in Glendale over the next 10 to 20 years. Healthcare represents the largest overall employer in Glendale with three hospitals (of 15 within the San Gabriel Valley). Green jobs are an important focus of the federal and state economic stimulus with an emphasis on smart grid jobs. Glendale's manufacturing sector is the third largest in the region. A discussion with City staff involved in economic development demonstrated a continuing commitment to use available resources to focus on these specific industries.

In addition, City staff recognizes the need to focus business assistance efforts within specific target areas. Economic development staff is currently involved in an in-depth effort providing technical assistance and outreach to businesses on

San Fernando Road. Another area of interest is businesses along Glendale Avenue south of Broadway. Due to the need to coordinate significant staff and financial resources to address another target area, during the next five years, a needs analysis will be conducted in order to identify the specific focus area.

While the City has much economic strength, it also faces many serious challenges, such as the major pockets of poverty in the City; the inability of many low-income immigrant residents to participate in the economic growth of the City; soaring real estate prices; an aging baby boomer population and workforce; and increasing traffic flow problems. The recent economic downturn has also added pressure to low- and moderate-income households.

Poverty

Between the 1990 and 2000 Census, the number of individuals living in poverty increased from 25,484 persons to 29,927 persons. This represents an increase from 14.4 percent to 15.5 percent of the total population. However, between 2000 and 2007, there has been a decrease from 15.5 percent to an estimated 13.9 percent.[4]

Additional data from the IRS in 2001 confirms the higher percentage of lower income residents in the City of Glendale. According to IRS individual income tax returns from 2001, 21.1 percent of Glendale filers had an adjusted gross income of under $10,000 per year. Of the total filers, approximately 24.6 percent had an adjusted gross income between $10,000 and $25,000 per year. In addition, 24.3 percent of filers had an adjusted gross income between $25,000 and $50,000 per year. In summary, 70 percent of Glendale income tax filers in 2001 had an adjusted gross income below $50,000 per year.

Poverty impacts the economy in a number of ways. First, Glendale's economy is highly dependent on consumer spending, and the amount of disposable income available for circulation within the local economy is depressed. Small businesses within poverty-impacted areas are particularly vulnerable to local downturns in consumer spending. Related to this, low income residents also generate smaller amounts of tax revenue, but often have a higher demand for tax supported-government and social services. This can negatively impact local government, an important sector of the local economy. Second, residents in poverty-impacted areas generally have lower skill and education levels, and this directly impacts the quality of the local workforce pool available to employers. Local businesses

[4] Since the 2007 data has a 2.9 margin of error, the 13.9 percent could be as low as 11 percent or as high as 16.8 percent. Therefore, the 2010 data will be extremely helpful to ascertain current poverty status.

expend more money for worker recruitment, and often their workforce productivity and profitability are directly impacted by the quality of workers they are able to hire. Finally, sections of poverty can have an impact on the City's ability to attract new businesses into its economy, and the types of businesses willing to move into the City are also affected.

Unemployment Rates and Labor Force Participation

As with poverty levels, high unemployment rates are confined to particular low-income census tracts in the City. While the City has a significant number of residents employed in higher pay industries and occupation, a strong percentage of residents are also employed in declining and lower paying industries and occupations. About 10.6 percent of residents are employed in the manufacturing sector. In addition, about 11.4 percent of residents work in the lower-wage retail sector.

As discussed in the Community Profile chapter, unemployment rates have ranged between 10.2 and 11.5 percent since June 2009. This is a significant increase from the average rate of 6.5 in 2008. In 2004, the unemployment rates for census tracts in southern Glendale ranged between 6.8 and 10.7 percent. Since these rates were higher than the City's overall 5.8 percent rate, it is likely that the unemployment rate in these census tracts is significantly higher than Glendale's overall rate of 10.1 in 2009.

High real estate costs

High housing costs can be a deterrent to business and employee attraction to the region. Housing prices and overcrowding issues are discussed in detail in the Housing Market Analysis section.

Large Self-Employed Population

Recent tax data indicates that there is a very high percentage of self-employed residents in Glendale, further complicating the City's ability to target services and resources to particular occupations, employers and industries. According to IRS individual income tax data from 2001 (from Schedule C form), 24 percent of Glendale tax filers report that they are self-employed, far above the 15.8 percent of filers overall in California. Self-reported survey data from the census indicated that 17 percent of Glendale residents are self-employed compared to the U.S. rate of 12 percent and the California rate of 14 percent. Glendale's high self-employment rate can be attributed to freelance entertainment workers living in the City and immigrant entrepreneurs.

Shrinking Future Labor Force

As with the U.S. population, Glendale faces an aging baby boomer population and future labor shortages. The City's middle age population (45-64 years) increased by 29.3 percent from 1990 to 2000. This group encompasses the portion of the labor force, which is hitting their peak earnings and career accomplishments prior to retirement. The median age of the City rose from 34.4 years to 37.5 years from 1990 to 2000. These statistics point to the possible need for local companies to recruit workers from outside the City in the future or to better develop the current and future local labor pool.

HOMELESS AND HOMELESS AT RISK NEEDS ASSESSMENT

Determining Housing Needs of the Homeless

The Federal Department of Housing and Urban Development, as part of its requirement for local jurisdictions to continue to substantiate and receive homeless continuum of care funding asks local jurisdictional applicants to conduct a "one night point-in-time" homeless count, at a minimum, every other year during the last 10 days of January. The homeless count is conducted under the auspices of the Glendale Homeless Coalition and in collaboration with Coalition members.

This year, the "City of Glendale's 2009 Point-In-Time Homeless Count" was conducted on Tuesday, January 27, 2009. Per HUD guidelines for purposes of a homeless count, persons were considered homeless if they were staying in places listed below and defined by HUD as follows:

1. Places not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings;
2. Emergency shelters; or
3. Transitional housing for homeless persons who originally came from the streets or an emergency shelter.

Table 31 provides a summary of the 2009 Point-In-Time Homeless Count. This information was the basis for the City's latest Continuum of Care application to HUD. Homeless persons enumerated on January 27, 2009 totaled 306. Of the 306 homeless persons, fifty- seven (57) were children under the age of eighteen. Also included in the 306 count were 48 persons who were homeless and now living in permanent supportive housing.

Based on the point-in-time count of homeless persons in the City of Glendale:

- 157 (51%) are individuals and 118 (39%) are persons in families; 31, (10%) refused to respond;
- 218 (71%) are adults;
- 57 (19%) are children;
- 21 (7%) were 65 years of age or older;
- 105(34%) of homeless adults meet the definition of chronically homeless;
- 84 (31%) identified with chronic mental health;
- 46(17%) had problems with chronic substance abuse;
- 28 (9%) suffered from both substance abuse and a serious mental illness (dual diagnosis);

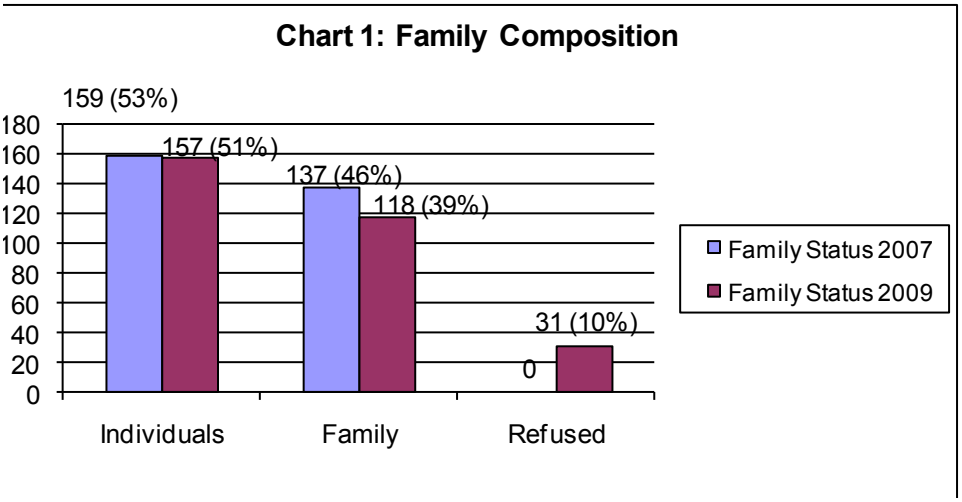
- 130, (46%) combined were either chronic substance abusers or seriously mentally ill,
- 30 (10%) women and children are homeless as a result of domestic violence;
- 13 (5%) men are homeless as a result of domestic violence;
- 10 (3%) homeless persons identified themselves as HIV positive or having been diagnosed with AIDS on the date of enumeration; and
- 22 (7%) homeless persons were veterans.

TABLE 31
Continuum of Care Homeless Population and Subpopulations Chart

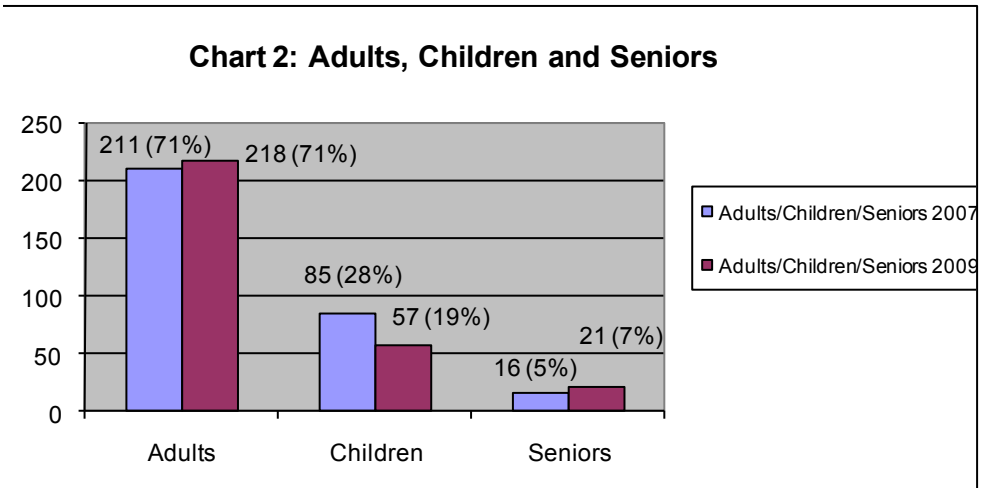
Part 1: Homeless Population	Sheltered		Un-sheltered	Total
	Emergency	Transitional		
1. Homeless Individuals	49	0	108	157
2. Homeless Families with Children	16	29	18	63
2a. Persons in Homeless Families with Children	37	52	60	149
Total (lines 1 + 2a)	86	52	168	306
Part 2: Homeless Subpopulations	Sheltered		Un-sheltered	Total
1. Chronically Homeless	6		99	105
2. Severely Mentally Ill	37			
3. Chronic Substance Abuse	15			
4. Veterans	22			
5. Persons with HIV/AIDS	1			
6. Victims of Domestic Violence	20			
7. Youth (Under 18 years of age)	0			

Source: Point In Time Enumerations conducted in January, 2009

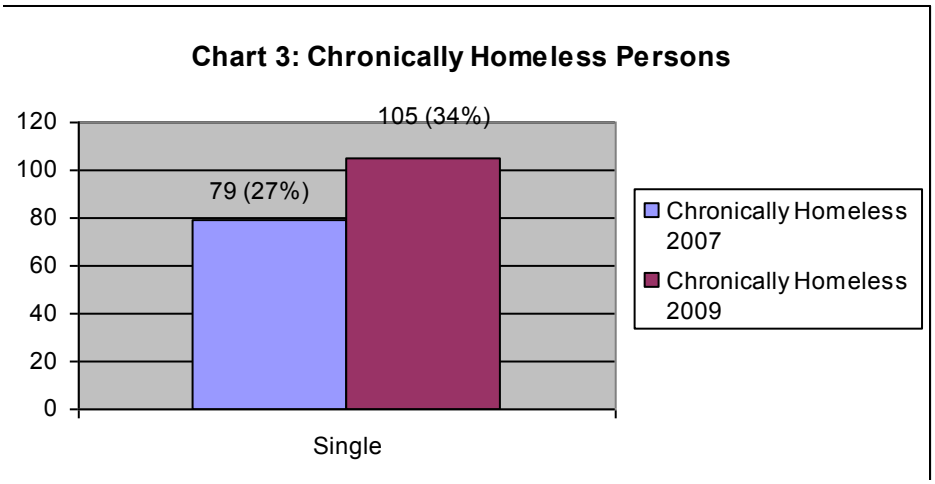
This section contains demographic information regarding key sub-populations in 2009 compared to the last homeless count in 2007.



The unaccompanied individual population remains virtually unchanged between 2007 and 2009. Persons in families are slightly less in 2009 vs. 2007.

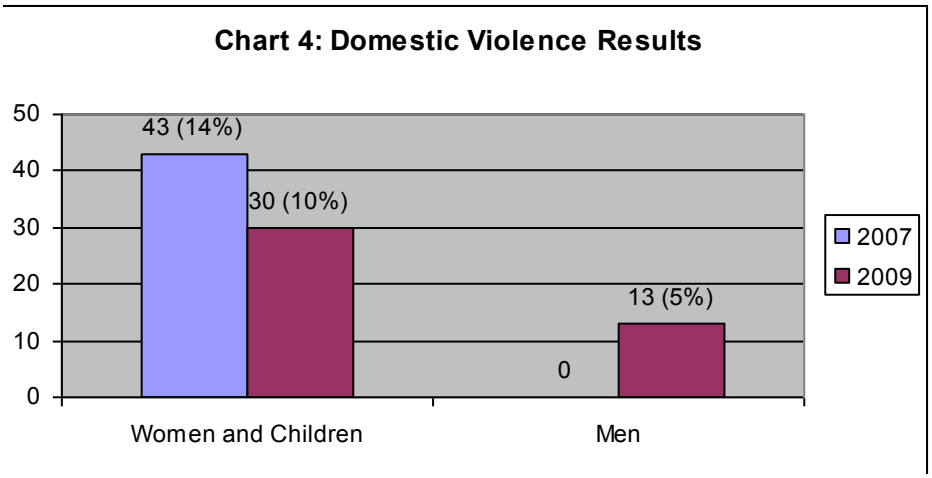


The percentage of children under the age of 18 decreased from 28% in 2007 to 19% in 2009, among the homeless population. Seniors 65 years or older increased by 2%.

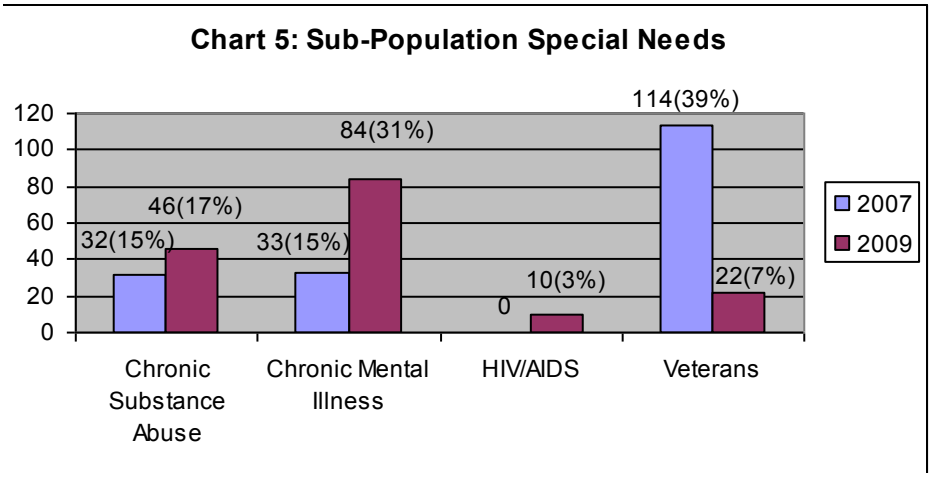


The total number of chronically homeless person increased from 27% in 2007 to 34% in 2009.

HUD defines Chronically Homeless as follows: an unaccompanied homeless individual with a disabling condition who has either been homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) year. A disabling condition is defined as a "diagnosable substance abuse disorder, serious mental illness or disability, including the co-occurrence of two or more of these conditions."



Since 2007, the number of women and children who are homeless as a result of Domestic Violence has decreased from 43 (14%) to 30 (10%). In 2009, 5% of men reported being homeless as a result of Domestic Violence compared to 0 in 2007.



Since 2007, the number of homeless clients who were identified as having Chronic Mental Illness doubled from 15% to 31% in 2009. In 2009, 10 individuals identified themselves as having HIV or been diagnosed with AIDS. In 2007, the number of homeless Veterans (114) was significantly higher than in 2009 (32).

Ethnic Background of the Homeless

In 2003-2004, the City analyzed the ethnicity of homeless by taking a sample of CDBG and ESG reports from the Project ACHIEVE Homeless Access Center, the Sunrise Village Emergency Shelter, and the Project Assist Hospital Discharge Program. A total of 1,620 persons were seen by all of these programs during FY 2003-04. Consistent with IDIS reporting, each program categorizes clients as either Hispanic or non-Hispanic and then categorizes clients among one of the ten IDIS determined racial categories. Among the 1,620 sample of homeless persons, 34 percent were Hispanic and 66 percent were non-Hispanic. In terms of the racial categories:

- 59 percent White
- 29 percent Black/African American
- 1 percent American Indian/Alaskan Native
- 1 percent Native Hawaiian/Other Pacific Islander
- 1 percent American Indian/Alaskan Native and White
- 1 percent Asian and White
- 2 percent Black/African American and White
- 1 percent American Indian/Alaskan Native and Black
- 4 percent report two or more races

In order to serve the needs of a diverse population, the sponsoring agencies for these programs have historically employed a multi-cultural and multi-lingual staff to communicate with their non-English speaking clientele.

Persons "At-Risk" of Homelessness

People "at-risk" of becoming homeless include very low-income individuals and families who, because of a number of barriers, are in immediate threat of becoming homeless. Among the risk factors to becoming homeless are poverty and high housing costs. In terms of sub-populations seniors, those who are released from correctional institutions, and emancipated youth from the foster care system are especially vulnerable to becoming homeless.

The number of households at-risk for homelessness is directly related to poverty rates. According to the Economic Roundtable's report *Homelessness in Los Angeles*, approximately one quarter of Los Angeles County residents with incomes below 50 percent of the poverty threshold become homeless at some point during the year. According to 2000 Census data, for the City of Glendale as a whole, the total number of persons below poverty level was 15.5 percent, an increase of approximately 1 percent from the 1990 Census. However, the poverty rates for southern Glendale are significantly higher. In zip codes 91204 and 91205, the poverty rates are at 23 percent and 25.6 percent respectively. Many of these persons are rent burdened and are at-risk of becoming homeless if a financial emergency or job loss occurs. Although public assistance benefits do provide some help for those in poverty, General Relief benefits are usually inadequate for a person to maintain housing. According to a separate report by the Economic Roundtable, over half of the individuals who receive General Relief experience homelessness.

Another indicator of those at-risk of homelessness is the number of households that pay a high percentage of their income for housing. Because the housing costs in Glendale are higher than many other Los Angeles communities, housing cost burden is a significant issue for Glendale households. Information on the number of households who are overburdened with housing costs is provided in the Housing Needs Assessment.

Glendale service providers reported that among the barriers facing the homeless at-risk population are underemployment or unemployment because of shifts in the local economy and a lack of viable job skills. Without the–appropriate skill development, low-income households are restricted to low paying jobs without opportunity for advancement. Furthermore, some individuals and families are unaware of, or ineligible for, the job training and employment assistance resources available in the community. Other prevalent issues among the

homeless at-risk population include lack of transportation and affordable childcare. These present difficulties in obtaining and sustaining employment. These issues are discussed in this report in greater detail in the Anti-Poverty Strategy.

NON-HOMELESS PERSONS WITH SPECIAL NEEDS

The following discusses needs for persons who are not homeless but require supportive housing, including the elderly, frail elderly, persons with disabilities, persons with alcohol or other drug addiction, persons with HIV/AIDS and their families.

Needs of the Elderly and Frail Elderly

Elderly Population

- According to the 2000 Census, there are an estimated 27,114 seniors (65+ years of age) living in the City of Glendale, representing 13.9 percent of the total population. This number represents an increase of 3,137 seniors since the 1990 Census.

- Glendale has a larger proportion of senior residents than Los Angeles County as a whole. The 2000 Census estimated that 9.7 percent of LA County residents were 65 or older. Nationwide, seniors accounted for 12 percent of the population in both the 1990 and 2000 Census.

Income

- According to the 2000 Comprehensive Housing Affordability Strategy (CHAS Data Book), approximately 55 percent of elderly households in Glendale were lower and moderate income (less than 80% of MFI) while almost 41 percent earned less than 50% of MFI.

- According to a report "We the People: Aging in the United States" released by the U.S. Census Bureau, among persons 85 years and older, 16.9 percent of women and 9.6 percent of men lived in poverty.

Housing

- According to the CHAS Data Book, in Glendale elderly renter-households had the highest proportion of low and moderate-income households. Among all elderly renter households, almost 77 percent were lower and moderate income, while 34 percent of elderly renters fell within the extremely low-income category.

- According to the 2000 Census, 28 percent of all seniors live alone, as compared with 10 percent of the overall population.

Health

- According to the 2000 Census, approximately 42 percent of seniors 65 years and older had a disability, including 14 percent with sensory, 29 percent with physical, and 11 percent with mental disabilities. Ten percent of seniors had difficulty with self-care, and 20 percent had difficulty with going outside the home.

- Fifteen to twenty-five percent of older adults in the United States suffer from symptoms of mental illness; and the incidence of psychopathology is 2.5 times greater in those over 65 than those aged 45-64.

- Adults aged 65 and older have the highest suicide rate in the United States.

- According to a 2005 report by the US Department of Agriculture, Economic Research Service, poor seniors are more likely to have severely reduced bone density than higher income seniors.

These characteristics indicate a need for smaller, lower cost housing units with easy access to transportation and health care facilities. An adequate number of housing units need to be adapted to accommodate the needs of the disabled or mobility-impaired seniors. Supportive services targeted for seniors must address the special needs of older adults' physical and mental health needs.

Existing Elderly Facilities and Supportive Services

The City of Glendale has assisted ten housing projects specifically targeted for the elderly. Combined, these projects represent 577 units for very low, low, and moderate-income seniors.

Senior Housing Projects

1. Casa de la Paloma

Developer: Southern California Presbyterian Homes
Total Units: 166 one-bedroom rental units
Target Population: Very Low Income Seniors
Assistance Type: HUD 221(d)3 and CDBG
Year Built: 1978 (rehabilitated with City assistance in 1994)
Affordability Period: 15 years from date of rehabilitation loan

2. Park Paseo

Developer: Southern California Presbyterian Homes
Total Units: 96 one-bedroom rental units, 23 efficiency rental units

Target Population: Very Low Income Seniors
Assistance Type: HUD 202 and CDBG
Year Built: 1984
Affordability Period: 40 years

3. ***Palmer House***
Developer: Southern California Presbyterian Homes
Total Units: 22 one-bedroom units
Target Population: Low Income Seniors
Assistance Type: Redevelopment Set-Aside funds and Low Income Housing Tax Credits
Year Built: 1992
Affordability Period: 55 years

4. ***The Gardens***
Developer: Southern California Presbyterian Homes
Total Units: 74 one-bedroom rental units
Target Population: Low Income Seniors
Assistance Type: Redevelopment Set-Aside funds and HUD 202
Year Built: 1994
Affordability Period: 40 years

5. ***Monte Vista Apartments***
Developer: Monte Vista Housing Associates
Total Units: 9 one-bedroom rental units, 1 three-bedroom rental unit
Target Population: Low Income Seniors
Assistance Type: Redevelopment Set-Aside funds and Low Income Housing Tax Credits
Year Built: 1992
Affordability Period: 55 years

6. ***Otto Gruber Housing***
Developer: Southern California Presbyterian Homes
Total Units: 39 one-bedroom rental units
Target Population: Very Low Income Seniors
Assistance Type: HUD 202 and HOME
Year Built: 2000
Affordability Period: 40 years

7. ***Silvercrest***
Developer: The Salvation Army
Total Units: 73 one-bedroom rental units
Target Population: Very Low Income Seniors

Assistance Type: Redevelopment Set-Aside funds and CDBG
Year Built: 2000
Affordability Period: 40 years

8. Heritage Park

Developer: Glendale Heritage Park, L.P.
Total Units: 46 one-bedroom rental units, 5 two-bedroom rental units
Target Population: Very Low and Low Income Seniors
Assistance Type: Redevelopment Set-Aside funds, HOME, and Low Income Housing Tax Credits
Year Built: 2004
Affordability Period: 55 years

9. Honolulu Manor

Developer: 2500 Honolulu, Limited
Total Units: 22 one-bedroom rental units
Target Population: Low and Moderate Income Seniors
Assistance Type: Density Bonus
Year Built: 1988
Affordability Period: In perpetuity

10. Twin Oaks Senior Apartments

Developer: 2800 Honolulu, Limited
Total Units: 25 one-bedroom rental units
Target Population: Low and Moderate Income Seniors
Assistance Type: Density Bonus
Year Built: 1988
Affordability Period: In perpetuity

Board and Care Facilities

In addition to assisted housing, there are 15 board and care facilities in Glendale that provide 1,353 beds of additional housing opportunities for the elderly. Approximately half are designed to accommodate non-ambulatory persons.

Housing Choice Vouchers (Section 8)

Of current Section 8 Program recipients, including portable vouchers administered by Glendale, approximately 65 percent are elderly.

City Housing Rehabilitation Program

The City offers grants and loans for the rehabilitation of rental or owner occupied units for very low, low, and moderate-income elderly and disabled residents.

In-Home Supportive Services Program

The State's In-Home Supportive Services (IHSS) program serves seniors 65 and older and the disabled population. Eligibility workers from IHSS assess each client's need for services and their eligibility for the IHSS program. Clients must then hire someone to perform authorized tasks such as personal care, cleaning, cooking, shopping, transportation, and protective supervision. The service providers' payments are issued by the State. The IHSS program does allow the hiring of a relative or friend to serve as the personal care giver for the elder or disabled person.

Salvation Army – Meals on Wheels Program

The Salvation Army operates a meals-on-wheels program serves people who are homebound due to permanent or temporary physical disability. The program serves approximately 80 persons per weekday and 18,000 meals annually to seniors in the City of Glendale and the surrounding communities of La Crescenta, La Canada, and Montrose. There is a minimal charge for meals, but scholarships are available to very low-income persons.

Greater Glendale Council on Aging

The Greater Glendale Council on Aging is a collaborative network of individual seniors and senior service agencies that advocate for community initiatives and provide access to information and resources, which promote the quality of life for seniors. Referrals are provided for counseling, housing, health care, transportation, and employment. Information is distributed to seniors through monthly meetings, newsletters, a web site and an annual senior fair in partnership with local service providers.

Senior Care Management Program

The City's operates supportive services and meal programs for seniors living in Glendale, La Crescenta and Montrose. In addition to providing a congregate meals program at three locations (Adult Recreation Center, Pacific Community Center and Sparr Heights Community Center), the Community Services and Parks Department also operates a home-delivered frozen meal program. Supportive services include referrals for housing programs, care management, health services, transportation, legal and tax assistance, utility assistance, and recreation and socialization activities. A CDBG-funded senior care management program is based at the Adult Recreation Center (ARC) and serves 250 unduplicated seniors who are at risk for premature institutionalization into convalescent homes or hospitals. By providing and coordinating services such as In Home Supportive Services and the home-delivered frozen meal program to home bound seniors, clients are enabled to stay in their home for as long as possible. The ARC also manages a telephone reassurance program (Caring Caller Program) for seniors and disabled adults living in the greater Glendale area. The program uses volunteers from the Glendale Police Department.

Multi-Purpose Senior Services Program
Seniors who are 65 years and older and are at risk of premature nursing home placement may also qualify for services to help them remain at home through the Multi-Purpose Senior Services Program (MSSP). Under MSSP, qualified seniors receive an in-home assessment to determine what services are needed to help them manage better at home. Services include home modifications, home health services, medical equipment, mental health counseling, and home-delivered hot meals. The program is managed by the California Department of Aging and funded through Medi-Cal. Two agencies serve the Glendale area with MSSP, depending on the zip code, the Partners in Care Foundation, which has an office in Burbank and Senior Care Network in Pasadena.

Verdugo Psychiatric Program
Verdugo Hills Hospital provides specialized psychiatric services to older adults through their Stepping Stones gero-psychiatric program treating both psychiatric and physical health problems. According to the hospital, 80 percent of gero-psychiatric patients require medical care in addition to psychiatric care. Recently, Glendale Memorial Medical Center also opened a new gero-psychiatric unit, which has 29 slots to serve adults 50 years and older.

Residential Care Facilities for the Elderly Program
Seniors who are no longer able to live independently may move into Residential Care Facilities for the Elderly (RCFE). RCFEs provide care, supervision and assistance with activities of daily living, such as bathing and grooming. They may also provide incidental medical services under special care plans. The facilities provide services to persons 60 years of age and over and persons under 60 with compatible needs. RCFEs may also be known as assisted living facilities, retirement homes and board and care homes. The California Department of Social Services indicates that in Glendale, there are a total of 13 licensed RCFEs, with a total of 1,342 slots.

Needs of Persons with Disabilities

Physically Disabled

A physical disability is a physical condition that affects the ability of a person to function independently. Physical disabilities can hinder access to housing units of conventional design, as well as limit the ability of the disabled person to earn adequate income.

According to the 2000 Census, nationwide 18.6 percent of the population was estimated to have a disability, including sensory (2.3 percent), physical (6.2

percent), and mental (3.8 percent). The proportion of individuals with disabilities increases with age. In Glendale, the total number of persons with a disability was estimated at 42,481, which is 21.7 percent of the population. The higher percentage of persons with a disability in Glendale can partly be attributed to Glendale's higher proportion of persons aged 65 year and older (13.9 percent), as compared to the nation (12.4 percent).

Census 2000 also showed that people between the ages of 16 and 64 were less likely to be employed if they were disabled. While 79.9 percent of working-age men without a disability were employed, only 60.1 percent of those with a disability worked. Among women of working age, the respective employment rates were 67.3 percent and 51.4 percent. Disability status also impacts poverty. In 2000, 17.6 percent of people with disabilities were at or below poverty level, which is a higher percentage than those without disabilities (10.6 percent).

Housing for physically disabled persons must not only be affordable but also contain special construction features to be accessible. The location of housing for disabled persons is also important because many such households need access to a variety of social services and to specialized handicapped access facilities. Housing opportunities for individuals with disabilities can be addressed through the provision of affordable, barrier-free housing. Rehabilitation assistance is currently targeted toward disabled renters and homeowners for unit modifications to improve accessibility.

Severely Mentally Ill

In the United States, mental disorders are present in about 21 percent of adults and children (DHHS, 1999). According to a Community Health Information Survey (UCLA Center for Health Policy Research, 2001), 15.4 percent of surveyed adults living in Los Angeles County reported that within the past 12 month period they had needed help for emotional or mental health problems. Other research also indicates a high prevalence of mental health issues. According to a 1999 report on mental illness by the U.S. Surgeon General, it was estimated that 20 percent of adults would experience a mental disorder in the course of a year. Between 2 - 7 percent of adult Americans are estimated to experience a mental disorder so severe that it could hamper their ability to work, perform daily tasks or live independently (National Institute of Mental Health, 1989 and U.S. Department of Health and Human Services). Unfortunately, it is estimated that as many as 40 percent of those with mental health problems do not receive treatment. The Surgeon General's report estimated that 10 percent of the U.S. population uses mental health services in the health sector, with another 5 percent using services from social services, religious and self-help organizations.

According to the California Department of Mental Health, using Census 2000 data, 6.78 percent of Los Angeles County residents suffer from a serious emotional disturbance (SED) or a serious mental illness (SMI). The prevalence of SED and SMI is higher among households living below 200 percent of the poverty line. These households have a prevalence of SED and SMI at a rate of 8.77 percent. Applying these percentages (6.78 percent) to Glendale's population indicates that potentially 13,219 residents suffer from SED or SMI.

Developmentally Disabled

The 1994 National Health Interview Survey estimated that 1.55 percent of the U.S. population has mental retardation or developmental disabilities. The State of California Department of Developmental Services (DDS) estimates that they serve over 225,000 persons (approximately 0.66 percent of the state's population) at its 21 regional centers. The local regional center, Frank D. Lanterman Regional Center, serving Glendale, Hollywood-Wilshire, Central Los Angles, Pasadena, Burbank, La Canada Flintridge, and La Crescenta, assists over 7,000 children and adults. Lanterman clients are persons with development disabilities, who have or are at risk for a developmental delay or disability, and who are at high-risk of parenting an infant with a disability. A developmental disability is defined by state law as: a disability that begins before the person's 18th birthday; continues or can be expected to continue indefinitely; presents a significant disability in three or more functional life areas and is due to autism, cerebral palsy, epilepsy, mental retardation, and/or disabling conditions related to or requiring treatment similar to mental retardation.

The last published quarterly client characteristic report, dated January 7, 2008 for the period ending December 2007, indicated that a total of 6,099 clients were served at the Lanterman Regional Center. At least 76.49 percent lived at their parent's or guardian's home; 12 percent were in community care; 6 percent lived independently; 2.6 percent in intermediate care facilities; 1.6 percent in a developmental center; and 1.5 percent in a skilled nursing facility or other situation. Closure of the Los Angeles area developmental center, Lanterman Developmental Center in Pomona, is being seriously considered. This Developmental Center is one of the oldest in the State and has the smallest population (398 residents) of the four developmental centers. Of the 398 residents, approximately 100 are served by the Lanterman Regional Center, indicating that the closure, anticipated within two years, will have some impact on the need for specialized housing in the regional area over the next five years.

Of the 6,099 clients served at the Regional Center in 2007, approximately 66 percent were male, and 47 percent were 17 years and younger. Hispanics were the largest ethnic group served at 40.56 percent; Whites were next at 29.02

percent. Of other ethnicities, Other (multiple or unidentified ethnicity) was 10.21 percent; Asian and Filipino 12.02 percent; and Black/African American 7.89 percent.

When comparing data from the December 2007 quarter to the December 2004 quarter, the number of clients increased by almost 500. The percentage of males; percentage of clients 17 years and younger; and percentage of Hispanic clients also increased slightly Clients living with parent(s) and/or guardian(s) also increased, from 73.68 percent to 76.49 percent.

Existing Facilities and Support Services for Persons with Disabilities

Ability First

Glendale has assisted housing projects that provide supportive housing opportunities for low-income disabled persons in the City. Ability First (formerly known as Crippled Children's Society) operates two independent living apartment buildings in Glendale. Maple Park Apartments has 12 one-bedroom units for physically disabled adults, 12 one-bedroom units for developmentally disabled adults (age 18 to 62), and one two-bedroom unit for an on-site resident manager. An off-site case manager monitors progress of residents and provides services as needed. The apartments are for very low-income adults and are subsidized under the HUD Section 811 program. Ivy Glen Apartments is another Ability First facility and consists of 21 one-bedroom and 4 two-bedroom apartments for very low-income persons with developmental and/or physical disabilities. The units and common living areas are fully handicapped accessible for non-ambulatory disabled persons.

Ability First also has a community center in Pasadena providing after school programs for disabled school age children. An adult workshop enables disabled adults to do assembly work and earn income. The organization also offers camping programs in the San Bernardino Mountains and in Malibu. All programs are open to Glendale residents who qualify.

Glendale Association for the Retarded

The Glendale Association for the Retarded (GAR) operates three assisted group homes for developmentally disabled adults through Hamilton House (11 beds), Alma House (6 beds), and David Gogian House (6 beds). In addition to housing, residents receive supportive services to enable them to integrate into the community. The City provided funding for the acquisition and rehabilitation of the three housing facilities.

GAR also provides counseling services to work with clients and families on goals and behavior problems. Since 1967, GAR has operated a “Self-Aid Workshop”,

recently renamed to GAR Services, which provides work training in the areas of newspaper recycling, assembly, mailings, and packaging. Contract work is procured from the business community and completed at a workshop site. In 2004, GAR hired a job developer to assist GAR clients obtaining employment in the community. Because a significant portion of GAR clients are from immigrant families, and therefore have limited English skills, in 2005, GAR plans to begin providing English as Second Language (ESL) classes to their clients. GAR also provides referral information on other agencies and resources in the area of mental retardation, cerebral palsy, and epilepsy. GAR serves about 65 adults with the primary disability of mental retardation, and secondary disabilities of cerebral palsy and epilepsy.

United Cerebral Palsy of Los Angeles, Ventura, and Santa Barbara Counties (UCP)

UCP operates a new independent living apartment building in Glendale that opened in 2010. Casa De La Amistad has 18 one-bedroom units for developmentally disabled adults, and 6 two-bedroom units, including a unit for an on-site resident manager. The apartments are for very low-income adults and are subsidized under the HUD Section 811 program.

The building is equipped with key features that support independent living for the developmentally disabled tenants, such as remote controlled doors, individual apartment unit emergency assistance lights, wide walk-ways, and wheelchair accessible configurations for both the kitchen and bathroom. UCP provides counselors from its Community Support Living Program for each resident.

United Cerebral Palsy is one of the largest direct-care service providers and advocates for persons with disabilities in California, with the goal of helping individuals with Cerebral Palsy, Autism, Down syndrome, and other developmental disabilities maximize their own potential to live full and dignified lives. Over 1,000 individuals are served daily, through UCP's housing services, physical and occupational therapy, support groups, education, job placement, and supported living assistance.

Adult Residential Facilities

According to the State Department of Social Services, in Glendale, there are 10 licensed Adult Residential Facilities (ARF) in Glendale, which provide a total of 62 slots. ARF facilities provide 24-hour non-medical care for adults ages 18 through 59, who are unable to provide for their own daily needs. Adults may be physically handicapped, developmentally disabled, and/or mentally disabled. Many residents with chronic mental illness participate in other day treatment programs offered through mental health centers.

City Rehabilitation Grants and Loans
The housing needs of disabled persons are compounded by design and location requirements which are often more costly. Special needs of households with wheelchair-bound or semi-ambulatory individuals, for example, may require ramps, holding bars, special bathroom design, wider doorways, lower cabinets, and elevators. The City of Glendale offers grants and loans for the rehabilitation of rental and owner occupied units to meet the needs of low and moderate income disabled and elderly persons.

Verdugo Mental Health
Verdugo Mental Health (VMH) provides outpatient psychological services and counseling to adults and families in a multicultural/multilingual setting. The **Adult Outpatient Program** is operated under contract with the Los Angeles Department of Mental Health. The program's focus is on medication support and rehabilitation services for adults with serious and chronic mental illness. Services include: medication evaluation and monitoring; individual, group, and family therapy; consumer and family education; and other services aimed at increasing community functioning and effective life management. Through the **Positive Directions Program**, a community counseling program, VMH provides affordable counseling and support services for low-income persons who may otherwise not seek help due to lack of financial resources. Services include individual, couples, family and group counseling as well as self-help (12-step) and sober social activities.

VMH-The Glen Roberts Child Study Center
The Glen Roberts Child Study Center, a program of VMH, treats children, adolescents, and families in child-oriented setting. The program services children with a range of issues including: serious mental illness, abuse / neglect, domestic violence, and school related issues. Services include individual, family, and group therapy, psychological assessment and testing, and medication support. Ninety percent of the children and families treated are at or below poverty level.

VMH School Based/Campus Program
VMH's School Based/Campus programs provide services to students on their school campus. Therapists work with the Glendale Unified School District to administer a therapeutic educational program for severely and emotionally disturbed adolescents referred to the program. These programs serve students who require mental health services to fulfill their academic requirements. Academic assistance, therapy and psychiatric services help those students achieve a level of functioning that allows them to perform satisfactorily in the school setting. Specialized populations include pregnant teens, at-risk youth, and severely emotionally disturbed youth.

Glendale Unified School District
The Glendale Unified School District also provides services to disabled students through the special education program. Students between the ages of 3 and 22 with one or more of a federally defined disabled condition that adversely affects educational performance are enrolled in the special education program.

Frank D. Lanterman Regional Center
The Frank D. Lanterman Regional Center in Los Angeles serves developmentally disabled individuals and their families in Glendale and surrounding communities. The Center provides case management, support groups for families and consumers, education, and training. The Center also provides funding for other support services deemed necessary on a case-by-case basis (i.e. physical therapy, speech therapy). The Lanterman Center currently serves 6,000 people, and most services are free of charge regardless of age or income.

In-Home Supportive Services Program
The IHSS program, which is discussed in detail under services for seniors, is also available to disabled persons to allow them to remain safely in their own homes rather than an institution.

Needs of Persons with Alcohol and Other Drug Abuse

Alcohol/other drug abuse (AODA) is defined as excessive and impairing use of alcohol or other drugs, including addiction. The Department of Health and Human Services Substance Abuse and Mental Health Administration released a report on a 2003 National Survey on Drug Use and Health. According to the survey, approximately 21.6 million persons aged 12 and older (9.1 percent of the population) were classified with substance dependence or abuse. Of these, 3.1 million were classified with dependence on or abuse of both alcohol and illicit drugs, 3.8 million were dependent on or abused illicit drugs but not alcohol, and 14.8 million were dependent on or abused alcohol but not illicit drugs. Of the 6.8 million persons classified with dependence on or abuse of illicit drugs, 4.2 million were dependent on or abused marijuana, 1.5 million were dependent on or abused cocaine, and 1.4 million were dependent on or abused pain relievers. Between 2002 and 2003, there was no change in the number of persons with substance dependence or abuse (22 million in 2002 and 21.6 million in 2003).

The survey also found that, nation-wide, 8.2 percent of the population aged 12 and older had used an illicit drug in the month prior to the survey interview. The types of drugs with the highest prevalence among the population were marijuana (6.2 percent), cocaine (0.4 percent), and heroin (0.1 percent). According to the report, males were almost twice as likely to be classified with

substance abuse dependence or abuse as females (12.2 percent versus 6.2 percent).

Using the nationwide percentages from the above report, staff estimates that potentially over 12,000 persons in Glendale may use illicit drugs. Because of the high proportion of drug users who are employed, education and services based in the workplace may be effective in reaching that population and preventing illicit drug use from contributing to unemployment or homelessness. For others, recovery and supportive living environments may be necessary to reestablish sobriety as well as stable employment and housing tenure. Public education and early intervention programs may prevent those who are currently abusing alcohol from becoming dependent.

Existing Facilities and Support Services for Persons with Substance Abuse Dependence

Positive Directions of the Verdugo Mental Health Center
Positive Directions of the Verdugo Mental Health Center provides a full range of low-cost services including individual, couples, family and group counseling as well as self-help (12-step) and sober social activities. Positive Directions is also a Proposition 36 provider, offering services to court mandated substance abuse offenders. A 20-week drug diversion program is also available for those court ordered to attend.

Windsor Club
Additional 12-step meetings are provided at the Windsor Club in Glendale, as well as at Catholic Charities Glendale Community Center. Windsor Club is open seven days a week and has meetings in English and Armenian. Catholic Charities provides 12-step meetings in Spanish.

Alpha Recovery Center
Glendale Memorial Hospital offers a day treatment program through their Alpha Recovery center. The 30-day program serves approximately 10 persons per day with psychotherapy and chemical dependency treatment. Glendale Adventist Medical Center also provides a day treatment program that treats persons with a dual diagnosis, substance abuse and mental health issues.

Residential rehabilitation programs are available in nearby communities and provide housing and on-site treatment for 6-12 months. Inpatient recovery programs are offered by Impact House and The Salvation Army in Pasadena, Cry Help in North Hollywood, and Dee Dee Hirsh in Pacoima. L.A. Family Housing in North Hollywood offers a sobering station, which can be used by clients prior to entry into residential programs that require sobriety.

Other agencies that serve Glendale residents are People in Progress, the Tarzana Treatment Center, and Bridge Focus. People in Progress in Sun Valley provides three to six months of alcohol and drug abuse treatment rehabilitation as well as a drop in center. Tarzana Treatment Center in Reseda provides services for the region including detoxification, residential rehabilitation, sober living, dual diagnosis, and outpatient services. Bridge Focus functions as a gateway agency for the Los Angeles County detoxification hospital beds and makes alcohol and drug awareness presentations. It also operates a youth center in Tujunga.

Needs of People with HIV Infection and AIDS

This special needs group is the most difficult to quantify. Issues such as reportability and potential discrimination limit the known information about the population. Anecdotal information from service providers suggests that the number of cases is underreported, especially among those who are undocumented, for fear of deportation. In addition, many individuals are not aware that they have contracted the virus. Data from the National Center for HIV, STD and TB Prevention indicates that between 21 percent and 29 percent of persons who are HIV positive are not aware that they are infected.

According to the Los Angeles County Department of Health Services, 1,233 HIV/AIDS cumulative cases were reported for Glendale and 56,091 cases for all of Los Angeles County from 1982 through December 31, 2009. Among the County population diagnosed with AIDS, 44 percent are White, 33 percent are Hispanic, 20 percent are African American, and 3 percent are composed of other racial/ethnic groups and unknown racial/ethnic groups.

The County's fatality/morbidity rate is approximately 56 percent; and has significantly decreased since 1997. When applied to the Glendale population, this translates into an estimated 542 Glendale residents currently alive and living with AIDS. The City of Glendale has no housing at this time to exclusively serve persons with HIV/AIDS, however, a number of local agencies within Los Angeles County administer Housing Opportunities for People With AIDS (HOPWA) tenant based rental assistance vouchers.

According to Los Angeles County records, most Glendale and County residents who have been diagnosed with AIDS were reported between 1990 and 1995. Since that period, the number of new AIDS cases has been steadily declining, with only 8 new cases reported in Glendale in 2009. According to the County, the gradual decline in new AIDS cases in indicative of an overall trend throughout the country. Over the past several years, better prevention and

outreach coupled with new drugs and better treatment has reduced the spread of HIV and prevented many of those currently living with HIV developing AIDS.

The National Center for HIV, STD and TB Prevention estimates that nationwide in 2006, between 1,056,400 and 1,156,400 persons were HIV positive, including between 232,700 persons (21%) who did not know they were infected (a decrease from 25% in 2003). The prevalence of persons with HIV is highest among men of all races, African Americans and Hispanics/Latinos. The metropolitan statistical areas with the highest number of reported AIDS cases in 2007 were New York City, Los Angeles, Miami, Washington D.C., and Philadelphia. Of people living with HIV in 2006, 70 percent were between the ages of 25 and 49 years; 25 percent were age 50 and older; and 5 percent were between the ages of 13 and 24 years.

Existing Facilities and Support Services for Persons with AIDS

AIDS Project Los Angeles

AIDS Project Los Angeles is the largest provider of comprehensive support services for persons with AIDS in Los Angeles County. A wide array of services are offered, including on-going case management, client services for immediate referrals, home health care, nutritional information including free groceries, psychological counseling and support services, legal services including discrimination response, education and training, and transportation services. Services are provided free of charge, although depending on the source of program funding, applicants may be required to meet state or federal income eligibility requirements.

The AIDS Service Center located in Pasadena also offers support services to adults and children with HIV and AIDS residing in Los Angeles County. The Center provides case management, educational outreach, rental assistance referral, mental health services, public benefits counseling, legal services, food services, home health, and transportation assistance for its clients. Limited medical services are provided by a nurse on-site. The Center provides approximately 1,700 units of service on a monthly basis. Of the 1,700 service units, approximately 8 percent are provided to Glendale residents.

Tarzana Treatment Center

In addition to medical, substance abuse, and mental health services, the Tarzana Treatment Center in Reseda has services for adults infected by AIDS /HIV. Case management and medical services are provided on site or through home visits. Clients are provided with referrals for medications. The Tarzana Treatment Center currently has 120 adults enrolled in their AIDS/HIV program.

Glendale Memorial, Verdugo Hills, and Glendale Adventist Hospitals
The three primary hospitals in Glendale - Glendale Memorial, Verdugo Hills, and Glendale Adventist - each have referral services for AIDS and HIV patients. In addition to AIDS Project Los Angeles and AIDS Service Center of Pasadena, patients with in-home health care needs are referred to VNA Care in Glendale. This team of nurses provides counseling, home health care, personal care, and spiritual and bereavement counseling.

Persons Released from Mental and Physical Health Institutions

In 2002, the City and the Glendale Homeless Coalition developed a discharge planning strategy. Information about homeless services is provided to all homeless persons upon discharge from Glendale Adventist Medical Center, Glendale Memorial Hospital, Verdugo Hills Hospital, and Verdugo Mental Health Center. If the person agrees, the street outreach team meets with the person and establishes follow-up steps. The City and the Coalition are continually evaluating the existing discharge planning, particularly as available services and programs change.

Glendale Adventist Medical Center

The Glendale Adventist Medical Center has a motel voucher program for homeless patients discharged from the hospital. The program provides for clothing, food, transportation and a short stay in a local motel. Clients are then referred to the PATH Achieve Access Center for follow-up. This program assists approximately 80 persons annually.

PATH Achieve Access Center

The PATH Achieve Access Center can provide homeless persons returning from mental and physical health institutions with an entry-point into Glendale's continuum of care and ensure that they receive adequate and timely casework. The PATH Achieve Homeless Access Center also provides information and referral to off-site services. Clients have been successful in using the Center to access case management, veteran's services, shelter, public assistance, health care, psychological services, and employment counseling and housing referral.

HOUSING NEEDS

The 2000 U.S. Census data indicates that 71,783 households reside in Glendale, and over half (55.5 percent) report experiencing some level of housing problems (i.e. overburdened with housing costs, severe cost burden, overcrowding, and substandard housing conditions). This Housing Needs Assessment summarizes Glendale's most significant housing needs for extremely low, very low, and low-income resident households, who comprise approximately 40 percent of Glendale's overall population. It also addresses the housing needs of both owner and renter households, single persons, elderly persons, large families, and persons with disabilities, including persons with HIV/AIDS and their families.

According to Public Hearing participants, a top Housing priority is the need for affordable rental housing. Residents also added the need to increase the number of Section 8 housing subsidies for low income renters. It was also recommended that the priorities for affordable housing include tenant/landlord counseling services, affordable senior housing, code enforcement, and the need to upgrade and maintain apartment units in Glendale. The Community Needs Survey identified new senior housing, housing repairs and new housing for disabled persons, new rental housing for families, and first time home buyer assistance as high priority housing needs.

The data used for the Housing Needs Assessment is based upon the 2000 U.S. Census, as compiled in the HUD Comprehensive Housing Affordability Strategy (CHAS) Data Book. Since California Redevelopment Law 20% Housing Set-Aside funds are a key component of affordable housing funding in Glendale, Table 32 below is provided to define those terms used in the Housing Needs Assessment section that follows, and correspond to those used in California Redevelopment Law. The terms are frequently used throughout this section to evaluate the housing needs of owners and renters who fall into the four defined ranges of area median family income (Area MFI).

TABLE 32
City of Glendale
Definition of Terms
Housing Needs Assessment

TERMS	DEFINITIONS
Extremely Low Income	0-30% of Area MFI
Very Low Income	31-50% of Area MFI
Low Income	51-80% of Area MFI
Moderate Income	81-120% of Area MFI
Housing Problems	Cost Burden, Severe Cost Burden, Overcrowding or Substandard Housing Conditions as defined on the next page.
Overburdened with Housing Costs	Housing expenditures exceeding 30% of gross income
Severe Cost Burden	Housing expenditures exceeding 50% of gross income
Overcrowding	Housing units with more than one person per room
Substandard Housing Conditions	Housing units that lack complete kitchen or plumbing facilities

Source: HUD CHAS Data Book

Extremely Low-Income Households

The HUD CHAS Data Book estimated that approximately 14 percent (9,698) of Glendale households were considered extremely low-income (0-30% MFI) in 2000. Table 33 below shows that 84 percent (8,137) of extremely low-income households experienced some type of housing problem in 2000. The primary problem faced by this income group was the high cost of housing in relation to their incomes.

TABLE 33
City of Glendale
Housing Problems of
Extremely Low-Income Households

Household Type	Total Number of Households	Number with any Housing Problems	Number with a Housing Cost Burden	Number with a Severe Housing Cost Burden
RENTERS				
Elderly Households (1 to 2 members)	2,679	2,165 (81%)	2,124 (79%)	1,974 (74%)
Small Related Households (2 to 4 members)	3,344	3,090 (92%)	2,749 (82%)	2,685 (80%)
Large Related Households (5 or more members)	900	900 (100%)	830 (92%)	770 (86%)
All Other Households	1,659	1,150 (69%)	1,115 (67%)	1,075 (65%)
Total Renter Households	8,582	7,303 (85%)	6,814 (79%)	6,505 (76%)
OWNERS				
Elderly Households	593	463 (78%)	463 (78%)	423 (71%)
Small Related Households	289	189 (65%)	179 (62%)	175 (61%)
Large Related Households	60	35 (58%)	35 (58%)	35 (58%)
All Other Households	174	145 (83%)	145 (83%)	135 (78%)
Total Owner Households	1,116	833 (75%)	822 (74%)	768 (69%)
TOTAL HOUSEHOLDS	**9,698**	**8,137 (84%)**	**7,642 (79%)**	**7,274 (75%)**

Source: HUD CHAS Data Book

Extremely Low Income Renter Households

Seventy-five percent of extremely low-income households faced a severe housing cost burden of paying more than half of their gross income for housing. Among renters, all large households are reportedly facing housing problems. In addition, all large renter households experienced some type of housing problem and at least 92 percent experienced housing cost overburden or severe cost burden. This indicates that a notable proportion of large renter households experienced other housing problems such as overcrowding or substandard housing conditions. A significant proportion (92 percent) of small-related renter households also experienced housing problems, with housing cost burden faced by the majority (82 percent) of them. In addition, 79 percent of elderly renter households faced a housing cost burden in 2000.

Extremely low-income renter households were only slightly more likely to experience housing problems than were owner households. This represents a change from previous years.

Extremely Low Income Owner Households

A comparison of Census data shows that the number of extremely low-income owner households with housing problems increased by 10 percent overall from 1990 to 2000. The highest increase was in households reporting severe cost burdens. Relatively few extremely low-income owner households are experiencing overcrowding or substandard housing conditions.

As with renter households, housing cost burden was the most predominant housing problem for extremely low-income owner households. Large related households accounted for only 5 percent of all extremely low-income owner households, and they were less likely to face housing problems than were other extremely low-income owner households. Elderly households represent the largest proportion of extremely low-income owner households (53 percent), and a growing number (78 percent) are reporting housing problems as compared to prior years.

Very Low-Income Households

The HUD CHAS Data Book estimated that approximately 12 percent (8,320) of Glendale households were considered very low-income (31-50% MFI) in 2000. Table 34 below shows that 93 percent (7,729) of very low-income households experienced housing problems in 2000. As with extremely low-income households, the high cost of housing was the primary housing problem facing very low-income households. Ninety percent of very low-income households

paid more than 30 percent of their gross income on housing and 56 percent paid more than half of their gross income on housing. These figures are between 8 and 14 percent higher than were observed ten years ago.

TABLE 34
City of Glendale
Housing Problems of
Very Low-Income Households

Household Type	Total Number of Households	Number with any Housing Problems	Number with a Housing Cost Burden	Number with a Severe Housing Cost Burden
RENTERS				
Elderly Households (1 to 2 members)	2,095	1,879 (90%)	1,854 (89%)	1,330 (64%)
Small Related Households (2 to 4 members)	2,854	2,831 (99%)	2,760 (97%)	1,704 (60%)
Large Related Households (5 or more members)	930	930 (100%)	830 (89%)	305 (33%)
All Other Households	989	949 (96%)	945 (96%)	635 (64%)
Total Renter Households	6,868	6,586 (96%)	6,387 (93%)	3,977 (58%)
Household Type	**Total Number of Households**	**Number with any Housing Problems**	**Number with a Housing Cost Burden**	**Number with a Severe Housing Cost Burden**
OWNERS				
Elderly Households	875	630 (72%)	630 (72%)	290 (33%)
Small Related Households	358	303 (85%)	299 (84%)	210 (59%)
Large Related Households	119	119 (100%)	119 (100%)	109 (92%)
All Other Households	100	85 (85%)	85 (85%)	70 (70%)
Total Owner Households	1,452	1,137 (78%)	1,133 (78%)	680 (47%)
TOTAL HOUSEHOLDS	**8,320**	**7,729 (93%)**	**7,521 (90%)**	**4,651 (56%)**

Source: HUD CHAS Data Book

Very Low Income Renter Households

Very low-income renter households were more likely to experience housing problems than were owner households. Ninety-six percent of very low-income renter households experienced housing problems as compared to only 78 percent of very low-income owner households. Among renter households, large households were most likely to face housing problems. Although 100 percent of large renter households experienced some type of housing problem, only 89 percent experienced housing cost burden or extreme housing cost burden, indicating that a relatively large proportion of large very low-income renter households experienced other housing problems such as overcrowding or substandard housing conditions.

Very Low Income Owner Households

Approximately 78 percent of very low-income owner households experienced housing problems in 2000 – a percentage that has doubled since 1990. The most prevalent housing problem among very low-income owner households was housing cost burden with 78 percent paying more than 30 percent of household income for housing and 47 percent paying more than half of household income for housing. Among very low-income owner households, elderly households were less likely to face housing problems than were other households. Seventy-two percent of elderly households faced housing problems as compared with 85 to 100 percent of other non-elderly households.

Low-Income Households

The HUD CHAS Data Book estimated that approximately 14 percent (10,063) of Glendale households were considered low-income (51-80% MFI) in 2000. Table 35 shows that 82 percent (8,242) of low-income households experienced housing problems in 2000. Housing cost burden was the most significant problem that faced low-income households, with 65 percent paying more than 30 percent of their income on housing and 16 percent paying more than half of their income on housing.

TABLE 35
City of Glendale
Housing Problems of
Low -Income Households

Household Type	Total Number of Households	Number with any Housing Problems	Number with a Housing Cost Burden	Number with a Severe Housing Cost Burden
RENTERS				
Elderly Households (1 to 2 members)	1,253	989 (79%)	920 (73%)	200 (16%)
Small Related Households (2 to 4 members)	3,930	3,396 (86%)	2,511 (64%)	271 (7%)
Large Related Households (5 or more members)	1,164	1,134 (97%)	514 (44%)	40 (3%)
All Other Households	4,659	3,578 (77%)	3,354 (72%)	461 (10%)
Total Renter Households	8,006	6,789 (85%)	5,140 (64%)	673 (8%)
OWNERS				
Elderly Households	899	439 (49%)	439 (49%)	279 (31%)
Small Related Households	678	563 (83%)	555 (82%)	430 (63%)
Household Type	**Total Number of Households**	**Number with any Housing Problems**	**Number with a Housing Cost Burden**	**Number with a Severe Housing Cost Burden**
Large Related Households	240	240 (100%)	185 (77%)	115 (48%)
All Other Households	240	205 (85%)	205 (85%)	130 (54%)
Total Owner Households	2,057	1,446 (70%)	1,384 (67%)	954 (46%)
TOTAL HOUSEHOLDS	**10,063**	**8,242 (82%)**	**6,521 (65%)**	**1,630 (16%)**

Source: HUD CHAS Data Book

Low Income Renter Households

Among low-income households, renters were generally more likely to face housing problems than owners. Eighty-five percent of renter households faced housing problems as compared with 70 percent of owner households. Among low-income renters, large households were the most likely group to face housing problems. Ninety-seven percent of large renter households faced housing problems. While housing cost burden was a problem for large renter households, overcrowding and/or substandard housing was a more significant problem. In fact, 53 percent of large renter households lived in overcrowded and/or substandard housing units and only 44 percent had a housing cost burden. Even among small, non-elderly, renter households, a relatively large proportion of households (22 percent) lived in overcrowded and/or substandard housing units.

Low Income Owner Households

Seventy percent of low-income owner households experienced housing problems in 2000, up from 40 percent in 1990. The most prevalent housing problem among low-income owner households was housing cost burden with 67 percent paying more than 30 percent of household income for housing and 46 percent paying more than half of household income for housing. Among low-income owner households, elderly households were less likely to face housing problems than were other households. Only 49 percent of elderly households faced housing problems as compared with 83 to 100 percent of other non-elderly households.

Overcrowding

Increases in household incomes have not kept pace with the escalating price of housing in Glendale. For example, the median price of housing in Glendale jumped by 60 percent from September 2002 to September 2004. At the same time, median family incomes actually decreased by 3 percent. This disparity can contribute to the incidence of overcrowding in the community, as households face increasing affordability restraints. More information regarding overcrowding can be found in the Housing Market Analysis section.

Minority Households

Approximately 55.3 percent of all Glendale households report having housing problems; however, certain racial / ethnic groups have a higher proportion of housing problems. Specifically, Hispanic (64.3 percent) and Asian households (60 percent) had notably higher proportions of housing problems than the rest of

Glendale residents. Native American, White, Black, and Pacific Islander households reported fewer housing problems than the Glendale average.

TABLE 36
Housing Problems by Race/Ethnicity

Households	Percentage with Housing Problems
All	55.3%
Hispanic	64.3%
Asian	60.0%
Native American	55.1%
White	50.8%
Black	29.2%
Pacific Islander	0%

Source: 2000 Census

Lead Based Paint Hazards

The U.S. Department of Health and Human Services' Centers for Disease Control and Prevention (CDC) states that nearly half a million children living in the United States have lead levels in their blood that are high enough to cause irreversible damage to their health. Lead is toxic to people of all ages when taken into the body by ingestion or inhalation; however, it is most hazardous to children under the age of six, whose still-developing nervous systems are most impacted by lead and whose play and normal hand-to-mouth activities expose them to lead-contaminated dust and soil. Lead can damage a child's central nervous system, kidneys, and reproductive system and, at higher levels, can cause coma, convulsions, and death. Even low levels of lead are harmful and are associated with decreased intelligence, impaired neurobehavioral development, decreased stature and growth, and impaired hearing acuity.

Lead based paint statistics and estimates in Glendale:

- The State of California Department of Community Services and Development states that more than three-quarters of housing units built before 1978 are believed to contain some lead-based paint.
- Approximately 76 percent of all housing units in Glendale were built prior to 1980.
- This translates to an estimated 42,200 housing units in Glendale that could contain some lead-based paint.

- Assuming lead based paint risks are spread equally throughout the community, and assessing that 40 percent of Glendale's population has reported to be low income, approximately 17,000 low income residents could be living in a housing unit containing lead based paint.

Although lead contamination is a potential environmental hazard for a significant number of Glendale households, regardless of income group, lower-income households have fewer financial resources to mitigate the potential threat to their health.

In order to obtain information on the incidence of childhood lead poisoning in Glendale, the City contacted the Los Angeles County Department of Health Services Childhood Lead Poisoning Prevention Program (CLPPP). Utilizing 2000 census data and birth record data, CLPPP staff identified geographical areas of lead exposure based upon three risk factors for childhood lead poisoning:

1. Number of children ages 1 and 2;
2. Number of Medi-Cal deliveries (referring to live births where Medi-Cal was used as payment for delivery as indicated on the birth record data); and
3. Presence of pre-1950 housing.

Areas ranking in the highest 50 percent in the countywide distribution of all three risk factors were designated as High Risk Areas. In Los Angeles County, 96 census tracts were identified as high-risk areas, including nine located in Glendale south of the 134 freeway. The County is currently focusing primary prevention activities in 10 cities and the 17 high risk areas in the unincorporated County. Glendale is not one of the current areas of focus. The County Department of Public Health indicated that there have been 12 reported cases of lead poisoning found in children under six years of age in the City of Glendale from January 2000 through June 2008.

Barriers to Affordable Housing

This section reviews a variety of potential public policy barriers to affordable housing in the City of Glendale as required by CFR 91.210(e) and 91.215(f). Potential barriers assessed include the City's growth limits (land use), development standards (zoning), approval process, building codes, fees and charges, and other policies, including tax policies, that might affect return on residential investment.

Land Use Controls: Land use controls may limit the amount or density of development, thereby increasing the per-unit cost of housing. In Glendale's case,

however, land use control has not functioned as a significant barrier to the development of affordable housing. Glendale's current General Plan Land Use Element provides significant areas of the City designated for multi-family uses under the assumption that due to its proximity to the City of Los Angeles, Glendale would share in the economic and residential growth projected in Los Angeles County. As a result, Glendale's growth rate during the 1990's into the 21st century has been extremely high (an increase of almost 40,000 people) with almost all increases coming in the form of multi-family housing.

This City's Land Use Element establishes residential land uses with densities ranging from 0.45 units per acre to 35 units per acre. In 2004, the Land Use Element was amended to include Mixed Use Development areas and in 2006 a Downtown Strategic Plan area. These mixed used areas, generally located on the City's major arterials generally allow for a compatible mix of commercial, industrial and residential land uses or just (stand alone) commercial, industrial or residential uses depending on the zone. The Mixed Use and Downtown Strategic Plan areas provide for residential uses with densities from 35 units per acre to 100 units per acre. The City desires compatible land uses, so the specific density allowed depends on the adjoining land use and zoning district designation. The following is a list of land uses allowing residential development, the general density allowed, and the Zoning Code designation.

- Restricted Residential (4 units/ acre) - R1R
- Low Density Residential (5.8 units/ acre) - R1
- Moderate Density Residential (14 units/ acre) - R-3050
- Medium Density Residential (19 units/ acre) - R-2250
- Medium-High Density Residential (26 units/ acre) - R-1650
- High Density Residential (35 units/ acre) - R- 1250
- Industrial/Commercial - Residential Mixed Use (35-100 units/ acre) - IMU-R
- Commercial/ Residential Mixed Use (35-100 units/ acre) – SFMU
- Downtown Strategic Plan (35-100 units/ acre) - DSP

Growth Limits: Glendale has no formal limits to growth incorporated in its City codes. However, it has de facto limits to growth embedded in its zoning code. The City also has definite limitations because it is landlocked by surrounding cities and a national forest.

As is true of many cities in Los Angeles County, Glendale is essentially built out with only smaller infill lots available, particularly for multi-family development. In the recently adopted Housing Element (January 2009), the City estimated that between 4,417 and 5,107 units could be built on vacant or underdeveloped

residentially zoned properties. Much of the single-family land available for development has significant physical development constraints such as ridgelines, steep slopes, unstable slopes, seismic hazards, drainage problems, and street access. Multi-family development in residentially zoned areas is likely to occur on underdeveloped sites (currently developed with fewer units than allowed by the zoning code) as the housing market conditions change to create economic feasibility. The newer mixed-use areas have significant potential for residential development. The City estimates that up to 4,400 units could be developed in these areas. Along with some potential residential development in commercially zoned properties, the total growth that could occur under "build-out" of the Land Use Element is between 9,000 and 10,000 units. This is higher than the estimate in the last Consolidated Plan of 6,860 to 9,680 units.

Zoning Ordinances: The City's Zoning Code establishes specific development standards in order to implement the adopted land use. The City's zoning regulations are consistent with the Land Use Element of the General Plan. The multi-family zoning districts are relatively easy to interpret. For example, the R1250 zone (a High Density land use at 35 units/acre) allows one unit for each 1250 square feet of property.

The City's development standards are designed to allow the maximum density on a parcel. For the Housing Element, the City tested the existing development standards for all multi-family residential zones to determine if the regulations created a significant constraint on housing development. The City randomly selected 50 residential projects in all four multi-family residential zones located throughout the City. Of the 50 projects, only five did not ask for the maximum density for unknown reasons. The remaining 45 projects included five that received variances from height and/or setback standards to achieve the maximum allowable density. One of the five was a lot that was nine square feet short of the necessary area for the number of units requested. Since 80 percent of the projects evaluated were able to achieve the maximum density with variances and all of the projects requesting variances to achieve the maximum allowable density were granted the variances, it is apparent that the City's regulations do not pose a significant constraint on the quantity of housing produced in the City.

In the last Consolidated Plan, there were two issues raised as negative impacts to the development of affordable housing projects. The City has addressed each of these issues since that time. The following presents both issues and how the City addressed each one.

1. *Glendale requires a conditional use permit (CUP) for senior housing in multi-family residential zones. Conditional use permits cause developers to incur costs,*

not only for the CUP application, but also for the costs involved in preparing for the CUP filing requirements and the time expended on the approval process.

The City's Zoning Code now allows senior housing by-right (without a CUP) in multi-family residential zones; commercial zones, provided the ground floor is a commercial use; and in the SFMU mixed-use zone as part of a mixed use project. Senior housing is conditionally permitted on the ground floor in commercial zones and in the IMU-R zone.

2. *California state law mandates that density bonuses be allowed for affordable/ senior housing projects when certain conditions are met. This jurisdiction has not incorporated similar language into its zoning code with the result that it requires variances from current code, again adding time delays and additional costs to projects.*

   The City has incorporated the State's density bonus regulations into the Zoning Code and new provides the following density bonuses: (1) lot combination/wide properties – a 25 percent density bonus when a property is 90 feet wide or more; (2) downtown affordable housing incentive – allowing up to 100 units per acre when the property is not abutting a residential zone; and (3) implementation of the State density bonus incentive – this density bonus is calculated after the other City density bonuses.

As discussed briefly under Land Use, the City adopted a new Industrial/Commercial-Residential Mixed Use zone (IMU-R), Commercial/Residential Mixed Use zone (SFMU) and Downtown Strategic Plan (DSP). The standards for these zones allow between 35 and 100 units per acre.

Project Approval Process Delays: The evaluation and review process required by City procedures contributes to the cost of housing in that holding costs incurred by developers are ultimately manifested in the unit's selling price. Project processing begins with the submittal of plans to Permit Services for plan check. Plans may be submitted concurrently to the Design Review Board (DRB) for design and to the Director of Planning for environmental review. A project appearing before DRB must obtain a Negative Declaration from the Director of Planning prior to receiving DRB approval. Average processing time for a residential project subject only to plan check, DRB, and environmental review is three months. An additional two months can be added if the project is subject to Planning Commission and City Council approval (e.g. subdivisions, change of zone, general plan amendment, etc.). The City has implemented one-stop processing for development review to shorten the project review process.

While this review period compares favorably to other southern California cities, a project's review time can be significantly lengthened if a Conditional Use Permit or Zoning Variance is required. The City's Housing Element policies call for continued monitoring of departmental processing procedures to determine their impact on the ultimate cost of housing and to initiate appropriate changes to reduce costs.

Other Potential Barriers to Affordable Housing

The following items – building codes, fees, and charges – do not currently present any impediments to affordable housing, but could possibly do so in the future.

Building Codes: The City of Glendale's building codes are based upon Title 24 of the California Code of Regulations (CCR). Title 24 of the CCR is comprised of amended versions of the International Building Code, International Fire Code, Uniform Plumbing Code, National Electric Code, Uniform Mechanical Code, and various other state mandated statutes. These codes are considered to be the minimum necessary to protect the public health, safety and welfare. The local enforcement of these codes does not add significantly to the cost of housing in Glendale.

Fees and Charges: Various fees and assessments are charged by the City and other agencies to cover the costs of processing permits and providing services and facilities, such as utilities, schools and infrastructure. Almost all of these fees are assessed through a pro rata share system, based on the magnitude of the project's impact or on the extent of the benefit that will be derived. Building and utility fees contribute to the cost of housing and may constrain development of lower priced units. Currently, however, Glendale's Community Redevelopment and Housing Department pays all fees for City assisted affordable housing projects.

Glendale is highly urbanized with most of its necessary infrastructure, such as streets, sewers, electrical and water facilities, already in place. As such, the cost of land improvements is less than in undeveloped suburban or rural areas. When compared to neighboring jurisdictions which are similarly urbanized, Glendale's plan check and building permit fees for apartments, condominiums and single family homes are the same or lower than those in Los Angeles, Burbank and Pasadena.

DEVELOPMENT OF TARGET AREAS

The City allocates most of its resources among geographic areas determined to have the greatest need using data from 2000 Census, the 2007 American Community Survey and an extensive community needs assessment. Target areas are identified by examining minority and low-income household concentrations, areas of poverty, above average crime rates, substandard housing, and demographic trends throughout the City as described below.

Minority Concentrations

The Consolidated Plan requires that jurisdictions identify and describe any areas with concentrations of racial/ethnic minorities and/or low-income families. An earlier discussion on race and ethnicity examined current ethnic population changes in Glendale. The following two tables (37 and 38) show concentrations of the City's largest minority groups - Hispanic and Asian persons - by census tract in 2000. Concentrations are defined in terms of the Los Angeles County averages for each racial/ethnic group. A "concentration" is defined as exceeding the countywide average for a specific group and a "high concentration" refers to at least twice the countywide average for a particular group.

Concentration of the Hispanic Population

Table 37 provides the percent of Hispanic persons in each census tract from the 2000 Census. Two of 29 census tracts in Glendale have a concentration that is more than the County 2000 average of Hispanic households (44.6 percent) – one in southern Glendale and one in western Glendale. This figure has decreased from six census tracts in 1997. All of these tracts are located along San Fernando Road, and none constitute a moderate or high concentration. Map 1 illustrates the Hispanic population concentration.

TABLE 37

Hispanic Population Concentration in Glendale by Census Tract, 2000

Census Tract	Total Population	Hispanic Population	Percent Hispanic Population	Concentration
3003	6,251	444	7.1%	
3004	5,610	723	12.9%	
3005.01	1,043	66	6.3%	
3006	7,572	848	11.2%	
3007.01	5,988	403	6.7%	
3007.02	5,494	357	6.5%	
3008	6,679	591	8.8%	
3009.01	6,161	473	7.7%	
3009.02	1,981	147	7.4%	
3010	4,826	882	18.3%	
3011	6,122	679	11.1%	
3012.02	7,601	738	9.7%	
3012.03	4,061	340	8.4%	
3012.04	4,364	497	11.4%	
3013	2,073	208	10.0%	
3014	3,653	215	5.9%	
3015.01	1,772	255	14.4%	
3015.02	7,332	832	11.3%	
3016.01	6,987	2,075	29.7%	
3016.02	4,148	1,905	45.9%	YES
3017.01	2,841	698	24.6%	
3017.02	6,044	1,311	21.7%	
3018	7,801	1,633	20.9%	
3019	7,227	1,078	14.9%	
3020.01	7,937	1,177	14.8%	
3020.02	3,444	604	17.5%	
3021.02	6,977	1,676	24.0%	
3021.03	6,279	1,552	24.7%	
3021.04	4,182	1,097	26.2%	
3022.01	3577	653	18.3%	
3022.02	5,830	1,626	27.9%	
3023.01	3,516	909	25.9%	
3023.02	6,034	2,466	40.9%	
3024	6,249	2,912	46.6%	YES
3025.01	9,466	3,026	32.0%	
3025.02	7,925	3,090	39.0%	
1810	0	0	0.0%	
1863	0	0	0.0%	
1881	0	0	0.0%	
9301	0	0	0.0%	

Source: 2000 Census

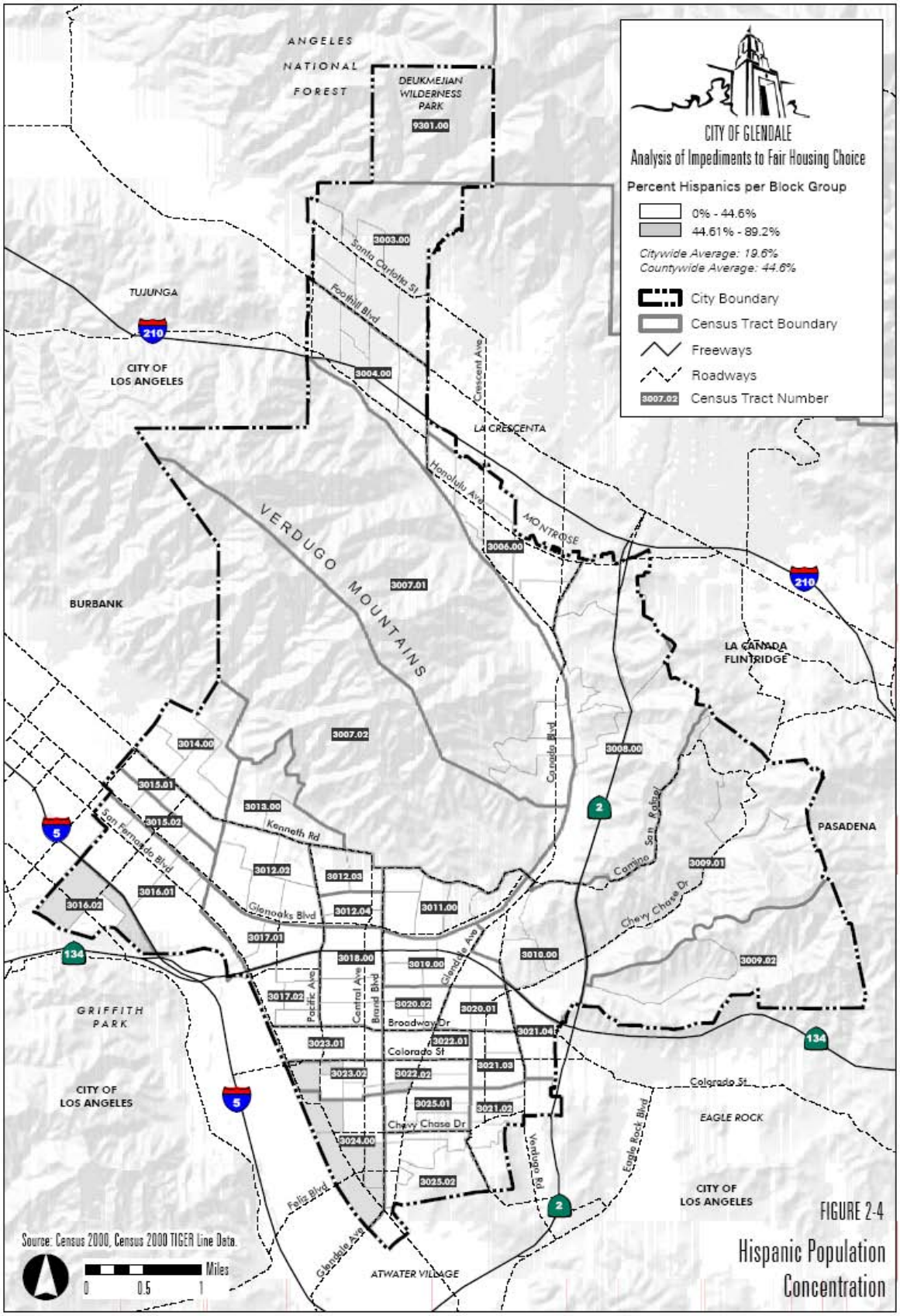


FIGURE 2-4
Hispanic Population Concentration

Concentration of the Asian Population

As shown in Table 38, all but ten of the City's tracts have above the County average concentration of the City's 31,424 Asian persons (11.81 percent) and 4 tracts have high concentrations of Asian residents (over 23.6 percent). The groups with the highest percentage within the category of "Asian" in Glendale are Korean (39.8 percent), Filipino (35.3 percent), Chinese (8 percent), Japanese (4.7 percent), and Asian Indian (4 percent).

Glendale's Asian residents are widely dispersed throughout the City. Compared to the countywide average of 12 percent, 30 Census tracts contain concentrations of Asian residents at or greater than the countywide average of 12 percent, including four with a high concentration of 30 percent or more. Map 2 illustrates the Asian population concentration.

TABLE 38

Asian Population Concentration in Glendale by Census Tract, 2000

Census Tract	Total Population	Asian Population	Percent Asian Population	Concentration
3003	6,251	1,350	21.6%	YES
3004	5,610	865	15.4%	YES
3005.01	1,043	376	36.0%	HIGH
3006	7,572	1,124	14.8%	YES
3007.01	5,988	691	11.5%	
3007.02	5,494	671	12.2%	YES
3008	6,679	1,353	20.3%	YES
3009.01	6,161	1,864	30.3%	HIGH
3009.02	1,981	333	16.8%	YES
3010	4,826	1,004	20.8%	YES
3011	6,122	636	10.4%	
3012.02	7,601	1,628	21.4%	YES
3012.03	4,061	726	17.9%	YES
3012.04	4,364	793	18.2%	YES
3013	2,073	197	9.5%	
3014	3,653	313	8.6%	
3015.01	1,772	259	14.6%	YES
3015.02	7,332	945	12.9%	YES
3016.01	6,987	587	8.4%	
3016.02	4,148	568	13.7%	YES
3017.01	2,841	397	14.0%	YES
3017.02	6,044	758	12.5%	YES
3018	7,801	1,505	19.3%	YES
3019	7,227	1,085	15.0%	YES
3020.01	7,937	1,576	19.9%	YES
3020.02	3,444	425	12.3%	YES
3021.02	6,977	1,123	16.1%	YES
3021.03	6,279	974	15.5%	YES
3021.04	4,182	1,276	30.5%	HIGH
3022.01	3,577	475	13.3%	YES
3022.02	5,830	552	9.5%	
3023.01	3,516	1,075	30.6%	HIGH
3023.02	6,034	859	14.2%	YES
3024	6,249	1,144	18.3%	YES
3025.01	9,466	1,228	13.0%	YES
3025.02	7,925	953	12.0%	YES
1810	0	0	0.0%	
1863	0	0	0.0%	
1881	0	0	0.0%	
9301	0	0	0.0%	

Source: 2000 Census

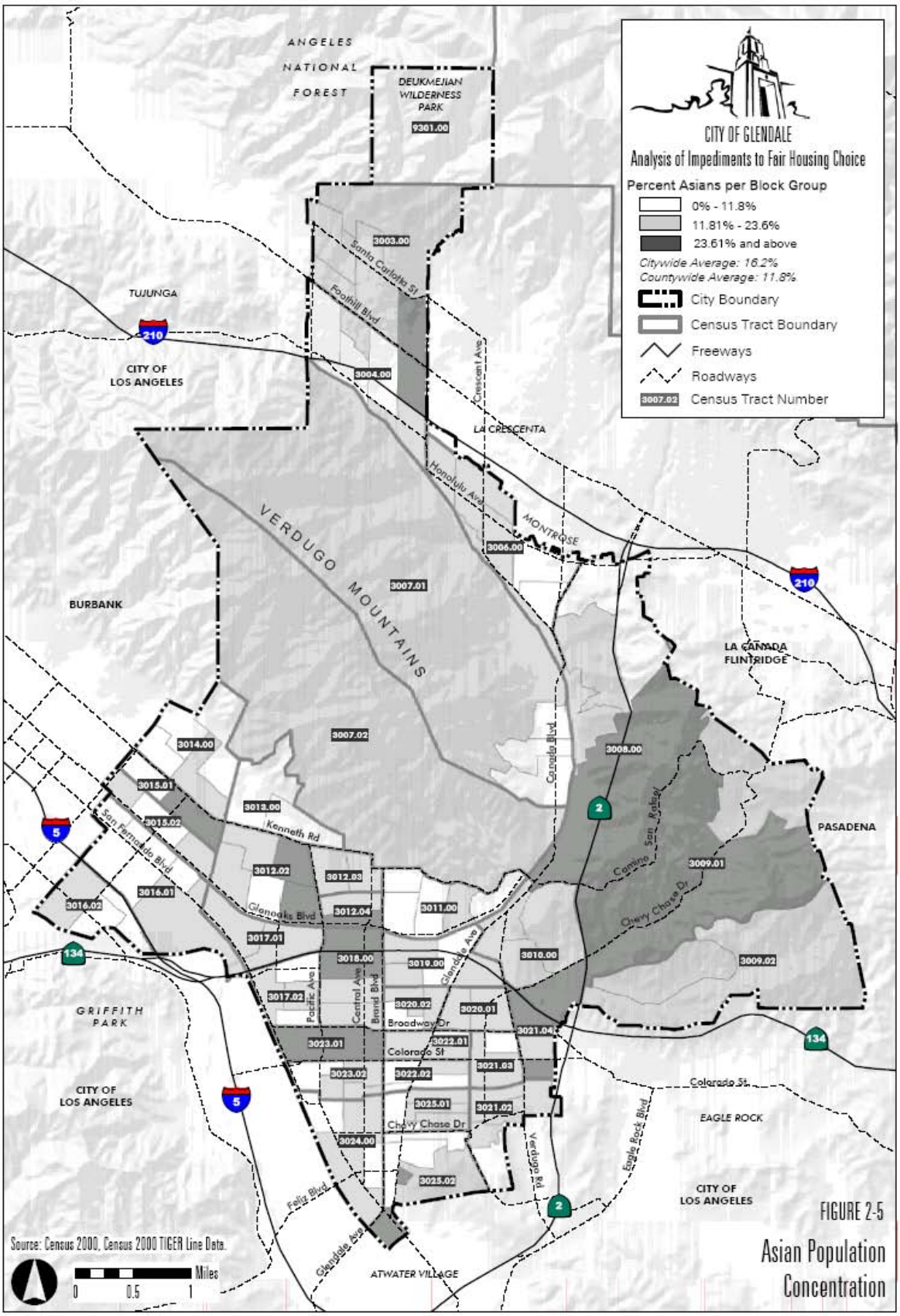


FIGURE 2-5
Asian Population Concentration

Eighteen tracts scattered across Glendale have twice the County average concentrations of persons categorized as "Two or More Races", and all are high concentration. Many people reporting more than one race in these areas were Latino or Asian who marked both "White" and "Some Other Race." In Glendale, 8.5 percent of the City's residents reported two or more races compared to 2.3 percent of the Los Angeles County residents.

Small numbers of American Indians also reside throughout the City, and three census tracts in western Glendale exceed the countywide concentration average.

Low-Income Household Concentrations

For the purposes of this Consolidated Plan, any census tract where at least 31.5 percent of the persons residing in the area earn 50% or less of the HUD adjusted median family income shall be considered a concentration of low-income households. With that definition, the City has identified 10 individual census tracts in two general areas having a concentration of low-income persons. Table 39 shows that these census tracts are located in southern and western Glendale.

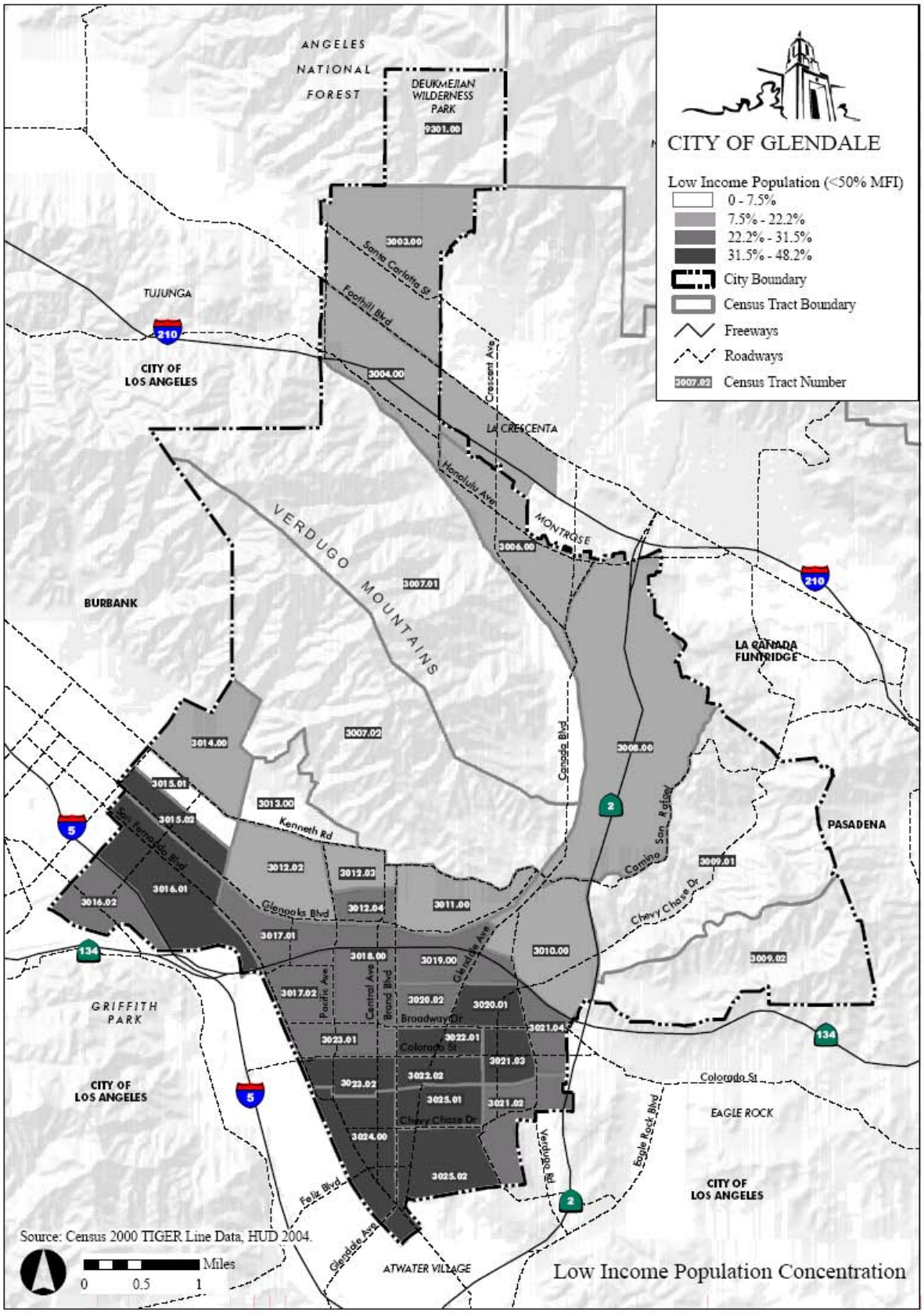
TABLE 39
CITY OF GLENDALE
Concentrations of Low Income Households***
By Census Tract

Tract	Number of Persons Earning <50% of MFI	Total Population in Tract	Percentage of Persons Earning <50% of MFI
3021.03*	2,465	6,261	39.4%
3022.01*	1,704	3,536	48.2%
3020.01*	3,010	7,937	37.9%
3022.02*	2,417	5,714	42.3%
3023.02*	2,242	5,834	38.4%
3024*	2,601	6,039	43.1%
3025.01*	4,443	9,466	46.9%
3015.02**	2,660	7,327	36.3%
3016.01**	2,615	6,929	37.7%

*Tracts in Low-Income Area 1
**Tracts in Low-Income Area 2
*** More than 31.5% of the persons earn less than 50% of HUD Median Family Income

Approximately over 31.5 percent of the people living in the ten census tracts are considered low-income. The following Map 3 identifies two areas in southern

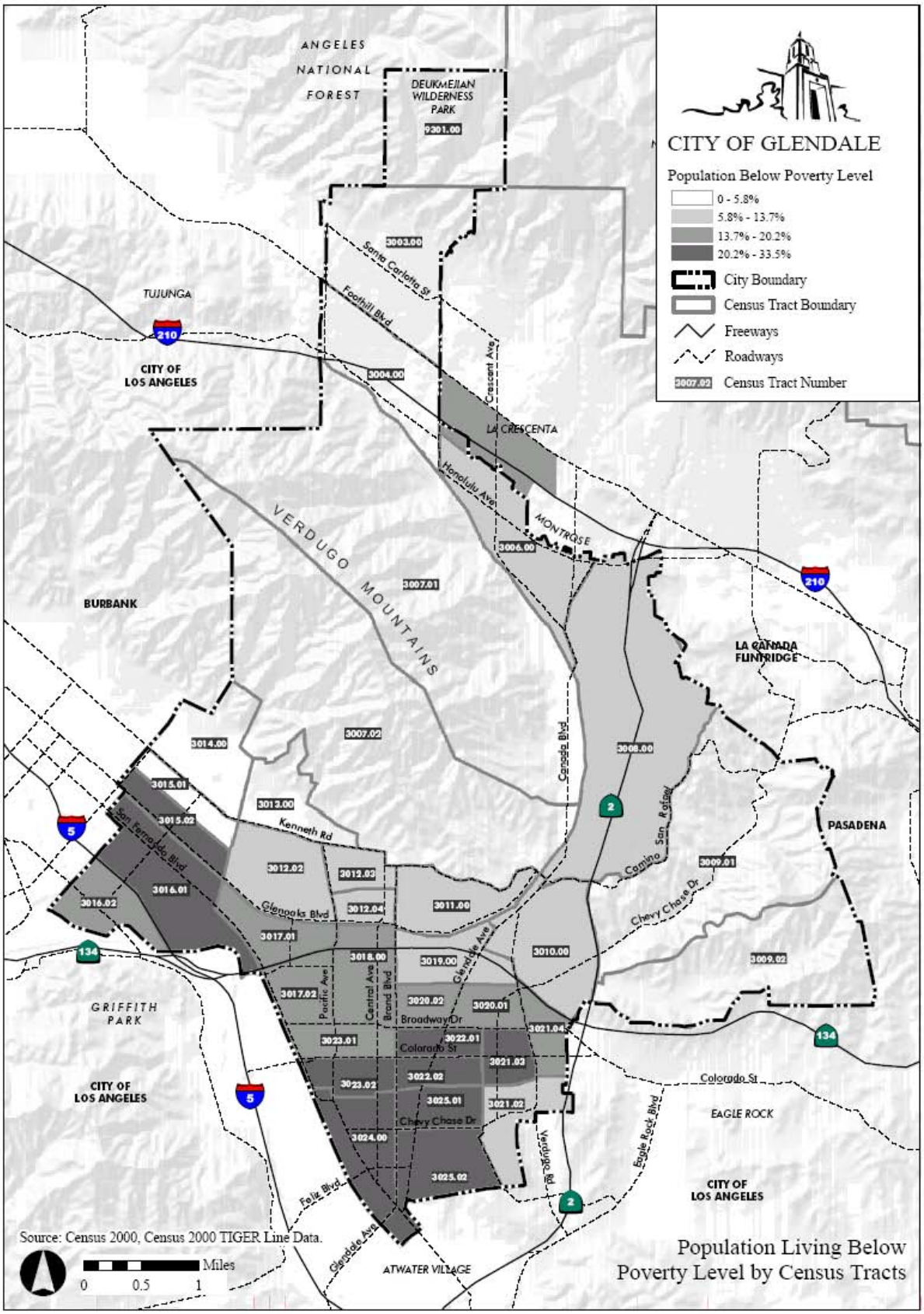
and western Glendale with concentrations of low-income households. The first area runs from Broadway to the north, San Fernando Road to the west, City limits to the south, and Verdugo Road to the east. The second concentration of low-income households runs the length of Maple Street between Brand Boulevard and Verdugo Road.


CITY OF GLENDALE
Low Income Population (<50% MFI)
0 - 7.5%
7.5% - 22.2%
22.2% - 31.5%
31.5% - 48.2%
City Boundary
Census Tract Boundary
Freeways
Roadways
3007.02 Census Tract Number
ANGELES NATIONAL FOREST
DEUKMEJIAN WILDERNESS PARK
9301.00
TUJUNGA
CITY OF LOS ANGELES
LA CRESCENTA
MONTROSE
VERDUGO MOUNTAINS
BURBANK
LA CANADA FLINTRIDGE
PASADENA
GRIFFITH PARK
EAGLE ROCK
ATWATER VILLAGE
Source: Census 2000 TIGER Line Data, HUD 2004.
Miles
0 0.5 1
Low Income Population Concentration

Poverty Status

The following map displays the percentage of persons in Glendale living below the poverty level by census tract. Approximately 24.5 percent of southern Glendale residents were living below the poverty level, as were 20.95 percent of the residents of far western Glendale.

These areas also have an above average concentration of students eligible for the Federal Free and Reduced Lunch program. Families qualifying for a reduced lunch in school year 2008-09, must have earned less than $39,220 (poverty level for a family of four was $21,200). During the 2008 school year, approximately 41.3 percent of students attending Glendale public schools were enrolled in the Federal Free and Reduced Lunch program, compared to the 49.4 percent statewide. However, this percentage is an average of all thirty public schools in the Glendale Unified School District. In the six public elementary schools (of 20 total public elementary schools in Glendale) located south of the 134 freeway, between 73 and 88 percent of the students were enrolled in the reduced lunch program. By comparison, in the five elementary schools located in the La Crescenta area in north Glendale, only 3 to 18 percent of the students were enrolled in the reduced lunch program.


CITY OF GLENDALE
Population Below Poverty Level
0 - 5.8%
5.8% - 13.7%
13.7% - 20.2%
20.2% - 33.5%
City Boundary
Census Tract Boundary
Freeways
Roadways
Census Tract Number
ANGELES NATIONAL FOREST
DEUKMEJIAN WILDERNESS PARK
TUJUNGA
CITY OF LOS ANGELES
LA CRESCENTA
MONTROSE
VERDUGO MOUNTAINS
BURBANK
LA CANADA FLINTRIDGE
PASADENA
GRIFFITH PARK
EAGLE ROCK
ATWATER VILLAGE
Source: Census 2000, Census 2000 TIGER Line Data.
Miles
0 0.5 1
Population Living Below Poverty Level by Census Tracts

Crime

Glendale continues to rank as one of the top 10 safest cities with a population over 100,000. Crime statistics from 2006 to 2009 show that crime rates have decreased slightly while the population has increased.

However, police report that crime is proportionally higher in the southern and western parts of Glendale. Although southern Glendale represents approximately 30 percent of the City's total population area, it was the location of approximately 40 percent of all the City's violent crimes, which include murder, rape, robbery and assault. Similarly, western Glendale represents approximately five percent of Glendale's population, but was the location of approximately 8 percent of all the City's violent crimes.

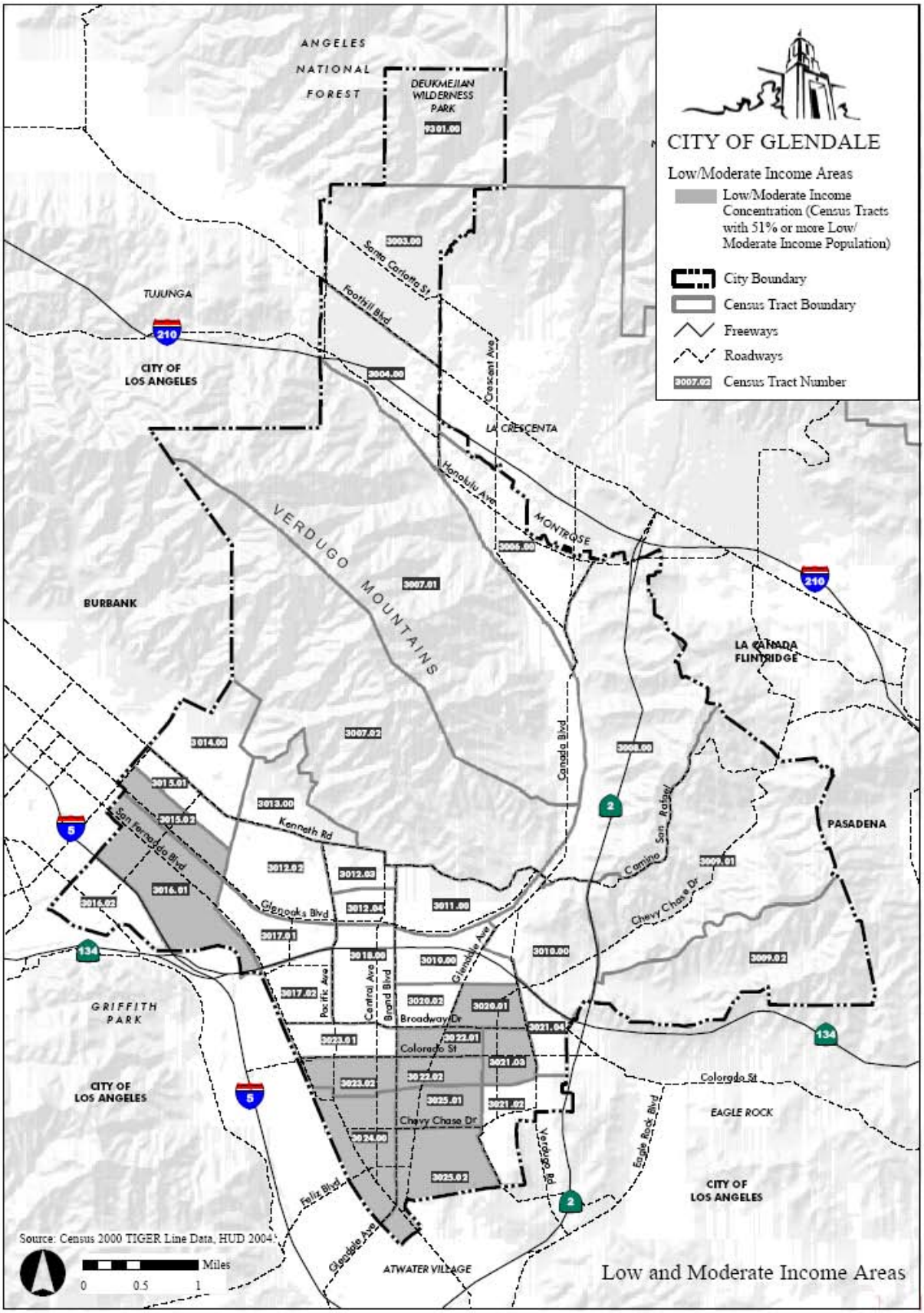
Substandard Housing Conditions

Census data limits the definition of substandard housing units to two deficiencies - housing units that lack complete kitchen facilities and housing units lacking plumbing facilities. Citywide, 2 percent of Glendale's housing units are without complete kitchen facilities, and 1 percent lack complete plumbing facilities. Southern and western Glendale neighborhoods have only a slightly higher incidence of substandard housing. In southern Glendale, 3 percent of units lacked complete kitchen facilities and 1.7 percent lacked complete plumbing facilities. In western Glendale, 2.6 percent of all units lack complete kitchen facilities and 1 percent lack complete plumbing facilities. However, over half of all substandard units are located in southern Glendale.

Approximately 41 percent of housing units in southern Glendale are overcrowded, as compared to 23 percent of all Glendale housing units. The data for western Glendale shows similar incidences of overcrowding. Approximately 32 percent of housing units were overcrowded in western Glendale.

Target Areas

The City's target areas are defined by physical, social and economic conditions which include concentrations of minority and low and moderate-income households, areas of poverty, above average crime rates, and substandard housing conditions. Based on the analysis of these conditions and trends, southern Glendale is determined to be the primary target area and western Glendale is the secondary target for use of federal funds.


CITY OF GLENDALE
Low/Moderate Income Areas
Low/Moderate Income Concentration (Census Tracts with 51% or more Low/ Moderate Income Population)
City Boundary
Census Tract Boundary
Freeways
Roadways
Census Tract Number
ANGELES NATIONAL FOREST
DEUKMEJIAN WILDERNESS PARK
TUJUNGA
CITY OF LOS ANGELES
LA CRESCENTA
VERDUGO MOUNTAINS
BURBANK
LA CANADA FLINTRIDGE
PASADENA
GRIFFITH PARK
EAGLE ROCK
ATWATER VILLAGE
Source: Census 2000 TIGER Line Data, HUD 2004
Miles
0 0.5 1
Low and Moderate Income Areas

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PART IV. CONSOLIDATED PLAN PRIORITIES/STRATEGIES

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CONSOLIDATED PLAN PRIORITIES/STRATEGIES

This chapter of the Consolidated Plan presents Glendale's priority needs analysis and strategies for addressing those needs, as required in 24 CFR 91.215. The regulations require that every jurisdiction review the basis for assigning the priority given to each category of priority needs and identify any obstacles to meeting underserved needs. Further each jurisdiction shall review priorities and strategies to address community development needs (public facilities, infrastructure, social service and economic development); homeless needs; housing needs in the community; non-homeless special needs and anti-poverty strategy.

Establishing Priority Needs

The identification of priority needs for this Consolidated Plan was based on an extensive and diverse community needs assessment and data analysis. The community outreach resulted in approximately 1,318 responses from residents and community agency stakeholders. These responses, along with relevant demographic data, were presented to the CDBG Advisory Committee, who reviewed, analyzed and discussed the data and developed recommendations for program priorities. Based on the Advisory Committee's evaluation of the input received, the needs and priorities expressed by the community and corroborated by census data continue to be consistent with current program priorities. Those priorities were then approved by the Glendale City Council and Housing Authority as a community expression of the following priorities for uses of federal funds in each of the specified categories. The list of priorities should not be construed as a listing based on order of priority, particularly since the opinion survey indicated very little difference in scoring between the top three or four priorities in each category. The priorities listed below have been assigned a high or medium priority in this Consolidated Plan. Further explanation of the priority levels is provided below.

TABLE 40
Priority Needs: Community Development, Homeless, Non-Homeless Special Needs, and Housing

Social Services: • At-risk Youth programs including youth counseling, gang and drug prevention, after-school programs, youth employment services, and youth recreation programs • Employment programs including job counseling, job training, job development, and English as a Second Language (ESL) classes • Crime, and public safety programs such as neighborhood watch programs and emergency preparedness • Child care for pre-school and school aged children • Senior services including transportation, in-home support, and recreation and social service centers • Health services • Mental health services • Fair housing services • Services for the developmentally and physically disabled
Neighborhood Improvements • Health facilities • Libraries • Parks, community centers and open space • Trash and debris abatement • Street lights • Street, curb and sidewalk improvements • Handicapped accessibility • Parking • Code enforcement and Graffiti removal
Homeless • Emergency shelters • Intake and case management • Homeless prevention • Supportive services • Street outreach • Service gaps
Housing • Home ownership assistance • Affordable rental housing • Multi-family housing rehabilitation

Each section below identifies and more fully describes the priority needs for Community Development and Non-Homeless Special Needs Populations;

Homeless; and Housing. These priorities have been incorporated into the HUD Consolidated Plan Management Program (CPMP) Needs Table in the Appendix. Specific short and long-term objectives are also provided in the Appendix. The CPMP Tables in the Appendix incorporate the Consolidated Plan Tables 1B, 1C, 2A, 2B, and 2C. Consolidated Plan Table 1A is presented in the Community Needs chapter as Table 31. Due to the technical nature of the HUD CPMP tables, summary tables for each program area are included in the text below.

Determining Priority Needs

The priority needs identified for each category are classified as High, Medium, Low or No Need in the Consolidated Plan for funding purposes. Based on HUD recommendations and the City's prior practices, general relative priorities for funding will be as follows:

High Priority: The jurisdiction plans to use funds made available for activities that address this unmet need during the period of time designated in the Strategic Plan.

Medium Priority: If funds are available and opportunities arise, activities to address this unmet need may be funded by the locality during the period of time designated in the Strategic Plan. Also, the locality will take other actions to help this group locate other sources of funds.

Low Priority: The jurisdiction does not plan to use funds made available for activities to address this unmet need during the period of time designated in the Strategic Plan. The jurisdiction will consider certifications of consistency for other entities' applications for Federal assistance.

No Such Need: The jurisdiction finds there is no need or the jurisdiction shows that this need is already substantially addressed. No certifications of consistency will be considered.

Obstacles to Meeting Underserved Needs

As Glendale prepares to address priority needs, the City recognizes that there are obstacles to meeting underserved needs. The primary obstacles to meeting underserved needs are similar to those reported in previous Consolidated Plans and Action Plans: the cost of providing those services; community opposition; and capacity of organizations.

Cost constraints reflect high land value, the higher cost of expertise to work with specialized targeted populations, and continued decrease of other funding sources (both private and public). Though Glendale land and housing values have decreased, they are still relatively high compared to comparable neighboring jurisdictions. Construction costs, though relatively high, have stabilized due to the changes in the housing market. As knowledge of underserved needs grows, recognizing the specialized services needed to address the particular issues is important. However, those specialized services are often harder to find and are likely to cost more. Public funding, from housing funds to social service funds, at the State level has decreased significantly. Housing funds from Proposition 1C have been allocated; and social service programs have been and are being cut from the State budget. Private funding sources have diminished resources – foundation investments have declined in value; corporations do not need to purchase tax credits; and overall giving to charity is uncertain from year to year.

Community opposition continues as an obstacle. Underserved populations are often the most stigmatized in the community, particularly the disabled or homeless. Residents want to 'protect' their neighborhoods from services and housing assisting these populations.

Organizational capacity is another obstacle to addressing underserved needs. Many of the local non-profits have excellent programs, but do not have the capacity to provide the detailed reports, program planning, and strategic focus required when using federal and other grant funds.

Glendale continues to address these obstacles through a variety of actions. Glendale staff is continually updating awareness of available funding opportunities and designs City programs to complement these other resources. This helps leverage local funds to the greatest extent. Glendale staff also provides technical assistance to agencies to apply for additional funds; build staff capacity; and understand local, state and national trends in service and housing provision. In the last five years, some new social service and housing providers have developed programs and housing in Glendale, bringing additional expertise to the community. The Glendale Homeless Coalition and its member agencies have taken on the task of community outreach. The Coalition works with community members to provide education on homelessness and bring sensitivity regarding the need for services. In addition, when local programs have had negative impacts on their neighbors, the Coalition has established coordination groups to provide a forum for open discourse and problem solving between the program provider(s) and the neighbors.

COMMUNITY DEVELOPMENT PRIORITIES/STRATEGIES

The five-year non-housing Community Development Strategy is based on the usage of federal Community Development Block Grant (CDBG), Section 108 Loan Guarantee Program funds, City of Glendale Capital Improvement Program funds, as well as other public and private funding as it becomes available. Federal CDBG and Section 108 funds will be allocated in a manner consistent with the non-housing community development priorities set by the community.

This section, in accordance with 24 CFR 91.214(e), identifies the jurisdiction's priority non-housing community development needs eligible for assistance by CDBG eligibility category specified in the Community Development Needs Table in the Appendix – i.e., public facilities, public improvements, public services and economic development. The basis for assigning the priority given to each category of priority needs will be described and specific obstacles to meeting underserved needs will be identified. This Consolidated Plan organizes these non-housing needs into social service needs; neighborhood and capital improvements needs; and economic development needs. The non-housing needs of special needs populations are also incorporated into these categories.

Specific long-term and short-term community development objectives (including economic development activities that create jobs), will be identified and developed in accordance with the statutory goals described in section 24 CFR 91.1 and with the primary objective of the CDBG program to provide decent housing and a suitable living environment and expand economic opportunities, principally for low- and moderate-income persons. In addition, tables for each eligibility category are presented for each specific objective, and contain proposed accomplishments, with the time period (i.e., one, two, three, or more years), and annual program year numeric goals the jurisdiction hopes to achieve in quantitative terms, or in other measurable terms as identified and defined by the jurisdiction.

This section presents the priority needs and basis for designation of those priority needs for community development and special needs populations. This includes priority designations for public social service needs; neighborhood and capital improvements needs; economic development needs; and planning. Tables that outline specific programs, outcomes and 5-year allocations to address these priority needs are also presented.

Social Service Needs

The following section presents a rating of priority needs for social services and the basis for the rating.

High Priority Social Service Needs

- *Youth Services*

Youth services continue as a top priority identified by the community through the survey, public hearing and focus groups. At-risk youth programs identified include youth counseling, gang and drug prevention, after-school programs, youth employment services and youth recreation programs.

- *Employment Training*

In all opinion surveys conducted and in the public hearing, employment programs were identified as a top priority need in the community. Employment programs identified include job counseling, job training, job development and English as a Second Language (ESL) classes. The 2000 Census income, immigration and employment data also suggests the high need for employment and training programs. Most employment programs will be provided at the Verdugo Jobs Center using Workforce Investment Act (WIA) funding.

- *Crime Awareness/Public Safety*

Crime and public safety was also a top priority according to the Community Needs Survey and public hearing participants. Youth anti-gang and drug prevention programs and after-school childcare are commonly considered part of an effective crime prevention strategy.

- *Child Care Services*

Childcare for pre-school and school aged children continues to be identified as a high need. These services are especially needed as a supportive service to employment and employment programs, which are also one of the top two identified needs in the community. Childcare was also identified as a priority in the Anti-Poverty strategy.

- *Senior Services*

Senior services, including transportation, in-home support, meals, care management, and recreation and social service centers, were identified as a priority need in both the community needs survey and in the public hearing.

- *Health Services*

The southern Glendale community is currently serviced by two area hospitals and the new community based health clinic located at the Edison Pacific Community Center. However, there are still many residents that cannot afford health care and there are no public County operated clinics in the area.

- *Fair Housing, Tenant/Landlord Counseling and other Legal Services*

Housing rights were identified as a high need by all community groups. In addition, in order to receive federal community development and housing funds, the City is required to ensure that fair housing services are available to its renter, property owner, and homebuyer citizens. The City contracts with the Housing Rights Center (HRC) to meet this need and responsibility, and HRC receives 1,000 calls per year from Glendale residents seeking housing rights information and counseling. Approximately 13 housing discrimination cases per year are filed in Glendale. In addition, in 2003, the City passed a Just Cause Eviction Ordinance to protect the rights of Glendale tenants.

- *Homeless and Battered and Abused Spouses*

Homelessness was identified as another high priority need. Street outreach, intensive case management, expanding limited housing options, and community coordination will continue to be the main focus regarding homelessness. Though CDBG is not the primary source of funds to assist homeless persons; there are some situations in which CDBG complements and leverages existing funds to ensure a continuum of care for the homeless in Glendale. Other needs associated with homelessness that have been designated as a medium priority are mental health services and subsistence payments. The Glendale Homeless Coalition supports continued programs providing health services and mental health services to the homeless. Subsistence payments along with security deposits and rental housing subsidies are also tools that are occasionally provided to persons who are homeless or at-risk of homelessness. Since these services are usually funded using other sources, they have a medium priority designation for CDBG funding.

Medium Priority Social Service Needs

- *Handicapped Services*

Though these services are not identified by the community as a need, the 2000 Census data indicates that 33 percent of the population over 5 years old in Glendale has a disability. Therefore, the City anticipates that there may be some opportunities during this Consolidated Plan period to fund services for handicapped persons.

- *Operating Cost of Homeless/AIDS Patients Programs*

The community continues to rank the need for assisting the homeless as a priority. Operating costs related to homeless programs is a medium priority for funding.

- *Relocation and Related Services*

To the extent the City acquires or assists in the acquisition of property, the City is prepared to fund to the cost of relocation and other related services.

Low Priority Social Service Needs

- *Transportation Services*

Most residents surveyed expressed a low need in the area of transportation services, with an exception for senior transportation.

- *Substance Abuse Services*

The category "services to groups with special needs" ranked low in the Community Needs Survey.

Social Service Strategies and Funding Levels

The projected five-year funding level for social services is $2,700,000. This amount is based on allocating 15 percent of the total anticipated CDBG allocation of $18,000,000 over the next five years. The majority of the funds, $4.4 million are allocated for youth programs, with an additional $250,000 allocated to youth programs related to crime and public safety. These two program areas, account for approximately 54 percent (54%) of the social service funds. Approximately $375,000 of social service program funding will be allocated for homeless programs under the Continuum of Care. In addition, it is projected that $15 million in Workforce Investment Act (WIA) funds will be used to provide employment programs. Strategies for addressing each of these priorities along with projected funding allocations are shown in Table 41 below. The social service strategy also incorporates WIA funds to leverage CDBG to address employment priorities.

TABLE 41
Social Service Program Strategies

Social Service Programs	Projected Funding Level	CPMP Objective/ Outcome*
Youth Programs (High Priority)	**$ 1,100,000**	**SL-1**
* Continue to support youth (aged 16-24) employment life skills and job training programs.	$ 500,000	
* Coordinate and leverage youth programs with the City and non-profit youth service providers and continue to support after school education and recreational programs, such as the bookmobile, outdoor leadership, mentoring, youth outreach, youth sports, and tutoring programs	$ 500,000	
* Support youth and family counseling programs, such as conflict resolution, and behavioral modification	$ 100,000	
* Coordinate and leverage health education, case management and treatment		
Outcomes: Serve 2,500 youth in recreational, academic, and after-school programs (500 served annually); 2,500 duplicated served with library services (only for FY 2010/11)		
Employment Programs (High Priority)	**$ 100,000**	**SL-1**
* Provide job search, assessment and training programs at the Verdugo One Stop Job Center (VJC) by leveraging the allocation of approximately $15 million in Workforce Investment Act (WIA) funds		
* Support and coordinate targeted job training programs and employment supportive services such as ESL, adult education, special needs job training, childcare and transportation; and leverage other funds such as WIA with CDBG and other federal funds (ARRA)	$ 100,000	
* Continue to support creative targeted employment programs for special needs populations		
* Provide satellite job centers (also listed as an Economic Development Program)		
Outcomes: Serve 250 low-income persons (50 annually) with employment, assessment, training, referrals, and placement through coordinated efforts with the Verdugo Jobs Center		

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

TABLE 41 (cont'd)
Social Service Program Strategies

Social Service Programs	Projected Funding Level	CPMP Objective/ Outcome*
Crime and Public Safety (High Priority)	**$ 250,000**	**SL-1**
* Coordinate at-risk youth programs with Glendale Police Department Youth Services Bureau and with neighborhood revitalization public safety activities, including graffiti removal and neighborhood beautification programs		
* Provide gang and drug diversion programs, including Police Activities League (PAL) programs; equestrian drill team, youth boxing and STAR mentorship programs; and other at-risk youth programs such as employment and counseling	$ 250,000	
Outcomes: Serve 375 at-risk youth (75 annually) through 10 crime awareness/prevention programs		
Childcare (High Priority)	**$ 350,000**	**SL-1**
* Coordinate and leverage pre-school and after-school childcare programs.	$ 350,000	
Outcomes: Serve 500 individuals (100 annually) with childcare		
Senior Services (High Priority)	**$ 150,000**	**SL-1**
* Provide adult care management, health education, recreation, nutrition, employment services, meals, and crime prevention awareness		
* Support alternative affordable housing opportunities such as home sharing		
Outcomes: Serve 900 low-income seniors (180 annually) with case management, meals, and other senior services		
Fair Housing and Health Services (High Priority)	**$ 375,000**	**SL-1**
* Fair housing assistance and tenant/landlord counseling	$ 75,000	
* Various services including: services to the disabled, ESL, legal assistance, health services, adult counseling and case management, special needs (non-homeless), and immigration services	$ 300,000	
Outcomes: Serve 5,000 extremely low, very low and low income persons (1,000 annually) with various fair housing and health services		

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

TABLE 41 (cont'd)
Social Service Program Strategies

Social Service Programs	Projected Funding Level	CPMP Objective/ Outcome*
Homeless (High Priority)	**$ 375,000**	**SL-1**
* Case management	$ 175,000	
* Homeless prevention	$ 175,000	
* Operation of service center, emergency shelters and transitional housing facilities. Most funding is provided by Supportive Housing Program (SHP) and Emergency Shelter Grant (ESG) funds. However, the City anticipates leveraging a portion of CDBG funds. **Outcomes:** Provided in Homeless Program strategy	$ 25,000	
TOTALS	**$ 2,700,000**	

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

Neighborhood and Capital Improvements Needs

Neighborhood and Capital Improvements needs include both public and private facilities and neighborhood infrastructure improvement needs. These needs are listed by high, medium, low priority or no need identified with the basis for the designation. The order of program need within each designation is not intended as a ranking of priority need.

High Priority Neighborhood and Capital Improvements Needs

- *Neighborhood Facilities/Community Centers*

The Community Needs Survey identified a variety of neighborhood and community facilities as high priorities, including health centers, libraries, parks and recreational facilities, and youth centers.

- *Parks and/or Recreational Facilities*

The public hearing participants identified park safety features such as lighting, and improved park recreational facilities as the most important community facilities needs.

- *Homeless Facilities*

Emergency shelters continue as a high priority for the greater Glendale community. Though Glendale is focusing efforts on the provision of permanent supportive housing, particularly for the chronically homeless, there is an interest in acquiring and rehabilitating a site for a permanent year-round shelter. The larger (40 bed) existing shelter is located in a leased building. The service provider has indicated an interest in acquiring and rehabilitating a building that could accommodate at least the 40 existing beds and one-stop center.

- *Youth Centers*

Since youth programs were identified as a high priority by the community, youth centers to house youth programs are a high priority.

- *Child Care Centers*

Existing licensed childcare centers require maintenance to ensure they meet licensing standards and need to be expanded to meet a continued high demand for childcare services.

- *Health Facilities*

Health facilities continue to be identified as a high priority by the community, although the southern Glendale community is currently serviced by two area

hospitals and the new community based health clinic targeting low-income persons located at the Edison Pacific Community Center.

- *Code Enforcement*

Results from the community survey and the public hearing continue to identify code enforcement as a high priority. It is also identified as a high priority under the housing needs assessment.

Medium Priority Neighborhood and Capital Improvements Needs

- *Senior Centers*

There are currently two facilities serving the estimated 5,846 senior citizens in southern Glendale - the Maple Park Center and the Adult Recreation Center. Therefore, though senior services are a high priority, the need for senior centers is assessed as medium.

- *Handicapped Centers/Removal of Architectural Barriers*

The community has not expressed a need for handicapped centers; however, there is recognition that existing neighborhood and community centers should be accessible to persons with a disability. Therefore, removal of architectural barriers is considered a medium priority need.

- *Parking Facilities/Traffic*

In the Community Needs Survey, traffic calming and parking were identified as a priority. Traffic enforcement and additional parking spaces were identified as needs in particular areas, especially near parks.

- *Street Improvements*

The community survey and public hearing participants identified a medium need for street improvements. CDBG funds are generally leveraged with City General funds as part of the Public Works Division's Annual Street Reconstruction Program.

- *Sidewalk Improvements*

Under the Consolidated Plan, CDBG sidewalk improvements and ramps for Americans with Disabilities (ADA) accessibility continue as a medium priority to be provided on an as-needed basis in southern and western Glendale.

- *Other Infrastructure Improvement Needs, including Public Safety Improvements*

Other infrastructure improvement needs include parkways, trees, lighting, traffic calming, parking, and street and alley lighting. As requests are considered the City's public safety experts are consulted to address any crime and public safety issues as well. All public input concurred that there is a medium need for these

types of improvements. Under the Consolidated Plan, these types of improvements will be leveraged with City General funds.

No Neighborhood and Capital Improvements Needs Identified

Neither business owners nor local residents expressed concern with the following need categories:

- *Water/Sewer Improvements* – Most of the water and sewer improvements needed in southern Glendale neighborhoods have been completed and this need category was not indicated as a concern by the public.
- *Flood Drain Improvements* - The City is not in a Flood Plain district.
- *Asbestos Removal*
- *Non-Residential Historic Preservation Needs*
- *Fire Stations/Equipment*
- *AIDS patients*
- *Solid Waste Disposal*
- *Tree Planting*

Neighborhood and Capital Improvements Strategies and Funding Levels

Approximately $10.8 million is allocated to this category, which is 60 percent (60%) of the anticipated CDBG funds for five years. The majority of the $10.8 million, $7.45 million, is allocated to capital improvement projects including parks, recreational facilities, libraries and social service community centers. The remaining $3.35 million is allocated to neighborhood improvements. Table 42 provides a summary of the proposed funding allocation.

TABLE 42
Neighborhood and Capital Improvements

Neighborhood/Capital Improvements	Projected Funding Level	CPMP Objective/ Outcome*
Neighborhood Improvements (High/Medium Priority)	**$ 3,350,000**	**SL-1**
* Continue to target neighborhoods for comprehensive revitalization, including construction of public improvements, and involve residents in the planning of these revitalization efforts. Incorporate housing, parks and school improvements. Complete the East Garfield Neighborhood Improvement Project and initiate planning activities for at least one new project in southern or western Glendale, such as South Glendale Avenue. Public improvements may include street resurfacing, curbs, sidewalks, parkway improvements, street trees, traffic calming, bike paths/bikeways, and streetlights. (High Priority)	$ 1,250,000	
* Continue to include residential street lighting in neighborhood improvement projects on a case by case basis. (Medium Priority)		
* Continue to support neighborhood planning and neighborhood improvement projects. (Medium Priority)		
* Continue to implement residential and commercial code enforcement programs to ensure quality housing, and provide education to residents concerning neighborhood standards. (High Priority)	$ 2,100,000	
Outcomes: Complete the East Garfield Neighborhood Improvement Project; coordinate efforts with other affected City staff to implement one new targeted neighborhood improvement project in southern or western Glendale; respond to neighborhood requests as needed; and conduct 5,000 housing inspections (1,000 annually) for code compliance in southern Glendale.		

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

TABLE 42 (cont'd)
Neighborhood and Capital Improvements

Neighborhood/Capital Improvements	Projected Funding Level	CPMP Objective/ Outcome*
Capital Improvement Projects including parks, recreational facilities, libraries and social service community centers (High Priority)	**$ 7,450,000**	**SL-1**
* Fund acquisition, expansion, and development of neighborhood parks in southern Glendale. Fund Library improvements in southern Glendale. Fund acquisition and rehabilitation of a homeless access center and year round permanent emergency shelter, potentially through a new Section 108 loan from HUD	$ 5,150,000	
* Continue to rehabilitate and expand existing non-profit and City-owned community centers and recreational facilities including libraries, childcare centers, youth centers, homeless facilities, health centers, and neighborhood service centers.	$ 1,500,000	
* Support projects to modify community centers and public facilities for physical accessibility	$ 100,000	
* Repayment of the Section 108 loan from HUD for the Edison Pacific Project. There are three years remaining with annual payments of $250,000.	$ 750,000	
* Provide opportunities for greening Glendale through bikeway improvements throughout the City.		
Outcomes: Improve and/or develop 5 non-profit or City-owned youth centers; upgrade and/or expand 10 existing non-profit or City-owned community centers, health centers, or libraries; develop, expand and/or rehabilitate and improve 2 neighborhood parks; complete payment of Section 108 loan for the Edison Pacific Project.		
TOTALS	**$10,800,000**	

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

Economic Development

The Economic Development priority needs are designated and discussed in this section.

High Priority Economic Development Needs

- *Commercial Building Acquisition, Construction, and/or Rehabilitation*

The City completed commercial rehabilitation in two commercial areas – Colorado Street and Adams Square - during the past five year period. The City is interested in focusing efforts in another commercial area, such as South Glendale Avenue. Various City departments will be involved in a coordinated effort to encourage economic development by improving the physical infrastructure of the area (including buildings) and providing technical support to business owners related to business and job development.

- *Economic Development Technical Assistance*

Technical assistance to small business remains a high priority. The high rate of self-employment in Glendale and the high business turnover rate provide an indication that many local residents may benefit from business development assistance.

Medium Priority Economic Development Needs

- *Direct Financial Assistance to For-Profits*

As the City focuses on a particular commercial area and/or particular industries, there is a potential need for acquisition of land in order to assist a business with expansion or consolidation. In addition, the City is exploring the need for direct financial assistance. The Business Development Officer has been working with businesses in particular industries and is beginning to assess the needs related to those industries.

- *Commercial/Industrial and Infrastructure Improvements*

The City has found that privately funded infrastructure costs can hinder economic development growth. By providing public funding for upgrades to commercial and industrial infrastructure, existing Glendale businesses would be able to expand without incurring major costs. Also, start-up businesses seeking to locate in Glendale would have adequate levels of infrastructure to accommodate business needs. Residents and business owners have expressed an interest in improved public infrastructure (sidewalks, streets, traffic calming) as

well as improved landscaping and trees to improve and enhance businesses and promote business development within the community.

Low Priority or No Economic Development Needs

- *Land Acquisition/Disposition*
- *Non-Residential Historic Preservation: No such need identified.*
- *Micro-Enterprises: No such need identified.*

Economic Strategies and Funding Levels

This five year Consolidated Plan allocates approximately $900,000 to economic development programs. This is approximately five percent (5%) of the total CDBG allocation. Several Departments within the City are in discussion regarding an approach to providing economic development programs in another commercial area; particularly given the success of the Colorado Street and Adams Square efforts. City staff is currently working in other geographic areas or with specific industries and need to finish that work before starting a concerted effort in another geographic area of town. However, there is commitment to assess the commercial areas along Glendale Avenue, south of Broadway within this five year Con Plan period. Table 43 provides a summary of the proposed five year program strategies and funding allocations.

TABLE 43
Economic Development Program Strategies

Economic Development Program Strategies	Projected Funding Level	CPMP Objective/ Outcome*
Rehabilitation of Commercial Buildings and Public Improvements (High Priority)	**$ 600,000**	**EO-3**
* Provide architectural design and rehabilitation services to businesses in at least one targeted commercial zone such as South Glendale Avenue.	$ 500,000	
* Provide funding for public improvements supporting economic development projects, such as streetscape, traffic calming, alleys, and street lighting.	$ 100,000	
Outcomes: Identify one targeted commercial zone for coordinated City efforts to plan and implement design and rehabilitation services to commercial buildings and fund public improvements; provide funds to implement bike paths/bikeways in low/mod income area(s). Assist 12 projects for a total of 36 storefronts (4 projects with 9 storefronts annually from FY 2012/13 through FY 2014/15)		
Job Creation/Employment (High Priority)	**$ 250,000**	**EO-1**
* Continue to fund social service programs, which support, leverage and coordinate employment, ESL and basic skills programs with WIA programs and the Verdugo Job Center (VJC) services. $15 million in WIA funds is allocated under the social services program strategy.		
* Provide Job Center satellites at libraries and neighborhood centers.		
Outcomes: Create or retain 75 new targeted jobs (15 annually); serve 50 persons at 2 new satellite job centers.		
Business Assistance (High Priority)	**$ 50,000**	**EO-1**
* Small business technical assistance programs to increase attraction, retention and expansion of businesses, to create jobs for low-income persons.		
* Provide business outreach and customized business services through the use of $2.5 million in WIA funds.		
Outcomes: Contact at least 500 businesses (100 annually) regarding business assistance services; provide technical assistance to at least 50 businesses (10 annually).		
TOTALS	**$ 900,000**	

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

Planning

- *Planning: High Priority*

The need for citizen participation in planning public improvement projects and setting public policy related to services has increased citywide. The Community Services and Parks Department is committed to public participation, neighborhood planning, and working in collaboration with other City departments to meet the needs of Glendale's neighborhoods. As a result, the City has assigned a high relative priority to these activities.

The City has allocated 20 percent of the anticipated CDBG funds for planning and program administration. This is approximately $3.6 million for the five year period.

HOMELESS AND HOMELESS AT-RISK PRIORITIES/STRATEGIES

This section of the Consolidated Plan identifies the homeless and homeless prevention priorities; describes the basis for designating those priorities; presents the strategies for addressing the priorities; and provides a narrative regarding the chronically homeless. Glendale has developed a sophisticated continuum of care system, with significant community participation from the broad-based Glendale Homeless Coalition.

Strategy to Address the Needs of Homeless Persons

The City has been applying for and receiving Continuum of Care Homeless Assistance funds through the SHP program since 1995. HUD looks favorably on systems of homeless service delivery that are planned and implemented by broad-based coalitions to ensure maximum coordination at the local level. Thus, HUD encourages the submission of a "consolidated application" in which one applicant applies on behalf of all the project sponsors in a geographic area. Since 1996, the Housing Authority of the City of Glendale has submitted a consolidated application on behalf of the Glendale Homeless Coalition, the local broad-based coalition providing coordination in Glendale. Through this annual competitive process, over $20.4 million in funding exclusively for homeless programs has been awarded to the Authority and Glendale service providers.

For the past several years, HUD has adjusted applicants' proposed share of the funding available (pro-rata need) to an amount equal to one year of funding for each eligible renewal project. This year the City of Glendale Housing Authority renewed eleven existing projects eligible for renewal funding and applied for one new Shelter Plus Care Program for a total of twelve (12) projects. In November, 2009 the Housing Authority submitted the Continuum of Care application to HUD. The application relies on a snapshot of homeless facilities, services and the City's one night point-in-time homeless count (January 27, 2009). HUD requires the Consolidated Plan to reflect that application, including the homeless count. Additional information about existing facilities and services available in Glendale is provided in the Community Profile chapter[5]; while more detailed information from the point-in-time count, including the chronically homeless, is provided in the Community Needs chapter[6].

For the Glendale Continuum of Care for the Homeless, a high priority was assigned to coordination of services; street outreach; access center, intake, assessment, and case management; emergency services; emergency shelters; and

[5] Community Profile, pages 23-28.
[6] Community Needs, pages 68-74.

permanent supportive housing for both individuals and families. A medium priority was assigned to transitional housing for both individuals and families and to the support services for homeless persons discharged from Glendale Adventist Medical Center[7]. These priorities reflect current practices to move homeless persons into permanent housing as quickly as possible in order to stabilize their housing and more easily provide necessary social services. This is particularly helpful for chronically homeless individuals and reflects HUD's top priority to serve the chronically homeless. One of the CPMP tables in the Appendix presents the Continuum of Care Homeless population and subpopulations as well as the needs for homeless individuals and families, expressed in numbers. The Table also shows the priority designations for homeless need categories.

Glendale's Homeless Continuum of Care Strategies

The Glendale Continuum of Care is comprised of the following components:

1. Coordination of Services: Glendale is fortunate to coordinate services through the Glendale Homeless Coalition, formed in 1995. Glendale also coordinates services through use of the Homeless Management Information System (HMIS). All homeless service provides participate in HMIS and new service providers are added as needed. Agency participation in HMIS has aided the Coalition in identifying needs and evaluating the success of homeless programs. This program has a high priority for funding.

2. Street Outreach: Currently, the most basic level of service in the continuum for homeless persons, particularly those who are chronically homeless, is street outreach. The Street Outreach Program consists of two components: (1) homeless case management on the streets, and (2) community education, response and mediation. Currently, the street outreach program consists of one Mental Health Street Outreach Case Manager, and two general outreach case managers. The street outreach case managers provide responsive case management, community education, transportation for emergency shelters and supportive services. In addition, the street outreach program is available to any business or community member to call and request assistance. This program has a high priority for funding.

3. One-Stop Access Center, Intake, Assessment and Case Management: Currently, Glendale's continuum of care is comprised of two entry-points for homeless individuals and families: one through the YWCA of Glendale for

[7] These specialized discharge services are designated as a medium priority because the program is funded by GAMC with no anticipation of federal funds, unlike other anticipated supportive services.

victims of domestic violence and one through People Assisting the Homeless (PATH) Achieve Glendale. The goal of these entry-points is to engage homeless persons in an individualized case management program that will not only meet their emergency needs, but that will deal with the root causes of their homelessness. Supportive services available through the continuum include: street outreach, including mental health services and veteran's outreach; a domestic violence hotline; domestic violence counseling; needs assessment; benefits assistance; childcare assistance; a health clinic; mental health assessment and assistance; and housing placement services. These programs have a high priority for funding.

4. Emergency Services: In addition, a number of agencies provide services designed to meet the emergency needs of homeless persons, such as food, clothing, and transportation and short-term shelter. These programs have a high priority for funding.

5. Emergency Shelters: There are two year-round shelters that together provide 50-beds intensive case management in Glendale's continuum of care. Residents must commit to follow a case management plan with benchmarks to work toward transitioning into either transitional or permanent housing upon program completion. The emergency shelters provide case management and residential services, including housing, meal, transportation and shower facilities. Families are connected to mainstream resources and save money to pay toward housing costs when exiting the emergency shelter programs. Ultimately clients are referred to transitional housing programs or permanent supportive housing programs. One of the two shelters, co-located with the one-stop center, is leased. That lease is due to expire in this five year time period and the operator, PATH, is looking for a replacement facility for purchase. PATH is working with the City to consider the potential of using HUD Section 108 loan funds for the acquisition and rehabilitation of a suitable property. These programs have a high priority for funding.

6. Transitional Housing: Transitional housing refers to housing with a maximum stay of 24 months with ongoing case management to enable clients to live independently and to transition to self-sufficiency and permanent housing. Three transitional housing programs currently provide homeless families and families who are domestic-violence victims with long-term housing and case management. Families pay a portion of their adjusted income in rent, and receive intensive case management services to help them build their income, save money, and move into permanent housing. These programs have a medium priority for funding.

7. Permanent Supportive Housing: Permanent housing is long term housing without timeframes, but still tied to case management and supportive services. Most permanent housing programs are targeted for persons with disabilities, or special needs. There are currently four permanent supportive housing projects that exclusively serve homeless persons, plus Shelter Plus Care housing vouchers for 32 disabled individuals and families, including three targeting chronic, disabled individuals. The Housing Authority's Housing Choice Voucher (Section 8) program also offers priority assistance to homeless families who qualify. In addition, one affordable housing project offers priority admission to eligible homeless families when openings become available. These programs have a high priority for funding.

The Glendale Homeless Coalition plans to continue support of the existing programs which all provide essential steps along the Continuum of Care for the homeless. The Coalition recognizes that there are needs not fully addressed in the existing Continuum, and therefore, periodically assesses the existing Continuum and homeless population in order to make the necessary adjustments to services. Given the current state of funding for homeless programs, the Coalition is alert to new funding opportunities that address unmet needs and attempts to leverage other public and private funds to the greatest extent feasible.

Focus on Strategy for Addressing Chronic Homelessness

The Federal administration continues to make ending chronic homelessness a top national priority, and therefore programs which serve the chronically homeless, especially those which provide permanent housing to this population have the highest priority; and they are the only new (non-renewal) programs being funded by HUD under SHP.

HUD defines the chronically homeless as: "an unaccompanied homeless individual with a disability condition who has either been continuously homeless for a year or more or has had at least four (4) episodes of homelessness in the past three (3) years." Data collected during the week of January 26 through January 31, 2009 for the unduplicated point-in-time count, indicates that approximately 34% of homeless individuals in Glendale meet the definition of being chronically homeless.

In response to the Federal Administration's charge for communities to adopt and implement ten-year strategies to end chronic homelessness and the posturing for funding associated with having a chronic homeless plan to place, on September 26, 2006, the Housing Authority approved the City of Glendale Ten-Year

Strategy to End Chronic Homelessness. The plan is compromised of five main strategies:

1. Creation and implementation of an on-going public education campaign.

2. Expansion of the existing Street Outreach Program.

3. Exploration and development of an integrated mental health care, health care and substance abuse treatment supportive service program.

4. Development of a First Step Housing-Discharge Planning program.

5. Continue development of affordable, permanent and permanent supportive housing programming designed to address the needs of chronic homeless individuals and families.

Discharge Planning

In developing a Discharge Planning program, the City has identified publicly-funded institutions and systems of care that discharge persons: foster care; health care; mental health care; and corrections. A member of the Glendale Homeless Coalition representing the Glendale Unified School District interacts with the Department of Children and Family Services office in Pasadena to coordinate education issues for children living with foster parents in Glendale. Since 1996, the City has had discharge planning practices in place for Glendale Adventist Medical Center, a privately funded hospital. The Glendale Adventist Medical Center's Assist Care Program provides case management aimed at linking clients to the continuum of care – assisting with transportation, motel vouchers (when appropriate), and the street outreach team (visiting homeless in the hospital). Glendale Memorial Hospital and the Verdugo Hills Hospital are also aware of the street outreach team services. Patients with the Verdugo Mental Health Center (an active participant in the Glendale Homeless Coalition) receive individualized case management plans and receive follow-up services. The only publicly funded corrections institution in Glendale is the Glendale City Jail. In 2002, the City and the Glendale Homeless Coalition developed a discharge planning strategy. Information about homeless services is provided to all homeless persons upon discharge. If the person agrees, the street outreach team meets with the person and establishes follow-up steps. The City and the Coalition are continually evaluating the existing discharge planning, particularly as available services and programs change.

Glendale's Continuum of Care application for 2009 included a Samaritan Housing Initiative, a NOFA funding bonus serving as an incentive to provide new permanent housing project(s) serving exclusively chronically homeless persons. The 2009 NOFA bonus was 15 percent (15%) of the local Continuum of Care's base pro-rata need for renewals. In Glendale, 15 percent (15%) of the pro-rata need represents $167,814. Due to this limited amount of bonus funding, Glendale has proposed that the most expedient, cost effective manner in which to use this funding would be through the expansion of the Shelter Plus Care program, which is similar to Section 8 rental subsidy vouchers, as allowed under the NOFA. This would create approximately three (3) additional housing beds for the chronically homeless.

The Glendale Housing Authority is the grantee and official lead agency for homeless services in Glendale; however, the Glendale Homeless Coalition provides planning oversight and coordination implementation of those services. The Homeless Coalition is comprised of 100 individuals representing over forty public/private agencies, community groups, residents and formerly homeless persons. The Coalition provides a community based approach to the development and implementation of a strategy designed to address the needs of homeless persons and has been unified and on-going since 1995. The Coalition annually assesses Glendale's progress toward a fully realized continuum of care for the homeless, reviewing existing needs and services and refining priorities based on the assessment. The Coalition has established a Steering Committee comprised of twelve Coalition members as follows: the Chairperson; Vice Chairperson; acting Sub-Committee Chairpersons; two (2) representatives from the City of Glendale; one (1) alumni/formerly homeless person; and the remainder are other members of the Coalition. Current Sub-Committees include Committee to Address Chronic Homeless and 10-Year Strategy; Winter Shelter; Southern California Regional Homeless Management Information System (HMIS) Collaborative; and a Discharge Planning Committee. The City of Glendale plans to continue the dedication of two staff positions for the administration, technical assistance, and coordination of homeless and homeless-prevention programs.

Addressing the Needs of Persons At-Risk of Homelessness

The City of Glendale recognizes the high need for ongoing supportive services and development of affordable housing to prevent homelessness. Recent reports from service providers demonstrate a large homeless at-risk population in Glendale. Households at-risk are comprised of families with children, seniors, and single adults living below the poverty level.

Homeless prevention case management services are provided to households at-risk for homelessness, along with programs providing one-time financial assistance for eligible households facing eviction or utility disconnection. Glendale has also received a grant of over $1.3 million in Homeless Prevention and Rapid Re-housing (HPRP) funds through the 2009 American Recovery and Reinvestment Act (ARRA). These funds, available for three years, will be used as rental and utility assistance through intensive case management.

The Housing Choice Voucher (Section 8) program as well as the development of affordable rental and ownership projects discussed elsewhere in this Consolidated Plan prevent homelessness through the provision of long-term affordable housing and in some cases linkages to on-going supportive services. Permanent Supportive Housing, including Shelter Plus Care, also provides affordable housing along with intensive case management to serve disabled homeless persons who would not otherwise be able to maintain housing. Fair housing education is a supplemental resource that will be provided to educate renters about their rights and responsibilities.

Homeless Program Strategies and Funding Levels:

The proposed funding level for implementing homeless programs under the Continuum of Care is $12,847,630. Of this amount, $725,000 is projected in Emergency Shelter Grant (ESG) funds; $170,000 in CDBG funds; $8,986,181 in Supportive Housing Program (SHP) funds; $2,045,500 in Shelter Plus Care funds; $250,000 in Redevelopment Set-Aside funds; and $670,949 in Homeless Prevention and Rapid Re-housing Program (HPRP) funds. These funding levels are based on current annual expenditures projected over five years.

There is also a strategy to increase the use of mainstream resources to supplement homeless services provided by the continuum of care. The Department of Public Social Services has active representation at the Glendale Homeless Coalition level, educating service providers on ways to link their clients to mainstream benefits, such as General Relief, Food Stamps, Medi-Cal, and TANF.

Glendale service providers will continue to seek ways to increase private financial support for homeless programs. The HMIS Outcomes Module has assisted agencies by providing a better tool for measuring the success of their programs and has also provided invaluable information for grant writing.

TABLE 44
Homeless Program Strategies

Homeless Programs	Projected Funding Level	CPMP Objective/ Outcome*
Emergency Shelter (High Priority) * Provide 40 year round shelter beds and 10 year round domestic violence crisis beds **Outcomes:** Serve 1000 people (200 annually) in year round emergency shelters	**$ 817,500**	**SL-1**
Transitional Shelters (Medium Priority) * Provide transitional housing - 125 family beds **Outcomes:** Serve 610 persons (122 annually) in transitional housing facilities - includes individuals and families	**$ 2,447,305**	**SL-1**
Permanent Supportive Housing (High Priority) * Shelter Plus Care program - assist 34 homeless households with disabilities * Special Needs Housing for Chronically Homeless and Substance Abuse - assist 21 chronically homeless individuals through SHP permanent supportive housing program * Referrals to Section 8 and Orange Grove project - serve 5 households (SHP) **Outcomes:** Assist 34 households with S+C funds; assist 21 persons with SHP funds; refer 5 households	**$ 4,451,145** $ 2,045,500 $ 2,405,645	**DH-1**
Case Management and Supportive Services (High Priority) * Supportive Services and Case Management - enroll 4000 persons in case management at PATH ACHIEVE * Homeless Management Information System (HMIS) expansion with new social service providers * Provide childcare services for homeless families **Outcomes:** Serve 4,000 persons (800 annually) with case management services; expand HMIS to two new providers; serve 100 families with childcare	**$ 4,133,231** $ 3,760,000 $ 265,731 $ 107,500	**SL-1**

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

TABLE 44 (cont'd)
Homeless Program Strategies

Homeless Programs	Projected Funding Level	CPMP Objective/ Outcome*
Homeless Prevention Services (High Priority) * Supportive Services and Case Management Homeless prevention case management and direct financial assistance. * Homeless Prevention and Rapid Re-housing Program (HPRP) funds through 2011 **Outcomes:** Serve 1000 households (200 annually) with case management services; provide financial assistance to 400 households (80 annually); serve 80 households with HPRP funds	**$ 828,449** $ 157,500 $ 670,949	**SL-2**
Support Services (Medium Priority) * Provide specialized services to homeless discharged from Glendale Adventist Medical Center (Program leveraged by GAMC) **Outcomes:** Serve 400 persons (80 annually) with specialized services	**$ ---**	**SL-1**
Street Outreach (High Priority) * Outreach to chronically homeless persons **Outcomes:** Serve 1,500 persons (300 annually) through outreach services	**$ 170,000**	**SL-1**
TOTALS	**$ 12,847,630**	

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

HOUSING PRIORITIES/STRATEGIES

This section of the Consolidated Plan presents priority housing needs for a five-year period, as required in 24 CFR 91.215 (b). Glendale's priority housing needs are presented in accordance with the categories specified in the Housing Needs Table in the Appendix. The Strategy also establishes specific affordable housing objectives that the City intends to initiate to address the identified needs.

The City's designation of high, medium and low priority housing needs is summarized below, based on income (extremely low, low and moderate income households) and household type (elderly, small related, large related, and other households) for owners and renter:

High Priority Housing Needs:
Owner Households

- (31-50% MFI) – Elderly and Small households
- (51-80% MFI) – Elderly and Small households

Renter Households

- (0-30% MFI) –Small households
- (31-50% MFI) – Elderly, Small and Large households
- (51-80% MFI) -Small, Large and Other households

Medium Priority Housing Needs:
Owner Households

- (0-30% MFI) – Elderly households
- (31-50% MFI) - Large and Other households
- (51-80% MFI) – Small, Large and Other households

Renter Households

- (0-30% MFI) – Elderly and Large households
- (51-80% MFI) - Elderly and Other households

Low Priority Housing Needs:
Owner Households

- (0-30% MFI) –Large and Other households

Rental Households

- (0-30% MFI) – Large, Other households
- (31-50% MFI) – Other households

During FY 2010-15, Glendale will fund activities that address the housing needs of the above categories of high priority households using federal funds and/or other public or private funds. Medium housing priority projects/programs will be funded, if funds are available. There is no plan to fund low priority housing

needs, though Glendale will support applications for other funds as opportunities arise. The Housing Needs Table in Appendix A provides an overview of the priority needs and outcomes for each household type by income group.

Basis for Assigning Priority Needs

The following is an analysis of how the characteristics of the housing market and the severity of housing problems and needs of each category of residents provided the basis for determining the relative priority of each priority housing need category.

Owner Households

Glendale has placed a high priority on addressing the housing needs of very low elderly and small family households and all types of moderate-income owner households. As described in the Housing Needs Assessment, housing problems among these households have significantly increased in the last 15 years. The number of low-income owner households with housing problems has doubled since 1990, and the number of moderate-income owner households with housing problems has increased by 40 percent. Cost burden is the most prevalent concern of these income groups.

The age of Glendale's housing stock presents particular issues for low and moderate income owner households. Based on the 2000 census, approximately 52 percent (52%) of Glendale's entire housing stock (single family and multi-family) was at least 50 years old, with an additional 27.5 percent (27.5%) built between 30 and 50 years ago. At 30 years of age, housing units generally have some major rehabilitation needs such as repair or replacement of plumbing, roofing or electrical systems. At 50 years of age, housing units will often need significant rehabilitation work. Fortunately, Glendale's older housing stock is generally single-family homes that have been well maintained and not in need of significant rehabilitation. However, depending on the household's disposable income available for repairs, many of these homes may have deferred maintenance issues. In some cases, these homes are located within a potential historical district. In contrast, many of the 20 year old apartment units built in the mid to late 1980's were poorly constructed in terms of workmanship and are already showing signs of rehabilitation needs. This priority of preserving and maintaining the City's existing housing stock will enable funding for rehabilitation programs that assist cash-strapped households to make needed health and safety repairs to their homes.

In addition to priorities for existing home owners, the City will also create opportunities for new home ownership. This is reflected as a high priority for large family renters with incomes between 51-80% of MFI. Homeownership in general can serve as a mechanism for renters to become even more invested in their community, and can provide opportunities for the future generations of long-term Glendale residents to remain in the City. The percentage of owner-occupied units is 38.9 percent (38.9%), while 61.1 percent (61.1%) of occupied dwellings are renter occupied (ACS 2007). This contrasts with the 49.3 percent (49.3%) owner occupied and 50.7 percent (50.7%) renter occupied units in Los Angeles County. (ACS 2005-2007).

From June 2007 through September 2009, there was a 35 percent decline in housing prices (includes single family detached homes and condos, resale and new construction) - from $670,000 to $440,000. This presents some opportunities for low and moderate income renter households to purchase their first home; however, City assistance is still required. These market price reductions will reduce the City assistance required for both existing and newly constructed housing.

Designating homeownership as a priority will ensure that funding is available to build and subsidize ownership housing units that reduce housing cost burdens and ensure affordability. Therefore, the City of Glendale has placed a high priority on meeting the needs of existing homeowners and enabling certain renter populations to become home buyers. Programs addressing ownership include new construction, homeownership education, single family rehabilitation, and code enforcement.

Renter Households

Due to the growing differential between household incomes and market rents, renter households are on average more likely to experience housing problems than owner households. Housing Needs Assessment data shows that with the exception of a limited number of studio units, extremely low and very low income households cannot afford to rent an apartment in Glendale. Low-income households are also limited to one bedroom and studio units, (approximately 31% of housing units) as well as some guest homes. More importantly, rents in Glendale are continuing to rise. Average rents from 2007 – 2009 for single, 1-bedroom and 2-bedroom units increased by 19 percent. As of 2009, average rents are $904, $1090, and $1361 respectively. Large lower-income households are particularly impacted by the rental market in Glendale due to the scarce number of larger apartments available to rent at an affordable level. These facts are underscored by the fact that the Housing Authority serves 1,592 households and

has nearly 7,000 applicants on its Section 8 waiting list with an approximate wait time of seven years.

Though the City wants to increase the percentage of owner occupied units; the City also recognizes that, with a majority of renter occupied units, rental housing is also a priority. Programs addressing this rental housing priority are development of affordable housing, rental assistance, multifamily rehabilitation and code enforcement.

Small Related Renter Households:

Glendale will give high priority to addressing the affordable housing needs of small renter households between 0-50% of MFI. Housing cost burden was the most significant problem faced by small-related renter households, especially at the extremely low and very low-income levels. Eighty-two percent (82 percent) of extremely low-income households report housing cost burdens, and ninety-seven percent (97 percent) of low-income households also report cost burdens. A smaller number (64 percent) of moderate income small-related renter households report cost burdens, and were therefore assigned a medium priority. The moderate income group may also be able to take advantage of City assistance for the purchase of smaller ownership units.

Elderly Renter Households:

Among the housing needs of elderly renters, those given a high priority include extremely low and low-income households. Among elderly renters, seventy-nine percent (79%) of extremely low-income households report housing cost burdens, and eighty-nine percent (89%) of low-income households also report cost burdens.

Moderate-income seniors have been assigned a medium priority. A smaller number (73%) of moderate income households report cost burdens, and were therefore assigned a medium priority.

Large Renter Households:

Glendale will also give high priority to low-income large renter households – a group reporting that 100 percent have housing problems. The larger low-income households that require two- and three-bedroom apartments are especially impacted by high rents in Glendale. Though there are over 18,510 three-bedroom units in 2000, over 83 percent (83%) were owner-occupied rather than renter occupied units. In 2000, approximately 60 percent (60%) of the units were zero and one-bedroom. Therefore, the supply of units adequately sized for large

renter households are limited. That combined with affordability issues create multiple problems for large renter households.

As a proportion, moderate income large related renter households report notably lower housing cost burdens, affecting only 44 percent of such households. This group was assigned a medium priority. Meeting the needs of large related renter households with incomes between 0-50% of MFI will most likely take the form of new construction of rental housing that is affordably priced and appropriately sized. The State's tax credit and Multi-family housing programs emphasize creation of units sized appropriately for large family households. However, as discussed above, the City also has opportunities to create opportunities for new home ownership for large family renters with incomes between 51-80% of MFI.

Community Perspective on Priority Needs

A top housing priority from public hearing participants is the need for affordable rental housing, particularly the need to increase the number of Section 8 housing subsidies for low income renters. Other priorities raised at the public hearing included tenant/landlord counseling services, affordable senior housing, code enforcement, and the need to upgrade and maintain apartment units in Glendale.

New rental housing for seniors, disabled persons, and families; housing repairs and rehabilitation; and first time home buyer assistance were high priority needs identified in the community needs survey. These identified priorities along with the housing market analysis and census data formed the basis for creating the following affordable housing objectives.

Affordable Housing Objectives

To address the priority housing needs identified in the Housing Needs Table (CPMP tables) in the Appendix, Glendale has established the three Affordable Housing Objectives and accompanying Program Strategies outlined below. Certain characteristics of Glendale's housing market have influenced these objectives, including high land prices, relatively high construction costs, prevailing wage requirements, and the continued relatively high value of existing for-sale housing.

Preliminary estimates indicate that Glendale can anticipate receiving approximately $11.5 million in HOME funds over the FY 2005-10 period, and approximately $43.1 million in Redevelopment Set-Aside funds. In the descriptions and funding priorities that follow, it can be noted that Glendale will be funneling the majority of the HOME funds toward renter new construction opportunities. The City provides an integrated approach to these public

resources, addressing the community's housing needs with both HOME and Redevelopment Set-Aside funds. This enables the City to create programs designed to meet the housing needs as well as the funding source regulations. The required HOME program elements are discussed in the Other Actions chapter of this Consolidated Plan.

OBJECTIVE #1: Increase Affordable Home Ownership Opportunities

The City of Glendale intends to increase opportunities for affordable home ownership through the following Program Strategies.

Objective #1: Program Strategy:

1. Affordable Ownership New Construction Program

Subsidized new construction of affordable homeownership units as part of an affordable development or in conjunction with a market rate development will enable households with incomes between 51 - 120% of MFI to purchase a home in Glendale. These projects will be encouraged throughout the City, and will involve indirect and direct assistance from the City to the developer as well as direct assistance to the homebuyer to achieve affordable home ownership.

In order to comply with HUD's goal of increasing homeownership rates among minority groups, the City of Glendale has created affirmative market/outreach efforts to specifically invite minority populations to apply for new construction units. As noted in previous tables, according to the 2000 Census, 20 percent of the City's population is of Hispanic background and 16 percent is designated as being of Asian racial/ethnic background.

Table 45 shows Glendale's proposed funding allocation and program goals for the Affordable Ownership New Construction Program for FY 2010-15. All newly constructed homeownership units that are funded with HOME funds will comply with Section 215 requirements. This program will address the high and medium priority housing needs of renter households with incomes between 51-120% of MFI.

2. Homeownership Education Courses

Free homeownership education courses for households who live or work in Glendale will encourage households with incomes between 51 – 120% of MFI to prepare for the home buying process. A U.S. Department of Housing and Urban Development certified home buyer education trainer provides information and resources to homebuyers on budget and credit issues, the mortgage

prequalification and approval process, available loan options including special programs available, working with realtors and real property options, the loan closing process, predatory lending practices, fair housing regulations for home buyers, and basic home maintenance. A lender and realtor participate in the class and answer questions as well.

During FY 2010-15, Glendale plans to provide approximately 30 homeownership education courses to approximately 750 individuals. Several of the courses will be offered in Spanish and Armenian languages. The Homeownership Education Courses will address the high and medium priority housing needs of all renter households with incomes between 51-120% of MFI. These courses are provided by the City and are financed with administration funds from Redevelopment Set-Aside.

OBJECTIVE #2: Increase Affordable Rental Opportunities

The City of Glendale intends to increase opportunities for affordable rental housing through the following Program Strategies.

Objective #2: Program Strategy:

1. Affordable Rental Housing – Acquisition/New Construction and/or Acquisition/Rehabilitation Program

Subsidized new construction of rental housing units will increase the supply of affordable rental housing to households with incomes below 80% of MFI. Glendale will provide developers with direct and indirect incentives to fund the financial gap, which exists when developing rent-restricted units for lower income households. These incentives will be provided indirectly through a variety of planning related tools such as density bonus and/or directly through various financial assistance mechanisms.

Table 45 shows Glendale's proposed funding allocation and program goals for the Affordable Rental New Construction Program for FY 2010-15. All newly constructed rental units that are funded with HOME funds will comply with Section 215 requirements. New construction of affordable rental housing will address the high priority housing needs of elderly, small-related, large-related, and special population renter households with incomes less than 50% of MFI.

2. Rental Assistance

Provision of rental assistance is an effective way in the short term to assist very low-income renters burdened with housing overpayment. The City of Glendale

will continue to use Section 8 rental assistance as a primary activity to assist renter households with incomes below 50% of MFI.

On an annual basis during FY 2010-2015, Glendale plans to expend approximately $22 million of Section 8 funds to provide rental assistance to 1,592 renter households. This includes both Glendale vouchers and portable vouchers, which Glendale administers on behalf of other housing agencies. These estimates are based on current federal Section 8 funding policies and may be adjusted if federal priorities should change. Rental Assistance will address the high priority needs of cost burdened elderly, small-related and large-related renter households.

OBJECTIVE #3: Preserve and Maintain the City's Existing Affordable Housing Stock

The City of Glendale intends to preserve and maintain its existing affordable housing stock through the following Program Strategies.

Objective #3: Program Strategy:

1. Single Family Rehabilitation Program

The Single Family Rehabilitation Program provides grants and low-interest deferred repayment loans to income eligible homeowners to ensure that these dwellings meet minimum health and safety codes. The following rehabilitation loans and grants, typically for moderate levels of rehabilitation, are available:

- Single Family Rehabilitation Loan - $25,000 limit, households with incomes below 80% of MFI throughout City and below 120% of MFI in certain target areas
- Senior Rehabilitation Grant - $10,000 limit, households with incomes below 80% of MFI
- Special Accommodations Grant for People with Disabilities - $10,000 limit, households with incomes below 80% of MFI
- Lead Based Paint Hazard Reduction Grant: $10,000 per unit, households with incomes below 80% of MFI

Loan and grant funds are made available for the following rehabilitation activities:

- Major systems repair or replacement, including heating and air conditioning, electrical and plumbing work.

- Safety improvements, such as GFI outlets and replacement of broken or inoperable windows.
- Exterior improvements including painting, siding, roofing, etc

Table 45 shows Glendale's proposed funding allocation and program goals for the Single Family Rehabilitation Program for FY 2010-2015. All rehabilitation loans and grants that are funded with HOME funds will comply with Section 215 requirements. The Single Family Rehabilitation Program will address the high priority housing needs of owner households with incomes below 80% of MFI.

2. Multifamily Rehabilitation Program

The Multifamily Rehabilitation Program provides low interest, forgivable loans to multifamily rental property owners for the purpose of improving their rental housing units. In return for the loan, the City requires that improved units be rented to low-income households at affordable rental rates for a specified period of time. Acquisition/substantial rehabilitation loans also typically require sharing of residual receipts for net income resulting from property operations.

Table 45 shows Glendale's proposed funding allocation and program goals for the Multifamily Rehabilitation Program for FY 2010-2015. All rental units assisted with HOME funds will comply with Section 215 requirements. The Multifamily Rehabilitation Program will address the high and medium priority housing needs of small related, large-related, elderly and other renter households with incomes below 80% of MFI.

3. Code Enforcement

The Code Enforcement Program provides inspection and on-going resolution to housing code violations in low and moderate income areas. This housing program, funded with Redevelopment Housing Set-Aside funds, complements the City's other code enforcement efforts, including commercial code enforcement in CDBG eligible areas. Table 45 shows the proposed funding and program goals for the Code Enforcement Program for FY 2010-2015. The program addresses the priority health and safety needs in all types of housing.

Targeted Geographic Areas

Glendale's rehabilitation and rental assistance programs are available citywide to residents and property owners. New affordable housing development projects are also distributed throughout the City so as to not concentrate them in any given neighborhood or section of the City.

From 2005 to 2010, the City was able to concentrate expenditure of funds in specific identifiable neighborhoods in an effort to improve neighborhoods through rehabilitation and/or new development of quality affordable housing and other community development initiatives such as development of neighborhood parks, etc. Though no new neighborhood areas have been identified for the 2010-2015 period, the neighborhoods surrounding proposed affordable housing developments will be assessed for potential additional City investment. Neighborhood participation will be sought to develop neighborhood program and encourage private investment.

TABLE 45
Housing Program Strategies

Housing Programs	Projected Funding Level	CPMP Objective/ Outcome*
Increase Affordable Home Ownership Opportunities (High/Medium Priority)	**$ 12,753,972**	**DH-2**
* Subsidize new construction of affordable ownership units direct assistance	$ 11,628,972	
* Provide direct assistance to homebuyers through down payment assistance loans	$ 1,125,000	
* Provide home buyer education classes (cost included in administration program)	n/a	
Outcomes: Provide funding for construction of 62 units (57 moderate and 5 lower income); provide homebuyer assistance to 5 households (moderate); serve 750 persons (150 annually) with home buyer education classes		
Increase Affordable Rental Opportunities (High/Medium Priority	**$ 26,569,869**	**DH-1; DH-2**
* Subsidize new construction of affordable rental units	$ 10,607,944	
* Repayment of loan for Vassar City Lights projects	$ 11,524,425	
* Provide rental assistance w/case management to special needs households	$ 4,437,500	
Outcomes: Subsidize construction of 35 new family rental units (lower income) and 40 new senior rental units (lower income); complete construction and loan repayment for 70 new rental units (mixed income); serve 150 lower-income households (30 annually) with rental subsidies		
Preserve and Maintain Existing Affordable Housing Stock (High/Medium Priority)	**$ 10,770,812**	**DH-1**
* Provide home and apartment rehabilitation loans and grants	$ 3,791,505	
* Provide code enforcement and systematic rental housing inspection services in low and moderate income areas	$ 6,979,307	
Outcomes: Assist 175 households with rehabilitation funds; conduct 7,000 inspections (1,400 annually) for 100% code compliance in lower and moderate income neighborhoods		
Administration (High Priority)	**$ 9,861,347**	
* Provide management and oversight of the housing funds and affordable housing portfolio		
Outcomes: Monitor 846 rental and 100 homeownership new construction units; 219 MF and 79 SF rehab units for long-term compliance; administer housing funds		
TOTALS	**$ 59,956,000**	

*Objectives: DH=Decent Housing; SL=Suitable Living Environment; EO=Economic Opportunity
Outcomes: 1-Availability/Accessibility; 2-Affordability; 3-Sustainability

PUBLIC HOUSING STRATEGY

As required in CFR 91.210, the Con Plan must address public housing in the City of Glendale, including families on the Section 8 tenant-based waiting list. Though the City of Glendale has no publicly owned housing, the Glendale Housing Authority (Authority) operates a successful Section 8 tenant-based rental assistance program. All units subsidized with Section 8 funds are inspected annually using not only the Section 8 housing quality standards, but also the City's housing code requirements. Owners must correct any inspection issues to continue in the Section 8 program. In Glendale, the Authority also administers the Redevelopment Set-Aside funds and Supportive Housing Program funds. This enables a comprehensive approach to housing policy. For example, new housing opportunities are routinely offered to persons on the Section 8 waiting list. In addition, Section 8 rental assistance is provided to persons coming out of homelessness, providing a continuum of assistance in the community. The Authority will continue to operate for a limited time (based on funding availability) also operates a Family Self-Sufficiency program which has provided opportunities for households to become home buyers, when coupled with the City's home buyer assistance.

PERSONS WITH SPECIAL NEEDS PRIORITIES/STRATEGIES

Elderly and Frail Elderly

The CPMP Tables in the Appendix designate a high priority of need for the elderly and frail elderly primarily due to the growing number of seniors in Glendale. The American Community Survey indicates that in 2007 an estimated 29,267 persons, or 14.6 percent, of Glendale's total population were persons over 65 years of age; compared to approximately 10.2 percent of Los Angeles County's total population were persons over 65 years. In Glendale, approximately 15,263 or 52 percent have disability status and 3,512 or 12 percent were below the poverty line; while in Los Angeles County approximately 42.7 percent had a disability and 10.2 percent were below the poverty line. The social service and housing needs of the elderly were mentioned during public hearings and in the community needs survey. Though designated as a priority need during the past 10 years, the elderly were particularly mentioned as having a high priority of need for the 2010-2015 period.

Supportive service needs of the elderly and frail elderly will continue to be met by the City through the Adult Recreation Center (ARC) operated by the Community Services and Parks Department. Over the next five years it is estimated that $50,000 in CDBG funds will be used for senior case management and $50,000 will be used to address the needs of frail elderly, serving an estimated total of 250 persons annually. Due to the aging population in Glendale and the community identification of high priority need for the elderly, an additional $50,000 has been allocated for senior services for the next five years, creating a total of $150,000 in CDBG funds designated for the elderly over the next five years. The additional funds will be used to support senior home sharing and/or other specific needs of seniors, such as transportation and in-home services.

The City will continue to coordinate closely with the Greater Glendale Council on Aging in order to assist with the development of these senior services. The City will also continue to provide technical support to community-based agencies such as The Salvation Army, Catholic Charities, and the Armenian Relief Society who serve seniors in addition to other low-income groups.

The City anticipates the development of approximately 40 rental units for seniors during the Con Plan period. These units will be affordable to low income households (under 50% MFI). The anticipated date of construction is FY 2014-2015.

Persons with Disabilities

The supportive service needs of persons with physical disabilities and the service needs for persons with developmental disabilities are both a medium priority. The priority ranking for persons with severe mental illness was determined to be a low priority due to the existing array of services provided by local agencies.

To help provide affordable housing for this population, the Glendale Housing Authority has made families and individuals with a disability a local preference for the Section 8 program. Homeless persons with special targeted disabilities may also be eligible for one of the permanent supportive housing programs in the continuum of care. To help ensure that the housing rights of disabled community members are protected, the City will continue to contract with the Housing Rights Center to provide education and investigate complaints related to housing discrimination. The City will also continue to provide technical assistance to social service providers who meet the non-housing social service needs of the disabled.

Severe Mental Illness
The majority of funding and services for this population is administered through the Los Angeles County Department of Mental Health. The area provider of community mental health services in Glendale is Verdugo Mental Health Center.

Developmental Disabilities
The majority of funding and services for this population is available through the State Department of Development Services. Non-profit organizations, such as the Glendale Association for the Retarded that specialize in serving subpopulations of the disabled, will continue to be invited to participate in the CDBG Planning process.

Physical Disabilities
Apart from ensuring that there is a sufficient stock of accessible housing in the City, community services and facilities must also be handicapped accessible. To this end, the City will continue to use CDBG neighborhood and capital improvement funds to improve public facilities and make them accessible. There are fewer requests for these funds because many of the public and private facilities have already been improved and are now handicapped accessible. Many of these public facility improvements will also serve the seniors with physical disabilities or mobility impairments.

Persons with Alcohol and Other Drug Addictions

The social service needs of non-homeless persons with alcohol and other drug abuse are a medium priority. Changes in the existing services offered to this special needs population is not anticipated during the 2010-2015 period. This population's needs will primarily be met by existing community services not funded by CDBG, such as free 12-Step meetings at Windsor Club and a variety of affordable services at the Verdugo Mental Health Services Positive Directions program. To support existing community programs, CDBG capital improvement funds will be used to provide improvements to community centers where recovery services are provided. Residential rehabilitation is often necessary to facilitate recovery for persons with alcohol and other drug additions, and Glendale service providers often make successful referrals to programs located in the nearby communities.

Educating youth about the consequences of alcohol and drug use is also an important intervention. Many of the youth activity and employment projects funded through the City's CDBG program have drug and alcohol diversion as part of their mission. Furthermore, even those youth programs which do not focus on drug and alcohol diversion will have an impact on youth who may have otherwise begun to experiment with controlled substances.

Homeless persons with alcohol and other drug addictions can receive extensive supportive services through Glendale's continuum of care, which employs a full time case manager specializing in substance abuse issues. Housing for homeless persons disabled due to substance abuse is also available through permanent supportive housing projects and Shelter Plus Care vouchers.

People with HIV Infection and AIDS

The social service needs of persons with HIV and AIDS are a low priority. This priority ranking is due in part to the existing services meeting the social service needs of this population. The AIDS Service Center (ASC) in Pasadena provides comprehensive social services to Glendale residents who are HIV positive as well as their families. ASC is also the area administrator of HOPWA vouchers. The Glendale Housing Authority administers any HOPWA vouchers for Glendale residents, which are provided through ASC. ASC also assists eligible households with security deposit and move-in costs. It is anticipated that over the next 5 years, 4 households will be assisted through the HOPWA program. Homeless persons with HIV/AIDS are also eligible for the Shelter Plus Care Program available through the continuum of care.

ANTI-POVERTY STRATEGY

The primary emphasis of the anti-poverty strategy, required by CFR 91.215 (h), is to raise the income of Glendale's poorest households, especially those living below the poverty level. This includes providing those households with the educational, training, supportive service and childcare opportunities that will allow them to address barriers to income and career development. Affordable housing opportunities can also allow poorer families to devote additional resources to raising their incomes and furthering their careers.

This section describes the jurisdiction's goals, programs, and policies for reducing the number of poverty level families. This section also addresses how the production and preservation of affordable housing will be coordinated with other programs and services for which the jurisdiction is responsible. Identification of the extent this strategy will reduce the number of poverty level families is also included when feasible.

The percentage of persons living below the poverty level has decreased from 15.5 percent (15.5%) in 2000 to 13.9 percent (13.9%) in 2007, according to the Census Bureau's American Community Survey (2007 ACS). This is also lower than the 15.4 percent (15.4%) in Los Angeles County living below the poverty line. The 2000 Census indicates that southern Glendale, south of Broadway, holds the highest concentration of persons living in poverty at 24.5 percent (24.5%) of the population. The population group experiencing the highest levels of poverty is female-headed households with children under 18 years of age. The 2007 ACS estimated that approximately 36 percent of all female-headed households with children lived in poverty; a higher percentage than the 26 percent (26%) in 2000 and than the 34.5 percent (34.5%) of female-headed households with children living in poverty throughout Los Angeles County in 2007.

Strategies

Affordable Childcare and Youth Programs

Background

According to the needs assessment, the shortage of affordable childcare is a major barrier for single parents entering the labor force. Childcare and youth services are also available to homeless families in the Glendale's Continuum of Care. Specialized services for children and youth, such as counseling, homework assistance, and recreational activities, are provided at each of the emergency shelter and transitional housing programs that serve homeless families with

children. In addition, families in need of childcare are connected with community childcare programs, including the New Horizons Family Center, which has a limited number of slots subsidized by the Supportive Housing Program to provide free childcare for homeless families.

At the same time, however, social service agencies also agree that there is a shortage of childcare "slots" in the community, particularly for infants and very young children. And, the Glendale Quality of Life Indicators show a slight decrease in childcare slots in the 77 licensed childcare facilities in Glendale - from 2,946 in 2002 to 2,875 in 2009. Additional evening and weekend childcare and activities for older youth would provide greater flexibility for working parents, especially single-parents. The need for childcare, particularly for infants (0-2 years of age) was expressed during the public hearing process.

Strategy

First, City staff will provide technical assistance to local social service agencies and assist them with resource development aimed at increasing information about and access to childcare and youth activities in the community. The Glendale Homeless Coalition and Glendale Healthy Kids are comprised of agencies serving families in poverty and agencies already providing childcare and youth activities. Each of these groups meets regularly to discuss community needs, and City staff works to ensure the ongoing development of individual agency capacity and the coordination of services among agencies.

Secondly, the City will devote CDBG funds to ongoing and new childcare and youth activities. Programs and employment for youth are consistently identified by the community and youth focus groups as a high-priority for the CDBG public social service program. In FY 2010/11, CDBG funds will be used to support youth-activity programs including after-school programs for older-youth. In addition, one youth employment program is being funded. This program not only provides supervision during non-school hours for youth when their parents may need to be working, but youth employment also directly increases the cash resources available to the household.

Employment

The City's Economic Development strategy includes business assistance programs for retention and expansion of businesses that will create jobs for low-income persons. Federal Workforce Investment Act funds and employment programs offered at the Verdugo Jobs Center (VJC) will also leverage the CDBG program funds. In addition, the Community Redevelopment and Housing Department's Business Assistance Office will continue to provide technical and

financial assistance to small businesses and merchant associations. Barriers to employment identified by Verdugo Jobs center staff are: lack of skills, both basic and higher technical, ESL, lower paying jobs in relation to cost of living.

Education and Training

Education and training are also crucial components of the City's anti-poverty strategy. Needs that have been specifically identified are access to English as a Second Language (ESL) classes and job counseling and training activities allowing workers to develop skills to match the employment opportunities in the City and surrounding area. While ESL and employment training activities can potentially be funded through the CDBG program, the City has other resources that are currently devoted to these activities. Thus, continued coordination is a key component of the anti-poverty strategy regarding education and training.

The Community Services and Parks Department is charged with administering Workforce Investment Act and Welfare to Work activities for the Verdugo Workforce Investment programs. This close institutional relationship facilitates coordination between public social service/community development activities and workforce development activities.

The majority of the workforce development activities are provided through the Verdugo Jobs Center (VJC), a "one-stop" center which includes among its on-site partners the State Employment Development Department, Department of Rehabilitation, Glendale Community College, WIA Title I, Glendale Youth Alliance, and Title V Senior Program. Off-site partners include Los Angeles County Department of Public Social Services, Glendale Unified School District, Burbank Unified School District, Verdugo Employment Program and Project Achieve. Some of the programs currently offered through the VJC and its partners that are available to Glendale's poorest households are summarized below:

- Classroom vocational or basic skills education may stand alone or be combined with employment or worksite activities to advance skill sets to obtain and/or retain higher-paid employment.
- Assessment of basic skills, aptitudes, and interests to determine appropriate career paths, and identify appropriate strategies and interventions, such as work experience, basic skills training, vocational training, etc. to achieve self-sufficiency.
- Job creation, through public/private sector economic development strategies and specific business assistance services designed to grow the number of sustainable, self-sufficiency jobs (defined as jobs which would allow the job holder to eliminate entirely their reliance on welfare). Wage

subsidy programs for public or private employment, where subsidies are available to an employer and the client draws a salary as an employee, may be included within a broader individual service plan. These activities will focus explicitly on transition into unsubsidized employment, relying upon case management, time-limited work assignments, intensive job search or placement activities, and support services to help participants move into the regular job market.

- Job placement into subsidized or unsubsidized employment with a public or private employer. Job placement includes skills assessment, identifying ranges of occupations available in the local labor market, and job development activities.
- Job readiness services provide clients job seeking and interviewing skills, understanding of employer expectations, and skills designed to enhance an individual's capacity to move toward self-sufficiency.
- Job retention and support services include childcare, transportation assistance (in addition to bus passes), emergency or short-term housing, domestic violence aversion support, assistance in applying for food stamps, and mental health and non-medical substance abuse treatment. The LIFERAP (Low Income Rental Assistance Program) provides working poor families with rental subsidies, freeing money for training, childcare and other services that allow the family to increase its income.
- Life skills/soft skills training to provide clients with training on the day-to-day skills needed to secure and retain employment includes job search, resume preparation, interviewing skills, time management, money management, banking skills, parenting skills, cultural diversity, grooming, conflict resolution, workplace behavior, communication, goal setting, stress management, developing emergency back-up plans, planning childcare and contingencies, personal safety planning, and application completion skills.
- Mentoring to provide guidance and counseling to clients may include the assignment of a community professional or former welfare recipient to a current program participant. Mentoring will be coordinated with the appropriate case management staff.
- On-the-job training (OJT), in the public or private sector, where the employer receives a wage subsidy to partially or wholly offset the payment of wages to clients while they develop job skills.
- Post-employment services include counseling regarding the workplace, English-as-a-second language, occupational skills training, basic educational skills training, and job mentoring.
- Programs accommodate persons with limited English skills include activities and training for monolingual Spanish participants. Where possible and necessary, comparable services in other languages will be

provided as well.

- Transportation services are provided through bus tokens, passes and mileage reimbursement on a case-by-case basis, consistent with an overall case management plan.
- Work experience, consisting of public sector work that helps provide basic job skills, enhances existing job skills in a position related to the participant's experience, or provides a needed community service that will lead to employment. Work experience must comply with the anti-displacement provisions contained in State law.

This Consolidated Plan includes expansion of the Verdugo Job Center support further into the community by creating Job Center satellites at public libraries and neighborhood centers. This would provide services on evenings and weekends.

Transportation

Meeting the transportation needs of Glendale's poorest families is a significant challenge. Staff from the Verdugo Workforce Investment Board is participating in countywide planning efforts to address this concern for the Welfare to Work population. The Verdugo Job Center and several social service agencies assist in the short-term with bus tokens and vouchers; however, long-term solutions to the on-going needs of a daily commute are still under review. One solution may be to focus job placement and job creation efforts within the immediate vicinity of participants' homes. An analysis of the labor market may help workforce development staff target their vocational education and training activities to those employment sectors for which significant growth is projected in the immediate geographic vicinity.

Homelessness, Housing, Public Social Services and Self Sufficiency

Programs for providing housing and supportive services to homeless families, and the strategies for increasing affordable housing for low-income and special needs households are described in the Housing Strategies and Homeless Needs Assessment sections.

Other CDBG funded public social service projects

These are also designed to address poverty through providing access to education and employment either directly or through linkages with other agencies. In addition, many of these projects provide access to supportive services, which help poor households address barriers to income/career development. The Armenian Relief Society operates a CDBG-funded case

management project which is designed to reach out to the Armenian community, provide them with supportive services, and link them to ESL and employment programs. CDBG funds are also used to affirmatively further fair housing through the completion and implementation of an Analysis of Impediments to Fair Housing Choice every five years and through CDBG funded services provided by the Housing Rights Center. These services include two, well-attended public workshops annually (one for multi-family owners and one for tenants), tenant-landlord services, and fair housing complaint investigation, testing and advocacy.

Self-Sufficiency Programs

Glendale Housing Authority administered two programs to promote self-sufficiency among participating families, including the provision of supportive services to these families - the Family Self-Sufficiency Program (FSS), and the Low Income Family Employment & Rental Assistance Program (LIFERAP).

Family Self-Sufficiency (FSS) is a program available to families served under the Authority's Housing Choice Voucher tenant-based rent subsidy program. The program is designed to provide families with individual training and services to assist families overcome barriers to full self-sufficiency and elimination of dependence on public assistance. FSS participants develop plans delineating supportive services to be provided to the family members, the activities to be completed by each family member, and the agreed upon completion dates for the services and activities. The program has been operated from the City's Workforce Investment Verdugo Jobs Center where families can access numerous programs and supportive services offered through the Workforce Investment Board's partner agencies.

The Housing Authority establishes an FSS "escrow" account for FSS families, which provides a percentage-match when a family's income increases as a result of successful performance of FSS activities and employment. This account is released to the family upon successful completion of the FSS training and services plan.

From 1991-1998, as required by HUD, the Glendale Housing Authority operated the FSS program as a condition for the award of incremental Section 8 certificates and housing vouchers. In 1998 this requirement was removed and the Housing Authority continued to operate the FSS program for existing participants. As FSS participants completed the program, the Housing Authority enrolled new clients in 2009. There are currently five households participating in the FSS program. HUD grant funding for the program has not been continued, due to the decreased number of participants (HUD minimum program size is 50

families annually). Therefore, the five families currently in the program will continue through September 2014 but no new families will be enrolled. The program has successfully "graduated" 72 families from FSS since 1991. The average escrow provided to each family was approximately $7,400.

The second self-sufficiency program is the Low Income Family Employment & Rental Assistance Program (LIFERAP). The Glendale Housing Authority has operated the Low Income Family Employment & Rental Assistance Program (LIFERAP) since the early 1990's. LIFERAP is a self-sufficiency program combining self-sufficiency counseling with and a rent subsidy component for low-income working families. The program is authorized on a multi-year basis to serve the needs of a set of renters over time to increase their ability to find improved employment through stabilized housing costs and case management assistance to increase their skills and education/training levels. Families are referred to the program by community organizations and schools, and final selection of families is performed by a panel comprised of community members and/or staff of Verdugo Jobs Center.

During the three year period of FY 2005/06 through FY 2007/08 an average of 56 households were served per year. The most recent LIFERAP program cycle is from 2008/09 through 2010/11. The Housing Authority authorized a budget of $2 million dollars to assist approximately fifty (50) lower income working families with employment and training services and rental assistance over that period of time. There are currently 20 households participating in the program and approximately seven additional applications are being reviewed.

The program will continue through 2015 on another multi-year cycle if sufficient Redevelopment Set Aside funds are available. Research is being conducted at this time to determine whether it is feasible to target returning veterans who are experiencing difficulties in finding and/or retaining their jobs and to include veterans and their concerns as part of this program.

Section 3 Program

The City's Section 3 program provides employment opportunities to low-income, local residents and businesses by referring potentially qualified residents and businesses to contractors selected to work on federally assisted construction projects. On an ongoing basis, eligible residents and local Section 3 businesses (businesses owned by or providing full-time employment to Section 3 residents) will be encouraged to submit their names and work experience to the Verdugo Job Center (VJC) in order to be listed on the City's Section 3 database. The database is then made available to contractors who are awarded construction projects with the City. The contractors make every attempt to consider database

applicants for employment whenever positions are open within their company or that of their sub-contractors at the onset of the project and through the course of the construction period.

PART V. OTHER ACTIONS

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Removal of Barriers to Affordable Housing

Glendale has addressed a number of the barriers identified in the 2005-2010 Consolidated Plan. The City plans to continue the implementation of these approaches through the 2010-2015 period and will continue to analyze the current development process to eliminate and/or mitigate any potential barriers to residential development. The housing market has been through a significant change during this same time period. The cost of ownership housing decreased over the past few years, but is still higher than 2005 levels. Rental rates are also higher. Because land is relatively scarce, land values continue at relatively high levels in Glendale. Therefore, Glendale is constantly assessing the best way to assist in the development of affordable housing. For example, The City has been able to acquire property; provide financial assistance to developers and to home buyers; leverage locally controlled federal and redevelopment funds with federal, state and private funds; .

- *Density Bonus:* Glendale has adopted the state density bonus regulations, providing greater certainty to residential developers who provide certain percentages of affordable and/or senior housing.

- *Land Use Controls:* Glendale has amended the land use and zoning to provide higher density residential development along major corridors with new mixed use policies and regulations. These new regulations allow densities of 35 to 100 units per acre.

- *Limited Available Land for Development:* The built out nature of Glendale restricts growth of both market and affordable units throughout the City. To capture the small number of vacant infill lots, staff routinely conducts vacant lot surveys to determine if they are suitable for affordable housing development. This has been a successful effort in the past and will be continued during the Consolidated Plan period. The City adopted an inclusionary housing policy for the San Fernando Road Corridor, (within the redevelopment project area). However, a recent court case in California may require reassessment of that policy, particularly as it applies to rental housing. In addition, land use regulations in the East Broadway area have incorporated affordable housing policies within the new zoning standards. Finally, the City has issued a Request for Qualifications / Statement of Interest (RFQ/SOI), which encourages developers to contact the City to discuss potential affordable housing project ideas on an ongoing basis.

Cost is also a barrier to affordable housing development, and Glendale will continue to further the following concepts regarding public policies to reduce the costs involved in affordable housing development:

- Density bonuses for affordable condominiums which would allow for additional density of up to 25 percent with no variance hearing if a specific project meets other zoning code standards;

- Density bonuses for rental projects which would allow for additional density of up to 25 percent and zoning modifications related to the affordable units;

- Flexibility of parking design;

- Pre-application submittal process to alert developer of potential requirements before plan check;

- Fast track processing;

- Flexibility in requirements for off-site improvements;

- Incentives for senior housing, which allow smaller units and less parking than required by code;

- Additional density bonuses could be negotiated with staff for rental housing;

- Reviewing condominium conversions and/or new condominium development at the Planning Commission level as opposed to requiring City Council approval; and

- Pre-application process for development projects, allowing the City and developers to receive comments on the projects from different agencies before preparing working drawings for plan check.

Progress in these areas is due in part to the coordinated and collaborative efforts of the Community Planning, Community Redevelopment and Housing, and Community Services and Parks departments of Glendale.

Lead-Based Paint Hazard Reductions

The Housing Needs Assessment identified the number of housing units within the City that contain lead based paint. In response to this concern, Glendale will offer a lead-based paint hazard reduction grant. Currently, the City includes lead-based paint hazard reduction as an eligible activity within its housing rehabilitation loan programs. In addition, the City will provide grants up to $10,000 to property owners for lead hazard reduction. The grants will be in addition to other assistance provided by the City. Thus, property owners that receive rehabilitation loans or first time home buyer loans will also be eligible for a grant of up to $10,000 for lead hazard reduction.

In addition, for all affordable housing projects that receive assistance with HOME and other HUD CPD funds, the City will require the following, in accordance with HUD CPD lead-based paint regulations:

- Ensure that all purchasers, occupants, and owner-occupants receive the brochure "Protect Your Family from Lead in Your Home".
- Require Visual Assessments for defective paint surface (interior and exterior) and notification of owner if defective paint surfaces are discovered during the assessment.
- Require paint testing on surfaces that will be disturbed during rehabilitation.
- Require Risk Assessments for housing units that receive more than $5,000 of City assistance using HOME and other HUD CPD funds.
- Require lead hazard reduction treatments of defective paint surfaces that are disturbed during construction or renovation.
- Require safe work practices for all work on lead-based paint surfaces.
- Require lead hazard clearance prior to occupancy.
- Require on-going maintenance, monitoring and cleaning for rental properties.

Obstacles to Meeting Underserved Needs

As echoed throughout the Consolidated Plan, the high cost of land and construction present an obstacle to meeting the housing needs of lower income households in Glendale. It is particularly expensive to serve the under-served, as deeper subsidies are often required. In addition, there are limited financial resources and often there is uncertainty regarding their ongoing availability. Finally, meeting under-served needs often demands the expertise of a well-trained, specialized non-profit to offer solutions for the needs of their particular

focus population. Developing capacity in existing organizations is required, as is the encouragement and welcoming of new organizations.

Additional obstacles to provide housing and social services to low-income persons and families, homeless persons and families, and persons with special needs are issues with funding, community opposition, and capacity of organizations. The funding for ongoing operations of existing programs continues to be a challenge, as grant funds are either reduced or fail to increase with inflation. Fund development from private sources presents a challenge due to a high level of competition for funds. The issue of community opposition continues to be an issue, as residents attempt to protect their neighborhood from services that serve stigmatized populations, such as the disabled or the homeless. Organizational capacity is an issue due to the requirements related to the use of federal and other grant funds, such as maintaining income eligibility documentation and completing the necessary reports for grant funded services.

One strategy to help address these barriers is to provide ongoing technical assistance to agencies to help build capacity. In addition, the Glendale Homeless Coalition and its member agencies work with community members to provide education on homelessness and bring sensitivity regarding the need for services. For circumstances where either homeless or special needs programs have negative impacts on their neighbors, coordination groups have been established to provide issues are forum for open discourse and problem solving between the service provider(s) and the neighbors. One such group has been an Inter-Agency Coordinating Committee, which includes the operator of a seasonal winter shelter program, and the neighboring facilities that feel the impact of the shelter program.

Institutional Structure

This section describes the institutional framework through which the City of Glendale will carry out its Consolidated Plan. Public agencies, for-profit and nonprofit organizations all play a part in the provision of social service, neighborhood improvement, economic development, homeless and affordable housing programs for the benefit low-income residents. The roles of these organizations are discussed in this section. This section also discusses potential gaps in the institutional structure, which would deter the City from carrying out its strategy for addressing priority needs.

Public Agencies

Glendale City Council: As needs arise, the City Council may contribute general funds to social service providers in Glendale to address needs such as the day laborer hiring center. City Capital improvement projects are also leveraged with CDBG funds to meet both national and local goals for neighborhood revitalization, public safety, and improvement of community centers.

Housing Authority: The City of Glendale created its own Housing Authority in 1975, consisting of five City Council members and two tenant commissioners. The City's Housing Authority, staffed by the Housing Division, is responsible for administration of the HUD Housing Choice Voucher (Section 8) program, Supportive Housing Program (SHP) funds, HOME funds, and Redevelopment Housing funds.

City Structure: Since 1990, the Department of Community Development and Housing of the City of Glendale has been responsible for the organization and preparation of the Consolidated Plan, as well as overseeing the implementation of the Consolidated Plan activities, including program strategies. The Department's divisions worked closely together to provide a coordinated approach to implementation:

1. **Community Development Block Grant:** Plans and administers CDBG, ESG and SHP funded programs, in addition to the Homeless Continuum of Care, neighborhood planning and fair housing.

2. **Workforce Development:** Administers employment and training programs youth employment and operation of the Verdugo Job Center.

3. **Housing Division:** Administers the Section 8 Rental Assistance and Family Self- Sufficiency programs and oversees the development of new affordable housing and rehabilitation of existing housing. In addition to HOME funds, this section administers Redevelopment Set-Aside funds.

4. **Neighborhood Services:** Directs code enforcement, community education and outreach, graffiti abatement, and neighborhood beautification programs.

In September 2009, the Glendale City Council approved the realignment of the functions and responsibilities of the Department of Community Development and Housing into three new, reformulated departments in order to improve service delivery to the community through coordination of programs and staff. This realignment and transfer of functions and responsibilities was effective as of

January 1, 2010. The former Community Development and Housing divisions and their new respective departments are noted in Table 46 below:

TABLE 46
Division Realignment

Division	New Department
Community Development Block Grant	Community Services and Parks
Workforce Development	Community Services and Parks
Housing Division	Community Redevelopment and Housing
Neighborhood Services	Community Planning

Community Services and Parks Department (CSP): This Department will be the lead in coordinating the Consolidated Plan effort and CDBG capital improvement projects. CSP will form interdepartmental project management teams led by the department with direct jurisdiction over the type of improvement that is funded. When there are several public improvements proposed as part of a neighborhood revitalization project, the CDBG section will be responsible for coordinating the planning and implementation of the project. The CDBG section will continue to monitor activities with respect to current and new HUD community development programs.

CSP has historically offered a variety of social services to elderly residents at the City's Adult Recreation Center. Case management is provided to seniors as a means of improving the delivery system for services such as in-home care and relocation assistance. The Youth Outreach program, which coordinates its activities with local non-profit youth agencies is also operated by the CSP. General recreational activities for low-income residents such as the Mobile Recreation Center program are provided by the CSP in targeted CDBG areas.

The Department has added the Workforce Development division, responsible for job training and employment programs in the Verdugo Hills area of Glendale, Burbank and La Canada Flintridge. Workforce Development is staff for the Verdugo Workforce Investment Board and operates the Verdugo One Stop Center to assist job seekers and businesses.

Community Redevelopment and Housing Department: Pursuant to State Redevelopment law, this Department sets aside 20 percent of the tax increment generated from its redevelopment projects for low and moderate-income housing. The Housing Division, now located in this Department, is responsible for the administration of these funds, along with federal HOME funds for housing and the Housing Choice Voucher (Section 8) program. The CDBG and Housing sections will continue to monitor activities with respect to current and new HUD housing programs.

The Community Redevelopment and Housing Department is also responsible for planning, development and implementation of a city-wide economic development strategy with the primary purpose to assist businesses with their needs. The Consolidated Plan includes development and implementation of an economic development strategy to target assistance to businesses that are located in and/or serve low and moderate-income neighborhoods and/or might employ low and moderate income, local residents. The Consolidated Plan economic development strategy also focuses on employment programs and supportive services that would allow persons to sustain their employment. This Department will work closely with the Community Services and Parks Department to collaborate on planning activities in order to ensure coordination and consistency between the citywide strategy and the Consolidated Plan strategy.

Community Planning Department: The City's Community Planning Department has been reorganized to include not only Neighborhood Services but also the Building Division. Traditionally this Department performs functions which directly affect the development and rehabilitation of housing and commercial areas. The Department oversees the permitting process, regulates compliance with zoning and building codes, prepares the City's Housing Element, and implements the density bonus program required by state law. The Department is also instrumental in the development of urban design and revitalization strategies in targeted commercial neighborhoods.

Glendale Police Department: On October 11, 2009 the Glendale Police Department implemented an Area Command, a community based policing service delivery model. The objective of this command structure is to address crime issues and improve quality of life through accountability, professional responsibility, and strategic utilization of our limited police resources. Specifically the Department divided the City into four distinct geographic areas, designated as the North, South, East and West Command Areas. Each Command has one Glendale Police Lieutenant designated as the Area Commander and at least one Community Lead Officer. Each Area Commander is being held accountable for understanding the issues and concerns unique to their service area and for developing strategies and directing resources to solve problems and improve the quality of life for our citizens. The Area Command strategy will use a variety of traditional and community based policing strategies to address crime and quality of life issues. The Department will continue to closely coordinate efforts to address neighborhood issues with other City departments, including participation on the Glendale Homeless Coalition. The Police Department will also continue to provide direct services to at-risk youth, such as the Police Activities League (PAL) programs; including an equestrian

drill team; youth boxing and STAR mentorship (operated with Catholic Charities) programs.

County Department of Public Social Services (DPSS): Services offered through the DPSS include: Temporary Assistance for Needy Families (TANF), CalWorks, In Home Supportive Services, Greater Avenues for Independence (GAIN), MediCal, General Relief to adult homeless individuals, and Food Stamps. DPSS also makes referrals for mental health, substance abuse, domestic violence programs, and Welfare to Work Programs including General Relief Opportunities for Work (GROW). DPSS may also provide eligible families with a one-time cash assistance to prevent eviction. The director of the Glendale DPSS office is a member of the Glendale Homeless Coalition and the Workforce Investment Board, and as a result, provides input into the City's anti-poverty program and strategies.

Private Sector

Non-Profit Organizations: Several non-profit organizations have sponsored housing projects in Glendale, including Southern California Presbyterian Homes, Salvation Army, Glendale Association for the Retarded, San Gabriel Valley Habitat for Humanity, Ability First, Hamilton Court Housing Corporation, United Cerebral Palsy of Los Angeles, and West Hollywood Community Housing Corporation. The City enjoys strong relationships with area non-profit housing developers and seeks their input and participation on a regular basis.

For-Profit Developers and Builders: There are many private for-profit builders, developers and contractors in the Glendale area. In addition, firms outside the region often do projects in the City as long-term investments or for resale. The vast majority of housing that is developed, built and rehabilitated in Glendale is done so by private firms, and is for the most part, unsubsidized or market rate. Although Glendale has historically partnered with non-profit organizations to develop affordable housing, the City has partnered with for-profit builders to develop several recent projects. Both private and non-profit developers continue to be identified through the RFQ/SOI process discussed earlier.

The Glendale Homeless Coalition includes members from the Glendale Chamber of Commerce, the Glendale Association of Realtors, private developers and builders, and local business representatives.

Lenders: Private lending institutions provide funds for housing development in Glendale. In particular, the City has worked with banks to leverage public monies for affordable housing projects. JP Morgan Chase Bank is the exclusive lender for Glendale's First Time Home Buyer program.

Delivery System Gaps and Strategy to Overcome Gaps

The identified community development, homeless, and housing institutional structure and delivery system in Glendale is quite efficient. However, there are key elements in the structure and delivery system, which could be improved. These areas for development include:

- Coordination of youth services and a community wide strategy for youth;
- Continual capacity building for non-profit organizations;
- Neighborhood-based planning;
- Transportation to social service agencies;
- Childcare for low-income working families;
- Closer working relationship between apartment owners, property managers and the City;
- More English as a Second Language courses for limited English speaking families; and
- Effective economic development to help businesses create new livable wage jobs for low income families.

The City of Glendale will attempt to address these gaps through the following strategies:

- Developing One-Stop centers and multi-purpose centers to ensure coordination and efficiency of community services;
- Coordinating youth activities;
- Increasing English as a Second Language courses throughout the City;
- Continuing involvement of housing providers and social service agencies with the Glendale Homeless Coalition;
- Increasing capacity building for non-profit housing and social service organizations through technical assistance and grant writing workshops;
- Increasing the dissemination of housing information to the Glendale Board of Realtors Affordable Housing Committee; and
- Better coordination between the CDBG program and workforce development, and the citywide economic development program.

HOME Program Elements

As required in the Consolidate Plan guidelines, the City will address the HOME program elements in this section.

1. Forms of Investment

The City will use the permissible forms of investment described in Section 92.205(b) of the HOME final rule. Specifically the City may use any of the following forms:

- Equity investments
- Interest bearing loans or advances
- Non-Interest loans or advances
- Interest subsidies
- Deferred payment loans
- Grants
- Loan guarantees

2. Resale/Recapture

The City uses a recapture method and limits the amount of recapture to the net proceeds available from the sale. The City does not use resale provisions for HOME funded projects. Depending on the type of project and amount of assistance provided, the City uses one of two methods of recapture.

a. New Construction Projects: If the City has provided financial assistance for the development of a new construction for-sale project, the City's assistance typically converts to a deferred (soft second) mortgage loan. The City's initial assistance requires a development agreement which includes a final form of home buyer loan agreement. The City's loan to the home buyer is secured by a loan agreement, deed of trust, promissory note, and an agreement establishing the covenants, conditions and restrictions (CC&R's) related to the ownership, required ongoing owner occupancy, and maintenance of the property for the required affordability period. The deed of trust and CC&R documents are recorded with the County recorder's office.

   Since the City's financial assistance to the buyer of a newly constructed unit is usually a significant amount (greater than $75,000), the City typically requires a minimum 15 year term of affordability. The term of affordability is at minimum in accordance with the affordability limits required by HOME regulations (5 years/less than $15,000 investment; 10 years/$15,000 to $40,000 investment; 15 years/greater than $40,000 investment).

During this period of affordability, the City will recapture the entire amount of the HOME investment from the homebuyer upon sale or transfer of the property based upon the net proceeds available from the sale, including an appreciation share of the net proceeds based upon the ratio of the HOME subsidy to the sum of the homebuyer's investment plus the HOME subsidy. The amount of the appreciation share will be reduced over time depending upon the length of occupancy. The City acknowledges that, if there are no net proceeds or insufficient net proceeds to repay the HOME investment due, the City can only capture the net proceeds, if any. The net proceeds are the sales price minus superior loan repayment (other than HOME funds) and any closing costs.

b. Down Payment Assistance Loans: If the City's assistance is used for down payment and closing costs, the amount is typically $25,000 or less. The City's assistance to the home buyer is in the form of a deferred junior mortgage loan, secured by a loan agreement, deed of trust, promissory note, and an agreement establishing the covenants, conditions and restrictions (CC&R's) related to the ownership, required owner occupancy, and maintenance of the property for the required affordability period. The deed of trust and CC&R's are recorded with the County recorder's office.

   Since the City's down payment assistance to the buyer is usually $25,000 or less, the City typically requires a maximum 10 year term of affordability for this type of loan. The term of affordability is at minimum in accordance with the affordability limits required by HOME regulations (5 years/less than $15,000 investment; 10 years/$15,000 to $40,000 investment; 15 years/greater than $40,000 investment).

   During the period of affordability the City's recapture is equal to the entire amount of the HOME investment upon sale or transfer of the property based upon the net proceeds available from the sale. However, the loan amount due is reduced annually on a pro-rata basis according to the time the homebuyer has owned and occupied the housing measured against the required affordability period. After the affordability period, the loan will be forgiven. The City acknowledges that, if there are no net proceeds or insufficient net proceeds to repay the HOME investment due, the City can only capture the net proceeds, if any. The net proceeds are the sales price minus superior loan repayment (other than HOME funds) and any closing costs.

3. Refinancing Guidelines
The City does not plan to provide funds for refinancing.

4. HOME Tenant Based Rental Assistance
The City does not plan to use HOME funds for tenant based rental assistance.

5. Median Area Purchase Price
The City will use the Los Angeles County 203(b) limits as allowed by HOME regulations.

6. Affirmative Marketing Procedures
The City uses an extensive affirmative marketing process for all housing containing five or more HOME assisted units. This process includes the required elements of affirmative marketing and is available for review.

7. Minority/Women's Business Outreach
The City has developed and uses long-standing processes to outreach to Minority/Women's Business Enterprises (MWBE).

Monitoring

The Community Services and Parks Department will monitor activities that are supported to meet all needs identified in the Consolidated Plan except for housing which will be monitored by the Community Redevelopment and Housing Department. The Community Services and Parks Department administers and monitors CDBG, ESG, SHP and HPRP funded projects and programs. The Community Redevelopment and Housing Department administers and monitors HOME and Housing Choice Voucher (Section 8) funded projects and programs. Program implementation will incorporate monitoring standards to ensure compliance with program objectives.

The performance of each funded project and activity is monitored in various ways depending on the type of program and reporting requirements. Agencies and City departments are required to commit to a number of persons served and outcomes of performance, goals, expenditure rates and compliance. Monitoring includes on-site visits, interviews, telephone contacts and quarterly reports. In addition, the City's sub-recipient agreements are used to measure an agency's compliance with federal and City requirements. As required, sub-recipients will be monitored annually for compliance with HUD regulations. All disbursement of funds is on a cost-reimbursement basis. For social service programs that show low expenditure rates, funds will be recaptured and reprogrammed. Activities which are cited in the Action Plan including comprehensive planning

requirements will be monitored as they are carried out, and such monitoring will be appropriately documented. Specific actions such as minority business outreach and Section 3 compliance will be regularly monitored by Department of Community Services and Parks staff.

With regard to affordable housing projects, to facilitate quality portfolio management after project completion, Community Redevelopment and Housing staff will regularly monitor existing projects. Staff conducts physical, financial, and occupancy monitoring reviews to guarantee that loan recipients serve the intended populations and are in compliance with the loan agreement terms. The portfolio management and monitoring process not only protects the Housing Authority's investment, it also encourages positive relationships between owners, tenants, neighborhood, and City staff. In addition, monitoring provides an opportunity to review the overall health of the portfolio and better gauge the impact of the funded projects.

Public Comments

Copies of the Five Year Consolidated Plan were made available to the public at the following locations after the publishing of a Public Notice of the availability of the Consolidated Plan (Appendix C):

City of Glendale
Community Services and Parks Department
Community Development Block Grant Division
141 N. Glendale Avenue, Rm. 202
Glendale, CA

Oral and Written Comments on the Consolidated Plan

No oral or written comments were provided during the Consolidated Plan comment period.

APPENDIX A

CONSOLIDATED PLAN MANAGEMENT PROCESS
CPMP Needs Tables
Assumptions/Methods

CPMP Version 1.3

Housing Needs Table

Grantee:

Only complete blue sections. Do NOT type in sections other than blue.

Housing Needs - Comprehensive Housing Affordability Strategy (CHAS) Data Housing Problems

			Current % of Households	Current Number of Households	3-5 Year Quantities: Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4* Goal	Year 4* Actual	Year 5* Goal	Year 5* Actual	Multi-Year Goal	Multi-Year Actual	% of Goal	Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member: % HSHLD	Households with a Disabled Member: # HSHLD	Disproportionate Racial/ Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income HIV/AIDS Population
Household Income <=30% MFI	Renter	Elderly	NUMBER OF HOUSEHOLDS	100%	2,679																100%	0			
			Any housing problems	80.8	2,164											0	####	H	Y	C,H,O		0			
			Cost Burden > 30%	79.3	2,124											0	####	N/A	Y	C,H,O					
			Cost Burden >50%	73.7	1,975											0	####	N/A	Y	C,H,O					
		Small Related	NUMBER OF HOUSEHOLDS	100%	3,344																				
			With Any Housing Problems	92.4	3,089	33		32		31		32		30		0	####	H	Y	C,H,O					
			Cost Burden > 30%	82.2	2,749											0	####	N/A	Y	C,H,O					
			Cost Burden >50%	80.3	2,685											0	####	N/A	Y	C,H,O					
		Large Related	NUMBER OF HOUSEHOLDS	100%	900																				
			With Any Housing Problems	100	900	4				3						0	####	M	Y	H,O					
			Cost Burden > 30%	92.2	830											0	####	N/A	N						
			Cost Burden >50%	85.6	770											0	####	N/A	N						
		All other hsholds	NUMBER OF HOUSEHOLDS	100%	1,659																				
			With Any Housing Problems	69.3	1,149											0	####	L	N						
			Cost Burden > 30%	67.2	1,115											0	####	L	N						
			Cost Burden >50%	64.8	1,075											0	####	L	N						
	Owner	Elderly	NUMBER OF HOUSEHOLDS	100%	593																				
			With Any Housing Problems	78.1	463	3		3		4		4		4		0	####	M	Y	H,O					
			Cost Burden > 30%	78.1	463											0	####	N/A	N						
			Cost Burden >50%	71.3	423											0	####	N/A	N						
		Small Related	NUMBER OF HOUSEHOLDS	100%	289																				
			With Any Housing Problems	65.4	189	1		1		1		1		1		0	####	M	Y	H,O					
			Cost Burden > 30%	61.9	179											0	####	N/A	N						
			Cost Burden >50%	60.6	175											0	####	N/A	N						
		Large Related	NUMBER OF HOUSEHOLDS	100%	60																				
			With Any Housing Problems	58.3	35											0	####	L	N						
			Cost Burden > 30%	58.3	35											0	####	L	N						
			Cost Burden >50%	58.3	35											0	####	L	N						
		All other hsholds	NUMBER OF HOUSEHOLDS	100%	174																				
			With Any Housing Problems	83.3	145											0	####	L	N						
			Cost Burden > 30%	83.3	145											0	####	L	N						
			Cost Burden >50%	77.6	135											0	####	L	N						

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Housing Needs Table

Grantee:

Only complete blue sections. Do NOT type in sections other than blue.

Housing Needs - Comprehensive Housing Affordability Strategy (CHAS) Data Housing Problems

			Current % of House-holds	Current Number of House-holds	3-5 Year Quantities: Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4* Goal	Year 4* Actual	Year 5* Goal	Year 5* Actual	Multi-Year Goal	Multi-Year Actual	% of Goal	Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member: % HSHLD	Households with a Disabled Member: # HSHLD	Disproportionate Racial/ Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income HIV/AIDS Population
Household Income >30 to <=50% MFI	Renter	Elderly	NUMBER OF HOUSEHOLDS	100%	2,095																	100%				
			With Any Housing Problems	89.7	1,880								40			0	####	H	Y	H,O		0			
			Cost Burden > 30%	88.5	1,855											0	####	N/A	Y	H,O					
			Cost Burden >50%	63.5	1,330											0	####	N/A	Y	H,O					
		Small Related	NUMBER OF HOUSEHOLDS	100%	2,854																				
			With Any Housing Problems	99.2	2,830	27		4		8		4				0	####	H	Y	H,O					
			Cost Burden > 30%	96.7	2,760											0	####	N/A	Y	H,O					
			Cost Burden >50%	59.7	1,705											0	####	N/A	Y	H,O					
		Large Related	NUMBER OF HOUSEHOLDS	100%	930																				
			With Any Housing Problems	100	930	15				4						0	####	H	Y	H,O					
			Cost Burden > 30%	89.2	830											0	####	H	Y	H,O					
			Cost Burden >50%	32.8	305											0	####	H	Y	H,O					
		All other hsholds	NUMBER OF HOUSEHOLDS	100%	989																				
			With Any Housing Problems	96	949											0	####	L	N						
			Cost Burden > 30%	95.6	945											0	####	L	N						
			Cost Burden >50%	64.2	635											0	####	L	N						
	Owner	Elderly	NUMBER OF HOUSEHOLDS	100%	875																				
			With Any Housing Problems	72	630	7		7		7		7		8		0	####	H	Y	H,O					
			Cost Burden > 30%	72	630											0	####	N/A	Y	H,O					
			Cost Burden >50%	33.1	290											0	####	N/A	Y	H,O					
		Small Related	NUMBER OF HOUSEHOLDS	100%	358																				
			With Any Housing Problems	84.6	303	1		2		2		2		2		0	####	H	Y	H,O					
			Cost Burden > 30%	83.5	299											0	####	N/A	Y	H,O					
			Cost Burden >50%	58.7	210											0	####	N/A	Y	H,O					
		Large Related	NUMBER OF HOUSEHOLDS	100%	119																				
			With Any Housing Problems	100	119											0	####	M	N						
			Cost Burden > 30%	100	119											0	####	M	N						
			Cost Burden >50%	91.6	109											0	####	M	N						
		All other hsholds	NUMBER OF HOUSEHOLDS	100%	100																				
			With Any Housing Problems	85	85											0	####	M	N						
			Cost Burden > 30%	85	85											0	####	M	N						
			Cost Burden >50%	70	70											0	####	M	N						

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Housing Needs Table

Grantee:

Only complete blue sections. Do NOT type in sections other than blue.

Housing Needs - Comprehensive Housing Affordability Strategy (CHAS) Data Housing Problems

Household Income >50 to <=80% MFI

		Current % of Households	Current Number of Households	3-5 Year Quantities: Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4* Goal	Year 4* Actual	Year 5* Goal	Year 5* Actual	Multi-Year Goal	Multi-Year Actual	% of Goal	Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member: % HSHLD	Households with a Disabled Member: # HSHLD	Disproportionate Racial/Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income HIV/AIDS Population
Renter – Elderly	NUMBER OF HOUSEHOLDS	100%	1,253																	100%				
	With Any Housing Problems	78.9	988												0	####	M	Y	H,O		0			
	Cost Burden > 30%	73.4	920												0	####	M	Y	H,O					
	Cost Burden >50%	16	200												0	####	M	Y	H,O					
Renter – Small Related	NUMBER OF HOUSEHOLDS	100%	3,930																					
	With Any Housing Problems	86.4	3,395			6		4		6					0	####	H	Y	H,O					
	Cost Burden > 30%	63.9	2,510												0	####	N/A	Y	H,O					
	Cost Burden >50%	6.9	270												0	####	N/A	Y	H,O					
Renter – Large Related	NUMBER OF HOUSEHOLDS	100%	1,164																					
	With Any Housing Problems	97.4	1,134	21				15							0	####	H	Y	H,O					
	Cost Burden > 30%	44.2	514												0	####	N/A	Y	H,O					
	Cost Burden >50%	3.4	40												0	####	N/A	Y	H,O					
Renter – All other hsholds	NUMBER OF HOUSEHOLDS	100%	1,659																					
	With Any Housing Problems	76.8	1,274												0	####	M	N						
	Cost Burden > 30%	72	1,194												0	####	M	N						
	Cost Burden >50%	9.9	165												0	####	M	N						
Owner – Elderly	NUMBER OF HOUSEHOLDS	100%	899																					
	With Any Housing Problems	48.8	439	12		12		12		12		12			0	####	H	Y	H,O					
	Cost Burden > 30%	48.8	439												0	####	N/A	Y	H,O					
	Cost Burden >50%	31	279												0	####	N/A	Y	H,O					
Owner – Small Related	NUMBER OF HOUSEHOLDS	100%	678																					
	With Any Housing Problems	83	563	3		3		3		3		3			0	####	H	Y	H,O					
	Cost Burden > 30%	81.9	555												0	####	N/A	Y	H,O					
	Cost Burden >50%	63.4	430												0	####	N/A	Y	H,O					
Owner – Large Related	NUMBER OF HOUSEHOLDS	100%	240																					
	With Any Housing Problems	100	240												0	####	M	Y	H,O					
	Cost Burden > 30%	77.1	185												0	####	M	Y	H,O					
	Cost Burden >50%	47.9	115												0	####	M	Y	H,O					
Owner – All other hsholds	NUMBER OF HOUSEHOLDS	100%	240																					
	With Any Housing Problems	85.4	205												0	####	M	Y	H,O					
	Cost Burden > 30%	85.4	205												0	####	M	Y	H,O					
	Cost Burden >50%	54.2	130												0	####	M	Y	H,O					
	Total Any Housing Problem			127	0	70	0	94	0	71	0	100	0	0	0					Total Disabled	0			
	Total 215 Renter			46				16				40			0		Tot. Elderly		6564		Total Lead Hazard		0	
	Total 215 Owner							5							0		Tot. Sm Related		24896		Total Renters		50183	
	Total 215			46	0	0	0	21	0	0	0	40	0	0	0		Tot. Lg. Related		7245		Total Owners		9156	

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Jurisdiction

Housing Market Analysis

Complete cells in blue.

Housing Stock Inventory	Vacancy Rate	0 & 1 Bedroom	2 Bedrooms	3+ Bedrooms	Total	Substandard Units
Affordability Mismatch						
Occupied Units: Renter		26610	14580	3051	44241	1588
Occupied Units: Owner		3178	8914	15457	27549	500
Vacant Units: For Rent	1%	260	150	30	440	
Vacant Units: For Sale	1%	25	120	164	309	
Total Units Occupied & Vacant		30073	23764	18702	72539	2088
Rents: Applicable FMRs (in $s)		1,090	1,361	1,828		
Rent Affordable at 30% of 50% of MFI (in $s)		743	892	1,030		
Public Housing Units						
Occupied Units					0	
Vacant Units					0	
Total Units Occupied & Vacant		0	0	0	0	0
Rehabilitation Needs (in $s)					0	

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Continuum of Care Homeless Population and Subpopulations Chart

Part 1: Homeless Population	Sheltered		Un-sheltered	Total
	Emergency	Transitional		
1. Homeless Individuals	49	0	108	157
2. Homeless Families with Children	16	29	18	63
2a. Persons in Homeless with Children Families	37	52	60	149
Total (lines 1 + 2a)	86	52	168	306

Jurisdiction

Data Quality: (N) enumerations

Part 2: Homeless Subpopulations	Sheltered	Un-sheltered	Total
1. Chronically Homeless	6	99	105
2. Severely Mentally Ill	37	47	84
3. Chronic Substance Abuse	15	30	45
4. Veterans	22	0	22
5. Persons with HIV/AIDS	1	9	10
6. Victims of Domestic Violence	20	20	40
7. Youth (Under 18 years of age)	0	0	0

Data Quality: (N) enumerations

Part 3: Homeless Needs Table: Individuals		Needs	Currently Available	Gap	5-Year Quantities										Total			Priority H, M, L	Plan to Fund? Y N	Fund Source: CDBG, HOME, HOPWA, ESG or Other
					Year 1		Year 2		Year 3		Year 4		Year 5							
					Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Actual	% of Goal			
Beds	Emergency Shelters	157	12	145	10	0	10	0	10	0	10	0	10	0	50	0	0%	H	Y	E,C
	Transitional Housing	157	0	157	0	0	0	0	0	0	0	0	0	0	0	0	###	M	Y	C,H,O
	Permanent Supportive Housing	207	50	157	50	0	50	0	50	0	50	0	50	0	250	0	0%	H	Y	C,H,O
	Total	521	62	459	10	0	10	0	10	0	10	0	10	0	50	0	0%			
Chronically Homeless		105	27															H	Y	O

Part 4: Homeless Needs Table: Families		Needs	Currently Available	Gap	5-Year Quantities										Total			Priority H,M,L	Plan to Fund? Y N	Fund Source: CDBG, HOME, HOPWA, ESG or Other
					Year 1		Year 2		Year 3		Year 4		Year 5							
					Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Actual	% of Goal			
Beds	Emergency Shelters	97	38	59	35	0	35	0	35	0	35	0	35	0	175	0	0%	H	Y	E,C
	Transitional Housing	209	112	97	100	0	100	0	100	0	100	0	100	0	500	0	0%	M	Y	C,H,O
	Permanent Supportive Housing	235	26	209	26	0	26	0	26	0	26	0	26	0	130	0	0%	H	Y	C,H,O
	Total	541	176	365	161	0	161	161	0	0	161	0	161	0	644	161	25%			

Completing Part 1: Homeless Population. This must be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time. The counts must be from: (A) administrative records, (N) enumerations, (S) statistically reliable samples, or (E) estimates. The quality of the data presented in each box must be identified as: (A), (N), (S) or (E).

Completing Part 2: Homeless Subpopulations. This must be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time. The numbers must be from: (A) administrative records, (N) enumerations, (S) statistically reliable samples, or (E) estimates. The quality of the data presented in each box must be identified as: (A), (N), (S) or (E).

Sheltered Homeless. Count adults, children and youth residing in shelters for the homeless. "Shelters" include all emergency shelters and transitional shelters for the homeless, including domestic violence shelters, residential programs for runaway/homeless youth, and any hotel/motel/apartment voucher arrangements paid by a public/private agency because the person or family is homeless. Do not count: (1) persons who are living doubled up in conventional housing; (2) formerly homeless persons who are residing in Section 8 SRO, Shelter Plus Care, SHP permanent housing or other permanent housing units; (3) children or youth, who because of their own or a parent's homelessness or abandonment, now reside temporarily and for a short anticipated duration in hospitals, residential treatment facilities, emergency foster care, detention facilities and the like; and (4) adults living in mental health facilities, chemical dependency facilities, or criminal justice facilities.

Unsheltered Homeless. Count adults, children and youth sleeping in places not meant for human habitation. Places not meant for human habitation include streets, parks, alleys, parking ramps, parts of the highway system, transportation depots and other parts of transportation systems (e.g. subway tunnels, railroad car), all-night commercial establishments (e.g. movie theaters, laundromats, restaurants), abandoned buildings, building roofs or stairwells, chicken coops and other farm outbuildings, caves, campgrounds, vehicles, and other similar places.

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Grantee Name: **Jurisdiction**

	Non-Homeless Special Needs Including HOPWA	Needs	Currently Available	GAP	3-5 Year Quantities										Total			Priority Need: H, M, L	Plan to Fund? Y N	Fund Source: CDBG, HOM
					Year 1		Year 2		Year 3		Year 4*		Year 5*							
					Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Actual	% of Goal			
Housing Needed	52. Elderly	6564	601	5963	0	0	0	0	0	0	0	0	40	0	40	0	0%	H	Y	H,C
	53. Frail Elderly	2757	0	2757	0	0	0	0	0	0	0	0	0	0	0	0	####	M	N	
	54. Persons w/ Severe Mental Illness	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	L	N	
	55. Developmentally Disabled	0	72	-72	0	0	0	0	0	0	0	0	0	0	0	0	####	M	N	
	56. Physically Disabled	0	24	-24	0	0	0	0	0	0	0	0	0	0	0	0	####	M	N	
	57. Alcohol/Other Drug Addicted	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	L	N	
	58. Persons w/ HIV/AIDS & their families	542	0	542	0	0	0	0	0	0	0	0	0	0	0	0	####	L	N	
	59. Public Housing Residents	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	N	N	
	Total	9863	697	9166	0	0	0	0	0	0	0	0	40	0	40	0	0%			
Supportive Services Needed	60. Elderly	8394	0	8394	105	0	105	0	105	0	105	0	105	0	525	0	0%	H	Y	C,E
	61. Frail Elderly	3525	0	3525	75	0	75	0	75	0	75	0	75	0	375	0	0%	H	Y	C
	62. Persons w/ Severe Mental Illness	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	L	N	
	63. Developmentally Disabled	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	M	Y	C,E
	64. Physically Disabled	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	M	Y	C,E
	65. Alcohol/Other Drug Addicted	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	M	N	
	66. Persons w/ HIV/AIDS & their families	542	0	542	0	0	0	0	0	0	0	0	0	0	0	0	####	L	N	
	67. Public Housing Residents	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	####	N	N	
	Total	12461	0	12461	180	0	180	0	180	0	180	0	180	0	900	0	0%			

CPMP Version 1.3

Jurisdiction

Only complete blue sections.

Housing and Community Development Activities		Needs	Current	Gap	5-Year Quantities Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4 Goal	Year 4 Actual	Year 5 Goal	Year 5 Actual	Cumulative Goal	Cumulative Actual	% of Goal	Priority Need: H,M,L	Dollars to Address	Plan to Fund? Y/N	Fund Source
01 Acquisition of Real Property 570.201(a)		0	0	0											0	0	###	H		Y	C
02 Disposition 570.201(b)		0	0	0											0	0	###	M		Y	C
Public Facilities and Improvements	03 Public Facilities and Improvements (General) 570.201(c)	0	0	0			2		2		2		2		8	0	0%	H		Y	C
	03A Senior Centers 570.201(c)	1	1	0											0	0	###	M		Y	C
	03B Handicapped Centers 570.201(c)	0	0	0											0	0	###	L		N	
	03C Homeless Facilities (not operating costs) 570.201(c)	2	1	1	1		1								2	0	0%	H	95.6K	Y	C
	03D Youth Centers 570.201(c)	0	0	0	2				1		1		1		5	0	0%	H	87.7K	Y	C
	03E Neighborhood Facilities 570.201(c)	0	0	0	1										1	0	0%	M	81.6K	Y	C
	03F Parks, Recreational Facilities 570.201(c)	74	44	30	2						1				3	0	0%	H	1.46M	Y	C
	03G Parking Facilities 570.201©	0	0	0											0	0	###	N		N	
	03H Solid Waste Disposal Improvements 570.201(c)	0	0	0											0	0	###	N		N	
	03I Flood Drain Improvements 570.201(c)	0	0	0											0	0	###	N		N	
	03J Water/Sewer Improvements 570.201(c)	0	0	0											0	0	###	L		N	
	03K Street Improvements 570.201(c)	0	0	0											0	0	###	M		Y	C
	03L Sidewalks 570.201(c)	0	0	0											0	0	###	M		Y	C
	03M Child Care Centers 570.201(c)	0	0	0	1										1	0	0%	H	40K	Y	C
	03N Tree Planting 570.201(c)	0	0	0											0	0	###	L		N	
	03O Fire Stations/Equipment 570.201(c)	0	0	0											0	0	###	N		N	
	03P Health Facilities 570.201(c)	0	0	0	1										1	0	0%	H	115K	Y	C
	03Q Abused and Neglected Children Facilities 570.201(c)	0	0	0											0	0	###	N		N	
	03R Asbestos Removal 570.201(c)	0	0	0											0	0	###	L		N	
	03S Facilities for AIDS Patients (not operating costs) 570.201(c)	0	0	0											0	0	###	N		N	
	03T Operating Costs of Homeless/AIDS Patients Programs	0	0	0											0	0	###	M		Y	C
04 Clearance and Demolition 570.201(d)		0	0	0											0	0	###	L		N	
04A Clean-up of Contaminated Sites 570.201(d)		0	0	0											0	0	###	L		N	

CPMP Version 1.3

Jurisdiction

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	Housing and Community Development Activities	Needs	Current	Gap	5-Year Quantities Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4 Goal	Year 4 Actual	Year 5 Goal	Year 5 Actual	Cumulative Goal	Cumulative Actual	% of Goal	Priority Need: H,M,L	Dollars to Address	Plan to Fund? Y/N	Fund Source
Public Services	05 Public Services (General) 570.201(e)	800	0	800	803		700		700		700		700		3603	0	0%	H	247K	Y	E,C
	05A Senior Services 570.201(e)	8394	0	8394	180		180		180		180		180		900	0	0%	H	22K	Y	C
	05B Handicapped Services 570.201(e)	0	0	0											0	0	###	M		Y	C
	05C Legal Services 570.201(E)	0	0	0											0	0	###	M		Y	C
	05D Youth Services 570.201(e)	3000	0	3000	3145		500		500		500		500		5145	0	0%	H	113K	Y	C
	05E Transportation Services 570.201(e)	0	0	0											0	0	###	L		N	C
	05F Substance Abuse Services 570.201(e)	0	0	0											0	0	###	L		N	C
	05G Battered and Abused Spouses 570.201(e)	80	0	80	80										80	0	0%	M	12K	Y	E,C
	05H Employment Training 570.201(e)	1000	0	1000	150		50		50		50		50		350	0	0%	H	79K	Y	C
	05I Crime Awareness 570.201(e)	75	0	75	85		75		75		75		75		385	0	0%	H	50K	Y	C
	05J Fair Housing Activities (if CDBG, then subject to 570.201(e)	900	0	900	1000		900		900		900		900		4600	0	0%	H	69K	Y	C
	05K Tenant/Landlord Counseling 570.201(e)	100	0	100	208		100		100		100		100		608	0	0%	H	"	Y	C
	05L Child Care Services 570.201(e)	100	0	100	325		100		100		100		100		725	0	0%	H	85K	Y	C
	05M Health Services 570.201(e)	0	0	0											0	0	###	H		Y	C
	05N Abused and Neglected Children 570.201(e)	0	0	0											0	0	###	N		N	
	05O Mental Health Services 570.201(e)	0	0	0											0	0	###	M		N	O
	05P Screening for Lead-Based Paint/Lead Hazards Poison 570.201(e)	0	0	0											0	0	###	L		N	O
	05Q Subsistence Payments 570.204	0	0	0											0	0	###	M			C
	05R Homeownership Assistance (not direct) 570.204	0	0	0											0	0	###	M		Y	O
	05S Rental Housing Subsidies (if HOME, not part of 5% 570.204	0	0	0											0	0	###	N		N	
	05T Security Deposits (if HOME, not part of 5% Admin c	0	0	0											0	0	###	M		Y	C,H,O
06 Interim Assistance 570.201(f)		0	0	0											0	0	###	L		N	
07 Urban Renewal Completion 570.201(h)		0	0	0											0	0	###	N		N	
08 Relocation 570.201(i)		0	0	0											0	0	###	M		N	
09 Loss of Rental Income 570.201(j)		0	0	0											0	0	###	L		N	
10 Removal of Architectural Barriers 570.201(k)		0	0	0											0	0	###	L		N	
11 Privately Owned Utilities 570.201(l)		0	0	0											0	0	###	L		N	
12 Construction of Housing 570.201(m)		0	0	0											0	0	###	H		Y	H,O
13 Direct Homeownership Assistance 570.201(n)		0	0	0											0	0	###	M		Y	H,O
	14A Rehab; Single-Unit Residential 570.202	0	0	0											0	0	###	L		Y	H,O
	14B Rehab; Multi-Unit Residential 570.202		0	0											0	0	###	M		Y	H,O
	14C Public Housing Modernization 570.202	0	0	0											0	0	###	N		N	
	14D Rehab; Other Publicly-Owned Residential Buildings 570.202	0	0	0											0	0	###	N		N	
	14E Rehab; Publicly or Privately-Owned Commercial/Indu 570.202	0	0	0											0	0	###	M		Y	C
	14F Energy Efficiency Improvements 570.202	0	0	0											0	0	###	M		Y	C,H,O
	14G Acquisition - for Rehabilitation 570.202	0	0	0											0	0	###	N		N	
	14H Rehabilitation Administration 570.202	0	0	0											0	0	###	M		Y	H,O
	14I Lead-Based/Lead Hazard Test/Abate 570.202	0	0	0											0	0	###	M		Y	H,O

CPMP Version 1.3

Jurisdiction

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Housing and Community Development Activities	Needs	Current	Gap	5-Year Quantities Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4 Goal	Year 4 Actual	Year 5 Goal	Year 5 Actual	Cumulative Goal	Cumulative Actual	% of Goal	Priority Need: H,M,L	Dollars to Address	Plan to Fund? Y/N	Fund Source
15 Code Enforcement 570.202(c)	2400	0	**2400**	2400		2400		2400		2400		2400		###	**0**	**0%**	H	1.68M	Y	C,O
16A Residential Historic Preservation 570.202(d)	0	0	**0**											**0**	**0**	###	M		Y	H,O
16B Non-Residential Historic Preservation 570.202(d)	0	0	**0**											**0**	**0**	###	M		N	
17A CI Land Acquisition/Disposition 570.203(a)	0	0	**0**											**0**	**0**	###	M		N	
17B CI Infrastructure Development 570.203(a)	0	0	**0**											**0**	**0**	###	M		N	
17C CI Building Acquisition, Construction, Rehabilitat 570.203(a)	4	0	**4**					4		4		4		**12**	**0**	**0%**	H		Y	C
17D Other Commercial/Industrial Improvements 570.203(a)	0	0	**0**											**0**	**0**	###	M		Y	C
18A ED Direct Financial Assistance to For-Profits 570.203(b)	0	0	**0**											**0**	**0**	###	M		N	
18B ED Technical Assistance 570.203(b)	10	0	**10**	10		10		10		10		10		**50**	**0**	**0%**	H		Y	C
18C Micro-Enterprise Assistance	0	0	**0**											**0**	**0**	###	M		N	
19A HOME Admin/Planning Costs of PJ (not part of 5% Ad	0	0	**0**											**0**	**0**	###	N		N	
19B HOME CHDO Operating Costs (not part of 5% Admin ca	0	0	**0**											**0**	**0**	###	L		N	H
19C CDBG Non-profit Organization Capacity Building	0	0	**0**											**0**	**0**	###	M		N	
19D CDBG Assistance to Institutes of Higher Education	0	0	**0**											**0**	**0**	###	L		N	
19E CDBG Operation and Repair of Foreclosed Property	0	0	**0**											**0**	**0**	###	L		N	
19F Planned Repayment of Section 108 Loan Principal	1	0	**1**	1		1		1						**3**	**0**	**0%**	H	500K	Y	C
19G Unplanned Repayment of Section 108 Loan Principal	0	0	**0**											**0**	**0**	###	N		N	
19H State CDBG Technical Assistance to Grantees	0	0	**0**											**0**	**0**	###	N		N	
20 Planning 570.205	0	0	**0**											**0**	**0**	###	H	712K		
21A General Program Administration 570.206	1	0	**1**	1		1		1		1		1		**5**	**0**	**0%**	H	"	Y	C
21B Indirect Costs 570.206	1	0	**1**	1		1		1		1		1		**5**	**0**	**0%**	H	"	Y	C
21D Fair Housing Activities (subject to 20% Admin cap) 570.206	1	0	**1**	1		1		1		1		1		**5**	**0**	**0%**	H	"	Y	C
21E Submissions or Applications for Federal Programs 570.206	1	0	**1**	1										**1**	**0**	**0%**	H	"	Y	C
21F HOME Rental Subsidy Payments (subject to 5% cap)	0	0	**0**											**0**	**0**	###	N		N	
21G HOME Security Deposits (subject to 5% cap)	0	0	**0**											**0**	**0**	###	M		Y	H
21H HOME Admin/Planning Costs of PJ (subject to 5% cap	1	0	**1**	1		1		1		1		1		**5**	**0**	**0%**	H	229K	Y	H,0
21I HOME CHDO Operating Expenses (subject to 5% cap)	0	0	**0**											**0**	**0**	###	L		N	H
22 Unprogrammed Funds	0	0	**0**											**0**	**0**	###				

CPMP Version 1.3

Jurisdiction

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	Housing and Community Development Activities	Needs	Current	Gap	5-Year Quantities Year 1 Goal	Year 1 Actual	Year 2 Goal	Year 2 Actual	Year 3 Goal	Year 3 Actual	Year 4 Goal	Year 4 Actual	Year 5 Goal	Year 5 Actual	Cumulative Goal	Cumulative Actual	% of Goal	Priority Need: H,M,L	Dollars to Address	Plan to Fund? Y/N	Fund Source
HOPWA	31J Facility based housing – development	0	0	0											0	0	###	N		N	
	31K Facility based housing - operations	0	0	0											0	0	###	N		N	
	31G Short term rent mortgage utility payments	0	0	0											0	0	###	N		N	
	31F Tenant based rental assistance	0	0	0											0	0	###	N		N	
	31E Supportive service	0	0	0											0	0	###	N		N	
	31I Housing information services	0	0	0											0	0	###	N		N	
	31H Resource identification	0	0	0											0	0	###	N		N	
	31B Administration - grantee	0	0	0											0	0	###	N		N	
	31D Administration - project sponsor	0	0	0											0	0	###	N		N	
CDBG	Acquisition of existing rental units	0	0	0											0	0	###	N		N	
	Production of new rental units	0	0	0											0	0	###	N		N	
	Rehabilitation of existing rental units	0	0	0											0	0	###	N		N	
	Rental assistance	0	0	0											0	0	###	N		N	
	Acquisition of existing owner units	0	0	0											0	0	###	N		N	
	Production of new owner units	0	0	0											0	0	###	N		N	
	Rehabilitation of existing owner units	0	0	0											0	0	###	N		N	
	Homeownership assistance	0	0	0											0	0	###	N		N	
HOME	Acquisition of existing rental units	0	0	0											0	0	###	L		N	H,O
	Production of new rental units	145	0	145	70				35				40		145	0	0%	H	2.4M	Y	H,O
	Rehabilitation of existing rental units	25	0	25			10				15				25	0	0%	H		Y	H,O
	Rental assistance	30	0	30	30		30		30		30		30		150	0	0%	H		Y	O
	Acquisition of existing owner units	0	0	0											0	0	###	L		N	H,O
	Production of new owner units	5	0	5					5						5	0	0%	H		Y	H,O
	Rehabilitation of existing owner units	150	0	150	30		30		30		30		30		150	0	0%	H	733K	Y	H,O
	Homeownership assistance	0	0	0											0	0	###	M		Y	O
	Totals	355	0	355	130	0	70	0	100	0	75	0	100	0	475	0	###				

City of Glendale, California
2010-2015 CPMP Needs Tables
Assumptions and Methods

This is a narrative description of assumptions and methods used to complete the CPMP Tables for the 2010-2015 Consolidated Plan.

I. HOUSING

Housing Needs Table
Information directly from the CHAS tables based on US Census 2000

Housing and Community Development Activities Table – Housing Activities
The five year goal number equals the needs number for each activity type.
150 Rental Assistance units are included in the Activities table to be consistent with the Housing Needs Table numbers, although HOME funds are not used for Rental Assistance.

The tables below provide detail on all Projects and Programs Quantities by Household Income, Household Type, and Activity Type.

215 Units:
Meets long-term affordability restrictions:

1. Renter – Rents <FMR or 30% of 55% AMI; 20% of units occupied by VLI @ 30% AMI or less; VLI has long term affordability and meets energy standards (so new construction rental would meet this)
2. Owner – low income – basically HOME incomes; <95% median purchase price; resale restrictions

For Glendale:

1. Renter – All ELI and VLI Project Units
2. Owner – 5 Habitat (Low)

Units by Program/Project and Year

Program/Project	2010/11	2011/12	2012/13	2013/14	2014/15	Income Type
RENTER PROGRAMS/PROJECTS						
New Rental Units						
Vassar City Lights	70					Small Households – 3 ELI; 27 VLI; Large Households – 4 ELI; 15 VLI; 21 Low
Central City Lights			35			Small Households – 1 ELI; 8 VLI; 4 Low; Large Households – 3 ELI; 4 VLI; 10 Low
Senior Project					40	Elderly – 40 VLI
Rehab Rental Units						
Future Projects		10		15		Small Households – 4 ELI; 8 VLI; 12 Low; 1 Mod (not in tables)
Rental Assistance						
ERAP – (Emergency Rental Assistance Program)	2	2	2	2	2	Small Households – 10 ELI
MAG/DRG – (Moving Assistance Grant/ Dwelling Repair Grant)	3	3	3	3	3	Small Households - 15 ELI
LIFERAP – (Low Income Family Employment & Rental Asst Program)	25	25	25	25	25	Small Households – 13 ELI; 84 VLI; 28 Low
OWNER PROGRAMS/PROJECTS						
New Owner Units						
Geneva – Habitat			5			Large Households – 5 Low
Doran					57	All Moderate - not included in CPMP Tables –39 Small Households; 18 Large Households
Downpayment Assistance	1	1	1	1	1	All Moderate – not included in CPMP tables
Rehab Owner Units						
Rehab Programs	30	30	30	30	30	80% Elderly (15% ELI (18); 30% VL (36); 50% Low (60); 5% Mod (6)) 20% Small Family (15% ELI (5); 30% VL (9); 50% Low (15); 5% Mod (1)) Mod not included in CPMP tables

Units by Household Type/Income and Year

Household Type & Income	Year 1 2010/11	Year 2 2011/12	Year 3 2012/13	Year 4 2013/14	Year 5 2014/15	Year/Program/Project
ASSISTING RENTERS						
Elderly						
VLI					40	New Senior Project
Small Household						
ELI	33	32	31	32	30	1-VCL; Rent Assist 2-Rehab; Rent Assist 3-CCL; Rent Assist 4-Rehab; Rent Assist 5-Rent Assist
VLI	27	4	8	4		1-VCL 2-Rehab 3-CCL 4-Rehab
Low		6	4	6		2-Rehab 3-CCL 4-Rehab
Large Household						
ELI	4		3			1-VCL 3-CCL
VLI	15		4			1-VCL 3-CCL
Low	21		15			1-VCL 3-CCL; Geneva Habitat – included here since it helps renters become owners though it is an owner activity
TOTAL RENTERS	**100**	**42**	**65**	**42**	**70**	**(1 Mod Rehab not included)**
ASSISTING OWNERS						
Elderly						
ELI	3	3	4	4	4	Rehab
VLI	7	7	7	7	8	Rehab
Low	12	12	12	12	12	Rehab
Small Households						
ELI	1	1	1	1	1	Rehab
VLI	1	2	2	2	2	Rehab
Low	3	3	3	3	3	Rehab
TOTAL OWNERS	**27**	**28**	**29**	**29**	**30**	**(7 Mod rehab units and 57 Mod new owner units not included)**

II. Non-Homeless Special Needs Including HOPWA

Housing Needed:

52. Elderly Need = All Elderly less than 80% MFI with Housing Problems (From Housing Needs Table)
    Elderly Currently Available based on projects listed in Consolidated Plan, pp 72-74
    Elderly Goal = projected project
53. Frail Elderly Need = 42% of Elderly (#52). (Consolidated Plan p.72 - 2000 Census info provided percentage of elderly with one or more disabilities).

55 & 56. Developmentally and Physically Disabled Currently Available shown in table below. (Consolidated Plan pp.79-80)

Project	**Developmentally Disabled**	**Physically Disabled**
Ability First		
Maple	12	12
Ivy Glen (25 units)	13	12
GAR		
Hamilton House	11	
Alma House	6	
David Gogian House	6	
UCP	24	
TOTAL	**72**	**24**

58. Persons w/ HIV/AIDS based on info from Consolidated Plan, p. 84

Supportive Services Needed

60. Elderly Needs = Total Elderly with incomes less than 80% MFI
    Elderly Goal = Services provided by Comm Services & Parks; frail elderly also part of service (see below)
61. Frail Elderly Needs = 42% of Elderly Needs (see #60 above). (Consolidated Plan p.72, 2000 Census info percentage of elderly with one or more disabilities)
    Frail Elderly Goal = 42% of total elderly served by Comm Services & Parks
66. Persons w/ HIV/AIDS based on info from Consolidated Plan, p. 84

III. Continuum of Care Homeless Population and Subpopulations Chart

Part 1: Homeless Population

All information is from the 2009 Continuum of Care application and reflects numbers from the 2009 Point-in-Time Count.

2a. Transitional Housing Count for Homeless Families with Children– This count does not reflect the number of children momentarily in foster care or juvenile court care at the time of the count. Since many of these families are victims of domestic violence, the children are momentarily separated from the parent entering transitional housing.

Part 2: Homeless Subpopulations

All information is from the 2009 Continuum of Care application and reflects numbers from the 2009 Point-in-Time Count.

Part 3: Homeless Needs Table: Individuals (beds)

- Emergency Shelters Needs = Unsheltered and Sheltered Individuals
- Transitional Needs = All Emergency Shelter Needs plus Currently Available Transitional Housing
- Permanent Housing Needs = Transitional Housing Needs plus Currently Available Permanent Supportive Housing

Part 4: Homeless Needs Table: Families (beds)

- Emergency Shelters Needs = Unsheltered and Sheltered
- Transitional Needs = Emergency Shelter Needs plus Currently Available Transitional Housing.
- Permanent Supportive Housing Needs = Transitional Housing Needs plus Currently Available Permanent Supportive Housing

Note: The Table contains incorrect formulas for columns in Part 3, starting with the Complete column for Year 2.

The Table below provides a summary of currently available units and beds by Housing Type and Family Type.

Homeless Continuum of Care Units and Beds
by Housing Type and Family Type

Housing Type/Name	**Individuals**		**Families w/ Children**		**Total Beds**
Emergency Shelter	**Unit**	**Beds**	**Unit**	**Beds**	
YWCA Sunrise				10	
PATH Achieve		12		28	
TOTAL Emerg Shelter		**12**		**38**	**50**
Transitional Housing	**Units**	**Beds**	**Units**	**Beds**	
Door of Hope – Hamilton Ct			13	44	
PATH Family Trans Hsg			12	36	
Salvation Army – Nancy Painter			4	18	
Union Station – Euclid Villa*			7	14	
TOTAL Trans Hsg			**36**	**112**	**112**
Permanent Supportive Hsg	**Units**	**Beds**	**Units**	**Beds**	
PATH – Next Step – Chronically Homeless	8	8			
Shelter Plus Care	29	29	5	10	39
PATH Ventures – Chronically Homeless	13	13			
Chester Street			4	16	16
TOTAL Perm Hsg	**50**	**50**	**9**	**26**	**76**

Shelter Plus Care (S+C):

- 1998 and 1999 - 21 units is what we are contracted to. We are serving 22 units now. So because HUD does not pay for the additional unit we are going to say 20 units are for single individuals and 1 units if for family
- 2001 - 6 units for individuals and 6 beds, and 4 units for families and 8 beds for families. Total of 10 units and 14 beds.
- 2005 - 3 units and 3 beds **only** for Chronically Homeless Persons (individuals only)

IV. Housing and Community Development Activities

01 Acquisition – this category for acquisition only; therefore, PATH Achieve acquisition/rehab of new facility with Section 108 funds included in 03C below

03 Public Facilities and Improvements
Needs and Current primarily reflect City-owned properties
03A – Senior Center = ARC
03C – Homeless Facilities = PATH Achieve and Hamilton Court
03F – Parks Current = 44 List from Community Services and Parks website (31 Parks; 10 Recreation & Special Use Facilities (really 9 due to repeat of Scholl Cyn Ballfields); 4 Historic Sites)
Parks Need = Current Parks (44) + Pools (8 – from Con Plan, p. 57) + Shortage (22 = 168 acres shortage/7.5 acres per park based on existing numbers)

05A Senior Services = Number of Elderly with less than 80% MFI

05D Youth Services = general number served (includes 2500 served by bookmobile, which is assumed to end in June 2011)

05H Employment Training = youth employment interest particularly in GYA
All other needs numbers (except housing) are based on conservative annual service numbers.

First Year Goals - The numeric goals are taken from the 2010-2011 Action Plan. The Table below provides a summary of these goals by HUD IDIS matrix activity code.

The Dollars to Address column reflects CDBG, HOME and Redevelopment Set-Aside dollars for projects/programs in FY 2010-11.

2010-2011 Action Plan - Social Services (CDBG & ESG)		
Services with HUD IDIS Activity Code Provided	**Persons/ Households/ Families Served**	**Dollar Amount**
Homeless Services (Public Services General (05))		
Outreach/Assess - PATH Achieve	300	$ 34,000
Emerg - PATH Achieve (CDBG & ESG)	200	$ 91,824
Transitional - Door of Hope (CDBG & ESG)	60	$ 28,464
Transitional/Perm - Glendale Hsg Now/PATH Ventures	13	$ 10,000
Prevention - Loaves & Fishes (CDBG & ESG)	200	$ 73,179
Subtotal	*773*	*$ 237,467*
Other Services (Public Services General (05))		
GAR Multi-Cultural Program	30	$ 10,000
Total Public Services General	**803**	**$ 247,467**
Senior Services (05A)		
Comm Services & Parks	**180**	$ 22,000
Youth (05D)		
CASPS	60	$ 28,000
Youth Seminar/ARK Family Center, Inc	90	$ 12,000
Zone Academy	70	$ 15,000
Homenetmen Tutoring	175	$ 16,000
Camp Rosie	60	$ 14,000
Youth & Family Services/CSP Dept	190	$ 16,000
Subtotal	*645*	*$ 101,000*
Bookmobile - Public Library	2500	$ 12,000
Total Youth	**3145**	**$ 113,000**
Battered and Abused Spouses (05G)		
Emerg - Sunrise Village/YWCA (ESG)	**80**	$ 12,309
Employment & Training (05H)		
GYA (serves 150-250)	**150**	$ 79,300
Crime & Public Safety (05I)		
PAL	60	$ 31,000
STAR	25	$ 19,000
	85	**$ 50,000**

2010-2011 Action Plan - Social Services (CDBG & ESG) – cont'd		
Services with HUD IDIS Activity Code Provided	**Persons/ Households/ Families Served**	**Dollar Amount**
Health Services/Fair Housing (05J and 05K)		
ARS - Community Outreach	208	$ 61,000
Fair Housing/Housing Rights Center	1000	$ 8,000
	1208	**$ 69,000**
Childcare (05L)		
Club JAM	100	$ 36,000
New Horizons	225	$ 49,000
	325	**$ 85,000**
9/11/2010		

2010-2011 Action Plan - Capital/Neighborhood Improvements	
HUD IDIS Activity Code Provided	**Dollar Amount**
Homeless Facilities (Public Facilities (03C))	
Energy Efficiency Window Replacement - DOH	$ 95,568
Senior Services (05A)	
Comm Services & Parks	$ 22,000
Youth Centers (03D)	
Homenetmen Roof Repair - - 3347 N. San Fernando Road	$ 40,920
Homenetmen Safety & Security - 3618 N. San Fernando Road	$ 46,754
Total Youth Centers	**$ 87,674**
Neighborhood Facilities (03E)	
NLS-LA Parking Lot/Traffic Imp - 1102 Chevy Chase	$ 81,591
Parks, Recreational Facilities (03F)	
Neighborhood Park Project (potentially 2 parks)	$ 1,458,065
Childcare Centers (03M)	
Children's Village "Nuestra Casa" - New Horizons Family Center	$ 40,000
Health Facilities (03P)	
Center for Mission and Comm Dev. - Glendale Adventist Med Ctr.	$ 115,000
9/11/2010	

2010-2011 Action Plan - Homeless						
CATEGORY	**FUNDING SOURCE FY 2010/11**	**SPONSOR**	**PROJECT**	**DOLLARS**	**NUMBER**	**COMMENTS**
Coordination of Services						
I/A/CM/SS	SHP - Renewal	Housing Authority	HMIS	$ 93,000		
Outreach & Assessment						
Outreach & Assess	CDBG	PATH Achieve	PATH Achieve	$ 34,000	300	
Intake/Assessment/Case Management/Supportive Services						
I/A/CM/SS	SHP - Renewal	New Horizons	Child Care	$ 21,420	14	5 slots
I/A/CM/SS	SHP - Renewal	PATH Achieve	Access Center	$ 753,330	1000	Consolidated Supportive Services - 40 beds - 200 persons served; 1,000 total served @ PATH
Emergency Shelter						
Emergency Shelter	ESG	PATH Achieve	PATH Achieve	$ 91,824	200	40 beds - 12 Individual; 28 Family
Emergency Shelter	ESG	YWCA	Sunrise	$ 12,309	80	10 beds - Family - Domestic Violence
Transitional Housing						
Transitional Hsg	CDBG	Door of Hope	Hamilton Court	$ 20,000	55	13 units/44 beds - 16 Families/yr - DV - funded w/CDBG, ESG, SHP
Transitional Hsg	ESG	Door of Hope	Hamilton Court	$ 8,464		"
Transitional Hsg	SHP - Renewal	Door of Hope	Hamilton Court	$ 217,292		"
Transitional Hsg	SHP - Renewal	Salvation Army	Nancy Painter	$ 86,437	20	4 units/18 beds - Families
Transitional Hsg	SHP - Renewal	PATH Achieve	Scatter Site	$ 181,966	23	12 Families at any given time
Transitional Hsg	N/A	Union Station Foundation - Pasadena	Euclid Villa		25	7 units for Families - located in & shared with Pasadena

2010-2011 Action Plan – Homeless (cont'd)						
CATEGORY	**FUNDING SOURCE FY 2010/11**	**SPONSOR**	**PROJECT**	**DOLLARS**	**NUMBER**	**COMMENTS**
Permanent Housing						
Permanent Hsg	SHP - New	Housing Authority	S+C - 2009	$ 167,814	3	Chronic - Individual - Scatter Site
Permanent Hsg	SHP - Renewal	Housing Authority	S+C - 1998; 1999	$ 289,920	21	20 units/20 beds Individual; 1 unit Family - Disabled?
Permanent Hsg	SHP - Renewal	Housing Authority	S+C - 2001	$ 150,024	10	6 units/6 beds Individual; 4 units/8 beds Families - Disabled?
Permanent Hsg	N/A	City of Glendale	S+C 2005		3	3 units/3 beds for Individuals
Permanent Hsg	SHP - Renewal	PATH Ventures	Homeless Lease Prog	$ 185,425	8	Chronic - Individual - Scatter Site
Permanent Hsg	SHP - Renewal	PATH Ventures	Housing Now	$ 148,156	5	Chronic - Individuals - Scatter Site
Permanent Hsg	SHP - Renewal	PATH Achieve	Next Step	$ 153,802	8	Dual/Recovery - Individuals - Scatter Site
Permanent Hsg	SHP - Renewal	PATH Ventures	Glendale Hsg Now	$ 10,000	13	8 units/8 beds - Individuals
Permanent Hsg	N/A	Salvation Army	Chester Street		16	4 units/16 beds for Families
Homeless Prevention						
Prevention	CDBG	Catholic Charities	Loaves & Fishes	$ 42,000	200	Duplicate under ESG - both together serve a total of 200/year
Prevention	ESG	Catholic Charities	Loaves & Fishes	$ 31,179	200	Duplicate of CDBG - serve 200 total/year
Prevention	HPRP – FY 09/10 & FY 10/11	City of Glendale	Homeless Prevention	$ 1,346,899	80	2nd year of 2 year grant - 80 households total; Individuals and Families; served 39 households through 6/30/10

APPENDIX B

CITIZEN PARTICIPATION PLAN

City of Glendale
Citizen Participation Plan

This Citizen Participation Plan (CPP) sets forth the City of Glendale's policies and procedures for citizen participation for the use of Community Development Block Grants (CDBG), Emergency Shelter Grant (ESG), HOME Investment Partnership Act (HOME), Section 108 Loan funds, and other HUD administered grant programs. The Citizen Participation Plan provides an opportunity for the community to work in partnership with the City to identify needs and to allocate CDBG, ESG and HOME funds, as well as to comment on any Section 108 Loan Application.

The City of Glendale holds the following standards regarding citizen involvement:

1. All citizen participation is to be done openly.
2. Involvement of low- and moderate-income persons, minorities, project area residents, elderly, handicapped and others is to be evident.
3. Reasonable efforts to ensure continuity of involvement of citizens throughout all stages of the CDBG, ESG and HOME programs are to be evident.
4. Timely and adequate information is to be given to citizens.
5. Citizens are encouraged to submit their views and proposals regarding the Consolidated Plan and use of CDBG, ESG and HOME funds.

While the Citizen Participation Plan will aim to ensure the participation of all residents, special assurances will be made to ensure the participation of the following groups:

- extremely low-, low-, and moderate-income persons;
- persons living in areas where CDBG, ESG, HOME, and Section 108 Loan funds are proposed to be used;
- residents of publicly assisted housing;
- low-income residents of target neighborhoods;
- minorities;
- non-English speaking persons; and
- persons with physical disabilities.

Definitions

For purposes of the CDBG, ESG and HOME programs, the following definitions will apply:

Community Development Block Grant (CDBG): A grant program administered by the U.S. Department of Housing and Urban Development (HUD). This grant allots money to cities and counties for housing rehabilitation, affordable housing assistance, community services, and community development activities (including community facilities, neighborhood revitalization-public improvements, and economic development).

Emergency Shelter Grant (ESG): A grant program administered by HUD and allocated to cities and counties for the provision of emergency shelter beds to address the needs of the homeless. Eligible activities include rehabilitation of a building used as a new shelter, operations and maintenance of the facility, essential supportive services (e.g. case management, physical and mental health treatment, childcare, etc.), short-term homeless prevention, and grant administration.

HOME Investment Partnership Program (HOME): A grant program administered by HUD and is allocated to cities and counties for affordable housing development. Eligible activities include housing development and rehabilitation, and homebuyer assistance.

Section 108 Loan Guarantee Program: Section 108 is the loan guarantee provision of the Community Development Block Grant (CDBG) program, allowing local jurisdictions to transform a small portion of their CDBG funds into federally guaranteed loans large enough to pursue physical and economic revitalization projects that can renew entire neighborhoods. Local governments borrowing funds guaranteed by Section 108 must pledge their current and future CDBG allocations to cover the loan amount as security for the loan. Eligible activities include economic development, housing rehabilitation, public facilities, and large-scale physical development projects.

Consolidated Plan (Con Plan): The Consolidated Plan is a three- to five-year planning document for the CDBG, ESG and HOME programs. The Con Plan must contain a housing and community development needs assessment, a three- to five-year strategic plan to address the needs identified, a one-year action plan to identify specify activities and planned use of CDBG, ESG and HOME funds. The City of Glendale has historically prepared a five-year strategic plan along with the annual one-year action plan. The Con Plan is due at HUD 45 days before the beginning of a program year. The City of Glendale CDBG, ESG and

HOME programs begin annually on July 1, making the Con Plan due at HUD no later than May 17 of each year, unless an extension is requested and granted.

Consolidated Annual Performance Evaluation Report (CAPER*):* CAPER is an annual report summarizing the City's progress in implementing the Consolidated Plan. The CAPER is due at HUD 90 days after the close of a program year. For the City of Glendale, each program year ends on June 30, making the CAPER due at HUD no later than September 28 of each year.

Median Family Income (MFI): HUD surveys major metropolitan areas annually to develop an index of median family income by household size.

Low- and Moderate-Income Households: Pursuant to HUD regulations, the primary beneficiaries of the CDBG, ESG and HOME programs should be low- and moderate-income households, defined by HUD as follows:

Extremely Low-Income -	0-30% County Median family income (MFI) adjusted for household size.
Low-Income -	31-50% County MFI adjusted for household size.
Moderate-Income -	51-80% County MFI adjusted for household size.

Low- and Moderate-Income Neighborhood: Generally defined as a census tract(s) or block group(s) in which a minimum of 51 percent of the residents have an income not exceeding 80 percent of the Los Angeles County median family income.

State Eligible Income Households: The City of Glendale uses State resources, including redevelopment housing set-aside funds to complement these federal funds. Therefore, households meeting the State's definition of moderate income (81-120% County MFI adjusted for household size) may also be discussed in the housing portion of the Con Plan and Action Plan.

Slum or Blighted Area: An area where a substantial number of deteriorating or dilapidated buildings or improvements are present throughout the area, or that meets the definition of a slum, blighted, deteriorated or deteriorating area under State or local law, typically identified as Redevelopment Project Areas.

Publicly Assisted Housing Developments: Housing projects (either rental or ownership housing) developed with the assistance of public funds such as HOME, CDBG, and/or redevelopment set-aside funds.

A. Citizen Involvement

1. Citizen Participation Plan (CPP)

The City of Glendale recognizes that CDBG, ESG and HOME funds are tax money returned to the City to be used primarily to benefit extremely low-, low-, and moderate-income persons. City staff and officials are stewards of these public monies and will openly discuss all records, except those confidential records protecting a household's privacy. The City presents the following Citizen Participation Plan (CPP), in accordance with 24 CFR Parts 91, et al.

The Citizen Participation Plan seeks to involve the participation of citizens of Glendale and social service agencies in the development and adoption of the Consolidated Plan, the Action Plan, any substantial amendments, and the Consolidated Annual Performance Evaluation Report (CAPER). In addition, efforts will be made to focus on the involvement of low- and moderate-income persons, those persons living in slum and blighted areas, persons living in low- and moderate-income areas and persons living in areas where CDBG, ESG and HOME funds are proposed to be used. The Citizen Participation Plan consists of a number of elements designed to foster community involvement as specified in each section of the Plan.

Pursuant to HUD regulations, City will conduct a minimum of two hearings annually at different stages in the CDBG/HOME program year (July 1 through June 30). The City will conduct public hearings at locations and at times that are convenient to the public, especially for those persons affected by program resources, and the locations will be equipped to accommodate persons with physical disabilities. As such, all public hearings will be conducted in a southern Glendale school/community facility accessible to persons with disabilities with meeting times at 7:00 p.m. in the evening and/or at 10:00 a.m. on weekends. Public hearings sites may include Pacific Community Center, 501 South Pacific Avenue; Roosevelt Middle School, 1017 South Glendale Avenue; and Man Elementary School, 501 E. Acacia Street. City Council/Housing Authority public meetings and/or hearings will usually be held at City Hall, 613 East Broadway, Council Chambers.

Spanish and Armenian translation will be available at public hearings where a significant number of non-English speaking residents are expected to attend.

Translation availability will be announced at the beginning of the hearing. Translation will be provided by bi-lingual Community Services and Parks staff and volunteer translators from community agencies serving non-English speaking population (i.e. Armenian Relief Society, Catholic Charities Glendale Community Center, New Horizons Family Center, and Glendale Unified School District). These services will be available at all public hearings and meetings if requested three (3) days prior to the hearing date. Other requests for translation services and/or reasonable accommodations (such as sign language) must be made three (3) days prior to the hearing date and the City will provide appropriate assistance to the extent feasible.

The schedule for review and adoption of the Consolidated Plan, Annual Action Plan and Consolidated Annual Performance and Evaluation Report is a follows:

- September – Community Meeting/Public Hearing to review community needs, anticipated amount of assistance the City expects to receive and the range of activities that may be undertaken in preparation of the Consolidated Plan and/or Action Plan for use of Community Development Block Grant, Emergency Shelter Grant, or HOME funds.
- September to November – Glendale Homeless Coalition (GHC) works with staff to prepare response to the Homeless Continuum of Care NOFA (usually released in September).
- October to February – Staff meetings with the CDBG Advisory Committee, various stakeholder groups to gain an understanding of community needs, trends and potential opportunities to address community needs.
- February/March – Public Meeting of the CDBG Advisory Committee, providing an opportunity for the Committee to comment on the proposed CDBG funding allocations. Public Meeting of the GHC Subcommittee to review and comment on proposed funding allocations for programs assisting the homeless.
- March/April – Public Hearing on the Proposed Consolidated Plan to review the proposed Consolidated Plan and/or Annual Action Plan programs and funding allocations.
- April - Public Meeting and Adoption of the draft Consolidated and/or draft Annual Action Plan by the City Council and Housing Authority.
- April/May – Publication of the Proposed Consolidated Plan and/or Action Plan Summary describing the contents and purpose of the Plan and locations where copies of the entire plan(s) may be examined during a 30-day comment period. At a minimum, copies will be available at the Central Library, 221 East Harvard Street; the office of the Community Services and Parks Department, CDBG Section, 141 North Glendale Avenue, Suite 200.

- May – Submittal of the final Consolidated and/or Annual Action Plan to Department of Housing and Urban Development in Los Angeles.
- September – 15-day Public Review period of the Consolidated Annual Performance and Evaluation Report and

Adoption of the Citizen Participation Plan

Prior to the adoption of the Citizen Participation Plan, implementation of the following public comment, review, and adoption procedures will ensure that all citizens have a chance to participate in development of the Plan.

i. The City will provide a notice of the 30-day public review period and public hearing on the Citizen Participation Plan in the *Glendale News Press.* The notice will be printed in this local newspapers a minimum of ten days prior to the public hearing date whenever possible and appropriate.

ii. The proposed Citizen Participation Plan will be available for public review at the following locations:

- Glendale Community Services and Parks, CDBG Section (141 N. Glendale Avenue, Room 202)
- Glendale Central Library (221 East Harvard Street)
- Glendale Community Services and Parks/CDBG Section website at http://www.ci.glendale.ca.us/parks/CDBG.asp

Upon request, the Plan will be made accessible to any person with disabilities. The City will provide a reasonable number of free copies of the Citizen Participation Plan to citizens and groups that request copies.

iii. Comments or views of citizens received in writing during the public review period or orally at the public hearing will be solicited by the Glendale City Council .

iv. The Draft Plan will be adopted upon a majority vote of the Glendale City Council and Housing Authority at a designated and publicly noticed City Council and Housing Authority meeting. After adoption of the Plan, a Final Plan will be prepared. The Final Plan will include a summary of public comments and a summary of any comments not accepted and the reasons therefore, all of which will be attached to the final Citizen Participation Plan.

Amendment of the Citizen Participation Plan

The City will amend its approved Citizen Participation Plan whenever a change in the public participation process, as outlined in this plan, is proposed. An amendment to the approved Citizen Participation Plan will be reviewed and approved by the CDBG Advisory Committee. Notice of any amendment to the Citizen Participation Plan will be published in the *Glendale News Press* no less than 10 days prior to the review and adoption by the Committee to allow the public the opportunity to review and comment on the amendment. Appeals concerning the amendment should follow the Appeal procedures outlined in Section G of this document.

2. Consolidated Plan (Five-Year Strategy and Annual Action Plan)

In developing the Consolidated Plan and annual updates, the City of Glendale is guided by two leading principles:

1. **Customer Service:** focus program efforts on the most critical needs.

2. **Comprehensive Approach:** achieve empowerment of individuals and families while ensuring long-term economic independence.

Inherent in these principals is extensive, relevant, and ongoing citizen participation. The City of Glendale believes it is essential to have widespread, meaningful participation throughout the planning process to ensure genuine community "ownership" of the plan.

The Consolidated Plan consists of three parts: the needs assessment, housing and community development strategic plan, and an action plan. Commonly known as the Consolidated Plan, the needs assessment and housing and community development strategic plan are updated every five years. The action plan is updated annually, reflecting annual CBDG and HOME funding allocations.

The Consolidated Plan identifies the housing and community development needs in the City, prioritizes the needs for funding, and prescribes a comprehensive strategy for addressing the needs. To maintain relevance, an annual One-Year Action Plan is developed which includes the following elements:

- Dollar amounts proposed for each activity
- A description and location of each activity

- The entity responsible for implementation of each activity
- Time frame for each activity

In all cases, the Consolidated Plan and Action Plan seek to minimize the displacement of residents from their homes or places of business.

The groups involved in the process of Consolidated Plan and Action Plan development include:

- CDBG Advisory Committee – a five-member Committee appointed by the City Council
- Glendale Homeless Coalition – focusing on programs for the homeless
- City Council and Housing Authority

CDBG Advisory Committee - The CDBG Advisory Committee is a Title 2 Commission of five (5) Glendale citizens appointed by the City Council. Their task is to participate in the CDBG program planning process and make funding recommendations to City Council on proposed projects submitted through the RFP process. Meetings of the CDBG Advisory Committee are open to the public, Brown Acted and televised, and the citizens of Glendale are invited to attend and participate in the discussion of the agenda items. The date, time and location of CDBG Advisory Committee public meetings shall be advertised the *Glendale News Press,* along with Brown Act notices at City Hall.

Glendale Homeless Coalition – The Glendale Homeless Coalition (GHC) is comprised of 100 individuals representing over forty public/private agencies, community groups, residents and formerly homeless. The GHC represents a community based approach to the development and implementation of a strategy designed to address the needs of homeless persons and provides planning oversight and implementation coordination for the Homeless Continuum of Care. A sub-committee of the GHC also reviews and makes funding recommendations to the City Council/Housing Authority on proposed projects submitted through the Homeless ESG RFP process. The group meets bi-monthly at open meetings.

City Council/Housing Authority - The City Council is comprised of five (5) elected positions; the Housing Authority is comprised of the five Council members plus two tenant members (participants in Housing Authority programs). The Council and Authority make the final determination about the priority of various community needs that will guide the Council/Authority when annually allocating CBDG, ESG and HOME funds in the Action Plan.

The City will affirmatively publicize its activities and meetings in publications circulated in Glendale's non-English speaking communities, including but not limited to, Spanish and Armenian publications, such as *La Opinion,* and *Asbarez,* as well as the local English newspaper (*Glendale News Press)* to outreach to all of the ethnic diversity of the City. Information may be obtained by calling the Community Services and Parks Department, CDBG Section at (818) 548-2060.

Development of the Consolidated Plan (Five-Year Strategy) and Annual Action Plan

The City of Glendale will implement the following strategies to solicit meaningful community input in preparation of the Consolidated Plan and Action Plan. Specifically, the City will:

i. Review past year performance with the CDBG Advisory Committee and discuss priority needs for upcoming year(s).

ii. Consult public agencies including City staff, adjacent local governments, economic development interests, and state and local health agencies.

iii. Consult private agencies that provide health services, social services for children, elderly, disabled, homeless, persons with AIDS, victims of domestic violence, and persons with alcohol/drug abuses, etc.

iv. Conduct at least one public meeting during the development of the housing and community development needs assessment.

v. Conduct interactive surveys at community events throughout the planning phase of development of the Plan(s).

vi. Develop an ongoing, on-line web survey for identify community development and housing needs.

vii. Since the Analysis of Impediments (AI) to Fair Housing Choice is a component of the Consolidated Plan, the citizen participation requirement for the Consolidated Plan applies. Therefore, the City of Glendale will solicit meaningful community input in the preparation of its AI.

Citizen participation during the development of the Consolidated Plan and Action Plan will take place at the CDBG Advisory Committee and Glendale Homeless Coalition meetings, which are open to the public. The citizens of Glendale are invited to take an advisory role in policy formation regarding program implementation by attending the CDBG Advisory Committee meetings

and making their views known. This will be made clear in all public announcements of the CDBG Advisory Committee meetings.

Adoption of the Consolidated Plan (Five-Year Strategy) and Annual Action Plan

The following procedures will ensure that all citizens will have a chance to influence the final Plan. Specifically, the City will:

i. Publish a notice announcing public hearing on the Draft Consolidated Plan and Action Plan. The notice will be published in the *Glendale News Press* and include a summary of the Draft Consolidated Plan and Action Plan that describes the contents and purpose. The notice will be published at least ten days prior to the public hearing.

ii. The City Council and Housing Authority will conduct a public hearing on the Draft Consolidated Plan and Action Plan. The Draft Consolidated Plan and Action Plan will be adopted upon a majority vote of the Glendale City Council and Housing Authority.

iii. Publish a notice announcing the 30-day public comment period for the Draft Consolidated Plan and Action Plan. The Draft Consolidated Plan and Action Plan will be available for public review at the following locations:

- Glendale Community Services and Parks, CDBG Section (141 N. Glendale Avenue, Room 202)
- Glendale Central Library (221 East Harvard Street)
- Glendale Community Services and Parks/CDBG Section City website at www.ci.glendale.ca.us/parks/CDBG.asp

Upon request, the Draft Consolidated Plan and Action Plan will be made accessible to any person with disabilities. The City will provide a reasonable number of free copies of the Draft Consolidated Plan and Action Plan to citizens and groups that request copies.

iv. At the end of the 30-day review period, the Final Consolidated Plan and Action Plan will be prepared for submittal to HUD. The Final Plan will include a summary of public comments and a summary of any comments not accepted and the reasons therefore, all of which will be attached to the Final Plan.

Amendment of the Consolidated Plan

The City shall maintain the ability to amend the adopted Consolidated Plan and Action Plan. The following outlines the criteria and procedures to be used when amending the Consolidated Plan and Action Plan.

Substantial Amendment Criteria

Consolidated Plan (Five-Year Strategy) - The City will amend its approved Consolidated Plan (Five-Year Strategy) whenever a decision is made to propose a substantial change in allocation priorities. For the purpose of the Consolidated Plan, a "substantial change" will constitute a cumulative change equal to or in excess of 25% of the City's CDBG or HOME entitlement for a program year.

Changes in funding priority not amounting to more than 25% of a program year will not be considered a substantial change to the Consolidated Plan and no formal amendment to the Consolidated Plan requiring public review and comment will be warranted. (For example, an amendment to the Consolidated Plan is needed if the five-year Strategy identifies only a low priority need for historic preservation, but during the five-year timeframe the City decides to establish a CDBG-funded historic preservation program that amounts to more than 25% of the City's annual allocation.)

Annual Action Plan - The City will amend its approved Action Plan whenever one of the following decisions is made to:

1. Carry out an activity not previously described in the Action Plan;

2. Cancel an activity previously described in the Action Plan;

3. Increase the amount to be expended on a particular activity from the amount stated in the Action Plan by more than 25% or $15,000 whichever is greater; or

4. Substantially change the purpose, scope, location, or beneficiaries of an activity.

Changes in funding for an existing activity (project) not amounting to more than 25% or $15,000 (whichever is greater) will not be considered a substantial change to the Action Plan; and no formal amendment to the Action Plan requiring public review and comment will be warranted.

Amendment Process

The following procedures will ensure that all citizens will have a chance to comment on the proposed amendment to the Consolidated Plan and Action Plan.

i. Publish a notice of the 30-day public comment period on the proposed amendment to the adopted Consolidated Plan and/or Annual Action Plan. The notice will be published in the *Glendale News Press* and include a summary of the amendment and where copies of the proposed amendment may be examined.

ii. When necessary, proposed amendments are reviewed by the CDBG Advisory Committee at a regular or special meeting for its recommendation to the City Council and Housing Authority if necessary.

iii. The proposed amendment will be available for public review at the following locations:

- Glendale Community Services and Parks, CDBG Section (141 N. Glendale Avenue, Room 202)
- Glendale City website at www.ci.glendale.ca.us/parks/CDBG.asp

Upon request, the amendment will be made accessible to any person with disabilities.

iv. A copy of the approved amendment will be sent to the Los Angeles Field Office for the U.S. Department of Housing and Urban Development along with the CAPER at end of the fiscal year.

3. Consolidated Annual Performance and Evaluation Report (CAPER)

The Consolidated Annual Performance and Evaluation Report (CAPER) details the accomplishments of the Consolidated Plan and the Action Plan. The following procedures will ensure that all citizens will have a chance to comment on the CAPER.

i. If necessary, the draft CAPER may be reviewed by the CDBG Advisory Committee at one of the CDBG Advisory Committee regular meetings.

ii. Publish a notice of the 15-day public comment period on the draft CAPER. The notice will be published in the *Glendale News Press.* The notice will include a list of locations at which the draft CAPER can be reviewed.

iii. The draft CAPER will be available for public review at the following locations:

- Glendale Community Services and Parks, CDBG Section (141 N. Glendale Avenue, Room 202)
- Glendale City Community Services and Parks Department website at www.ci.glendale.ca.us/parks/CDBG.asp

Upon request, the amendment will be made accessible to any person with disabilities.

B. Public Notification of Public Hearings

Staff will ensure adequate advance notice of all public hearings. Adequate noticing will include:

- Printing notices in the *Glendale News Press,* at least ten days prior to the public hearings.

- Other papers used for noticing may include, but not be limited to, *La Opinion and Asbarez,* whenever possible and appropriate.

- Posting notices at City Hall.

- Glendale City Community Services and Parks Department website at www.ci.glendale.ca.us/parks/CDBG.asp

C. Access to Records

The City will provide citizens, public agencies, and other interested parties with reasonable and timely access to information and records relating to the Consolidated Plan documents and the use of assistance during the preceding five years.

At all times during City Hall operating hours, all information regarding the HUD programs will be made available upon request, including the Federal Regulations governing the CDBG, ESG and HOME programs, a year-by-year

breakdown of the program expenditures, the minutes of the most recent CDBG Advisory Committee meeting, records of Committee meetings, mailings and promotional material, prior years application, letters of approval from HUD, grant agreements, this Citizen Participation Plan, reports required by HUD, the current proposed application, and any other documents regarding important program requirements by HUD.

During the period of planning for the next program year, information to be made available to the public will include such items as the amount of funds available to Glendale, the range of activities that may be undertaken with these funds, the kind of activities previously funded in Glendale, the processes involved in drawing up and approving Glendale's application, the role of Glendale's citizens in the CDBG, ESG and HOME programs and any other information necessary for Glendale's citizens to participate in the process fully. Thirty to forty-five days prior to the first public hearing concerning the application for a coming program year, a public hearing will be held to review the program's performance and progress. The announcement of this hearing and all other hearings concerning a new application for funds shall be announced in newspapers serving the non-English speaking communities in Glendale, including but not limited to local Spanish and Armenian language newspapers.

Requests for information and records must be made to the City of Glendale in writing. Staff will respond to such requests within 15 working days or as soon as possible thereafter.

D. Technical Assistance

Upon request, staff will provide technical assistance to groups representing extremely-low, low- and moderate-income persons to develop funding requests for CDBG, ESG and HOME eligible activities. Technical assistance will be provided as follows:

i. Answer, in writing or verbally, all inquiries received from citizens or representative groups relating to funding requests.

ii. Meet with groups or individuals as appropriate, to assist in identifying specific needs and to assist in preparing request/application for assistance.

iii. Provide bi-lingual translation on as needed basis.

E. Comments and Complaints

1. Comments

Citizens or the City government, as well as agencies providing services to the community, are encouraged to state or submit their comments in the development of the Consolidated Plan documents and any amendments to these documents. Written and verbal comments received at public hearings or during the comment period, will be considered and summarized, and included as an attachment to the final Consolidated Plan documents. Written comments, including those via e-mail should be addressed to:

City of Glendale
Moises Carrillo
Senior Community Development Supervisor
Community Services and Parks Department/CDBG Section
141 N. Glendale Avenue, Room 202
Glendale, CA 91206
E-mail: mcarrillo@ci.glendale.ca.us

A written response by letter or e-mail will be made to all written and e-mail comments within ten working days, acknowledging the letter and identifying a plan of action, if necessary. Every effort will be made to send a complete response within 15 working days to those who submit written comments.

2. Complaints

Citizen with complaints concerning the Consolidated Plan, the Annual Action Plan, substantial amendments and the CAPER should contact the City of Glendale personnel by phone, via e-mail, or in writing within 30 days from the date the document is published for comment. Complaints concerning any CDBG-funded, ESG-funded, or HOME-funded program in which the person believes access has been limited or denied, must be made within 30 days from the date of the occurrence. Staff will review each complaint based on the information provided within the complaint and provide a complete written responses to citizen complaints within 15 working days from the date of their complaint when practicable. Persons with disabilities may request reasonable modifications to the complaint process to accommodate their disabilities.

The City will accept written complaints provided they specify the following:

(1) The description of the objection, and supporting facts and data

(2) Provide name, address, telephone number, and a date of complaint
(3) Address the complaint as follows:

City of Glendale
Moises Carrillo
Senior Community Development Supervisor
Community Services and Parks Department/CDBG Section
141 N. Glendale Avenue, Room 202
Glendale, CA 91206
(818) 548-2060
E-mail: mcarrillo@ci.glendale.ca.us

A record will be maintained of all complaints received that will include the nature of the complaint, City investigation of facts and evidences, referrals made, and the final disposition.

Citizens may contact HUD directly if they wish to object to any part of the Consolidated Plan, Annual Action Plan or Consolidated Annual Performance or Evaluation Report, or if they feel that they have been aggrieved by any program, activity or procedure funded through the CDBG, ESG or HOME funds. Such objections should be made to: Community Planning Development Representative, Community Planning and Development Division; Department of Housing and Urban Development, Los Angeles Field Office, 611 W. Sixth St., Los Angeles, CA 90017.

F. Bilingual Opportunities

Translation services will be provided upon advance request to the extent feasible. Translation services at public hearings and meetings will be provided in Armenian and/or Spanish. Requests for translation services for additional languages, such as Korean, or for reasonable accommodation should be made at least 3 days prior to the meeting date and the City will provide appropriate assistance to the extent feasible.

G. Appeals

Appeals concerning the Consolidated Plan documents or decisions, statements, recommendations of the staff, or disposition of complaints should be made first to the Senior Community Development Supervisor, then to the Assistant Director of Community Services and Parks, the Glendale City Council/Housing Authority, and finally to the Los Angeles Area Office of HUD if concerns are not answered.

H. Anti-displacement/Relocation

In the event that any residential displacement and relocation must take place in order to carry out a program activity, the City of Glendale ensures that it will develop an Anti-displacement and Relocation Plan in connection with that project as applicable per Federal regulations.

In the event that any acquisition and relocation must take place in order to carry out a program activity, Glendale will also comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1070, as amended and implementing regulations of 49 CFR Part 24.

K. Assurances

The City of Glendale assures that the most diligent effort will be made to comply with the process and procedures outlined in this Citizen Participation Plan.

APPENDIX C

PUBLIC NOTICE

CITY OF GLENDALE
NOTICE OF THE AVAILABILITY OF THE FIVE YEAR 2010-2015 CONSOLIDATED PLAN AND PUBLIC HEARING

Pursuant to federal regulations, the City of Glendale is preparing to submit a "Five Year 2010-2015 Consolidated Plan" for Community Development Block Grant (CDBG), Emergency Shelter Grant (ESG), and HOME Investment Partnership Act (HOME) programs to the Federal Department of Housing and Urban Development (HUD).

The Consolidated Plan may also be viewed at www.ci.glendale.ca.us/parks/CDBG.asp. A public hearing on the Consolidated Plan will take place at a special joint City Council/Housing Authority meeting on Tuesday, May 25, 2010 at 2:30 p.m. in the Municipal Services Building, 633 E. Broadway, Room 105.

The Consolidated Plan consists of four main elements: 1) Management and Coordination of the Consolidated Plan and Citizen Participation; 2) Housing and Community Development Needs Assessment; 3) Housing Market Analysis, and 4) Priorities, Program Strategies, and Projected Funding Levels. Provided below is a summary of proposed program priorities, strategies, and projected funding levels.

PROGRAM PRIORITIES, STRATEGIES AND PROJECTED FUNDING LEVELS:

Based on the findings from community input and data resources which are detailed in the Consolidated Plan, program priorities, strategies and projected funding levels have been identified. The specific funding levels for each program priority and strategy are detailed in the Consolidated Plan and are projected primarily based on current level of need and funding.

Community Development Priorities and Program Strategies

Social Services:

- At-risk Youth programs including youth employment, youth counseling, gang and drug prevention, after-school programs, and youth recreation programs
- Employment programs including job counseling, job training, job development, and English as a Second Language (ESL) classes
- Crime, and public safety programs such as neighborhood watch programs, gang and drug prevention, and emergency preparedness
- Child care for pre-school and school aged children
- Senior services including transportation, in-home support, and recreation and social service centers
- Health services
- Mental health services
- Fair housing services
- Services for the developmentally and physically disabled

The projected funding level available over five years for social services is $2,700,000. This amount is based on allocating the maximum 15% that HUD allows of the total anticipated CDBG allocation of $18,000,000 over a five-year period.

Neighborhood/Capital Improvements

- Parks, community centers and open space
- Health facilities
- Libraries
- Trash and debris abatement
- Street lights
- Street, curb and sidewalk improvements
- Handicapped accessibility
- Parking
- Code enforcement and Graffiti removal

The projected funding level to address neighborhood/capital improvement priorities, which would include neighborhood revitalization projects and development and improvement of parks and community centers, is $10,800,000. Included in the neighborhood improvement program strategies is the five year funding amount for a Section 108 Loan from HUD for acquisition and rehabilitation of a homeless access center and year round emergency shelter.

Economic Development

- Rehabilitation of commercial buildings
- Job Creation/Employment
- Business assistance to create jobs

The projected funding level to address Economic Development priorities is $900,000. The Economic Development strategy is to physically upgrade commercial areas; attract, retain and expand businesses; and provide employment programs. This funding will be leveraged with $15,000,000 in Federal Department of Labor, Workforce Investment Act funding the City anticipates receiving from 2010-2015.

Homeless Priorities and Program Strategies

- Outreach
- Intake, Assessment, Case Management, Supportive Services:
- Medical Discharge Counseling
- Emergency Shelter
- Transitional Housing
- Permanent Supportive Housing
- Homeless Prevention

The proposed funding level for implementing homeless programs under the City's homeless Continuum of Care service delivery system is $12,847,630. Of this amount, $725,000 is projected in Emergency Shelter Grant (ESG) funds; $170,000 in Community Development Block Grant (CDBG) funds; $8,986,181 in Supportive Housing Program (SHP) funds; $2,045,500 in Shelter Plus Care funds; $250,000 in Redevelopment Set-Aside funds; and $670,949 in Homeless Prevention and Rapid Re-housing Program (HPRP) funds.

Housing Priorities and Program Strategies

- Increase Affordable Home Ownership Opportunities: New construction of ownership housing units, provision of homeownership education courses, and downpayment and closing cost assistance.

- Increase Affordable Rental Opportunities: New construction of senior and family rental housing units and provision of rental assistance.

- Preserve and Maintain the City's Existing Affordable Housing Stock:
  Provision of housing rehabilitation assistance to single family homeowners and multifamily property owners.

The projected funding level for all affordable housing programs is $ 59,831,000. Of this amount, $11.5 million is projected in federal HOME funds, $43.1 million in Redevelopment Set-Aside funds and $5.2 million in BEGIN funds, a State bond program to assist income eligible homebuyers in new for-sale developments

AVAILABILITY OF THE CONSOLIDATD PLAN:

All residents are invited to review and comment on the Plan from May 10, 2010 to June 9, 2010. Comments may be addressed to the City's Community Services and Parks Department, 141 N. Glendale Ave., Room 202, Glendale, CA 91206 (818) 548-2060 or via e-mail to mcarrillo@ci.glendale.ca.us. Copies of the entire Five Year Consolidated Plan are available for public review and comment at the following public locations:

City of Glendale
Community Services & Parks/CDBG Section
141 N. Glendale Avenue, Rm 202
(818) 548-2060
Contact: Front Desk

Glendale Central Library
Reference Desk
201 E. Harvard Street
(818) 548-2027
Contact: Reference Librarian