



FY 2010-2014 HUD Consolidated Plan



Clark County
North Las Vegas
Boulder City
Mesquite

FY 2010-2014 Consolidated Plan
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Clark County, NV HCP Consortium FY 2010-2014 Strategic Plan

GENERAL

Executive Summary

Introduction

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

HCP Consortium

Clark County and the Cities of North Las Vegas, Boulder City and Mesquite are the local entitlement communities that comprise the HCP Consortium. The City of Henderson and the City of Las Vegas are affiliate jurisdictions but operate their programs independently. The HCP Consortium was formed to respond to HUD's requirements for completion of the Consolidated Plan. Clark County is the lead agency in the HCP Consortium. The planning period for the HCP is from Fiscal Year (FY) 2010 to 2014. All members have the same program year. The HCP is a five-year plan, which provides an assessment of the Consortium's needs, resources and gaps as well as develops strategies to eliminate any gaps in service.

Citizen Participation

There was an extensive citizen participation process for the HCP Consortium Consolidated Plan including surveys, communitywide meetings, and committees focusing on specific issues and public hearings at the monthly meetings of the jurisdictional governing bodies.

Community Profile

Clark County is home to the world-famous Las Vegas Strip, the Entertainment Capital of the World, attracting over 38 million visitors every year. However, the majority of the 8,060 square miles within Clark County is owned by agencies of the federal government, including the Bureau of Land Management, the Department of Defense, and the U.S. Forest Service. The County contains five incorporated jurisdiction, which includes Las Vegas, North Las Vegas, Henderson, Boulder City and Mesquite. Development occurs in both the unincorporated and incorporated areas of the County.

For the past 20 years, Clark County’s population has increased significantly, fueling growth. However, in the past 2 years, Clark County’s population has decreased slightly and growth has come to a screeching halt. The 2009 Certified Population Estimate of 1,952,040 is the second year decrease of 1.7 percent from the 2008 Population Estimate, as compared with Clark County’s average annual population growth rate since 1990 of 5.63 percent. The national recession and local housing market collapse have left Clark County reeling, with an unemployment rate of 13.1 percent as of December 2009. According to the UNLV Center for Business and Economic Research (CBER), taxable sales for 4th quarter 2009 were down 6.6 percent from a year ago. Most other indicators of economic health are also in the negative, including gaming revenue, passenger counts for McCarran Airport, and visitor volume.

Figure 1: Clark County Population; 1995-2009

Year	Population	Percent Change
1995	1,040,688	-
1996	1,119,708	7.6
1997	1,170,118	4.5
1998	1,246,193	6.5
1999	1,321,319	6.0
2000	1,428,690	8.1
2001	1,498,279	4.9
2002	1,578,332	5.3
2003	1,641,529	4.0
2004	1,747,025	6.4
2005	1,815,700	3.9
2006	1,912,654	5.3
2007	1,996,542	4.4
2008	1,986,146	-0.5
2009	1,952,040	-1.7

Source: Clark County Comprehensive Planning and State of NV Demographer

Figure 2: Clark County Population Race/Ethnicity; 2009

Race/Ethnicity	Percent
White	53.2
Hispanic/Latino	27.4
Black/African American	9.2
Asian	6.1
American Indian/Alaska Native	0.5
Native Hawaiian/Pacific Islander	0.4
Other or More than One Race	3.1

Source: 2009 Las Vegas Perspective

The “Great Recession” is continuing to impact Southern Nevada more than other areas. According to CBER, this is because the two primary economic engines—construction and tourism—were disproportionately impacted by the US recession. Further, “the run-up in house prices was much larger in Southern Nevada in 2003-2006 than it was in much of the US and consequently, the subsequent decline in prices was large as well. Moreover, Southern Nevadans are credited for a disproportionately high number of high-risk loans, so that the local housing market continues to suffer from exceedingly high foreclosure rates. Excess capacity, in

both the residential and commercial real-estate markets, means there is little incentive for homebuilders to begin new developments. As a result, the construction sector has virtually collapsed.” (CBER, 4th Qtr 2009)

Consortium Housing Plan

The following summary is provided to illustrate the primary housing issues facing the HCP Consortium and the strategies that will be pursued over the next five years. The data used is from the 2000 U.S. Census and 2005-2007 American Housing Survey unless otherwise indicated.

Housing Needs Assessment

The foreclosure crisis has been the most significant change in economic conditions since the last Consolidated Plan was written. Since 2007, over 58,000 foreclosures have been recorded in Clark County and the crisis is not yet over. The housing bubble burst and the resultant economic recession and widespread job losses have made it difficult for all households to remain and maintain their housing, but this has been particularly hard for low income households.

Housing conditions for low income renters were dire even before the current foreclosure crisis began. According to the Census 2000, over 122,000 moderate- and low-income households are estimated to be paying for housing they cannot really afford. Over 50,000 of these households are low-income households with “worst case” housing needs - families who have incomes at or below 50 percent of the area median and pay more than half of their income for housing. As can be logically expected, households between 0 and 30 percent of area median income are the most likely to have worst case housing needs. This translates to 28,114 households that are extremely low-income and severely cost burdened.

Despite the relatively recent construction of the majority of housing, many lower-income households are living in substandard housing conditions. Most dwelling units in substandard condition are rental units. Minority owner households are more likely to have disproportionately higher level of housing problems than minority renter households. However, renter households overall have more housing problems, no matter what race or ethnicity.

The special needs population includes elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents. Self-sufficiency is not a realistic goal for certain segments of the special needs population due to age and/or need for services. These households need permanent housing with supportive services, assisted living, transportation, medical services, treatment options and many other social service supports.

Housing Market Assessment

The housing market has substantially changed as the housing bubble burst, leaving a decimated community of foreclosures, short sales, tumbling housing prices and a skyrocketing vacancy rate in multifamily housing as renters move into single family home rentals. The significant drop in single family home prices has lured investors back in to the market and many of the homes priced below \$200,000 are once again investor owned.

The vacancy rate in multifamily rental housing continues to rise as families move in to single family rentals that are priced similarly to multifamily housing. The concern is that once the housing market recovers, these single family rental homes may be sold to homebuyers, thus displacing many renters and driving them back to multifamily rental housing, where few new units are being constructed due to the current high vacancy rates.

The large majority of existing affordable rental housing in the Consortium is affordable to those with incomes between 51 and 80 percent of median family income (MFI). There are 3,814 public housing units and 9,223 publicly assisted households in Clark County with lengthy waiting lists for both programs. These facts indicate the need for the production of more affordable rental units for those with incomes below 50 percent of MFI.

While homeownership is no longer beyond the reach of most moderate-income households, the ability of these same households to obtain a first mortgage is lower as the credit market has tightened considerably

in the last two years. In 2000, the price of a new home was about \$161,893. New home prices rose to about \$280,000 by 2007 but have now fallen back to 2000 pricing and lower.

Summary of Consortium Housing Strategy

- High Priority:
1. Extremely low-income and low-income renter households
 2. Persons with special needs (elderly, frail elderly, severely mentally ill, developmentally disabled, physically disabled, persons with alcohol/other drug additions, HIV/AIDS, and public housing residents)
 3. Existing low- and moderate-income owner households
 4. Low- and moderate-income first-time homebuyers

- Medium Priority:
1. Moderate-income renter households

Housing Strategies

- Expand the supply of affordable rental housing through new construction with an emphasis on households at 50 percent of AMI and below
- Provide rental assistance that helps low income households obtain and retain housing
- Provide homeownership opportunities for low- and moderate-income prospective homebuyers through new construction, acquisition /rehab/ resale and/or financial assistance (i.e. downpayment assistance, closing cost assistance, principal buydown)
- Preserve and expand the supply of affordable housing for people with special needs: Elderly, Frail Elderly, Developmentally Disabled, Severely Mentally Ill, Physically Disabled, HIV/AIDS, Public Housing Residents
- Preserve and improve the existing stock of affordable housing through acquisition and/or rehabilitation of owner and renter occupied housing
- Provide energy efficiency improvements to homes

Consortium Strategy to Remove Barriers to the Production of Affordable Housing

Current barriers to the production of affordable housing include the lack of community support, limited financial resources, local fees and zoning regulations and lack of land for development. Over the next five years, the HCP Consortium will work on reducing local government regulatory driven costs, increasing public education on housing issues, and developing new resources.

Consortium Lead-Based Paint Hazard Reduction

The potential for lead-based paint poisoning is limited in the HCP Consortium Area due to the relatively young age of the housing stock. However, there may be other sources of lead poisoning and the Southern Nevada Health District's Childhood Lead Poisoning Prevention Program will continue to examine the prevalence of childhood lead poisoning. The HCP Consortium will test for lead-based paint in potential rehabilitation projects constructed prior to 1978; continue to educate non-profit rehabilitation providers on lead-based paint; use the XRF machine to identify lead-based paint problems; and work to abate lead paint as needed.

Continuum of Care for the Homeless

Summary of Homeless Needs

The *Southern Nevada 2009 Homeless Census and Survey* identified 13,338 sheltered and unsheltered homeless throughout the community. African Americans are estimated to make up 31 percent of the homeless population, a significantly higher percentage than among the population in general. Subpopulations among the homeless that have special service and housing needs include the severely mentally ill, the chronic homeless, those with substance abuse problems, victims of domestic violence, children and youth, veterans and the disabled.

Many low-income persons and families in Clark County are at risk of becoming homeless due to the lack of sufficient income, or in the event of a temporary crisis, including loss of employment, sickness or disability, loss of spouse or domestic violence. Extremely low-income households paying 50 percent or more of their household income for housing are at greatest risk. These households are often one paycheck away from becoming homeless. The resources available to assist these households are extremely limited. The local public housing authorities have extensive waiting lists for all types of assisted housing, and emergency rental, mortgage and utility assistance for temporary crisis situations are in short supply.

Summary of Inventory for Homeless

There are currently 915 shelter beds, 6,569 transitional housing beds, and 1,982 permanent supportive housing beds available through the Continuum of Care in Southern Nevada.

Homeless Strategies:

Closing the Front Door to Homelessness

- Prevent homelessness whenever possible. Improve the availability of prevention programs and expand the types of prevention strategies.
- Provide people at risk of homelessness with wraparound services to keep the client in safe, affordable housing and address health and wellness issues
- Provide homeless individuals and families with services that will help them regain self-sufficiency including job training, GED assistance, health care, child care assistance, transportation assistance, etc.

Opening the Back Door Out of Homelessness

- Expand the availability of affordable permanent housing with supportive services for homeless and formerly homeless individuals and families
- Rapidly re-house people who become homeless by maintaining and expanding supply of emergency shelter and transitional housing

Community Development Plan

- Support acquisition or new construction of public facilities to benefit low and moderate income residents, including homeless
- Support infrastructure improvements to improve availability and accessibility of services
- Support new construction or improvements to facilities for people with special needs including: elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents

- Support public services that promote the well-being of residents
- Provide quality supportive services so people with special needs can live as independently as possible
- Support neighborhood preservation and improvement activities such as code enforcement and demolition
- Support rehabilitation of public facilities to benefit low and moderate income residents

Anti-Poverty Strategy

The HCP Consortium members will continue to promote housing efforts that incorporate supportive services, which assist extremely low- and low-income housing residents in achieving self-sufficiency. The HCP Consortium will continue to encourage applications by non-profit organizations and public housing authorities for programs designed to promote self-sufficiency among assisted housing and transitional housing residents. Support for preschools and day care centers will allow low-income households to secure job training and placement with the knowledge that their children are well cared for during working hours. North Las Vegas may use CDBG program funds for education programs that provide classes in English as a Second Language and classes designed to assist high school dropouts in receiving their GED. Programs such as these provide the basic skills necessary to enter job training and job placement programs.

The HCP Consortium believes that the main opportunities to assist those below poverty level to achieve economic independence in coordination with affordable housing activities is through education and job training apprenticeship programs provided through the public housing authorities and non-profit agencies, and through transitional housing programs operated by non-profit organizations. CDBG and ESG Program funds are annually committed to transitional housing organizations to provide the operating funds necessary to assist residents in entering the workforce.

Strategic Plan

Mission:

The HCP Consortium is committed to improving the quality and quantity of affordable housing, both for rental and homeownership, ensuring people with disabilities have access to both housing and services, creating community facilities that serve low income areas, undertaking activities to end homelessness, supporting social service programs to help low income households maintain self-sufficiency and improving the living environment for distressed neighborhoods and communities.

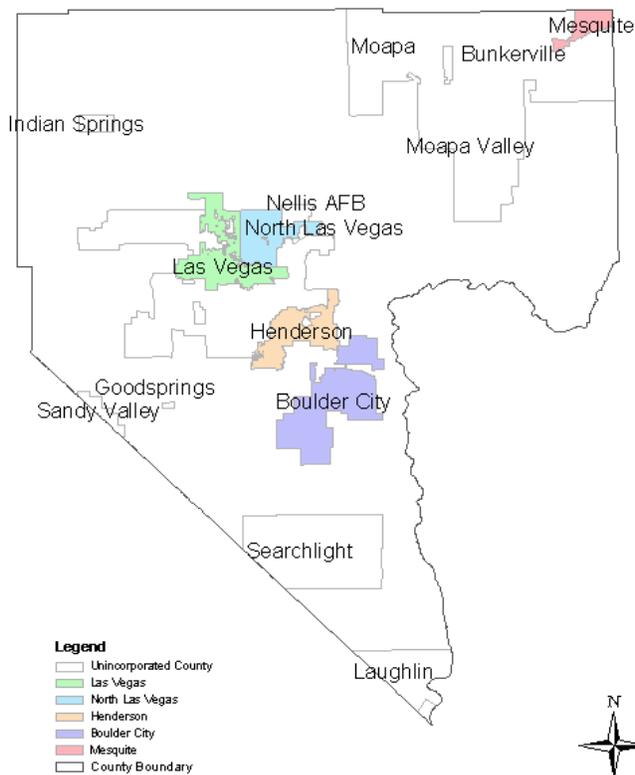
General Questions

Geographic Area

Clark County, Nevada contains 8,060 square miles and is located at the southernmost portion of Nevada. Larger than the state of New Jersey, most of the land area in Clark County is owned by agencies of the federal government, including the Bureau of Land Management, the Department of Defense, and the U.S. Forest Service.

There are five incorporated jurisdictions in the County including Las Vegas, North Las Vegas, Boulder City, Henderson and Mesquite. Clark County provides traditional county services (social services, property assessment) as well as urban services (fire, police, water, and sewer). As a result, urban development occurs in the unincorporated areas of Clark County as well as within the cities.

Figure 3. Clark County, Nevada



The small but growing rural communities of Mesquite, Moapa Valley, Indian Springs, and Pahrump, rely primarily on the services provided in the Las Vegas Valley for serving their low-income and homeless populations. The Las Vegas Valley is the nearest metropolitan area to these communities, with the other major metropolitan area of Nevada (the Cities of Reno and Sparks in Washoe County) being approximately a 7-hour drive northwest.

The HCP Consortium Consolidated Plan involves the Unincorporated County, North Las Vegas, Boulder City and Mesquite. Henderson and Las Vegas are their own entitlement communities and are not part of the current Consortia.

Clark County

North Las Vegas

Boulder City

Mesquite

Areas of Minority and Low-Income Concentration

According to the 2000 Census, minority groups have higher percentages of lower income households when compared to non-minority, lower income households as well as to all households in the Consortium Area. These minority group residents also tend to live in those parts of the Consortium Area that contain greater proportions of lower income households. The following two maps show the concentrations of minority groups compared to CDBG eligible areas and compared to areas of high poverty rates. Assistance will be directed to these areas primarily but not exclusively.

Figure 4. Areas of Minority Concentration Compared to Low and Moderate Income Areas

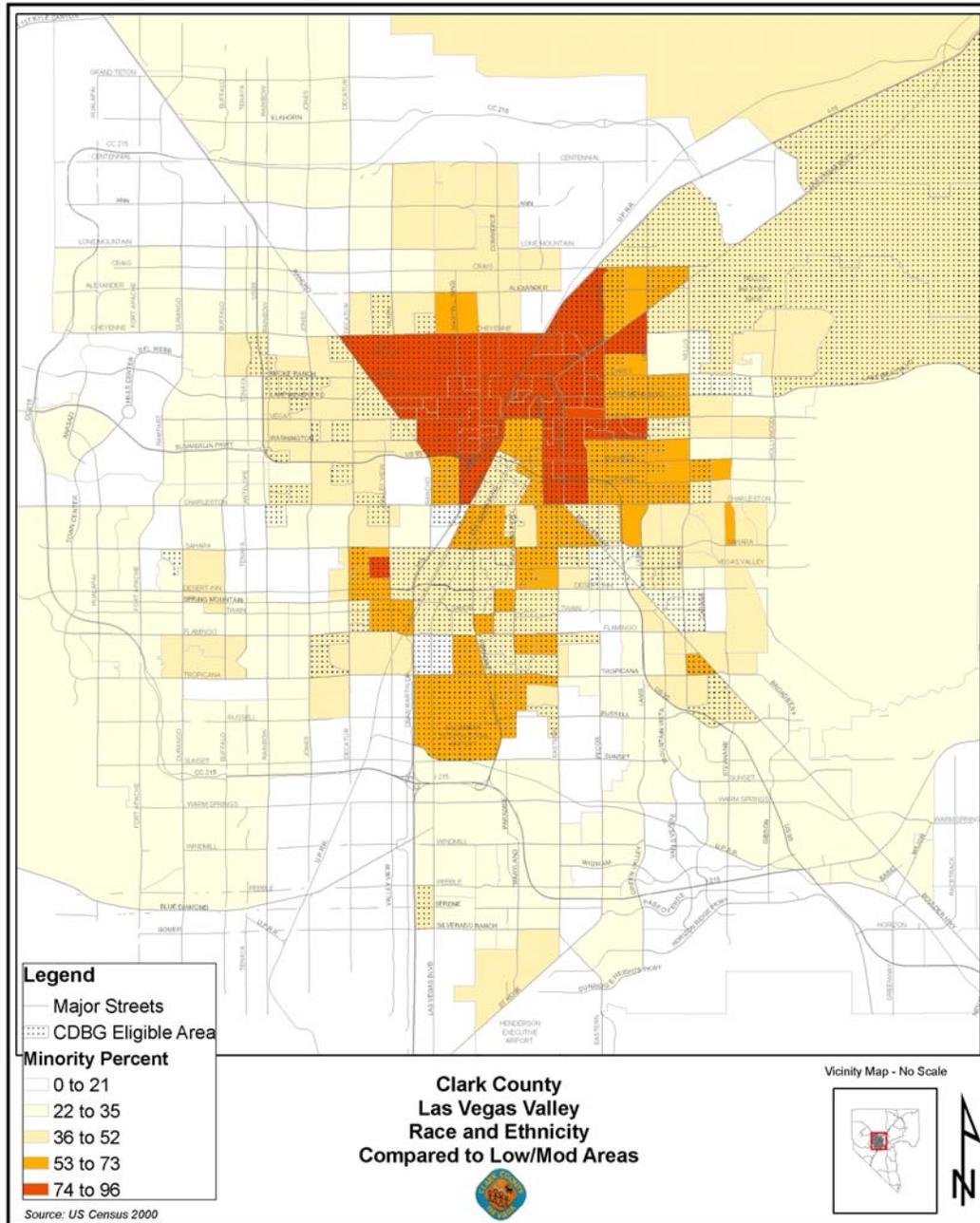
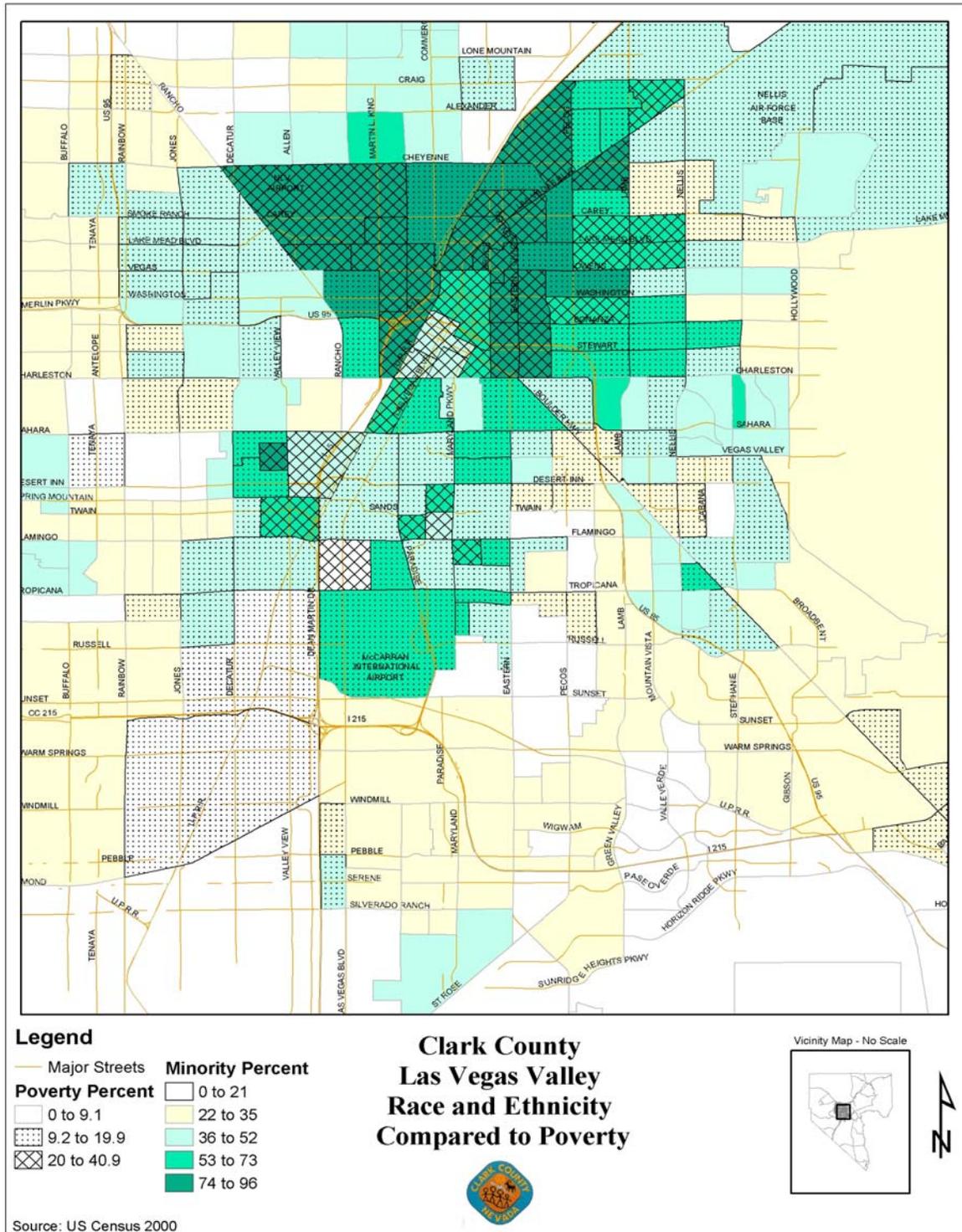


Figure 5. Areas of Minority Concentration Compared to Poverty Areas



Obstacles to Serving Underserved

Extremely low- and low-income households of all types are underserved with respect to affordable housing. In order to overcome this gap, the HCP Consortium has included strategies to provide additional affordable rental and owner housing opportunities. These strategies include the acquisition, rehabilitation and new construction of rental housing units using federal funds to leverage state and private funding sources. Furthermore, strategies to address the need for affordable owner housing include single family rehabilitation, new construction of owner housing units and first-time homeownership assistance.

The lower value of tax credits will make the development of affordable housing severely challenging in the next five years should those values not increase, which seems unlikely in the near term. Therefore, despite reductions in the price of land and construction, the new construction of affordable housing will still require layers of financing that are difficult and time consuming to assemble, and slows the production of much needed affordable housing.

Managing the Process (91.200 (b))

Lead Agency

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

Plan Development

Clark County and the Cities of North Las Vegas, Mesquite and Boulder City are the local entitlement communities that compose the HCP Consortium. The HCP Consortium was formed to respond to HUD's requirements for completion of the Consolidated Plan. The planning period for the HCP is from 2010 to 2014. All members have the same program year.

The HCP Consortium Consolidated Plan is developed through a cooperative effort between all jurisdictions affected by the plan. Each jurisdiction is consulted with Clark County researching and writing the Plan. The Cities of Henderson and Las Vegas participate in bi-monthly Consortium meetings where discussion of issues, including the Consolidated Plan, takes place. The Consortium reviewed the City of Henderson, City of Las Vegas and State of Nevada Consolidated Plans as well as submitted the Consortium Consolidated Plan to both jurisdictions for their review and comment. The plans are consistent and outline similar goals for the five-year period.

Throughout the strategic planning process, the Planning Team composed of staff from Clark County and the City of North Las Vegas met regularly to plan community involvement events, program project activities, review draft work products, and coordinate documentation of commitments.

Program Consortia

There are currently two housing and community development consortia in Clark County: 1) the Urban County CDBG Consortium (consists of Clark County and the Cities of North Las Vegas, Boulder City, and Mesquite); and 2) the Clark County HOME Consortium (Clark County and North Las Vegas). The City of Las Vegas and the City of Henderson are separate CDBG and HOME entitlement recipients and are submitting their own Consolidated Plans. The Cities of Boulder City and Mesquite are part of the HOME Consortium by virtue of their participation in the CDBG Consortium.

Consultation

The development and implementation of the strategies and objectives presented in the Strategic Plan requires consultation between governmental agencies, as well as consultation between the public and private sector.

Housing and Community Development Consultation

As part of the planning for the FY 2010-2014 Consolidated Plan, Clark County conducted a Housing and Community Development Needs Survey beginning in October 2009 and ending in December 2009. This survey was conducted through an Internet survey company. However, participants were also able to complete hard copies of the survey which were then entered into the online system. The survey was sent via email to over 600 people including the Community Development Advisory Committee, non-profit

agencies, housing providers, for-profit businesses, State and Federal governmental agencies, and State legislators. Additionally, the survey was available on the Community Resources Management Division website and was handed out at several Land Use Plan Update Workshops, including Sunrise Manor, Paradise, and Winchester, which all have CDBG eligible census tracts within their planning areas. The majority of the 191 people who responded to the survey were non-profit organizations and Clark County residents.

The survey indicated that the highest affordable housing concerns include:

- Homeownership retention (foreclosure prevention)
- Affordable rental housing for seniors
- Affordable rental housing for low and moderate income families
- Affordable ownership housing
- Housing for people with disabilities
- Homeownership assistance (i.e. downpayment and closing costs assistance)
- Energy efficiency improvements
- Housing for the homeless (emergency, transitional, permanent)

The survey indicated that the highest public service needs include:

- Abused and neglected children services
- AIDS patients programs
- Battered and abused spouse services
- Childcare services
- Crime awareness
- Employment training
- Fair housing services
- Health services
- Homeless services
- Legal services
- Mental health services
- Senior services
- Substance abuse services
- Transportation services
- Youth services

The survey indicated that the highest community development facility and infrastructure needs include:

- Child care centers
- Youth center
- Homeless facilities
- Health facilities
- Abused and neglected children facilities
- Street improvements
- Solid waste disposal improvements

The survey indicated that the highest rehabilitation needs include:

- Code enforcement

The survey indicated that the highest economic development needs include:

- Micro enterprise/small business assistance
- Job training and job placement services
- Loans to businesses

A number of affordable housing development planning groups provided opportunities for the various jurisdictions' governments to consult outside entities in the promotion, production and planning of affordable housing and homeless assistance.

- The Nevada Housing Coalition works to promote affordable housing in Nevada. Projects include helping in the development of HUD Consolidated Plans, producing the statewide housing conference, developing a statewide affordable housing database, impacting legislations and fair housing issues. Clark County and North Las Vegas are members of the Nevada Housing Coalition.
- The Community Housing Resource Board (CHRB) is a community volunteer group established to promote the goals of Fair Housing. Working with local real estate boards and homebuilder groups, the CHRB monitors programs of voluntary compliance and assesses the progress and effectiveness of these efforts. The organization is also involved in a program of education to expand public awareness of the necessary and desirability of Fair Housing practices. Clark County is an active member of CHRB.
- State of Nevada Housing Division Advisory Committee on Housing is a volunteer group that advises the Housing Division. The Nevada Housing Division Advisory Committee was established by the 1995 Legislature. The Committee is appointed by the Director of the Department of Business and Industry and meets quarterly to review program activities of the Housing Division.

Special Needs Consultation

The HCP Consortium consulted with a variety of organizations concerning the needs of people with disabilities including many divisions and agencies within the Nevada Department of Health and Human Services – the Substance Abuse Prevention and Treatment Agency, the Nevada State Health Division, the Desert Regional Center, Aging and Disability Services, Child and Family Services and Southern Nevada Adult Mental Health Services.

This section was also informed by the Nevada Special Needs Housing Assessment which was completed by BBC Research & Consulting at the behest of the State of Nevada Housing Division and other state reports and data. Clark County Social Service was consulted regarding the needs and issues facing persons with HIV/AIDS. The City of Las Vegas was also consulted as they administer the Housing Opportunities for Persons with AIDS (HOPWA) funding for the Las Vegas Metropolitan Statistical Area, which includes all jurisdictions in Clark County.

Lead Based Paint Consultation

The Southern Nevada Health District was consulted regarding the prevalence of lead-based paint poisoning in the Consortium area.

Housing Authority Consultation

Effective January 1, 2010, two former public housing authorities, the Housing Authority of Clark County (HACC) and the Housing Authority City of Las Vegas (HACLV), have been regionalized into one agency, the newly formed Southern Nevada Regional Housing Authority. The Housing Authority of the City of North Las Vegas has not joined in the regional agency but it is planned for that to take place over the next year.

Discussions were held with the Southern Nevada Regional Housing Authority (SNRHA) and the administrator for the Housing Authority of the City of North Las Vegas (HACNLV) regarding the

development of the Consolidated Plan and the Housing Authority 5-year Plans. Both organizations are required to complete their own 5-Year Plan using data provided by the HUD Consolidated Plan. The draft Consolidated Plan was provided to the SNRHA and HACNLV for input.

Homeless Consultation

The HCP Consortium consulted the Office of the Regional Homeless Coordinator on homeless issues and has incorporated the Southern Nevada Housing and Homeless Plan in to the Consolidated Plan. This plan includes all of the jurisdictions that make up Southern Nevada and outlines goals and strategies to guide local governments in funding, developing and supporting homeless services.

Community Development Consultation

In preparation for the 2010-2014 Consolidated Plan, Clark County is seeking HUD pre-award approval for a five-year Capital Improvement Plan for the expenditure of CDBG capital monies for FY 2010-2014. Clark County submitted the HUD pre-award request in April 2010 and is confident that it will be approved by June. Through this process, the County can advance funds for previously approved CDBG projects and then pay them back from grants for the period 2010-2014. With the HUD pre-award approval accompanied by a County line of credit, CDBG projects are completed years earlier than previously possible.

The five-year CDBG Capital Improvement Plan for FY 2010-2014 represents a targeted and focused planning effort by Clark County and its participating cities over a one-year period. County staff conducted two technical workshops and met personally or by phone with all the parties interested in the CDBG Capital planning process to answer their questions. County staff also developed a detailed program manual describing the CDBG program requirements and made available this Capital Project Application Request for Proposal Manual to all those who might be interested in applying both with hard copies and on the Internet. Thus, the projects ultimately selected and included in the Pre-Award Approval Request reflect the outcome of a twelve-month planning process.

The document *Building the Future Now – Clark County 2010-2014 CDBG Capital Improvement Plan* is available through the Clark County Community Resources Management Division and outlines in detail the citizen participation and projects selected. Clark County made a significant outreach to the larger community to solicit project proposals, encouraged citizen review and input on project selections, and conducted numerous posted public meetings at the citizen (CDAC) and Board of Commissioners levels. These were open meetings and efforts were taken to get a broad selection of possible projects benefiting the low and moderate income for public consideration. In deciding on the projects to fund, all parties involved were clearly mindful that this Community Development Block Grant is a federal anti-poverty program targeted to serve the low and moderate income.

The City of Boulder City and the City of Mesquite also proposed and received approval for their own 5-Year CDBG Capital Improvement Plans, which were approved by their respective City Councils. Information on their specific projects is also available through the “Building the Future Now” document.

On November 6, 2007, the Board of County Commissioners decided to release the pre-commitment of the 15 percent set-aside for Public Service funds for homeless services and to instead commit these funds to the repayment of County funds advanced in support of the current CDBG Five-Year CIP. Clark County will continue to focus its CDBG funds on its newest Capital Plan.

Intergovernmental Consultation

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

The State of Nevada Department of Business and Industry's Housing Division designates a percentage of its HOME Program funds for disbursement within Clark County and allows the County to administer a portion of those funds. Such an arrangement allows for the coordinated disbursement of State and County HCP Consortium HOME Program funds with other federal housing resources within the County to carry out the HCP's strategies. The Housing Division is consulted on a regular basis concerning housing needs and State staff even participates with Clark County in joint monitoring of subrecipients.

Clark County, Las Vegas, North Las Vegas and Henderson also work together on the Continuum of Care (CoC) planning and application each year. Local jurisdictions consult on the application for homeless funding through a community-based group, which prioritizes homeless needs and funding recommendations.

Clark County and the cities of Las Vegas, Henderson, North Las Vegas, Boulder City and Mesquite meet on a bi-monthly basis to discuss issues relating to HOME, CDBG and ESG. The discussions range from questions about joint projects, to coordination of grant application cycles. Although Henderson and Las Vegas are not part of either the HOME or CDBG Consortia, their activities affect the region and the Consortia's activities may affect their community. Their participation in the Consortium meetings allows for an assessment of the regional impact of housing and community development policies. Discussions regarding the development and content of the Consolidated Plan took place at all of the Consortium meetings for FY 2009 and early FY 2010.

The housing authorities of Clark County, the City of Las Vegas and the City of North Las Vegas are working on consolidating into one organization, called the Southern Nevada Regional Housing Authority (SNRHA). This regionalization of the housing authorities is designed to ensure the efficient and effective delivery of housing authority services. The SNRHA issues Housing Choice Vouchers which can be used anywhere in Clark County. Clark County worked with the executive director of the SNRHA to coordinate the development of the Consolidated Plan and the Housing Authority Five-Year Plan. While the consolidation is not yet complete as the Housing Authority of the City of North Las Vegas has not yet been merged into the new regional Housing Authority, the plan is for that to take place within the next year.

Citizen Participation (91.200 (b))

Clark County Citizen Participation

In order to successfully meet the goals of the Department of Housing and Urban Development's Consolidated Plan, the voices of those individuals, neighborhoods and communities participating and/or impacted must be heard.

Public hearings and meetings are the primary means by which individual citizens are able to provide input into the Consolidated Plan. Open meetings are held at the town level, city level, and countywide level. All such meetings are scheduled in advance and posted in the community. The meetings provide an opportunity for citizens to: (1) submit project proposals to be included in the statement to HUD, and (2) comment on projects under consideration. All meetings are held in handicapped accessible facilities.

The Community Development Advisory Committee (CDAC) is the primary conduit for citizen input into the Consolidated Plan as the members represent the community in all its diversity and interests. CDAC is advisory in nature. The purpose of the Committee is to provide citizen input into the CDBG, HOME and ESG planning and implementation activities. CDAC is responsible for making recommendations to the Board of County Commissioners with regard to the selection of projects to be funded with CDBG monies. CDAC is composed of thirty-six (36) members of the community. The specific responsibilities of the three types of CDAC members are outlined below:

Town Advisory Boards/Citizens Advisory Councils

Each of the fourteen (14) town advisory boards and five (5) citizens advisory councils is entitled to nominate one representative and one alternate, subject to appointment by the Board of County Commissioners. Members appointed to CDAC by the town advisory boards (TABs) and citizens advisory councils (CACs) primarily represent their respective unincorporated towns and unincorporated areas. They are responsible for insuring that fellow town advisory board members and residents are kept apprised of CDBG activities, requirements, and timetables. They serve as a conduit for input from their respective towns and areas into the consolidated planning and implementation process.

Participating Cities

The North Las Vegas, Boulder City, and Mesquite City Councils each appoint a representative and an alternate to the Committee. CDAC representatives from North Las Vegas, Boulder City, and Mesquite serve primarily as non-voting liaisons for their respective cities.

Because North Las Vegas, Boulder City, and Mesquite are largely responsible for planning and administering their own projects, they are encouraged to conduct independent meetings and hearings soliciting citizen input to augment the CDAC process. The North Las Vegas Citizens Advisory Committee, of which the North Las Vegas CDAC representative may be a member, meets in their community and advises the North Las Vegas City Council directly regarding Community Development activities.

Boulder City and Mesquite meet the citizen participation requirements by conducting at least one City Council public hearing during each program year.

Community At-large

The fourteen representatives at large are responsible for insuring that the needs of the low- and moderate-income families, elderly, handicapped, and minority populations are expressed and adequately reflected in Consolidated Plan activities. They also play a role in keeping County residents informed of program progress.

In addition to the public meetings held both at the CDAC and at the Board of County Commissioners, Clark County conducted a Housing and Community Development Needs Survey beginning in October 2009 and ending on December 31, 2009. This survey was conducted through an Internet survey company. However, participants were also able to complete hard copies of the survey which were then entered into the online system. The survey was sent to over 600 people including the CDAC, non-profit agencies, housing providers, for-profit businesses, State & Federal governmental agencies, and State legislators. Additionally, the survey was available on the Community Resources Management Division website and was handed out at several Land Use Plan Update Workshops, including Sunrise Manor, Paradise, and Winchester.

North Las Vegas Citizen Participation

In 2003, the North Las Vegas City Council selected volunteers to serve on a steering committee to oversee a citizen driven strategic planning process, know as Visioning 2025 (<http://www.ci.north-las-vegas.nv.us/Departments/StrategicPlanning/Visioning2025.cfm>). The Community Forum phase of the project took place in July and August 2004. A community survey, the National Citizen Survey, was mailed to 1,200 households to obtain citizen input with a response rate of 27 percent. Additionally, eight meetings were held in various locations to generate public input to the Visioning 2025 plan. From these meetings, the citizens selected nine Core Elements on which to focus – planning and land use, transportation, water and air quality, infrastructure, public safety, park and community amenities, quality education, economic development and redevelopment, and tax policy. Project Teams were created to address a specific issue area and develop a strategic plan, which will be presented to the City Council for adoption in March 2005. Goals were identified that are included in the strategic plan in this document including expanding housing options to meet the needs of residents of all income levels, expanding recreation and park facilities, and providing affordable health facilities.

In 2010, North Las Vegas implemented a web-based survey modeled on the Clark County survey designed by the Community Resources Management Division to determine whether priorities identified in the Visioning 2025 Plan have significantly altered over time. The survey was distributed from January 2010 through March 2010. The survey was sent via email to over 500 people who subscribe to City based newsletters, e-mail alerts and council bulletins. Three community meetings were held on March 8, 10, and 13, 2010. These meetings were held in CDBG-eligible census tracts and one meeting was conducted completely in Spanish. The town hall meetings hosted by elected officials are in both eligible and non-eligible census tracts to ensure a wide spectrum of residents had an opportunity to respond to the survey. All meetings were held in handicapped accessible locations. Surveys were made available upon request in alternative formats for the vision and/or hearing impaired. Additionally, the survey was available on the City of North Las Vegas website and was handed out at community meetings and town hall forums, all but one of which has CDBG eligible census tracts within their planning areas. Local media, including Fox 5 News and the Review-Journal, carried notices about the survey and its availability. The majority of the 189 people who responded to the survey were City of North Las Vegas and Clark County residents.

The survey indicated that the highest affordable housing concerns include:

- Homeownership retention (foreclosure prevention)

- Energy Efficiency Improvements
- Homeownership assistance (i.e. down payment and closing costs assistance)
- Affordable rental housing for seniors

The survey indicated that the highest public service needs include:

- Crime awareness
- Abused and neglected children services
- Youth services
- Health services

The survey indicated that the highest community development facility and infrastructure needs include:

- Street improvements
- Sidewalks
- Water and Sewer Improvements
- Flood drain Improvements

The survey indicated that the highest rehabilitation needs include:

- Improve Appearance of Business Districts
- Code enforcement
- Historic Preservation
- Clean-up of Contaminated sites

The survey indicated that the highest economic development needs include:

- Job training and job placement services
- Micro enterprise/small business assistance
- Loans to businesses
- Commercial and Industrial development

Additionally, North Las Vegas empowers a 7-member Citizens Advisory Committee (CAC) to review project applications for HUD funding, listen to presentations by applicants and make recommendations on funding to the City Council. Each meeting of the CAC is posted and open to the public and held in a handicapped accessible location. The project recommendations are forwarded to the City Council, which has final approval authority over project funding.

Consolidated Plan Public Hearings

Each jurisdiction held a public hearing on the entire Consolidated Plan at a monthly public meeting of their respective Councils or Commissions. The final draft of the Consolidated Plan was made available for the required 30-day comment period during which an additional public hearing was held on April 20, 2010 at the Board of County Commissioners. Final approval took place at the May 4, 2010 Board of County Commissioners meeting.

Outreach to Minorities, Non-English Speakers and Persons with Disabilities

Public hearings and meetings are the primary means by which individual citizens are able to provide input into the Consolidated Plan. Open meetings are held at the town level, city level, and countywide level. All such meetings are scheduled in advance and posted in the community. All meetings are held in handicapped accessible facilities with Spanish translation available if needed. North Las Vegas conducted one of their community meetings in Spanish and all meetings were held in handicapped accessible facilities.

Summary of Citizen Comments and Responses

No citizen comments were received.

Institutional Structure (91.215 (i))

Institutional Structure

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

Private Industry

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

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

Non-Profit Organizations

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

Accessible Space Inc.	Nevada HAND
Community Development Programs Center of Nevada	Neighborhood Housing Services of Southern Nevada
Habitat for Humanity	Salvation Army
Help of Las Vegas	US Vets

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

Public Institutions

Clark County and the cities of Las Vegas, Henderson, North Las Vegas, Boulder City and Mesquite meet on a bi-monthly basis to discuss issues relating to HOME, CDBG and ESG. The discussions range from questions relating to joint projects, to coordination of grant application cycles. Although Henderson is not part of either the HOME or CDBG Consortia, their activities affect the region and the Consortia's activities may affect their community. Their participation in the Consortium meetings allows for an assessment of the regional impact of housing and community development policies. Discussions regarding the development and content of the Consolidated Plan took place at all of the Consortium meetings for FY 2009 and early FY 2010.

Clark County

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

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

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

City of North Las Vegas

North Las Vegas utilizes its Office of Housing and Neighborhood Services (OHNS) Division to carry out its CDBG program, HOME program and Neighborhood Stabilization Program (NSP 1). The Planning Department is responsible for administering the City's Master Plan, its policy framework for community growth and revitalization. The City's Economic Development Department is responsible for downtown redevelopment activities, economic development marketing, business retention and expansion, and working on land auctions with the BLM in the City's Northern Development Area. The Economic Development Department is also working with local financial institutions to ensure mortgage and rehabilitation financing is made available to all areas of North Las Vegas.

Boulder City

Boulder City administers CDBG action plan projects per the Interlocal Agreement for a CDBG Consortium with Clark County.

Mesquite

The Mesquite Planning and Redevelopment Department oversees housing and community economic development activities for the City of Mesquite. Mesquite also administers CDBG action plan projects per the Interlocal Agreement for a CDBG Consortium with Clark County.

State of Nevada

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

Housing Authorities

Effective January 1, 2010, two former public housing authorities, the Housing Authority of Clark County (HACC) and the Housing Authority City of Las Vegas (HACLV), have been regionalized into one agency, the newly formed Southern Nevada Regional Housing Authority. The Housing Authority of the City of North Las Vegas has not joined in the regional agency but it is planned for that to take place over time.

The Southern Nevada Regional Housing Authority works with its local jurisdictional governments to ensure the efficient and effective delivery of housing authority services. The regionalization for the former three housing authorities remove restrictions of jurisdictional boundaries, thereby eliminating paperwork and administrative requirements brought about by the portability regulations of the program. This also afford the community and its residents with one set of policies and procedures; one wait list for housing and one goal to provide low-income families with safe, decent and affordable housing. For more information on housing authority's activities, please refer to the SNRHA's five-year plan.

Over the years, each jurisdiction has funded a variety of public service, housing and community facility projects, through the housing authorities and social service organizations, which benefit housing authority residents. This interaction and support between the jurisdictions and their respective housing authorities is expected to continue over the next five years as well via the Southern Nevada Regional Housing Authority which will result in the elimination of duplicate services.

Any capital improvements, demolition, or disposition of public housing developments are reviewed by the appropriate jurisdictions through interactions with governmental agencies for permitting, zoning, and funding.

Strengths and Gaps in Institutional Structure

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

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

Non-profit organizations that provide support services to low-income households are being utilized at their maximum capacity. The difficulty in providing services is not the lack of agencies and organizations

to implement service programs, but the lack of resources to provide services to all those in need. If supportive housing is to be provided to special needs groups then greater efforts have to be made to obtain necessary resources.

The Clark County Growth Task Force recommended that Clark County support training and education on affordable housing issues, funding sources, and regulation compliance for non-profit and for-profit developers, to increase community capacity to build and operate affordable housing.

The lack of information concerning the housing needs of special needs groups within the Clark County HOME Consortium Area has been rectified through a study conducted by the Nevada Housing Division. The “Nevada Special Needs Housing Assessment” was completed in August 2002 and provides the first broad based assessment of housing needs for those with a range of disabilities. The study identifies a large need for special needs housing in Nevada. Unfortunately, the deep subsidies needed to support the construction or rehabilitation of housing for people with special needs, makes these types of projects less attractive to developers and more difficult to finance. Again, non-profit organizations with the ability to develop housing for special needs groups need more support from all local jurisdictions.

Monitoring (91.230)

Clark County and North Las Vegas

Clark County and North Las Vegas include in all sub-recipient contracts an “on-site monitoring” section. It stipulates that the program under the agreement will be subject to “on-site monitoring” by jurisdiction staff or a HUD representative on a 24-hour notice during normal working hours. It also states that the representatives shall be granted access to all records pertaining to the program. Representatives, on occasion, may request to interview program recipients who volunteer to be interviewed.

An additional section of the sub-recipient contract addresses access to records. It states that at any time during normal business hours, the sub-recipient’s records, with respect to matters covered by the agreement shall be made available for audit, examination, and review by jurisdictional or HUD representatives.

Clark County and North Las Vegas use a two-part form for monitoring sub-recipient agencies. The first form is initially completed when the agency receives the grant award and the file is set up. This form addresses all the required certifications, insurance, legal documents and environmental review.

The second part is the actual on-site form used when the annual visit to the agency is undertaken. This form is used to conduct a random sampling to confirm eligibility of clients, and that appropriate documentation of such is in the agency files. It is also used to verify and tag any equipment that may have been purchased with grant funds. If the agency has any grant-funded employees, payroll tax returns and W-2’s are checked to make sure they were completed and submitted to the IRS.

The HCP Consortium uses the year-end reports of subrecipients to monitor its performance in meeting its goals and objectives as set forth in its Consolidated Plan. Housing Quality Standards (HQS) inspections are conducted as rental projects and owner units are completed. Clark County requires that HQS inspections be submitted before the final draw down of funds. Clark County HOME staff also performs financial desk audits throughout the year with every request for payment, including reviewing information for accuracy and compliance.

The ESG subrecipient contracts include a clause indicating that the subrecipients will be monitored at least twice during their ESG grant period. Clark County ESG staff also performs financial desk audits throughout the year with every request for payment, including reviewing information for accuracy and compliance.

The Clark County CDBG program monitors its capital projects through the Real Property Management Division that provides construction coordination and job supervision. A risk assessment of newly funded non-profits is completed to determine whether the organization will require additional technical support. Staff also performs financial desk audits throughout the year with every request for payment, including reviewing the information for accuracy and compliance. Further, staff and the 36-member citizen committee visit most of the non-profit subrecipients during the bus tours for new grant requests, where they then also visit capital projects under construction or recently completed.

Priority Needs Analysis and Strategies (91.215 (a))

The basis for assigning the priority given to each category of priority needs and identification of any obstacles to meeting underserved needs are described in detail under [Priority Housing Needs](#), [Priority Homeless Needs](#) and [Community Development](#)

Lead-based Paint (91.215 (g))

Lead-Based Paint in Housing Units

The age of housing is the major variable for estimating the number of potential lead-based paint housing units in a given geographical area. This is based on the fact that the lead-based paint (now banned) was used on older housing stock built before 1978. Consequently, the older the home the greater is the potential for encountering lead-based paint.

Figure 6: Housing Units by Age, Tenure, Income Group and Potential for Encountering Lead based Paint; HCP Consortium Area

Year	Household Type	Clark County	North Las Vegas	Boulder City	Mesquite	Total
Pre-1949	Total	1,506	940	1,652	1,852	9,661
	Renter					
	-Ext. low	237	47	52	9	972
	-Low	131	24	33	0	606
	-All Other	582	523	1,093	1,824	5,058
	Owner					
	-Ext. low	99	23	3	0	348
	-Low	46	100	29	0	337
	-All Other	411	223	442	19	2,340
1950-1959	Total	3,634	1,710	176	29	13,357
	Renter					
	-Ext. low	533	158	11	9	1,866
	-Low	542	139	11	9	1,395
	-All Other	1,571	431	49	11	3,840
	Owner					
	-Ext. low	124	71	0	0	555
	-Low	49	176	19	0	743
	-All Other	815	735	86	0	4,958
1960-1979	Total	6,712	1,620	284	13	12,757
	Renter					
	-Ext. low	576	124	9	1	1,160
	-Low	564	805	64	4	1,831
	-All Other	2,061	222	39	3	3,476
	Owner					
	-Ext. low	283	59	12	0	493
	-Low	48	33	2	0	135
	-All Other	3,180	377	158	5	5,662

Source: 2000 Census

There are an estimated 35,775 occupied housing units potentially containing lead-based paint within the HCP Consortium Area. Forty four percent are owner occupied, and 56 percent are renter occupied. Of the units with the potential for containing lead-based paint, 2,611 units are owner units and 7,830 units are renter units that are occupied by low- and extremely low-income households. It is estimated that 6,511 of moderate-income households have the potential for encountering lead-based paint. This number of housing units is extrapolated from the fact that 18.2 percent of all households are moderate-income in the HCP Consortium. This same percentage was applied to the estimated number of occupied housing units potentially containing lead-based paint to arrive at the number of moderate-income housing, as moderate-income households were not a separate category available through the HUD provided data.

From 2005 through 2009, the EPA lead hazard inspector for Clark County examined approximately 300 structures for lead hazards. The results of those examinations indicate that lead hazards primarily exist in housing built before 1960 in Clark County. The lead that exists in housing built from 1960 to 1978 is usually present only in ceramic bathroom tile and lead preservative treated doorframes, neither of which has presented or developed as lead hazards from use or occupancy.

Figure 7: Blood Lead Reports Received by Southern Nevada Health District, 2009

Children 72 months and younger:								
Blood lead level	Male	Female	Unknown	Total	Hispanic	Non-Hispanic	Unknown	Total
>=10µg/dl	5	7	0	12	8	4	0	12
5µg/dl to <10µg/dl	123	100	22	245	87	71	87	245
<5µg/dl (including zero)	5385	5183	70	10638	2752	2982	4904	10638
Total	5513	5290	92	10895	2847	3057	4991	10895
Children older than 72 months and younger than 18 years								
Blood lead level	Male	Female	Unknown	Total	Hispanic	Non-Hispanic	Unknown	Total
>=10µg/dl	3	0	0	3	1	2	0	3
5µg/dl to <10µg/dl	7	4	1	12	2	5	5	12
<5µg/dl (including zero)	873	777	2	1652	467	338	847	1652
Total	883	781	3	1667	470	345	852	1667

Note: All data is provisional. Totals are for a child's first blood test except for children with a blood lead level (BLL) ≥10µg/dL. Totals include venous and capillary test results except for BLLs ≥10µg/dL which are all confirmatory venous results. Children with capillary test results ≥10µg/dL and confirmatory venous test results below 10µg/dL are classified under that lower BLL. If no confirmatory test was performed for a child, then that child was classified as having a result of zero. This occurred with a total of 7 children in the data reported below. Most blood lead reports are received from commercial laboratories operating in Clark County, NV, and ethnicity information is not customarily provided. Nationally, a blood lead result of 10 µg/dL or higher in a child meets the level of concern. In young children, blood lead results from 5 to less than 10 µg/dL may be significant; emerging research has shown that intellectual impairments may occur at these levels even though they are below the national level of concern.

Source: Southern Nevada Health District STELLAR Database, January 28, 2010.

The Southern Nevada Health District (SNHD) does not determine the source of lead contamination, only that lead is present in those patients who test positive. Therefore, it is not possible to determine which patients were contaminated from lead-based paint or some other sources of lead. Calendar Year 2009 results from blood testing in Clark County are presented in Figure 7. As indicated in this figure, more than 99.99 percent of all children tested during this period were not considered lead poisoned.

Activities

HCP Consortium members require lead-based paint inspections to be conducted on all units built prior to 1978 receiving HOME funding. In particular, the guidelines for addressing lead-based paint issues are included in all subrecipient agreements with organizations providing housing rehabilitation, acquisition

and rehabilitation and homeownership assistance. Clark County's Housing Rehabilitation Specialist uses the County owned XRF machine to inspect Clark County HOME Consortium funded units for lead. Clark County staff works with the subrecipients on the abatement of lead-based paint when it is encountered and often provides the clearance upon completion of the work. Clearance is also provided by outside contractors for some projects. Additionally, all HQS inspections include an assessment of lead-based paint.

Clark County and North Las Vegas also participate in the SNHD's Childhood Lead Poisoning Prevention Program (CLPPP) Strategic Advisory Coalition. CLPPP has developed a number of goals and related objectives, which form a framework by which to address their overarching goal of elimination of lead poisoning as a threat to the health and well-being of Nevada's children. These goals and objectives are the core of the SNHD CLPPP Elimination Plan:

- Objective 1: Increase services related to detecting and managing lead exposure in children
- Objective 2: Assessing the presence of lead in the environment
- Objective 3: Increase public awareness about the dangers of lead exposure
- Objective 4: Utilize legislation, regulations, and guidelines at all governmental levels to further program efforts
- Objective 5: Acquire community support and maintain inter-agency communication

Additionally, the Healthy Homes Initiative was developed as an expansion of the CLPPP, which is a collaborative effort between the Southern Nevada Health District (SNHD) and the University of Nevada Las Vegas Department of Environmental and Occupational Health. In order to provide a more holistic approach to addressing public health issues in the home, CLPPP has been expanded to include Healthy Homes initiatives which address a wide array of environmental factors in the home that impact ones health and quality of life. The Healthy Homes project is a multifaceted, comprehensive and efficient approach to enhancing the sustainability of the built environment, while increasing the overall health of Nevada residents. By modifying unhealthy conditions in the home environment and addressing the social determinants of health, Healthy Homes will serve disadvantaged populations in Nevada by focusing on four focal areas: 1) reducing asthma triggers, 2) preventing unintentional injuries, 3) eliminating poisoning hazards, and 4) leveraging resources to fix structural problems in the home. By addressing these four focal areas, we aim to improve the overall health and quality of life for the occupants of participating homes. Clark County and North Las Vegas will continue to participate in these two SNHD and UNLV initiatives.

Housing Needs (91.205)

Introduction

The social costs of not housing people properly include increased homelessness, family disintegration and joblessness in the face of housing instability, all of which affect the community as a whole. A house is where we nurture and create a safe place for our young to develop their sense of self-esteem. Affordable housing is not an abstract term, but a measure of how well a society provides for its citizens. People should not have to choose between feeding their children and paying their rent and utilities.

Like a high stakes game of musical chairs, the number of poor renters increases and they must compete for a diminishing number of affordable places to live. Over 122,000 moderate- and low-income households are estimated to be paying for housing they cannot really afford. Over 50,000 of these households are low-income households with “worst case” housing needs. Households with worst-case needs are families who are low income (have incomes at or below 50 percent of the area median) and pay more than half of their income for housing or live in substandard housing.

Housing Needs

Categories of Persons Affected

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

Extremely Low-Income: Households whose income is between 0 and 30 percent of the median family income for the area, as determined by HUD

Low-Income: Households whose income does not exceed 50 percent of the median family income for the area, as determined by HUD

Moderate-Income: Households whose income does not exceed 80 percent of the median family income for the area, as determined by HUD

The following define the incomes specifically for Clark County in 2009 based upon household size. This information is useful to understanding the level of need as presented in the next section. Median family income in 2009 is \$65,400.

Figure 8. Income Limits by Housing Size FY 2009

Income Level		Household Size							
		1-person	2-person	3-person	4-person	5-person	6-person	7-person	8-person
Extremely low-income	30% of AMI	\$13,700	\$15,700	\$17,650	\$19,600	\$21,150	\$22,750	\$24,300	\$25,850
Low-Income	50% of AMI	\$22,900	\$26,150	\$29,450	\$32,700	\$35,300	\$37,950	\$40,550	\$43,150
Moderate Income	80% of AMI	\$36,600	\$41,850	\$47,050	\$52,300	\$56,500	\$60,650	\$64,850	\$69,050

Note: AMI = Area Median Income
 Source: U.S. Department of Housing and Urban Development

Cost Burden

Cost Burden = 30 percent or more of income spent on housing expenses including utilities

Severe Cost Burden = 50 percent or more of income spent on housing expenses including utilities

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

- Elderly households (1- and 2- persons)*
- Small related households (2-4 persons)*
- Large related households (5+ persons)*
- Other households (generally non-elderly, 1-person households)*

The following summary is provided to illustrate the primary issues facing Southern Nevada concerning cost burden. The cost burden tables for the cities of Las Vegas and North Las Vegas are also provided for informational and comparison purposes. Unfortunately, more current data is only available on a Countywide basis, but not for the HCP Consortium only. The Countywide data would include the cities of Las Vegas and Henderson, which are not a part of the HCP Consortium and this data would therefore not accurately represent the Clark County HCP Consortium which includes the unincorporated County, North Las Vegas, Boulder City and Mesquite. Therefore, 2000 Census Data is used in much of the analysis of need in the following section.

As of 2000 –

- There were 442,713 households in Clark County
- There were 170,706 households with income at or below 80 percent of median area income
- Of the 170,706 low and moderate income households, 109,300 or 64 percent paid over thirty percent of their income for housing
- Of the 170,706 low- and moderate-income households, 53,883 or 31.6 percent paid over fifty percent of their income for housing
- Cost burdened renters households = 67,611 (15.3 percent)
- Cost burdened owner households = 41,689 (9.4 percent)

Figure 9. Clark County HOME Consortium Cost Burden by Household Type, Income and Housing Problem, 2000

Household by Type, Income, & Housing Problem	Renters				
	Elderly	Small Families	Large Families	All Other	Total Renters
Household Income (0 to 30% MFI)	6,981	9,834	3,376	10,688	30,879
% with any housing problems	74.4	80.4	94.7	72.6	77.9
% Cost Burden >30%	73.2	76.2	84.5	69.9	74.3
% Cost Burden >50%	61.8	67.8	67.3	64.3	65.2
Household Income (31% to 50% MFI)	5,757	9,894	4,135	8,705	28,491
% with any housing problems	83.8	90.4	92.2	91.2	89.6
% Cost Burden >30%	82.4	85.5	61.9	90.2	82.9
% Cost Burden >50%	44.4	29.0	14.5	41.8	33.9
Household Income (51 to 80% MFI)	5,906	17,091	5,549	15,862	44,408
% with any housing problems	60.7	58.6	84.5	59.8	62.6
% Cost Burden >30%	59.2	43.9	20.3	56.1	47.4
% Cost Burden >50%	9.0	2.9	0.9	5.9	4.5
Total Households	26,361	72,811	21,841	67,016	188,029
% with any housing problems	54.8	45.7	76.6	43.5	49.8
Household by Type, Income, & Housing Problem	Owners				
	Elderly	Small Families	Large Families	All Other	Total Owners
Household Income (0 to 30% MFI)	5,800	3,169	946	3,272	13,187
% with any housing problems	72.0	74.3	91.3	65.2	72.2
% Cost Burden >30%	71.4	72.4	81.0	64.3	70.5
% Cost Burden >50%	55.3	66.4	76.7	59.4	60.5
Household Income (31% to 50% MFI)	8,775	4,260	2,270	2,096	17,401
% with any housing problems	54.0	81.1	93.2	79.4	68.8
% Cost Burden >30%	53.5	79.6	82.5	78.9	66.7
% Cost Burden >50%	33.3	56.8	42.7	58.7	43.3
Household Income (51 to 80% MFI)	12,874	12,205	5,244	6,017	36,340
% with any housing problems	41.8	70.5	82.1	71.2	62.1
% Cost Burden >30%	41.6	67.4	56.0	71.0	57.2
% Cost Burden >50%	15.1	20.4	9.2	27.7	18.1
Total Households	65,508	115,244	32,769	41,163	254,684
% with any housing problems	29.6	26.9	47.3	35.6	31.6

Note: Excludes Henderson and Las Vegas
Source: HUD CHAS Data Books, 2003

Figure 10. North Las Vegas Cost Burden by Household Type, Income and Housing Problem, 2000

Household by Type, Income, & Housing Problem	Renters				
	Elderly	Small Families	Large Families	All Other	Total Renters
Household Income (0 to 30% MFI)	188	1,095	598	460	2,341
% with any housing problems	61.2	77.2	97.7	73.9	80.5
% Cost Burden >30%	61.2	72.6	83.4	73.9	74.7
% Cost Burden >50%	45.2	58.4	61	58.7	58.1
Household Income (31% to 50% MFI)	89	780	540	184	1,593
% with any housing problems	60.7	85.9	94.4	87	87.5
% Cost Burden >30%	60.7	74.4	52.8	87	67.7
% Cost Burden >50%	28.1	24.4	10.2	29.9	20.4
Household Income (51 to 80% MFI)	81	1,035	775	418	2,309
% with any housing problems	59.3	54.1	85.8	51	64.4
% Cost Burden >30%	54.3	37.2	12.9	44	30.9
% Cost Burden >50%	12.3	2.9	1.3	6	3.2
Total Households	125	1,805	995	935	3,860
% with any housing problems	8	21.6	63.8	17.6	31.1
Household by Type, Income, & Housing Problem	Owners				
	Elderly	Small Families	Large Families	All Other	Total Owners
Household Income (0 to 30% MFI)	375	357	182	354	1,268
% with any housing problems	64	79	92.3	56.2	70.1
% Cost Burden >30%	64	73.4	73.6	56.2	65.9
% Cost Burden >50%	50.7	68.3	71.4	52	59
Household Income (31% to 50% MFI)	423	575	498	179	1,675
% with any housing problems	55.3	82.6	94	88.8	79.8
% Cost Burden >30%	55.3	82.6	77.9	88.8	75
% Cost Burden >50%	38.8	53.9	27.9	58.7	42.9
Household Income (51 to 80% MFI)	604	1,614	1,090	549	3,857
% with any housing problems	52	75.2	84.9	76.3	74.5
% Cost Burden >30%	52	72.1	48.6	75.6	62.8
% Cost Burden >50%	20.5	21.4	4.6	22.8	16.7
Total Households	1,780	9,770	3,105	2,374	17,029
% with any housing problems	18.8	18.8	34.5	28.6	23

Source: HUD CHAS Data Books, 2003

Overcrowding

Overcrowding is an indicator of unaffordable housing. Unit overcrowding typically results from the combined effect of low earnings and high housing costs in a community, and reflects the inability of household to buy or rent housing that provides a reasonable level of privacy and space.

Figure 11. HCP Consortium Percent of Overcrowded Households, 2000

Income Groups	Owners		Renters	
	Households	percent of all owner households	Households	percent of all renter households
Extremely Low Income (0-30% MFI)	685	.3	5,180	2.7
Low Income (31-50% MFI)	1,635	.6	6,010	3.2
Moderate Income (51-80% MFI)	3,425	1.3	7,765	4.1
Total	6,975	2.2	18,955	10

Source: US Census, July 2003 HUD Special Tabulation Data Tables A3A & A3B.

An overcrowded housing unit is defined as a unit with more than one person per room, excluding bathrooms, kitchens, hallways, and porches. As indicated by the 2000 Census, approximately 5.6 percent of low- and moderate-income households were overcrowded in Clark County. Severely overcrowded households are households with more than 1.5 persons per room. In 2000, about 6.6 percent or 13,260 low- and moderate-income households were severely overcrowded. While there is no new data available, anecdotal information on household size, many families are moving in together as the economic situation worsens in Clark County and unemployment increases. This will lead to more overcrowded households than indicated by the 2000 Census figures.

In addition to the strain on families, overcrowding may also result in increased traffic within a neighborhood, accelerated deterioration of homes and infrastructure, and a shortage of on-site and off-site parking. The prevalence of overcrowding varies significantly by the income, type and size of the household. Generally, very low- and low-income households and large families are disproportionately affected by overcrowding. Overcrowding is also generally more prevalent among renters than owners.

Large families are defined as: *any family with five or more members*, by the U.S. Department of Housing and Urban Development. Meeting the housing needs of large families is made particularly difficult because market forces provide a strong incentive to produce multiple dwelling units, which have a larger number of one- and two-bedroom units and fewer three- and four-bedroom units. These forces include generally shrinking household sizes and high land costs which creates a tendency on the part of developers to maximize the number of units, in part by building a larger number of smaller units. Larger units would mean fewer units in the same amount of space. In addition, older houses often have only two bedrooms. These units are being rehabilitated with increasing frequency rather than being replaced with newer units. Consequently, the larger houses with three-or-more bedrooms continue to be available primarily in planned, suburban communities, which are farther from the employment center and tend to be more expensive. Additionally, of the total large, low-income, renter households, in Clark County, approximately 60 percent overpay for rental housing.

The same market forces, which act as a disincentive for the private sector to provide housing for large families also make it difficult for the public sector to provide adequate housing for large families. Housing must compete with a variety of other legitimate needs for limited public funds. Evidence of the extent of the problem is found in the significant number of large families on the waiting list for Section 8 vouchers and the long waiting lists for three-bedroom units in the public housing program.

Substandard Housing Units

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

A strong indicator of the structural condition of a community’s housing stock is the age of existing housing. Because most of the growth in the jurisdictions of the HCP Consortium Area has taken place since 1960, most of the housing stock has been constructed since that time. The housing units that were constructed before 1960 have a higher probability of exhibiting substandard housing conditions. The Consortium contains approximately 13,500 housing units constructed before 1960.

However, despite the relatively recent construction of housing, many lower-income households are living in substandard housing conditions. Most dwelling units in substandard condition are rental units. Figure 12 provides the number of housing units that are severely substandard, meaning they lack complete plumbing or kitchen facilities.

The next two tables present Census 2000 data regarding the age of occupied housing units in the HCP Consortium Area. The

data is categorized by households with extremely low-incomes, low-incomes, and all other-incomes.

- The housing inventory in the City of North Las Vegas is older than the inventory in Unincorporated Clark County. While only 1.7 percent (1,902 units) of the Unincorporated County housing stock was built before 1959, 7.1 percent (1,674 units) of the housing in North Las Vegas was built during that period.
- While Boulder City has the highest percentage of units built prior to 1959, these older units are not primarily owned by low- income households (9 percent) as compared to Clark County (20 percent) and North Las Vegas (27 percent).

Figure 12. HCP Consortium Severely Substandard Occupied Households, 2000

Jurisdiction	Lacking complete plumbing or kitchen facilities					
	Renter			Owner		
	0-30%	31-50%	51-80%	0-30%	31-50%	51-80%
Clark County	384	339	174	64	24	90
North Las Vegas	80	30	25	25	10	40
Boulder City	0	4	0	0	0	0
Mesquite	0	0	4	0	0	0
Consortium Area	463.7	403.5	253.2	88.7	64.5	180.2

Source: Census 2000, July 2003 HUD Special Tabulation Data, Table A3A & A3B

- Extremely low-income or low-income owner households occupied 10.5 percent (4,361 units) of the existing housing stock in the HCP Consortium Area (in 2000), built between 1960 and 1979.

Figure 13. Age of Owner Occupied Housing Units Low and Moderate Income Groups

Jurisdiction/Income Level	Time Period Built				Total
	Pre-1949	1950 – 1959	1960 – 1979	1980-2000	
Unincorporated County					
Extremely Low (30% or below)	104	165	2,833	3,542	6,644
Low (50% or below)	48	65	479	4,556	5,148
All Other	433	1,087	31,795	66,403	99,718
Subtotal	585	1,317	35,107	74,501	111,510
North Las Vegas					
Extremely Low (30% or below)	24	95	585	570	1274
Low (50% or below)	105	235	325	660	1325
All Other	235	980	3,770	15,910	20,895
Subtotal	364	1310	4,680	17,140	23,494
Boulder City					
Extremely Low (30% or below)	4	0	120	95	219
Low (50% or below)	30	25	15	110	180
All Other	465	115	1,580	2,120	4,280
Subtotal	499	140	1,715	2,325	4,679
Mesquite					
Extremely Low (30% or below)	0	0	4	115	119
Low (50% or below)	0	0	0	125	125
All Other	20	0	50	2,005	2,075
Subtotal	20	0	54	2,245	2,319

Source: Census 2000, July 2003 HUD Special Tabulation Data, Table A14A

Figure 14. Age of Renter Occupied Housing Units for Low and Moderate Income Groups

Jurisdiction/Income Level	Time Period Built				Total
	Pre-1949	1950 – 1959	1960 – 1979	1980-2000	
Unincorporated County					
Extremely Low (30% or below)	249	710	5,759	8,193	14,911
Low (50% or below)	138	723	5,648	8,344	14,853
All Other	613	2,095	20,614	48,628	71,950
Subtotal	1,000	3,528	32,021	65,165	101,714
North Las Vegas					
Extremely Low (30% or below)	49	210	1,235	860	2,354
Low (50% or below)	25	185	805	590	1,605
All Other	550	575	2,220	3,290	6,635
Subtotal	624	970	4,260	4,740	10,594
Boulder City					
Extremely Low (30% or below)	55	14	85	115	269
Low (50% or below)	35	14	64	60	173
All Other	1,150	65	385	380	1,980
Subtotal	1,240	93	534	555	2,422
Mesquite					
Extremely Low (30% or below)	10	10	10	135	165
Low (50% or below)	4	10	40	180	234
All Other	1,920	15	29	795	2,759
Subtotal	1,934	35	79	1,110	3,158

Source: Census 2000, July 2003 HUD Special Tabulation Data, Table A14B

Disproportionate Needs of Racial and Ethnic Groups

A difference of 10 percent or more of housing problems between the total population and minority groups indicates a disproportionate need of a minority group. The summary of housing problems by race and ethnicity are presented below for the Clark County HOME Consortium. The housing problems by race and ethnicity for the City of North Las Vegas is also provided for informational and comparison purposes.

Based on Figure 15 and 16, minority owner households are more likely to have disproportionately higher level of housing problems than minority renter households. However, renter households overall have more housing problems, no matter what race or ethnicity.

Figure 15. Clark County HOME Consortium Housing Problems by Race and Ethnicity, 2000

Household Type	Housing Problem	Income Category		
		Ex. Low 0 – 30%	Low 31 – 50%	Mod. 51 – 80%
All Owner	Any Housing Problem	72.2%	68.8%	62.1%
White Owner	Any Housing Problem	71.5%	62.4%	56.6%
Black Owner	Any Housing Problem	69.2%	79.9%	69.3 %
Hispanic Owner	Any Housing Problem	81.4%	88.4%	78.3%
Asian Owner	Any Housing Problem	63.4%	71.9%	72.7%
Pacific Is. Owner	Any Housing Problem	0.0%	100%	83.9%
Native Am. Owner	Any Housing Problem	87.2%	86.7%	30.0%
All Renter	Any Housing Problem	77.9%	89.6%	62.6%
White Renter	Any Housing Problem	77.2%	87.9%	62.1%
Black Renter	Any Housing Problem	76.3%	88.7%	60.1%
Hispanic Renter	Any Housing Problem	84.2%	92.2%	65.3%
Asian Renter	Any Housing Problem	67.4%	93.9%	64.5%
Pacific Is. Renter	Any Housing Problem	57.6%	100%	72.1%
Native Am. Renter	Any Housing Problem	58.7%	90.8%	68.6%

Source: SOCDs Chas Data

Figure 16. North Las Vegas Housing Problems by Race and Ethnicity, 2000

Household Type	Housing Problem	Income Category		
		Ex. Low 0 - 30%	Low 31 - 50%	Mod. 51 – 80%
All Owner	Any Housing Problem	72.8	69.2	64.5
White Owner	Any Housing Problem	72.2	67.9	74.4
Black Owner	Any Housing Problem	52.8	80.7	69.8
Hispanic Owner	Any Housing Problem	84.8	85.9	76.4
All Renter	Any Housing Problem	76.0	89.4	63.3
White Renter	Any Housing Problem	70.5	91.1	63.4
Black Renter	Any Housing Problem	76.4	88.9	56.9
Hispanic Renter	Any Housing Problem	87.8	85.9	68.7

Source: SOCDs Chas Data

Special Needs

The special needs population includes elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents. Self-sufficiency is not a realistic goal for certain segments of the special needs population due to age and/or need for services. This sub-section estimates, to the extent feasible, the number of persons within each special needs group requiring supportive housing and describes their supportive housing needs. It also assesses the needs of low-income families in assisted housing for programs that promote economic independence and self-sufficiency. Data for this section is derived from State plans, reports and information from service providers. Some data is also derived from the *Nevada Special Needs Housing Assessment* which is available at nvhousing.state.nv.us/pr/Special%20Needs%20Report.pdf.

Clark County has developed and maintains an affordable housing list, which is provided to non-profit organizations, the management of the affordable properties and citizens. This list is updated as new affordable properties are completed and is provided to clients of service agencies to assist them in their search for affordable rental housing. The list identifies any units that are set-aside for special needs populations and is available through Clark County's website.

Elderly and Frail Elderly

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

Figure 17. HCP Consortium Elderly Households by Income and Tenure

Tenure	Very Low-Income (30% or below AMI)		Low-Income (31-50% of AMI)		Other (51% or above AMI)		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Renter	6,981	55	5,757	40	13,623	21	26,361	29
Owner	5,800	45	8,775	60	50,933	79	65,508	71
Totals	12,781	100	14,532	100	64,556	100	91,869	100
Percent	14		16		70		100	

Source: 2000 Census CHAS Data Books

For the past two decades, Nevada has had the highest population growth rate in the nation, with the exception of 2006, when Nevada ranked second. Nevada recaptured its rank of highest in growth rate in 2007. USA Today analysts reviewed Census data, and in 2007 reported that Nevada will have a 264 percent increase in persons age 65 and older between 2000 and 2030, the highest senior growth rate in the nation.

Reasons for this growth in Nevada's senior population are attributed to issues such as in-migration of retirees, aging of the existing population, and the out-migration of younger people, especially in rural environments.

While these reasons vary, the impact of the senior population is multi-faceted, affecting all aspects of Nevada communities. This population change will impact transportation needs, housing requirements, workforce pools and healthcare costs to name a few.

Nevada is ranked 36th in the nation, with 38.7 percent of Nevadans age 65 and older having a disability (U.S. Census Bureau 2006 American Community Survey). Of the 214,065 non-institutionalized Nevadans, age 65 and older, 40.5 percent or 86,816 self identify as having a disability (Census 2000). These disabilities are self reported in the following categories: sensory, physical, mental, self-care and or homebound.

The Nevada Division for Aging Services estimates the percentage of frailty among the total elderly population at approximately 5 percent among those ages 60 to 85, and 25 percent of those over 85. Based upon the percentage of elderly from the 2000 Census data that were 60 to 85, and over 85, a total of 10,191 frail elderly can be calculated in Clark County.

As illustrated in Figure 17, there were 91,869 elderly households in the HCP Consortium Area in 2000. Applying the 5 percent as above, of the 27,313 households that are extremely low and low income, approximately 1,366 frail elderly need assisted supportive housing. As these figures are based upon 2000 Census data and the population of older Nevadans has continued to increase substantially in the intervening year, it can be assumed that the number of low income frail elderly needing assisted supportive housing is actually much higher.

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

Southern Nevada has little alternative housing in place to bridge the gap between fully independent living and nursing homes. While many assisted living facilities are being built in Southern Nevada, they are not generally affordable to low-income seniors and there are very few programs that will bridge the cost between the elder's income and the cost of an assisted living facility. Fortunately, one affordable assisted senior housing development, Silver Sky, has been constructed and a second facility is under development. However, while these two developments are helpful, the need continues to outstrip the supply.

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

Supportive services needed by the *non-frail* elderly also range widely, from transportation and homemaking services to medical care. With a growing elderly population in general, many thousands more non-frail elderly in Southern Nevada could be in need of assisted supportive living. Options to provide this housing include shared housing arrangements, accessory units within single-family homes,

and construction or rehabilitation of multi-family assisted living units. Case managers should also be used to link existing housing and services, thus making more efficient use of current resources.

Nevada's State Plan: Services for Nevada's Elders, which covers the period October 1, 2008 to September 30, 2012, is the blueprint for services to be provided through the Division for Aging Services. This plan outlines the Division's strategy for meeting the needs of Nevada's seniors. It specifically addresses the Division's target populations: at-risk older persons, those with the greatest economic and social needs, particularly frail, low-income, minority individuals and those living in rural areas. The State Plan: Services for Nevada's Elders 2008-2012 is available at www.nvaging.net/sp/state_plan.htm.

Severely Mentally Ill

Severely Mentally Ill (SMI) persons are defined as people with a serious and persistent mental or emotional impairment that significantly limits their ability to live independently. According to the Nevada *Division of Mental Health and Developmental Services (MHDS) 2008 Needs Assessment*, there are 653,829 people in need of mental health services in the state of Nevada. This did not include 15 percent of all adults who have a co-occurring disorder of mental health and substance abuse. As 72 percent of the state's population lives in Southern Nevada, it is estimated that 470,757 people in Clark County are in need of mental health services.

According to the *Community Mental Health Services (CMHS) Block Grant Application for FY 2010*, approximately 112,276 adults in Nevada are projected to have a severe mental illness (SMI). Using the percentages above, approximately 80,838 people in Southern Nevada suffer from a severe mental illness, and 35,136 (1.8 percent of the Southern Nevada population) are dysfunctional and in need of supportive housing and services. The CMHS Block Grant Application can be viewed in its entirety at: http://mhds.nv.gov/index.php?option=com_content&task=view&id=21&Itemid=22

Southern Nevada Adult Mental Health estimates that at least half of the SMI rely on Social Security Supplemental Security Income (SSI) as their only source of income. Since the average SSI for a person living independently averages only \$600 per month, it is estimated that at least 17,500 SMI persons are extremely low-income and need supportive housing.

Developmentally Disabled

National incidence rates suggest that the population of people with developmental disabilities in Southern Nevada is around 19,400. This plan uses the estimate based on national incidence rates, since it is the most widely agreed upon by service providers. Desert Regional Center (DRC) is the State of Nevada operated regional center located in the Las Vegas area and serving Clark, and parts of Lincoln and Nye counties. DRC supports over 3,300 people with intellectual disabilities and related conditions in their efforts to live, work, and recreate in the community.

While some developmentally disabled are only mildly developmentally delayed and can function independently, others require ongoing training and care by service providers. This latter group requires supportive services. The most severely developmentally disabled require an intensive care facility, but most can and do live in semi-independent supportive living arrangements such as foster family care, group homes or with other family members. Social Security SSI is the only source of income for a majority of those able to live in semi-independent living arrangements. Since SSI pays an average of \$600 per month, these persons would be considered extremely low-income and thus need assisted housing.

Physically Disabled

The physically disabled have an illness or impairment that impedes their ability to function independently. The 2000 Census identified 36,769 low- and moderate-income households in the Clark County HOME Consortium with self-care limitations. This data is not available by type of disability. Despite its limitations, this is the only data available to estimate the number of physically disabled people in Southern Nevada.

The SNRHA provides accessible units for the physically disabled who are impeded in their ability to function independently. There are multiple family housing units accessible to the physically disabled within the Consortium. However, these units are offered at market rate rents unlike those provided by the Housing Authorities, which are rented at affordable rates. As of March 2010, there were 1,658 disabled persons on the waiting lists for these public housing facilities. However it should be noted that there may be unidentified need for units as these waiting lists are frozen and are not taking any additional applications.

Persons with Alcohol/Other Drug Addictions (AODA)

In terms of substance abuse, Nevada has one of the nation's highest percentages of population reporting past-month use of illicit drugs. However, Nevada's rankings with respect to substance abuse have improved markedly since 1999. In that year the State was ranked 1st in past-month use of illicit drugs (now 5th), 1st in illicit drug dependence (now 30th) and 8th in past-month binge alcohol use (now 47th).

In order to identify the approximate population of alcohol and other drug abuse cases in Clark County, the Substance Abuse Prevention and Treatment Agency (SAPTA) for the State of Nevada used the 2009 Population Estimate compared to the 2005-2006 National Survey on Drug Use and Health (NSDUH), percentages from the Substance Abuse and Mental Health Services Administration, Office of Applied Studies. Using this methodology, there are 161,194 alcohol and other drug addicted Nevada residents. As Southern Nevada encompasses 72 percent of the state population, it is estimated that there are 116,060 AODA residents in Clark County. SAPTA estimates that only one in six people will seek treatment. Therefore, it is estimated that there may be as many as 19,343 Clark County AODA residents who may be in need of treatment services. If only half of those people (9,672) need housing with supportive services, there is a substantial gap between those in need and the number of beds available. There are only 382 beds available for in-patient treatment through non-profit organizations. There are several additional in-patient facilities but they are not counted here as they would not be considered affordable for low and moderate income AODA residents.

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

HIV/AIDS

According to the Nevada State Health Division (SNHD) HIV/AIDS reporting system, at the end of 2009 there were 8,881 people known to be living with HIV/AIDS in the Las Vegas Therapeutic Goods Administration (TGA), which encompasses Clark County and Nye County, Nevada and Mohave County, Arizona. That same year 245 new cases of HIV were reported and 245 new cases of AIDS.

Housing Opportunity for Persons with AIDS (HOPWA) funds leverage other resources, including programs involving housing, health care, and supportive services for persons with HIV/AIDS and their

families through the Ryan White program and other Federal, State, local and private sources. The City of Las Vegas requires that HOPWA service providers leverage other resources and coordinate their activities with other services providers to avoid duplication of services.

Public Housing Residents

In an effort to move public housing residents up the economic scale, the SNRHA participates in the Family Self Sufficiency (FSS) Program. Under this program, public housing residents and Section 8-Housing Choice Voucher participants are provided the means, through the coordination of public and private resources and supportive services, to becoming economically independent and self-sufficient. Supportive services required to achieve self-sufficiency are based on individual family needs and may include child care, transportation, education, job training, preparation, and counseling, substance/alcohol abuse treatment and counseling, life skills training and homeownership counseling. Thousands remain on the Section 8-Housing Choice Voucher (HCV) and Public Housing waiting lists. For a full understanding of public housing resident and HCV participant needs and programs see the 5-year plan of the SNRHA, available through that organization. For specific information on the number of public housing units, etc. please see the Market Analysis in this document.

Priority Housing Needs (91.215 (b))

Housing Priorities for HCP Consortium

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

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

The HCP Consortium has based its strategic plan on the HUD 2000 Census Data, updated reports and surveys regarding housing sales and development, comments from citizen participation meetings, and surveys of housing providers. In some cases, updated reports and/or studies affected the priority designation due to changes, for example, in housing market conditions since the 2000 Census.

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

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

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

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

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

Figure 18. Clark County HOME Consortium Total Needs for Renter Households

Renter Households			
Income categories all family types			
Housing Problem	Ex. Low	Low	Mod
	0-30%	31-50%	51-80%
Cost Burden >30%<50%	2,803	13,951	19,010
Cost Burden >50%	20,125	9,664	2,014
Total Cost Burden	22,928	23,615	21,024
Affordable units	12,055	22,865	118,090
Underserved Need*	10,873	750	(97,066)
Total Overcrowded	5,180	6,010	7,765
3-bedroom Units	4,055	3,330	17,585
Underserved Need*	1,125	2,680	(9,820)
Owner Households			
Income categories all family types			
Housing Problem	Low	Mod	
	0-50%	51-80%	
Cost Burden >30%<50%	5,396	14,208	
Cost Burden >50%	15,522	6,583	
Total Cost Burden	20,918	20,791	
Affordable units	26,424	76,276	
Underserved Need*	(5,505)	(55,490)	
Total Overcrowded	2,320	3,425	
3-bedroom Units	11,795	54,090	
Underserved Need*	(9,475)	(50,665)	

Source: 2000 Census

*Underserved Need as noted within Figure 18 indicates the difference between the number of households affected by cost burden and the number of affordable housing units available to each income category. The total number of affordable units exceeds the number of households affected by cost burden in some income categories. The assumption is that while the units are available, the target income group does not occupy them. Therefore, in order to ensure that the appropriate target income group occupies affordable housing units, new and existing units receiving assistance will only be available to the intended target income group.

Figure 18A: HUD Table 2A – HCP Consortium Housing Needs

Housing Needs		Current % of Households	Current Number of Households	Goal	Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member		Disproportionate Racial/Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income HIV/AIDS Pop		
								% HSHLD	# HSHLD					
Household Income <=30% MFI	Renter	Elderly	NUMBER OF HOUSEHOLDS	100%	6,981				100%	10971	Y	6511	6949	
			Any housing problems	74.4	5,194	247	Y	Y	H, C	77.3	8481			
			Cost Burden > 30%	73.2	5,110		Y	Y	H, C					
			Cost Burden >50%	61.8	4,314		Y	Y	H, C					
		Small Related	NUMBER OF HOUSEHOLDS	100%	9,834							N		
			With Any Housing Problems	80.4	7,907	200	Y	Y	H, C					
			Cost Burden > 30%	76.2	7,494		Y	Y	H, C					
			Cost Burden >50%	67.8	6,667		Y	Y	H, C					
		Large Related	NUMBER OF HOUSEHOLDS	100%	3,376							N		
			With Any Housing Problems	94.7	3,197	50	Y	Y	H, C					
			Cost Burden > 30%	84.5	2,853		Y	Y	H, C					
			Cost Burden >50%	67.3	2,272		Y	Y	H, C					
	All other	NUMBER OF HOUSEHOLDS	100%	10,688							N			
		With Any Housing Problems	72.6	7,759	200	Y	Y	H, C						
		Cost Burden > 30%	69.9	7,471		Y	Y	H, C						
		Cost Burden >50%	64.3	6,872		Y	Y	H, C						
	Owner	Elderly	NUMBER OF HOUSEHOLDS	100%	5,800						N			
			With Any Housing Problems	72	4,176	10	Y	Y	H, C					
			Cost Burden > 30%	71.4	4,141		Y	Y	H, C					
			Cost Burden >50%	55.3	3,207		Y	Y	H, C					
		Small Related	NUMBER OF HOUSEHOLDS	100%	3,169							Y		
			With Any Housing Problems	74.3	2,355	10	Y	Y	H, C					
			Cost Burden > 30%	72.4	2,294		Y	Y	H, C					
			Cost Burden >50%	66.4	2,104		Y	Y	H, C					
		Large Related	NUMBER OF HOUSEHOLDS	100%	946							N		
			With Any Housing Problems	91.3	864	0	Y	Y	H, C					
			Cost Burden > 30%	81	766		Y	Y	H, C					
			Cost Burden >50%	76.7	726		Y	Y	H, C					
All other		NUMBER OF HOUSEHOLDS	100%	3,272							Y			
		With Any Housing Problems	65.2	2,133	0	Y	Y	H, C						
		Cost Burden > 30%	64.3	2,104		Y	Y	H, C						
		Cost Burden >50%	59.4	1,944		Y	Y	H, C						

Clark County

North Las Vegas

Boulder City

Mesquite

		Housing Needs				Current % of Households	Current Number of Households	Goal	Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member	Disproportionate Racial/Ethnic Need?	# of Households in lead-Hazard Housing	Total Low Income HIV/AIDS Pop
Household Income > 30 to <= 50% MFI	Renter	Elderly	NUMBER OF HOUSEHOLDS	100%	5,757							100%	10526	N	5047
			With Any Housing Problems	83.8	4,824	990	H	Y	H, C	74.4	7831				
			Cost Burden > 30%	82.4	4,744		H	Y	H, C						
			Cost Burden >50%	44.4	2,556		H	Y	H, C						
		Small Related	NUMBER OF HOUSEHOLDS	100%	9,894									N	
			With Any Housing Problems	90.4	8,944	400	H	Y	H, C						
			Cost Burden > 30%	85.5	8,459		H	Y	H, C						
			Cost Burden >50%	29	2,869		H	Y	H, C						
		Large Related	NUMBER OF HOUSEHOLDS	100%	4,135									N	
			With Any Housing Problems	92.2	3,812	40	H	Y	H, C						
			Cost Burden > 30%	61.9	2,560		H	Y	H, C						
			Cost Burden >50%	14.5	600		H	Y	H, C						
	All other	NUMBER OF HOUSEHOLDS	100%	8,705									N		
		With Any Housing Problems	91.2	7,939	0	H	Y	H, C							
		Cost Burden > 30%	90.2	7,852		H	Y	H, C							
		Cost Burden >50%	41.8	3,639		H	Y	H, C							
	Owner	Elderly	NUMBER OF HOUSEHOLDS	100%	8,775								N		
			With Any Housing Problems	54	4,739	5	H	Y	H, C						
			Cost Burden > 30%	53.5	4,695		H	Y	H, C						
			Cost Burden >50%	33.3	2,922		H	Y	H, C						
		Small Related	NUMBER OF HOUSEHOLDS	100%	4,260									Y	
			With Any Housing Problems	81.1	3,455	25	H	Y	H, C						
			Cost Burden > 30%	79.6	3,391		H	Y	H, C						
			Cost Burden >50%	56.8	2,420		H	Y	H, C						
		Large Related	NUMBER OF HOUSEHOLDS	100%	2,270									N	
			With Any Housing Problems	93.2	2,116	10	H	Y	H, C						
			Cost Burden > 30%	82.5	1,873		H	Y	H, C						
			Cost Burden >50%	42.7	969		H	Y	H, C						
All other		NUMBER OF HOUSEHOLDS	100%	2,096									Y		
		With Any Housing Problems	79.4	1,664	0	H	Y	H, C							
		Cost Burden > 30%	78.9	1,654		H	Y	H, C							
		Cost Burden >50%	58.7	1,230		H	Y	H, C						0	

Clark County

North Las Vegas

Boulder City

Mesquite

		Housing Needs				Current % of Households	Current Number of Households	Goal	Priority Need?	Plan to Fund?	Fund Source	Households with a Disabled Member	Disproportionate Racial/Ethnic Need?	# of Households in lead-Hazardous Housing	Total Low Income HIV/AIDS Pop
Household Income >50 to <=80% MFI	Renter	Elderly	NUMBER OF HOUSEHOLDS	100%	5,906							100%	15272	N	6511
			With Any Housing Problems	60.7	3,585	300	M	Y	H, C	55.1	8415				
			Cost Burden > 30%	59.2	3,496		M	Y	H, C						
			Cost Burden >50%	9	532		M	Y	H, C						
		Small Related	NUMBER OF HOUSEHOLDS	100%	17,091									Y	
			With Any Housing Problems	58.6	10,015	200	M	Y	H, C						
			Cost Burden > 30%	43.9	7,503		M	Y	H, C						
			Cost Burden >50%	2.9	496		M	Y	H, C						
		Large Related	NUMBER OF HOUSEHOLDS	100%	5,549									N	
			With Any Housing Problems	84.5	4,689	44	M	Y	H, C						
			Cost Burden > 30%	20.3	1,126		M	Y	H, C						
			Cost Burden >50%	0.9	50		M	Y	H, C						
	All other	NUMBER OF HOUSEHOLDS	100%	15,862									N		
		With Any Housing Problems	59.8	9,485	0	M	Y	H, C							
		Cost Burden > 30%	56.1	8,899		M	Y	H, C							
		Cost Burden >50%	5.9	936		M	Y	H, C							
	Owner	Elderly	NUMBER OF HOUSEHOLDS	100%	12,874								Y		
			With Any Housing Problems	41.8	5,381	10	H	Y	H, C						
			Cost Burden > 30%	41.6	5,356		H	Y	H, C						
			Cost Burden >50%	15.1	1,944		H	Y	H, C						
		Small Related	NUMBER OF HOUSEHOLDS	100%	12,205									N	
			With Any Housing Problems	70.5	8,605	225	M	Y	H, C						
			Cost Burden > 30%	67.4	8,226		M	Y	H, C						
			Cost Burden >50%	20.4	2,490		M	Y	H, C						
		Large Related	NUMBER OF HOUSEHOLDS	100%	5,244									N	
			With Any Housing Problems	82.1	4,305	15	M	Y	H, C						
			Cost Burden > 30%	56	2,937		M	Y	H, C						
			Cost Burden >50%	9.2	482		M	Y	H, C						
All other		NUMBER OF HOUSEHOLDS	100%	6,017									N		
		With Any Housing Problems	71.2	4,284	5	M	Y	H, C							
		Cost Burden > 30%	71	4,272		M	Y	H, C							
		Cost Burden >50%	27.7	1,667		M	Y	H, C							

Clark County

North Las Vegas

Boulder City

Mesquite

	Total Any Housing Problem			2986		Total Disabled	24,727		
	Total 215 Renter			2671	Tot. Elderly	92,390		Total Lead Hazard	18069
	Total 215 Owner			315	Tot. Sm. Related	95,693		Total Renters	176,721
	Total 215			2986	Tot. Lg. Related	36,196		Total Owners	107,889

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

- High Priority:**
1. Extremely low-income and low-income renter households (50 percent AMI and below)
 2. Persons with special needs (elderly, frail elderly, severely mentally ill, developmentally disabled, physically disabled, persons with alcohol/other drug additions, HIV/AIDS, and public housing residents)
 3. Existing low- and moderate-income owner households
 4. Low- and moderate-income first-time homebuyers

H-1: There were 22,928 extremely low-income renter households that experienced a cost burden in 2000 with only 12,055 units affordable to this income level. Overcrowding was also an issue for 5,180 extremely low-income families. While there are larger units in the market, they are simply not affordable to low-income large families. While Figure 18 indicates that low-income renters have far more affordable units to choose from, with a need for only 750 more units, this is understated. Not all units affordable to people at this income are occupied by people at this income level. Assuming that persons at a higher income occupy 50 percent of the units, 11,433 additional units are needed. Further, based on the size of units, there are plenty of affordable 1-bedroom units, but 2- and 3-bedroom units are not affordable to this group in the current market.

H-2: Almost half of the severely cost-burdened households in the HCP Consortium Area were considered to have extremely low-incomes in 2000. Within this subgroup of extremely low-income households, 65 percent of existing homeowners are severely cost-burdened. Assisting this group in maintaining their homes will reduce the threat of homelessness for these families and preserve affordable housing for future generations, helping keep neighborhoods livable. Over 7,500 low-income homeowner families experienced a severe housing cost burden in 2000 and over 11,000 low-income owner households were cost-burdened. The HCP Consortium's jurisdictions want to maintain those households that currently own their own home whenever possible. While housing rehabilitation for moderate-income households is not as high a priority as for extremely low- and low-income households, it is still an important aspect of maintaining viable neighborhoods and reducing blight. Therefore, the HCP Consortium may also provide housing rehabilitation to moderate-income existing owner households.

H-3: Persons with special needs include the elderly, frail elderly, persons living with HIV/AIDS, and the developmentally, physically and mentally disabled. The need for supportive housing units for this population remains very high. There are 25,042 low- and moderate-income disabled households with only 17,510 special needs designated affordable units available in the market. The impediments to construction of special needs housing are many, including the need to subsidize the rents, the cost of supportive services or on-site assistance, and all the other development costs faced by private market developers.

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

to low-income households in a very structured and supportive program, are successful and will continue to support those types of activities.

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

Medium Priority: **1.** Moderate-income renter households

M-1: Due to the large number of extremely low- and low-income households with severe housing cost burdens in the Clark County HOME Consortium Area, the Consortium places more of an emphasis on lower-income groups than specifically on moderate-income renter households. However, the households at the lower end of the moderate-income range experience similar difficulties in finding housing as those at 50 percent of AMI. Therefore, the Clark County HOME Consortium will support projects that target renters at 60 percent of AMI and below.

Obstacles to Meeting Underserved Needs

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

Over the past 20 years, rapid population growth increased the demand for housing and land upon which to build, and created an ever increasing upward spiral in housing costs. This ended in 2007 when the housing bubble burst and prices have steadily decreased in the intervening years. As vacancy rates rise, the cost of housing and land has decreased to the point that prices are nearing those of the late 1990’s and early 2000. Home purchase prices have once again decreased to a point that a family with a middle income can afford to purchase a home. This brings homeownership within reach for many moderate to low income families if they are provided with downpayment and closing costs assistance. Unfortunately, the current state of the credit market may preclude families with less than perfect credit from taking advantage of the current conditions to become homeowners.

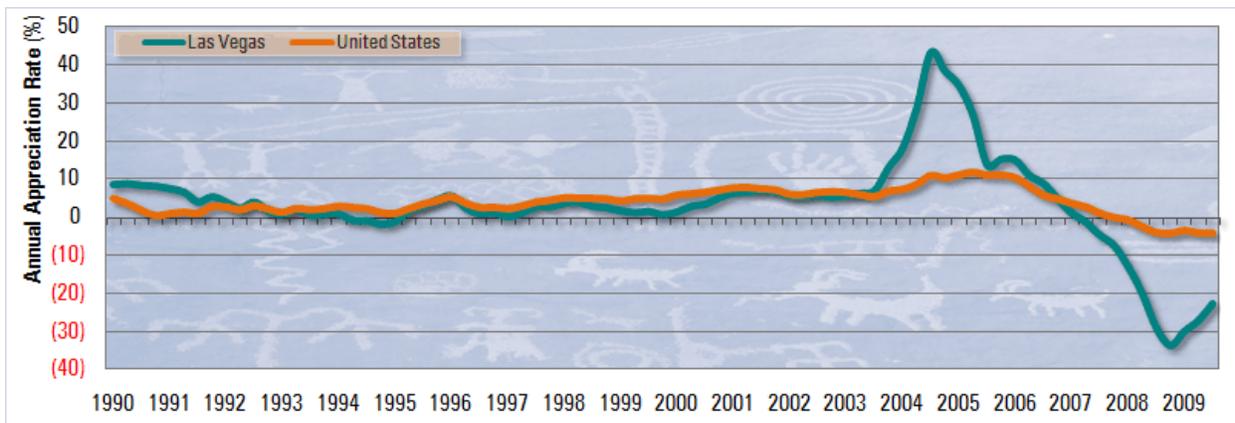
Housing Market Analysis (91.210)

General Market Characteristics

The Clark County Monitoring Program, which is maintained by Applied Analysis, Inc., indicates that in the years leading up to the current recessionary period, southern Nevada grew by leaps and bounds within and beyond the valley’s core tourism industry. For those looking in from the outside, it is difficult to understand what decades of 5.5-percent annual growth has entailed. Thirty years ago, the Las Vegas market was home to 400,000 full-time residents. That number has increased five-fold through 2009, as Las Vegas currently maintains a population base of approximately 2.0 million people.

While primary reasons for business relocations and expansions into the Valley have included southern Nevada’s favorable tax climate, relative housing affordability, quality of life considerations, and financial benefits associated with business activity, population growth itself has been driven largely by employment growth. In recent years, softened consumer demand in goods and services, especially at the disposable level, put southern Nevada economic and fiscal conditions on a downward spiral. This resulted in sluggish financial performance measures in the region’s main economic sectors, forcing local employment growth into negative territory thus making in-migration at the household level less attractive.

Figure 19: Housing Price Appreciation Index



Source: Applied Analysis, Inc. March 2010

Recessionary Market Conditions

The construction industry in Clark County is facing economic challenges which make residential construction less profitable. These challenges include low sales rates, inadequate revenues, and limited access to credit. There is an expanding inventory of foreclosed homes within Clark County which has driven down home values significantly. The large number of pre-owned homes on the sales market crowd out the profitability of additional new home production. According to the Greater Las Vegas Association of Realtors, In January 2010, 21.1 percent of all existing homes sold here were short sales. Further, bank-owned homes accounted for 57.4 percent of all sales in January.

Multi-family home construction has been even harder hit. According to a HUD 2009 regional activity report, multi-family construction activity measured by units declined significantly. Based on preliminary data, during the twelve month time period between September 2008 and 2009, 18,650 multifamily units were permitted. This marks a 65 percent drop compared with the number permitted in the previous time period between September 2007 and 2008. Several home builder associations that would typically build

multi-family homes have gone bankrupt or merged. According to the Las Vegas Review Journal (LVRJ), at the end of the year 2008 there were 38 homebuilders in Southern Nevada as compared with 76 in 2006.

Meanwhile, there are new opportunities for affordable housing. The high home foreclosure rates have driven down the prices of homes making a home purchase attainable for those who previously would not be able to afford it before. Single family home rental rates have decreased and are affordable to more households, prompting many to leave their multifamily rental units, thus increasing vacancy rates to 10.4 percent in multifamily housing, according to the Nevada Housing Division Apartments Facts for Second Quarter 2009.

Ongoing monitoring of metrics for Clark County is undertaken through the Clark County Monitoring Program which can be accessed at: <http://www.monitoringprogram.com/demographics.htm>.

Housing Supply

According to Figure 20, in 2000 there were 294,125 housing units in the HCP Consortium. In 2009, there were an estimated 444,385 housing units in the HCP Consortium, a 51.1 percent increase in housing units from 2000. Mesquite had the greatest increase in housing units by percentage from 2000 to 2009 at 97.5 percent; North Las Vegas was second at 92.3 percent, followed by unincorporated Clark County at 44.7 percent, and Boulder City at 8.1 percent.

Figure 20: Number of Housing Units

Jurisdiction	1990	2000	2009	Percent Change 2000-2009
Unincorporated County	160,207	244,133	353,306	44.7
North Las Vegas	15,837	39,352	75,673	92.3
Boulder City	5,390	6,276	6,787	8.1
Mesquite	684	4,364	8,619	97.5
HCP Consortium	182,118	294,125	444,385	51.1

Sources: 1990 U.S. Census Data; Clark County Comprehensive Planning Southern Nevada Consensus Population Estimate, July 2000 & 2009

In 2009, Clark County had the greatest number of housing units at 353,306 or 79.5 percent of the HCP Consortium total. North Las Vegas had a total of 75,673 housing units or 17.0 percent of the total, followed by Mesquite at 1.9 percent and Boulder City at 1.5 percent.

Housing Age and Condition

Figure 21 indicates the age of housing stock within the Consortium by jurisdiction. Approximately two-thirds of the Consortium housing stock has been constructed since 1980. The housing stock is relatively new since rapid population growth did not occur until the 1980's and continued until 2008. Over half, 62.5 percent, of the entire Consortium housing stock was built from 1990 to date. Approximately 170,116

Figure 21. HCP Consortium Age of Housing Stock

Jurisdiction	Year Built Housing Units					
	Pre-1960	1960-1969	1970-1979	1980-1989	1990-1999	2000-2009
Clark County	6,048	18,481	58,300	62,986	81,829	125,537
North Las Vegas	4,287	5,176	4,095	2,440	20,129	39,546
Boulder City	1,383	493	1,853	1,541	968	549
Mesquite	180	23	33	308	3,588	4,484
HCP Consortium	10,098	24,173	64,281	67,275	106,516	170,116
Percentage	2.3	5.5	14.5	15.2	24.1	38.4

Source: Clark County Assessor Data, January 2009. Includes single family residences and condominiums

housing units were built in between 2000 and 2009.

Housing Tenure and Occupancy

Figure 22 indicates the tenure and occupancy percentages in the Consortium and the jurisdictions therein for 1990 and 2000. Owner occupied housing units increased from 51 percent to 57 percent while renter occupied housing units decreased from 49 percent to 43 percent.

Compared to the 2003 national homeownership average rate of 68.3 percent, only Boulder City and North Las Vegas have a higher homeownership rate than the national average. The Consortium homeownership rate of 57 percent is far below the national average. Clark County has the lowest homeownership rate at 54 percent. It is expected that once the new Census 2010 data becomes available, it will show that homeownership has decreased overall in Clark County due to the foreclosure crisis and economic recession.

Figure 22. Housing Tenure and Occupancy

Jurisdiction	1990			2000		
	Owner Percent	Renter Percent	Vacancy Percent	Owner Percent	Renter Percent	Vacancy Percent
Unincorporated County	50	50	10.2	54	46	9.9
North Las Vegas	50	50	9.0	70	30	7.1
Boulder City	74	26	7.3	76	24	8.5
Mesquite	48	52	12.9	64	36	21.3
HCP Consortium	55.5	44.5	9.9	66	34	11.7

Sources: U.S. Census Data 1990 & 2000

The majority of the housing supply has been developed to accommodate the owner market by a ratio of more than 1.5 to 1. According to the Nevada Housing Division 2nd quarter 2009 Apartment Facts survey, the vacancy rate for the Greater Las Vegas Valley increased to 10.4 percent in multifamily rental complexes, an increase of 2.8 percent from the second quarter 2008 point-in-time survey data. The vacancy rate is expected to continue its upward trend as single family homes are purchased by investors and rented out until the real estate market turns, when once again these units will be flipped to homebuyers. Until that time, many households are choosing to rent single family homes as opposed to apartments in multifamily complexes.

Affordability Analysis

Supply of Affordable Rental Units

Figure 23 indicates the number of Rental units affordable to households by income level and bedroom size for the Consortium and its jurisdictions in 2000. This data will be compared to the “Cost Burden” (30 percent), “Severe Cost Burden” (50 percent) and “Overcrowded” housing problems as listed within the Housing Needs Assessment section as one criterion for determining under-served housing needs or “gaps” identified within the Housing Strategic Plan.

In the Consortium, families with incomes below 30 percent of median family income (MFI) can afford:

- 7 percent of the affordable rental zero- to one-bedroom units
- 5 percent of the affordable rental two-bedroom units
- 16 percent of the affordable rental three-plus-bedroom units

In the Consortium, families with incomes between 31 and 50 percent of MFI can afford:

- 17 percent of the affordable rental zero- to one-bedroom units
- 11 percent of the affordable rental two-bedroom units
- 13 percent of the affordable rental three-plus-bedroom units

In the Consortium, families with incomes between 51 and 80 percent of MFI can afford:

- 76 percent of the affordable rental zero- to one-bedroom units
- 85 percent of the affordable rental two-bedroom units
- 71 percent of the affordable rental three-plus-bedroom units

Figure 23 indicates that the large majority of the affordable rental units in the Consortium are affordable to those with incomes between 51 and 80 percent of MFI. This shows the need for the production of more affordable rental units for those with incomes below 50 percent of MFI. There are more affordable zero- to one-bedroom units than any other type of affordable rental unit, primarily for those with incomes below 50 percent of MFI. This illustrates the need for the production of more affordable two- and three-plus bedroom rental units. These larger units would be in greater demand for families with children. While larger units exist in the housing market, these units are not generally affordable for lower income families.

Figure 23. Affordable Renter Units by Number of Bedrooms (BR)

Jurisdiction	0-1 BR Units			2 BR Units			3+ BR Units		
	0-30%	31-50%	51-80%	0-30%	31-50%	51-80%	0-30%	31-50%	51-80%
Unincorporated County	1,625	3,997	31,245	1,885	3,501	45,800	2,288	1,369	8,515
North Las Vegas	280	705	1,710	240	1,300	1,810	405	535	1,580
Boulder City	90	63	180	65	160	425	47	12	220
Mesquite	10	85	205	55	109	510	15	34	135
HCP Consortium	2,005	4,850	33,340	2,245	5,070	48,545	2,755	4,705	10,450

Source: 2000 HUD CHAS Data

The following analysis is by jurisdiction:

- Clark County has the greatest number of affordable rental units with a total of 100,225 affordable rental units. However, approximately 85 percent of the affordable rental units are only affordable to those with incomes between 51 and 80 percent of MFI. This is especially true for the two-bedroom units where the percentage is about 89 percent of the total.
- North Las Vegas has a total of 8,565 affordable rental units. Approximately 60 percent of the affordable rental units are affordable to those with incomes between 51 and 80 percent of MFI. There are 3,465 affordable rental units that are affordable to those with incomes below 50 percent of MFI.
- Boulder City has a total of 1,262 affordable rental units. Approximately 65 percent of the affordable rental units are affordable to those with incomes between 51 and 80 percent of MFI.
- Mesquite has a total of 1,158 affordable rental units. Approximately 73 percent of the affordable rental units are affordable to those with incomes between 51 and 80 percent of MFI.

Clark County

North Las Vegas

Boulder City

Mesquite

Renter Affordability Analysis

Affordability is defined as rent and utilities not costing more than 30 percent of a household's income. The average monthly apartment rental rate across all unit sizes for the Valley in 2009 was \$815. According to 2000 Census data all Extremely Low and Low income renter households reported a high percentage of Severe Cost Burden (housing costs exceeding 50 percent of household income). This severe cost burden is understandable through a comparison of Figure 24 and 25, which show that Extremely-Low income households cannot afford to rent even a Studio apartment at the "Average" market rate. For example, the "Average" Studio apartment in Clark County rents for \$580, yet this is only considered marginally affordable to an extremely low-income household of 6 persons. One, two and three bedroom apartments are well outside the affordable range of Extremely Low-income households regardless of family size.

Figure 24. Maximum Affordable² Rent by Income and Household Size

Income Level ³	Number of Persons in Household							
	1	2	3	4	5	6	7	8
Extremely Low (30%)	\$343	\$393	\$441	\$490	\$529	\$569	\$608	\$646
Low (50%)	\$573	\$654	\$736	\$818	\$883	\$949	\$1,014	\$1,079
Moderate (80%)	\$917	\$1,046	\$1,176	\$1,308	\$1,413	\$1,516	\$1,646	\$1,726

1. Affordable = Housing Payment may not exceed 30% of Household Income

2. HUD Income levels based upon Clark County Median Family Income for 2004 by household size. Affordable rents are based upon 30% of monthly household income.

Source: 2009 HUD Income Limits by Household Size (shown below)

2009 HUD Income Limits	Household Size							
	1	2	3	4	5	6	7	8
Extremely Low (30%)	13700	15700	17650	19600	21150	22750	24300	25850
Low (50%)	22900	26150	29450	32700	35300	37950	40550	43150
Moderate (80%)	36660	41850	47050	52300	56500	60650	65850	69050

Low-income households can afford the average market rate for a 1-bedroom apartment, while 2- and 3-bedroom apartments remain outside the affordable range. A comparison of moderate-income households by family size with market rate rents shows that this income category is relatively well served by the market.

Figure 25. Mean Rental Rates by Apartment Sizes – Las Vegas Metropolitan Area

Year	Number of Bedrooms (BR)			
	Studio	1-BR	2-BR	3-BR
2001	\$459	\$588	\$714	\$884
2002	\$489	\$599	\$726	\$902
2003	\$499	\$607	\$733	\$909
2004	\$515	\$619	\$747	\$923
2005	\$533	\$655	\$795	\$963
2006	\$570	\$715	\$855	\$1,055
2007	\$598	\$753	\$899	\$1,097
2008	\$597	\$760	\$900	\$1,115
2009	\$580	\$727	\$869	\$1,082

Source: Nevada Housing Division, NHD Apartment Facts, Second Quarter 2009, Greater Las Vegas Valley.

Supply of Affordable Owner Units

Figure 26. Affordable Owner Units by Number of Bedrooms (BR)

Jurisdiction	0-1 BR Units		2 BR Units		3+ BR Units	
	0-50%	51-80%	0-50%	51-80%	0-50%	51-80%
Unincorp Clark County	501	2,144	9,396	10,008	6,521	22,165
North Las Vegas	364	523	598	1,049	1,905	7,050
Boulder City	130	10	389	250	90	325
Mesquite	19	4	32	278	49	350
HCP Consortium	1,014	2,681	10,415	11,585	8,565	29,890

Source: 2000 HUD CHAS Data

The following analysis is by jurisdiction:

- According to the HUD CHAS Data, Clark County has the greatest number of affordable owner units with a total of 50,735 affordable owner units. This is 79 percent of the total affordable owner units in the Consortium. Approximately 68 percent of the total affordable owner units are only affordable to those with incomes between 51 and 80 percent of MFI. Therefore, 32 percent of the total affordable owner units in Clark County are affordable to those with incomes below 50 percent of MFI.
- North Las Vegas has a total of 11,489 affordable owner units. This is 18 percent of the total affordable owner units in the Consortium. Approximately 75 percent of the affordable owner units are affordable to those with incomes between 51 and 80 percent of MFI. Approximately 25 percent of the total affordable owner units in North Las Vegas are affordable to those with incomes below 50 percent of MFI.
- Boulder City has a total of 1,194 affordable owner units. This is 1.9 percent of the total affordable owner units in the Consortium. Approximately 49 percent of the affordable owner units are affordable to those with incomes between 51 and 80 percent of MFI. Approximately 51 percent of the total affordable owner units in Boulder City are affordable to those with incomes below 50 percent of MFI.
- Mesquite has a total of 732 affordable owner units. This is 1.1 percent of the total affordable owner units in the Consortium. Approximately 86 percent of the affordable owner units are affordable to those with incomes between 51 and 80 percent of MFI. Only 14 percent of the total affordable owner units in Boulder City are affordable to those with incomes below 50 percent of MFI.

Homeownership Prices

One of the key housing indicators is building permits. According to the *2010 Las Vegas Perspective*, single family permits were running around 20,000 a year in the late 1990s and peaked at 32,879 in 2004. Residential single family permits plummeted to 3,813 in 2009 with low activity to date in 2010. Multifamily permits have similarly declined from a high of 13,138 in 2006 to 1,921 in 2009. There is very little activity in the residential construction sector which has resulted in huge job losses for construction workers and added to the foreclosure crisis.

The median sales price for new and existing homes in Metropolitan Las Vegas has decreased significantly in the last 2 years as the housing bubble burst and the economic recession has deepened with continued job losses in Southern Nevada. Homes are once again affordable to moderate income families, while low-income families often still need assistance to become homeowners. See Figure 27 for a look at median sales prices from 1994 to 2009. The price of an existing single family home in 2009 is now below the median price of an existing home in 2000.

Figure 27. Median Sales Price of a New Home

Metropolitan Las Vegas ¹	Median Sale Price				Percent Change			
	1994	2000	2004	2009	1994 - 2000	2000 - 2004	2004 - 2009	1994 - 2009
New Home	\$121,500	\$161,893	\$278,924	\$216,854	+33	+72	-29	+78
Existing Home	\$111,250	\$130,000	\$250,000	\$123,000	+17	+92	-103	+11

Source: Homebuilders Research Inc. of Las Vegas, 1994-2009.

1. Metropolitan Las Vegas = Includes Henderson, Clark County, Las Vegas, North Las Vegas, Boulder City, Mesquite

- In 2004, the median price of a new home was \$278,924 which was affordable to households at 153 percent AMI and above. New home prices have decreased to a median of \$216,854 and are now affordable to persons at 92 percent of AMI and above.
- The median price of an existing home in 2004 was \$250,000 and was only affordable to persons at 137 percent of AMI and above. The current price of an existing home is \$123,000, which is affordable to households at 52 percent AMI and above.

Renting vs. Owning in Clark County

Ownership Housing Affordability

Figure 27 analyzes the annual median family income for Clark County and housing affordability. It indicates that even families earning just below area median income can afford to own a home. Figure 28 assumes a 30-year FHA loan with a fixed interest rate of 5.5 percent, 3.5 percent downpayment, \$3,000 closing costs, takes into account property taxes, homeowners insurance, and mortgage insurance. The Tipping Point table also assumes good credit, and no debt, which are large assumptions and need to be taken into consideration. Further, not all households, particularly those at 60 percent and below can save enough for downpayment and closing costs. However, the table is encouraging in that it shows that families earning \$33,877 annually or 52 percent of AMI can afford the median priced existing home. This is an enormous change from 2004 and has brought homeownership within range of far more households.

Figure 28. The Tipping Point - Homeownership Affordability

Percent of AMI ¹	Annual Median Family Income	Monthly Wage	Hourly Wage	Maximum Affordable Monthly Mortgage Payment ²	Maximum Total Mortgage	Maximum Affordable Sales Price ³	Can Afford Median Metro Las Vegas Existing Home? \$123,000	Can Afford Median Metro Las Vegas New Home? \$216,854
30	19,620	1,635	9.43	491	66,834	72,367	No	No
40	26,160	2,180	12.58	654	89,185	95,529	No	No
50	32,700	2,725	15.72	818	111,673	118,833	No	No
60	39,240	3,270	18.87	981	134,024	141,994	Yes	No
70	45,780	3,815	22.01	1,145	156,512	165,298	Yes	No
80	52,320	4,360	25.15	1,308	178,863	188,460	Yes	No
90	58,860	4,905	28.30	1,472	201,352	211,763	Yes	No
100	65,400	5,450	31.44	1,635	246,191	234,925	Yes	Yes
110	71,940	5,995	34.59	1,799	268,542	258,229	Yes	Yes
120	78,480	6,540	37.73	1,962	291,030	281,390	Yes	Yes
130	85,020	7,085	40.88	2,126	306,662	304,694	Yes	Yes
140	91,560	7,630	44.02	2,289	313,381	327,856	Yes	Yes
150	98,100	8,175	47.16	2,453	335,869	351,159	Yes	Yes
160	111,180	9,265	53.45	2,780	358,220	374,321	Yes	Yes
170	117,720	9,810	56.60	2,943	380,708	397,625	Yes	Yes

1. HUD Income levels based upon Clark County Median Family Income for 2009 for a four-person household. FY 2009 Median Family Income was \$65,400
2. Assumes Maximum Monthly Mortgage Payment may not exceed 30% of income
3. Mortgage Rate is based on 5.5% FHA 30-year mortgage rate accounting for principal, interest, taxes, and insurance; assumes 3.5% Downpayment, \$3,000 Closing Cost, no debt, and good credit. Monthly tax payments are calculated taking the sales price x 35% = assessed value x tax rate (.033002) / 12. Annual property tax per \$1,000 of value is \$11.20. Monthly homeowners insurance was calculated using Sales Price x .0025 / 12. Annual property insurance per \$1,000 of value is \$2.50. Monthly mortgage insurance was calculated using Total Mortgage x .005 / 12.

Rental Housing Affordability

Figure 29 illustrates the continuing affordability problems for families earning 60 percent or less of AMI. The table indicates the following:

- Families must earn an income of at least \$26,160 or 40 percent of AMI to afford an average priced studio apartment of \$580
- Families must earn a combined income of at least \$32,700 or 50 percent of AMI to afford an average priced one-bedroom apartment of \$727
- Families must earn a combined income of at least \$39,240 or 60 percent of AMI to afford an average priced two-bedroom apartment of \$869
- Families must earn a combined income of at least \$45,780 or 70 percent of AMI to afford an average priced three-bedroom apartment of \$1,082

Figure 29. Rental Housing Affordability

Percent of HUD AMI (\$65,400)	Annual Wage	Hourly Wage	Monthly Income	30% of Gross Monthly Income	Can Afford Studio? Mean Rental Rate = \$580	Can Afford One-Bedroom Unit? Mean Rental Rate = \$727	Can Afford Two-Bedroom Unit? Mean Rental Rate = \$869	Can Afford Three-Bedroom Unit? Mean Rental Rate = \$1,082
10	6,540	3.14	545	164	No	No	No	No
20	13,080	6.29	1,090	327	No	No	No	No
30	19,620	9.43	1,635	491	No	No	No	No
40	26,160	12.58	2,180	654	Yes	No	No	No
50	32,700	15.72	2,725	818	Yes	Yes	No	No
60	39,240	18.87	3,270	981	Yes	Yes	Yes	No
70	45,780	22.01	3,815	1,145	Yes	Yes	Yes	Yes
80	52,320	25.15	4,360	1,308	Yes	Yes	Yes	Yes
90	58,860	28.30	4,905	1,472	Yes	Yes	Yes	Yes
100	65,400	31.44	5,450	1,635	Yes	Yes	Yes	Yes
110	71,940	34.59	5,995	1,799	Yes	Yes	Yes	Yes
120	78,480	37.73	6,540	1,962	Yes	Yes	Yes	Yes
130	85,020	40.88	7,085	2,126	Yes	Yes	Yes	Yes
140	91,560	44.02	7,630	2,289	Yes	Yes	Yes	Yes
150	98,100	47.16	8,175	2,453	Yes	Yes	Yes	Yes
160	104,640	50.31	8,720	2,616	Yes	Yes	Yes	Yes
170	111,180	53.45	9,265	2,780	Yes	Yes	Yes	Yes

Special Needs

The special needs population includes elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents. Self-sufficiency is not a realistic goal for certain segments of the special needs population due to age and/or need for services. This sub-section estimates, to the extent feasible, the number of persons within each special needs group requiring supportive housing and describes their supportive housing needs. It also assesses the needs of low-income families in assisted housing for programs that promote economic independence and self-sufficiency. Data for this section is derived from State plans, reports and information from service providers. Some data is also derived from the *Nevada Special Needs Housing Assessment* which is available at nvhousing.state.nv.us/pr/Special%20Needs%20Report.pdf.

Elderly and Frail Elderly

HUD Section 202 and HOME funded housing developments; group homes and skilled nursing facilities serve the supportive housing needs of the frail elderly. There are a total of 19,523 designated senior rental housing units as well as 7,160 Residential Home, Group Home and Skilled Nursing beds available in the Southern Nevada. However, none of the designated units that are appropriate for low-income frail elderly are set-aside specifically for frail elderly. Additionally, there are currently no low-cost skilled nursing facilities and only 90 low-cost assisted living units, with 90 more in development.

There are programs that allow the frail elderly to remain in their homes such as Adult Day Care and Respite services. The Clark County Social Services Department and State Division for Aging, also offer independent living services to low income frail elderly and disabled persons to assist them in returning to the community after institutionalization.

Severely Mentally Ill

Southern Nevada Adult Mental Health Services (SNAMHS) provides housing, training in areas of independent living, psychosocial rehabilitation, support services and psychiatric care for individuals with mental illness in Clark County. In addition to Residential programs, SNAMHS has a community based psychiatric center with the mission to help adults with mental illness, through provision of inpatient and community based services, empowering them to live safely and participate in the community, and maximizing their quality of life. While there are 1,440 beds in licensed facilities that can serve mentally ill clients, the majority of those beds are occupied by elderly or disabled people. Therefore, the number of group home beds for mentally ill is taken from the Continuum of Care application and is 430 beds. Excluding homeless shelter spaces for mentally ill people, there are only 1,272 beds

Figure 30. Housing Inventory for Elderly and Frail Elderly

Facility Type	Number
Adult Group Care – Residential Group Care or Assisted Living Facility ¹	2,772
Adult Group Care for Persons with Alzheimer's ¹	650
Skilled Nursing ¹	3,636
Home for Individual Residential Care (2 beds max.) ¹	102
Total Beds	7,160
Southern Nevada Regional Housing Authority Senior Units ²	933
Active 55 and Older Housing ³	11,797
Affordable Senior Rental Housing ⁴	6,523
Total Designated Units	19,253
Owner-Occupied Units - 65 years and Older Living Alone ⁵	27,154

Sources:

1. Nevada Department of Health and Human Services, Nevada State Health Division, Health Care Quality and Compliance, March 2010
2. SNRHA, March 2010
3. State of Nevada Division for Aging; Nevada Housing Division 2009 2nd Quarter Apartment Facts
4. CRM Affordable Housing List, March 2010
5. 2006-2008 American Community Survey 3-Year Estimates; B25116

Figure 31. Housing Inventory for Mentally Ill

Facility Type	Number
SNAMHS Inpatient Beds ¹	289
Group or Residential Care ²	430
Supported Living Arrangements ²	227
Safe Haven ²	25
Transitional Housing ²	60
Permanent Supportive Housing ²	241
Total Beds	1,272
<i>Other Housing Arrangements</i>	<i>Persons</i>
Living with Family, Friends or Alone	unknown
Other Homeless Shelters ²	1,636
Unsheltered ²	1,738

Source:

1. Southern Nevada Adult Mental Health Service
2. Office of the Southern Nevada Regional Homeless Coordinator, Continuum of Care Application 2009

specifically designated for people with severe mental illness.

There is a particular need for supportive housing for people with severe mental illness and not enough state funding to house all those in need. Clark County has recognized that this fragile population is a priority for receiving Tenant Based Rental Assistance (TBRA) through the HOME program. The Southern Nevada Regional Housing Authority provides TBRA for severely mentally ill homeless while the Southern Nevada Adult Mental Health Services (SNAMHS), Lutheran Social Services, Mohave Mental Health and HELP of Southern Nevada provide supportive services and case management to the client.

Developmentally Disabled

The primary provider of services to the developmentally disabled in Clark County is Desert Regional Center (DRC), which currently assists 973 individuals including 889 in supportive housing and 84 in intermediate care facilities. DRC assist over 3,300 people, some of whom would be in need of supportive housing whose inventory is extremely limited.

Physically Disabled

The Southern Nevada Regional Housing Authority provides 473 accessible units for the physically disabled who are impeded in their ability to function independently. There are multiple family housing units accessible to the physically disabled within the Consortium. However, the majority of these units are offered at market rate rents unlike those provided by the Housing Authorities, which are rented at affordable rates. The assisted living facilities are available to those with physical disabilities but are often occupied by the elderly and frail elderly population. Accessible Space, Inc., a non-profit housing provider, has 255 units of housing for people with traumatic brain injuries. These units were developed using the HUD Section 811 Program and provide supportive services to residents and rental assistance.

Figure 32. Housing Inventory for Persons with Developmental Disabilities

Facility Type	Number
Supported Living Arrangements	373
Intensive Supportive Living Arrangements	516
Intermediate Care ¹	84
Living with Family, Friends/Guardians	unknown
Total	973

Source: Desert Regional Center, March 2010

Figure 33. People with Physical Disabilities

Facility Type	Number
Adult Group Care – Residential Group Care or Assisted Living Facility ¹	2,772
Southern Nevada Regional Housing Authority ²	473
Accessible Space, Inc Units ³	255*
Total People with Physical Disabilities Housing Units	3,500
<i>Living Arrangements⁴</i>	<i>Individuals</i>
Live with Spouse	55,000
Live Alone	18,000
Live in Group Quarters	1,500

*Some units still under construction but will be completed in next 2 years

Sources:

1. Nevada Department of Health and Human Services, Nevada State Health Division, Health Care Quality and Compliance, March 2010
2. Southern Nevada Regional housing Authority, March 2010
3. Clark County Community Resources Management Division, Affordable Housing Database, March 2010
4. Nevada Special Needs Housing Assessment, 2002, State of Nevada, BBC Research & Consulting

Persons with Alcohol/other Drug Addictions (AODA)

The Nevada Substance Abuse Prevention and Treatment Agency (SAPTA) provide funding for treatment and prevention programs in Clark County. Services funded by SAPTA for prevention and treatment of alcohol and drug abuse include detoxification programs, inpatient and outpatient treatment, counseling for individuals, families and groups, and education on self-esteem and other harm reduction issues. SAPTA also targets its client population for testing and early intervention for tuberculosis and HIV. Figure 34 indicates those SAPTA funded facilities offering inpatient services including the number of beds and/or transitional housing units available.

Figure 34: Substance Abuse Treatment Beds 2009

Program Name	Type of Treatment Bed ¹		
	Detox	Residential	Transitional
Community Counseling		10	
Salvation Army		111	
WestCare – Adult Male (CTC & Harris Springs) and Adolescent Male	50*	56	25
WestCare Healthy Families – Pregnant and Parenting Women		85 45**	
Clark County totals	50	307	25

1. Social model detoxification beds and residential treatment are licensed under the same regulations. Transitional beds are licensed by BLC as residential.
 * Includes Community Triage Center beds, not supported by SAPTA.
 ** Adolescent girl beds.

Source: State of Nevada Substance Abuse Prevention and Treatment Agency

HIV/AIDS

A small number of housing units in Southern Nevada are designated for persons with HIV/AIDS. The majority of housing assistance to persons with HIV/AIDS is provided through rental or mortgage payment subsidies and funded through the HOPWA program. The 2009 SNHD Surveillance Project estimates a housing gap of 47 percent, and a service needs gap of 39 percent. Based on this estimate, there are 4,174 persons with HIV/AIDS who are under-housed. The other 4,707 may live with family, friends or partners or in market or subsidized housing.

Figure 35: Housing for Persons with HIV/AIDS

Facility Type	Number
Transitional/Permanent Existing Units	41
Rental/Housing Assistance (Persons/Year)	255
Living Independently or with Friends (Persons)	4,707
Sheltered Homeless (Persons)	68
Unsheltered Homeless (Persons)	82

Source: City of Las Vegas HOPWA Program, Southern Nevada 2009 Homeless Census and Survey

Some people with HIV/AIDS are in care facilities such as group homes or nursing homes, living in transitional housing or weekly motels, or are homeless. Service providers estimate the percentage of persons with HIV/AIDS living in nursing and group home to be very small, at only 1 to 3 percent. Therefore, the number of persons with HIV/AIDS in need of housing is approximately 1,000 individuals.

As noted in Figure 35, a total of 41 units are available specifically to serve HIV/AIDS clients in Clark County including condominiums, townhouses, and apartments, communal living and single family detached housing units.

The Las Vegas HOPWA grant, administered by the City of Las Vegas, Neighborhood Services Department, encompasses all jurisdictions within Clark County, Nevada. The HIV/AIDS community is also assisted through the other HUD grants administered by the Cities and County in addition to Ryan White. Although not specifically for HIV/AIDS clients, the respective CDBG and ESG grants from each entity funds services that are also accessed by HIV/AIDS clients.

Assisted Housing Inventory

Assisted housing is housing that receives some form of federal, state or local financial assistance. This includes grants, loans, low-income housing tax credits, and industrial development revenue bonds. Assisted housing can be project based, where the housing unit itself is subsidized, or tenant based, where the assistance is given directly to the tenant who is then responsible for finding housing in the private market. Assisted housing includes the traditional public housing units that are funded by HUD as well as housing units that are managed by non-profit groups. In recent years, the Housing Authorities expanded their parameters to serve people up to 80 percent of area median income, making housing for people at 30 percent of area median income increasingly scarce as housing authority units are rented to those over 30 percent of area median income.

Effective January 1, 2010, two former public housing authorities, the Housing Authority of Clark County (HACC) and the Housing Authority City of Las Vegas (HACLV), have been regionalized into one agency, the newly formed Southern Nevada Regional Housing Authority. The Housing Authority of the City of North Las Vegas has not joined in the regional agency.

There are currently 3,814 public housing units and 9,223 publicly assisted households in the Southern Nevada. Figure 36 indicates the number and type of “Publicly Assisted” housing units by PHA while Figure 37 indicates the number and type of “Public Housing” units by PHA.

Figure 36. Southern Nevada Publicly Assisted Housing Units

Public Housing Authority	Section 8 Rental Vouchers ¹	Tenant-Based Rental Assistance ²	Other Federally Assisted Housing ³	Total Housing Units
SNRHA	8,883	199	40	9,122
North Las Vegas	n/a	0	101	101

1. Section 8 Rental Vouchers: allow low-income households to lease units from private sector owners. Program requires 75 percent of households have incomes less than 30 percent of the Area Median Family Income. Households using vouchers must pay at least 30 percent of their income as rent with the Housing Authority paying the balance of an agreed upon Fair Market Rent using HUD funds.

2. Tenant Based Rental Assistance Program: program is allocated funds through the Clark County HOME Consortium from Low Income Housing Trust Funds. The program is modeled after the Section 8 Voucher program in which families pay 30 percent of their household income as rent.

3. Section 202 New Construction: program provides a reduced interest rate loan making private non-profit group development economically feasible. This program assists the elderly and handicapped through subsidized operating costs allowing households to pay 30 percent of their income as rent.

Source: Southern Nevada Regional Housing Authority, March 2010 and Housing Authority of the City of North Las Vegas, March 2010

Figure 37. Southern Nevada Low Rent Public Housing¹ Units

Public Housing Authority	Number of Elderly Units	Number of Family Units	Number of Scattered Sites	Total Public Housing Units
SNRHA	894	2,477	443	3,814

1. Conventional Low Rent Public Housing: Constructed with Federal funds, owned and managed by Housing Authorities. Operated from funds paid as rent by residents in addition to subsidies provided through HUD. Residents of Conventional Low Rent units pay 30 percent of their household adjusted income as rent.

Source: Southern Nevada Regional Housing Authority – 2010

Income Limits for Assisted Housing

Income limits for federally assisted public housing programs are set at 50 percent of the area median family income, as determined annually by HUD, and apply to all of Clark County. The eligibility level for any of the above federally assisted programs ranges from an annual income of \$19,800 for one person to \$37,300 for a family of eight.

Use of Funds

The HCP Consortium will continue to focus its housing efforts on rental assistance for low and very low-income families, homeownership assistance, rental and owner occupied housing rehabilitation, and the new construction of both owner and rental housing.

Clark County Affordable Housing Inventory

Clark County maintains a database of existing, affordable multi-family rental units. The production of new, affordable housing, as well as the preservation of existing affordable units is crucial in maintaining a stock of affordable housing. Clark County currently has 18,772 rent-restricted affordable housing units throughout Clark County in 148 developments, serving very low income; low income and moderate income households. The vast majority of these affordable units have been financed using a combination of private and public funds. The requirements of the public funding include maintaining the affordability for a specific number of years. The majority of these units have been developed in the last 10 years and will continue to remain affordable for another 10-30 years in most cases.

Units Expiring in 1-5 Years

There are some units at risk of conversion to market-rate housing due to termination of a public funding subsidy contracts, mortgage prepayments, or other expiring use restrictions. An analysis of units tracked indicates that between 2010 and 2015, there are 1,451 units in 24 developments that are at-risk of terminating their housing rental subsidies or will otherwise lose their affordability restrictions through the expiration of covenants and termination of restrictions. The majority of these, 965 (67 percent), are located in buildings that received financing from the U.S. Department Housing and Urban Development (HUD), Project-based Section 8 rental subsidies and/or are financed through FHA 221(D)(3), 221(D)(4), 236(J)(1), and 202 and 811 HUD loan subsidy programs. HUD required investors to make the units available to very low and low income households at approved rents throughout the term of the mortgage. Although the mortgages have 40-year terms, most owners are able to prepay their mortgages after 20 years. Most of these properties have now exceeded the 20-year term and have prepaid or are able to prepay their loans. Most of the Project-based Section 8 contracts (312 units) in Clark County have passed the initial 20-year term and are renewing their respective contract with HUD on an annual basis. For these reasons, federally financed and assisted properties are considered at-risk.

Based on the overall multifamily housing market and the over 18,000 rent-restricted affordable housing units' currently in operation, the loss of 7.7 percent (1,451) units of affordable housing would have a substantial impact on the community. However, while the 965 federally financed units identified above would be considered the most at risk, the remaining 486 units are located in buildings financed using the HUD Section 202 or 811 Programs and would not be considered as vulnerable to losing their status as affordable housing. Those two programs provide housing to senior and disabled households at very low-incomes and will most likely remain serving those populations based upon the other financing used to construct these units or the fact that these units are owned and operated by non-profit organizations whose mission it is to serve these populations.

An additional 61 units in Clark County, North Las Vegas and Las Vegas HOME/LIHTF funded projects will meet their affordability requirements in the next 5 years. While these units are owned and operated by non-profit organizations there is no guarantee that they will continue to be operated by these agencies as affordable housing, although it is likely.

Units to Expire in 5-10 Years

Of more serious concern, an analysis of units with expirations between 2015 and 2020 identified 3,874 units that are at-risk of terminating their housing rental subsidies or that will otherwise lose their affordability restrictions. The majority of these units, 3,528, are units developed using the Private Activity Bond program which has a required affordability period of 20 years. The remaining 346 units are located in projects financed by Clark County or Las Vegas with HOME/LIHTF funds or operated under the HUD Section 202 or 811 programs. The Clark County HOME Consortium will need to find ways to address this problem, particularly in the next 5-year plan.

Specific Housing Objectives (91.215 (b))

Housing Strategies

In the HCP Consortium, housing programs are handled by many different entities. The Southern Nevada Regional Housing Authority provides affordable housing for thousands of low-income households through their public housing, Section 8 and non-aided programs. The Community Resources Management Division of the Department of Finance manages the federal grants funding covered in this plan for Clark County. The Office of Housing and Neighborhood Services administers the federal funds for the City of North Las Vegas.

Another important entity in the delivery of housing is the State Housing Division. The Division is responsible for managing the State Low-Income Housing Trust Fund (LIHTF), the federal Low-Income Housing Tax Credits (LIHTC), and the single family and multifamily mortgage bond programs. The largest provider of housing is the private sector. Homebuilders and non-profit organizations provide a wide variety of housing products throughout all areas of the HCP Consortium.

The following pages outline the strategies the HCP Consortium will be pursuing for the next five years to provide for affordable housing including rental housing, homeownership, and housing for the homeless or formerly homeless. Information on the resources available and expected to be used is available under the heading [Resources](#) in the “Other Narratives” section at the end of this document.

- High Priority:**
- H-1. Extremely low-income and low-income renter households
 - H-2. Persons with special needs
 - H-3. Existing owner households
 - H-4. First-time homebuyers
- Medium Priority:**
- M-1. Moderate-income renter households

The HCP Consortium Housing Strategic Plan focuses on improving the availability/accessibility, affordability and sustainability of housing for low and moderate income households. These objectives/outcomes are outlined in the table below and are then applied to the specific strategies to be used.

Consolidated Plan Outcomes and Objectives

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

CLARK COUNTY AND NORTH LAS VEGAS HOUSING STRATEGIC PLAN

Increase the Availability, Accessibility and Affordability of Decent Housing

Availability/Accessibility of Decent Housing (DH-1)					
Specific Objective		Source of Funds	Year	Performance Indicators	Expected Number
DH 1.1	Expand the supply of affordable rental housing through new construction with an emphasis on households at 50% of AMI and below	HOME, LIHTF, Bonds, LIHTC, NSP	2010	Completed units	144
			2011		300
			2012		100
			2013		100
			2014		100
			MULTI-YEAR GOAL		
DH 1.2	Preserve and expand the supply of affordable housing for people with special needs: Elderly, Frail Elderly, Developmentally Disabled, Severely Mentally Ill, Physically Disabled, HIV/AIDS, Public Housing Residents	HOME, LIHTF, Bonds, LIHTC, NSP	2010	Completed units	430
			2011		300
			2012		200
			2013		200
			2014		200
			MULTI-YEAR GOAL		
Affordability of Decent Housing (DH-2)					
DH 2.1	Provide rental assistance that helps low income households obtain and retain housing	HOME, LIHTF	2010	Households assisted	100
			2011		100
			2012		100
			2013		100
			2014		100
			MULTI-YEAR GOAL		
DH 2.2	Provide homeownership opportunities for low- and moderate-income prospective homebuyers through new construction, acquisition /rehab/ resale and/or financial assistance (i.e. downpayment assistance, closing cost assistance, principal buy down)	HOME, LIHTF, NSP	2010	Households assisted/ Housing units purchased	100
			2011		50
			2012		40
			2013		40
			2014		40
			MULTI-YEAR GOAL		
Sustainability of Decent Housing (DH-3)					
DH 3.1	Preserve and improve the existing stock of affordable housing through acquisition and/or rehabilitation of owner and renter occupied housing	HOME, LIHTF, CDBG, NSP	2010	Housing units rehabilitated	40
			2011		40
			2012		20
			2013		10
			2014		10
			MULTI-YEAR GOAL		
DH 3.1	Provide energy efficiency improvements to homes	Other	2010	Housing units assisted	200
			2011		200
			2012		200
			2013		200
			2014		200
			MULTI-YEAR GOAL		

Needs of Public Housing (91.210 (b))

For specific local public housing information please refer to the following websites: www.snvrha.org and www.hacnlv.org.

Number of Public Housing Units, Physical Condition of Public Housing, Restoration and Revitalization Needs of Public Housing

Southern Nevada Regional Housing Authority

The SNRHA currently has 3,814 public housing units in its inventory. Rehabilitation needs are primarily funded using the Capital Fund. Physical improvements are planned or underway at several sites such as Levy Gardens, James Down Towers, Espinoza Terrace and Landsman Gardens. There are plans to convert unit in several properties to provide wheelchair, hearing and visual accessibility.

The results of the recent physical needs assessment indicate that the physical conditions of certain developments are in need of considerable improvements. The majority of these properties are over thirty years old and are in need of comprehensive modernization. The Capital Fund Program/modernization funding has experienced significant cuts in the last three years. The physical needs assessment indicates \$134.8 million is needed in order to ensure the public housing developments remain a viable housing option for low-income persons.

The former HACLV completed the Voluntary Compliance Agreement with HUD by the deadline of December 31, 2009. As the newly formed SNRHA, we are concentrating efforts to meet the requirements for the former CCHA Voluntary Compliance Agreement.

Housing Authority of the City of North Las Vegas

The Housing Authority of the City of North Las Vegas continues to own and operate its inventory of 120 conventional assisted units, under the Low-Rent Public Housing Program. All one hundred twenty (120) are for elderly only. The remaining ninety-eight (98) are currently scheduled for demolition.

Public Housing and Section 8 waiting lists

Southern Nevada Regional Housing Authority

The Section 8 and Public Housing waiting lists are long and only open for new applications infrequently. This is an indication of severe housing needs community wide, especially for households below 30 percent of area median income.

- Total Applicants on Wait List – Conventional (CV): 6,791
 - Applicants over the age of 62 on the CV Wait List: 357
 - Applicants on the Designated Housing Wait List: 362
- Total Applicants on Section 8 Wait List: 3,726
- Total Applicants of Public Housing Site-Based Wait List: 3,494

Housing Authority of the City of North Las Vegas

In March 2009, HUD mandated HAP (Section 8) and Homeowners Assistance programs be permanently transferred to the Housing Authority of the City of Las Vegas (HACLV) which is now the Southern

Nevada Regional Housing Authority (SNRHA). The Management of the Public Housing Program is also being managed by the SNRHA.

Public Housing Strategy (91.210)

Housing Authority Strategic Plans

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

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

SNRHA's 5-Year Goals, Management Initiatives and Homeownership Initiatives

Clark County is supporting the SNRHA in the redevelopment of 16 acres at Flamingo and Perry. The existing distressed Miller Plaza and Brown Homes was demolished and will be redeveloped using ARRA Funds with 80 units of senior housing for the first phase. An additional 40 units of senior housing are planned for the site in a future phase of the project.

The SNRHA has 12 resident councils in formation or operation and has a staff member designated to assist in organizing the remaining SNRHA public housing development's resident councils.

SNRHA has designated 96 of its existing scattered site public housing units for the Public Housing Homeownership Program. The remaining 291 scattered sites will be utilized for applicants in our Public Housing Program.

5-Year Goals

Expand the supply of Low Income and Affordable housing available within its jurisdiction:

- Apply for additional Section 8 Choice Vouchers
- Develop public/private partnerships to create affordable housing opportunities
- Utilize SNRHA's resources to leverage and encourage new development initiatives
- Expand homeownership initiatives to SNRHA residents and program participants.

Improve the quality of assisted housing:

- Improve program management and fiscal accountability by utilizing SEMAP and PHAS indicators
- Increase customer satisfaction

Increase assisted housing choices:

- Conduct outreach efforts to potential vouchers landlords
- Further the development of the Section 8 Homeownership Program

Improve marketability of SNRHA owned units:

- Enhance and maintain site appearance to increase curb appeal
- Provide amenities and services to compete with private sector property owners
- Further develop partnerships with law enforcement agencies to provide a safe living environment

Promote self-sufficiency and economic independence of assisted households:

- Increase the number and percentage of employed program participants
- Further develop and enhance educational opportunities and prevention programs for youth
- Provide and attract supportive services to increase program participants' employability through job training and educational opportunities
- Provide public/private partnerships to further enhance resident initiatives at no cost to the agency (i.e., Sunrise Hospital, Girl Scouts, Juvenile Justice Department) through fund raising and grant application submission
- Promote homeownership opportunities through the Scattered Site Homeownership Program, the Section 8 Housing Choice Voucher Program, and the supportive service program for potential homebuyers.

Increase affordable housing resources:

- Develop a detailed plan for the Replacement Housing Fund
- Continue to identify partners for affordable housing development
- Explore the opportunity for conversion of assistance from unit-based to tenant-based. Consider the development of a Conversion Plan

Currently there are six (6) Senior Resident Councils and six (6) Family resident councils active at SNRHA. The SNRHA's Supportive Services Department will be working to establish/re-establish councils in its remaining five housing developments over the next five years.

The SNRHA currently administers a Scattered Site Homeownership Program, which involves the sale of existing scattered site homes to HACLV low-income Public Housing residents and Section 8 participants. The homes are sold at or below fair market value and the SNRHA provides down payment and closing costs assistance to buyers as well as directing prospective buyers to other organizations, which provide low-income homebuyer assistance. Prospective purchasers must be able to qualify for a mortgage and attend a Homeownership counseling course.

SNRHA also administers a Section 8 Homeownership Program, which utilizes the Voucher subsidy towards mortgage payments vs. rental assistance for eligible participants. Participants must be Section 8 participants and FSS graduates and must attend a Homeownership counseling course.

The Housing Authority will continue its partnerships with the City of North Las Vegas and local non-profits towards their mutual goal of revitalizing old neighborhoods and increasing the availability of affordable housing units to low and moderate income families including the elderly and disabled.

Public Housing Program residents and Section 8 program participants have played and will continue to play a vital role in the development of this Agency Plan in their capacity as a "Resident Advisory Board" (RAB) which contributed input into policies and strategies contained in this Plan.

Housing Authority of the City of North Las Vegas

The Housing Authority of the City of North Las Vegas (HACNLV) is considered a troubled public-housing agency by HUD and will pursue the following goals over the next five years:

- Maintain the existing Memorandum of Agreement (MOU) and strive for regionalization within the next fiscal year.
- Assess needs of tenants and applicants on waiting list for accessible units

The HACNLV currently has one active resident council in its Rose Garden public housing development representing the senior community. HACNLV will continue to staff and assist this council to promote resident involvement in the management and operation of their units.

The HACNLV Plan reaffirms its commitment to the mission of providing quality, affordable housing that is decent, safe, sanitary and in good repair to eligible families in the community by continuing its current Public Housing, Non-Aided and Low-Income Housing Tax Credit Rental programs.

Public Housing Program residents have played and will continue to play a vital role in the development of the Agency Plan in their capacity as a “Resident Advisory Board” (RAB) which contributed input into policies and strategies contained in the Plan.

Barriers to Affordable Housing (91.210 (e) and 91.215 (f))

The predominance of low- to medium-density single-family units in the HCP Consortium Area has made the production of more dense affordable housing difficult. In addition to these challenges, public agency regulatory policies related to residential development in the HCP Consortium Area are not flexible with respect to their implementation. While some of the public policies outlined below are generally not considered excessive, flexibility and/or waivers in the implementation of such policies would encourage further investment in affordable housing.

The issues of weak market conditions, water fees, federal environmental regulations, Boulder City growth controls, and limited financing opportunities will be difficult to address since they are not controlled by the local jurisdictions but by the market (market conditions and private market financing), an independent governmental agency (Las Vegas Valley Water District), the federal government (environmental laws), and by the voters (Boulder City). These barriers are mentioned below as they do influence the production of affordable housing.

Barriers:

Legislature: The Nevada State Legislature only meets once every two years and has a voter -approved limited session of 120 days. In that time, a limited number of bills can be introduced and acted upon. County governments are “legal creatures of the State”. Lacking the charter powers of incorporated cities, the County has only those powers specifically authorized in the Nevada Revised Statutes (“Dillon’s Rule”). As such there may occasionally be some confusion whether the County is always legally authorized to provide a variety of services to non-profit organizations, simply because those powers may not have been clearly delineated or specified in the statutes. This limits the County’s ability to react quickly when new and innovative ideas for the production of affordable housing emerge.

Citizen Review: Required public hearings before public entities such as Planning and Zoning Commissions and City Councils to allow public comment on proposed affordable housing projects add to the processing time and ultimately to the project’s final cost. Affordable and special needs housing development goes through the standard development review process. Sometimes during this process citizen concerns arise that are often based on fears regarding the believed characteristics of potential residents or the housing’s characteristics or perceived impact (e.g. housing density or impact on neighboring housing). These concerns on the part of citizens often result in a delay of action by the local decision making body.

Water Fees: The Las Vegas Valley Water District imposes a regional connection fee for new water hook-ups. The fee per apartment unit in 2000 was \$1,288 and was increased to match the residential fee of \$2,136 per unit in 2004. In 2000, the water fees for a 216-unit apartment development were \$278,208. In 2004, the connection fees for the same 216-unit development were \$461,376. In November 2008, regional connection charges per unit were raised to \$3,400 for a residential master metered development with over 8 units per acre and mobile homes, bringing the total water connection fee for the 216-unit development to \$734,400. These fees have placed a substantial burden on the development of affordable housing, which is generally multi-family and higher density.

Limited land availability: The urban areas of the HCP Consortium Area are surrounded by land currently under the supervision of the Bureau of Land Management (BLM). The BLM oversees these lands under the Recreation and Public Purpose Act, which through the Southern Nevada Public Lands Act of 1998 includes affordable housing as a “public purpose”. As a result, Clark County has “reserved” 1,200 acres for the future development of affordable housing.

From 2000-2007, rapidly rising land prices made the construction of affordable housing difficult. However, due to the economic downturn and real estate crisis, the average sales price per acre is 49 percent less this current period than the same period last year. The average sales price per acre of vacant land was \$524,725 in March 2008 and decreased to \$264,040 in March 2009. Federal lands also were affected. In November 2005 the BLM owned a 2.5 acre parcel within a Rural Neighborhood Preservation (RNP) area which sold for \$900,000. In November 2009 a 2.5 acre parcel in an RNP area sold for \$250,000. Land prices no longer pose as great a burden to the production of affordable housing as they did in the past.

Though land is more affordable, the acquisition process, zoning restrictions and limited availability of ideal parcels in terms of size and location appropriate to develop higher density homes are barriers that remain. Recommendations to streamline the land purchase process and provide additional land availability still hold.

Development Fees: Clark County and local jurisdictions have full cost recovery policy for processing development applications and these fees are not considered burdensome. These processing fees are added to the cost of the housing and thus passed on to the purchaser or renter. The building department and public works fees are imposed on all development with no waivers or reduced fees available for affordable housing developments.

Permit and Plans Review Time: The review process itself can increase costs by virtue of the amount of time and money it takes for a developer to receive approval. This results from staff review of a development proposal in addition to any required public hearings.

Rezoning or Variance Process: This can be a difficult, painful and risky process that works against the production of affordable housing and creative development solutions. While many development projects could be improved or made more affordable through rezoning or the variance process, the development community is hesitant to pursue such options because of the difficulty of the process. Public opposition may make it difficult to effect positive change.

Federal and State Environmental Protection Regulations: Environmental mitigation fees, fees charged by local government and private firms for performing environmental analysis and reviews and delays caused by mandated public review periods also add to the cost of housing and are passed on to the purchaser. No exemptions are provided for affordable housing developments.

Boulder City Voter-Adopted Growth Controls: A number of factors not under Boulder City's control affect whether their housing and community development goals will be reached. The vast majority of vacant land within the city limits is owned by the city. However, the city does not have unlimited control over the land it owns. One factor is a voter-adopted ordinance that requires voter approval of any sales of land over one acre in size. Another factor is a voter-adopted controlled growth ordinance, which sets limits on the total number of dwelling units that can be built per year. Since the city cannot readily make available land for purchase to organizations that might wish to build affordable housing, the City continues to support other housing goals to further this purpose.

Financing for Homeownership: The lack of availability of home purchase financing for low and moderate-income households and minority groups affects the supply of and demand for ownership and rental housing. This also affects homeownership levels among low and moderate-income households and minority groups. This problem is exacerbated by the current nation-wide recession where in the overall market, credit is less available.

According to the 2003 Home Mortgage Disclosure Act (HMDA) data, there were 96,735 applications in 2003 for conventional home purchase loans in Clark County. Approximately two-thirds of all applications resulted in loans originated. An originated loan is one that is approved by the lender and purchased by the applicant.

Loan origination rates varied by the level of median family income (MFI) in census tracts. Origination rates were highest in upper-income census tracts (greater than 120 percent of MFI) averaging approximately 65 percent. Origination rates averaged approximately 43 percent in low and moderate-income census tracts (less than 80 percent of MFI).

Loan origination rates varied by the level of minority concentration in census tracts. Census tracts with less than 20 percent minority population had the highest origination rates, with approximately 65 percent of loans originated. Origination rates decreased as the proportion of minority population increased, with only 43 percent of loans originated in census tracts with greater than 80 percent minority population.

Overall loan application rates have declined. According to HMDA data, in the year 2007 within the town of Paradise in Clark County, there were 72,106 conventional loan applications and 53 percent of these loans were originated. In 2008, only 28,935 conventional loan applications were made and 55 percent of these loans were originated.

Community Support: There has traditionally been minimal support for affordable housing development in Southern Nevada. There have been problems with the “Not In My Backyard” or NIMBYism among residents of established neighborhoods who fear affordable housing and higher densities. Housing advocacy groups, non-profit organizations and the jurisdictions themselves are involved in raising public awareness regarding the shortage of affordable housing and the reality of affordable housing in an effort to reduce citizen concerns.

Solutions:

Utilize the BLM land disposal process for the purpose of developing affordable housing for lower income citizens. On April 8, 2004, the BLM Nevada State Director established Interim Guidelines on the policy, provisions, and required information for the implementation of Section 7(b) of the Southern Nevada Public Lands Management Act of 1998 (SNPLMA). These guidelines provide for a discount of 75 percent up to 95 percent of fair market value for land designated for the use of affordable housing (defined as families earning less than 80 percent of AMI). Request to purchase land owned by the federal government at a discounted price for the creation of affordable housing pursuant to the provision of section 7(b) of the Southern Nevada Public Land Management Act of 1998, Public Law 105-263.

Leverage excess public lands. Sell land owned by the city/county to developers exclusively for the development of affordable housing at not more than 10 percent of the appraised value of the land and require that any such savings, subsidy or reduction in price be passed to the purchaser of housing. Donate land owned by the city/county to a nonprofit organization to be used for the development of affordable housing.

Reduce affordable housing development costs by subsidizing fees and reducing review times. At the expense of the county, as applicable, subsidizing, in whole or in part, impact fees and fees for the issuance of building permits collected pursuant to NRS 278.580. Clark County provides a fee waiver for any and all land use applications for affordable housing development including those fees charged for zone changes, use permits, and design review related to the project. Affordable housing developers must

obtain approval from the Community Resources Management Division prior to submitting their land use applications so that they can be identified as affordable housing to the Comprehensive Planning Department.

Clark County will continue its Affordable Housing Plans Check process, which moves affordable housing projects to the front of the line for the initial plans check. Clark County will continue its “Red Flag” system for key affordable housing developments, ensuring they receive priority review by the Development Services and Building Departments.

Require comprehensive plans to address housing/jobs linkages and balance. The local comprehensive plans are good at planning for the construction of sewers, roads and parks—and for creating residential and commercial areas. However, they should also focus on the balance between jobs and housing, and the links between jobs and the type of housing in which these workers will live. This also includes the transportation elements needed to get workers from their homes to their places of employment. The linkage between density and transportation needs to be emphasized to avoid future gridlock. Zoning codes should be designed to reflect this desired balance and linkage. As a community, we need to assess if we are encouraging segregation of uses and a reliance on traditional single family detached housing that can lead to sprawl, economically segregated communities, affordable housing problems and traffic congestion.

Legislative action. Clark County will introduce legislation as needed to make any necessary changes to state law that will improve the ability of the county to address affordable housing needs.

Land bank and/or land trust. Establish a land bank and/or land trust to expedite and simplify the process to enable the acquisition, sale, and/or redevelopment of properties within the County over the long-term.

Use rezoning powers. When developing affordable housing on parcels reserved for that purpose under SNPLMA, Clark County will continue to use its rezoning powers to create opportunities for the construction of affordable housing. Clark County will work to pre-zone BLM parcels in preparation for the development of the land into affordable housing developments.

Provide incentives for the development of affordable housing. Clark County will look at providing incentives for affordable housing such as shared parking opportunities, reduced parking requirements, tax abatements, density bonuses, flexible zoning and fee waivers that could make affordable housing more economically feasible to develop.

Tie affordable housing to public projects. The local governments and regional agencies could evaluate the feasibility of constructing affordable housing as part of the request for proposals (RFP) process for major public-sector development or redevelopment projects. Examples of such opportunities include the expansion of mass transit (including transfer stations), the use of excess road rights-of-way, or when rehabilitating our older public schools.

Address community concerns to dispel myths about affordable housing. The local governments and/or development trade groups could conduct education programs to demonstrate the value of affordable housing for the Southern Nevada economy. Such programs should address the concerns of low-income housing advocates and how affordable housing affects these issues. Community groups and public officials should be brought into the discussion.

Build a coalition of the business, governmental and citizen advocates. Creating an organized advocacy group that will proactively support affordable housing and will search for creative answers is

crucial. Groups that logically should be included in this coalition include labor unions, business associations, environmental organizations, faith-based nonprofits, seniors and disabled housing advocates. At the local level, our local ULI District Council, the Southern Nevada Home Builders Association, National Association of Industrial and Office Properties, the Nevada Development Authority, the Nevada Commission on Economic Development, the various chambers of commerce and other civic leaders are potential champions. A focused education campaign could begin to build support for development proposals that include affordable housing.

Assess the possibility of establishing a Regional Housing Commission. Research should be conducted into the feasibility of establishing a Regional Housing Commission modeled like some of our other regional agencies, such as the Regional Transportation Commission of Southern Nevada and the Southern Nevada Water Authority, to serve as the central authority for the administration of housing authorities, HOME program, housing trust fund, redevelopment and federal grants and Section 8 housing assistance.

Support the development of “single family” looking multifamily housing. Given the strong market support and preference for single-family detached homes, multifamily housing developed to look like single-family houses offers a good opportunity to engender community support, while also providing affordable housing. Local design regulations could be adjusted to support this housing type. Architectural firms and multifamily developers could adopt this building type into their respective portfolios.

Investigate the effectiveness of modular housing. This housing type could play a role in solving our affordable housing problem. Its time savings, production ease and reduced construction financing costs could enable the production of more affordable housing. The full capabilities of the efficiencies created by this housing type have not yet been realized locally.

Continue to provide property tax relief. Nevada Revised Statutes (NRS) Section 361.082 provides exemptions for low-income housing units that were built with Federal assistance.

HOMELESS

Homeless Needs (91.205 (b) and 91.215 (c))

Definition of Homeless

The Stewart B. McKinney Homelessness Act defines a person experiencing homelessness as “one who lacks a fixed permanent nighttime residence or whose nighttime residence is a temporary shelter, welfare hotel or any public or private place not designated as sleeping accommodations for human beings.”

HUD’s definition of homelessness is slightly more comprehensive. In addition to defining individual and families sleeping in areas “not meant for human habitation,” the definition includes persons who:

- “Are living in transitional or supportive housing for homeless persons but originally came from streets or emergency shelters;
- Ordinarily sleep in transitional or supportive housing for homeless persons but are spending a short time (30 consecutive days or less) in a hospital or other institution;
- Are being evicted within a week from private dwelling units and no subsequent residences have been identified and they lack resources and supportive networks needed to obtain access to housing; or
- Are being discharged within a week from institutions in which they have been residents for more than 30 consecutive days and no subsequent residences have been identified and they lack the resources and support networks needed to obtain access to housing.”

This definition demonstrates the diversity of people experiencing homelessness. The numerous locations in which people experiencing homelessness can be found complicate efforts to accurately calculate their total population.

The HUD definition does not include persons who are staying in a hotel/motel, with relatives or friends, in a Board and Care facility, Adult Congregate Living Facility, or who are in jail.

On May 20, 2009, President Obama signed into law a bill to reauthorize HUD's McKinney-Vento Homeless Assistance programs. The McKinney-Vento reauthorization provisions are identical to those included in two bills introduced earlier in 2009, both known as the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act. This will go into effect at the latest October 2010, or the sooner of 18 months after enactment or 3 months after HUD publishes final regulations.

The HEARTH Act changes HUD’s definition of homelessness to include people at imminent risk of losing their housing and families or youth who live in precarious situations and are unlikely to become stable. Communities will be able to use up to 10 percent of their resources to serve people who meet the definitions of homelessness used by other federal agencies.

Costs of Homelessness

For many who are interested in solving the problem of homelessness, it may seem that providing persons with shelter is cheaper than providing funds to get them into permanent housing. This view is deceptive. The cost of homelessness is staggering, not only to the affected individuals and families in terms of decreased health and wellness and the ability to meet the most basic needs, but also to the community in terms of real dollars.

The impact of homelessness on hospitals, prisons, and social services is high. Because homeless persons do not have a stable place to live, they are at risk for a variety of poor outcomes such as health and mental health difficulties, emotional and developmental delays in children, or incarceration. Preventing someone from becoming homeless, or providing a quick and efficient transition into stable permanent housing from homelessness can result in a significant cost savings, both financially and socially.

The following are some of the ways in which homelessness can be costly to the health delivery system alone:

- \$3,722= average cost of an emergency room visit
- \$7,444= average costs for emergency room visits by a homeless individual at two visits per year
- \$214=average cost for transport by ambulance
- \$4,440=average cost of a three day hospital stay

Those who only access healthcare through the emergency room do not receive follow-up care or services beyond immediate intervention, making them more likely to return to the hospital in the future.

Homeless Needs Assessment

Homeless Census

During the period of January 28-29, 2009, the Southern Nevada Regional Planning Coalition (SNRPC) Committee on Homelessness and the Office of the Regional Homeless Coordinator, in conjunction with Applied Survey Research (ASR), conducted the *2009 Southern Nevada Homeless Census and Survey*. Due to the large size of Clark County, it was necessary to conduct the enumeration over two days. On January 28th the towns and rural areas outlying the 215 Beltway were enumerated, and the following morning the cities of Las Vegas, North Las Vegas, and Henderson and other areas within the 215 Beltway were enumerated.

The results of the Homeless Census provide invaluable data regarding the number and characteristics of homeless persons in Southern Nevada and begin the compilation of multi-year data, building upon the baseline of information established by the 2007 census and survey, to support regional and statewide efforts to mitigate and end homelessness.

The 2009 Southern Nevada Homeless Census was performed using HUD-recommended practices for counting homeless persons. This comprehensive study included a field enumeration and field surveys.

- The overall homeless population of Clark County enumerated in the point-in-time count was 13,338 persons.
- Of those persons, 3,027 unsheltered homeless persons were enumerated on streets within the 345 tracts.

- An additional 7,004 sheltered homeless persons were counted in emergency shelters and transitional housing programs.
- A telephone survey of the general population of Clark County revealed an estimated 3,307 unsheltered “hidden” homeless persons.
- An additional 307 homeless persons were housed in jails, hospitals, and rehabilitation facilities on the night of the shelter and institution count, but did not meet HUD’s homeless definition for the point-in-time count.

Figure 38. Homeless Population, 2007-2009 Comparison

	2007	2009	07-09 Net Change	07-08 Percent Change
Total Sheltered People	3,844	7,004	3,160	82.2
Total Unsheltered People	3,747	3,027	-720	-19.2
Total Hidden Homeless	3,826	3,307	-519	-13.6
TOTAL HOMELESS PERSONS	11,417	13,338	1,921	16.8
Source: Applied Survey Research, 2007 Southern Nevada Homeless Census. Applied Survey Research, 2009 Southern Nevada Homeless Census.				

Homeless Survey

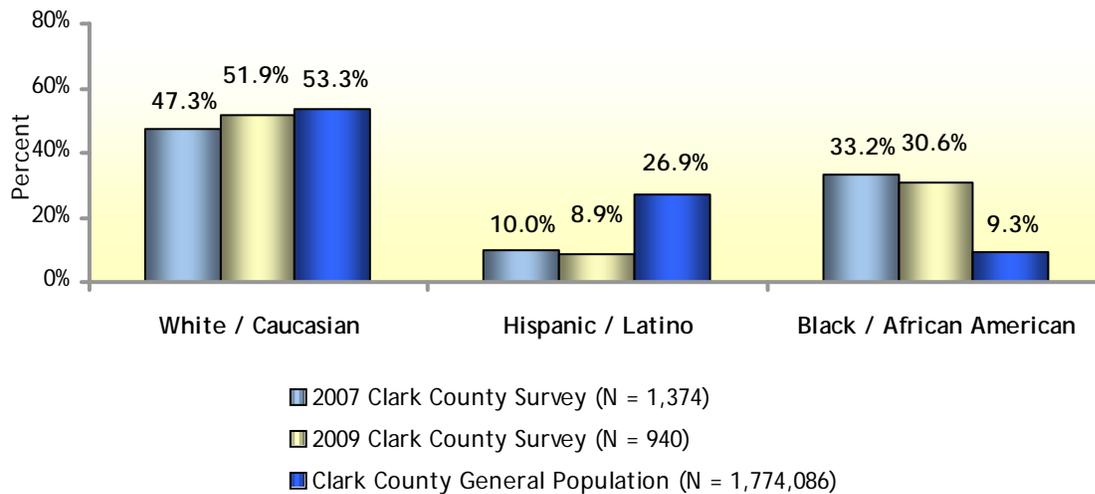
The following section provides an overview of the findings generated from the Southern Nevada Homeless Survey conducted by Applied Survey Research. Altogether, 940 valid surveys were administered between February 9 and March 19, 2009. Approximately 1 percent of these surveys were conducted in Spanish or other languages. These survey findings provide important demographic information on homeless households. In order to measure the diversity of homeless residents in Clark County, respondents were asked to answer several demographic questions pertaining to their age, gender, ethnicity, and military service.

Homeless Needs by Race/Ethnicity

Whites comprised 53 percent of the total population of Clark County, Hispanics comprised 27 percent, and African Americans comprised 9 percent. Therefore, the survey suggests that Hispanics were under-represented in the homeless population as compared to the general population of Clark County. African Americans were over-represented in the homeless population in comparison to the general population.

- 52 percent of homeless survey respondents identified their racial / ethnic group as White.
- 31 percent of homeless survey respondents identified as African American.
- 9 percent of survey respondents said they were Hispanic.
- In the overall County population, 53 percent of residents were White, 9 percent were African American, and 27 percent were Hispanic, indicating an over-representation of African Americans in the homeless population and an under-representation of Hispanics.
- Between 2007 and 2009, the percentage of White homeless survey respondents increased from 47 percent to 52 percent.

Figure 39: Respondents by Race / Ethnicity (Top 3 Race / Ethnicities) and Comparison to General Population



Source: Applied Survey Research, 2007 Southern Nevada Homeless Survey, 2007; Applied Survey Research, 2009 Southern Nevada Homeless Survey, 2009; Clark County General Population data source: U.S. Census Bureau, 2005 - 2007 American Community Survey 3-Year Estimates, 2009.

Homeless Subpopulations

The qualitative data about homelessness from the *Southern Nevada 2009 Homeless Census and Survey* were derived from direct surveys of a sample of homeless persons. Figure 40 presents 2009 subpopulation data and provides a comparison to 2007 subpopulation data. There has been a significant increase in the number of sheltered severely mentally ill homeless, those with chronic substance abuse, persons with HIV/AIDS and Victims of Domestic Violence. The number of unsheltered Chronically Homeless has increased 60 percent since 2007 as have the Severely Mentally Ill by 27.5 percent.

Figure 40: Homeless Subpopulations

Subpopulation	Sheltered				Unsheltered				Total			
	2007	2009	Net Change	Percent Change	2007	2009	Net Change	Percent Change	2007	2009	Net Change	Percent Change
Chronically Homeless ¹	174	117	-57	-32.8	1,309	2,094	785	60.0	1,483	2,211	728	49.1
Severely Mentally Ill	888	1,636	748	84.2	1,363	1,738	375	27.5	2,251	3,374	1,123	49.9
Chronic Substance Abuse	697	1,225	528	75.8	2,473	2,427	-46	-1.9	3,170	3,652	482	15.2
Veterans	835	986	151	18.1	1,486	1,276	-210	-14.1	2,321	2,262	-59	-2.5
Persons with HIV / AIDS	19	68	49	257.9	76	82	6	7.9	95	150	55	57.9
Victims of Domestic Violence	215	637	422	196.3	545	500	-45	-8.3	760	1,137	377	49.6
Unaccompanied Youth (Under 18 years of age)	128	55	-73	-57.0	152	154	2	1.3	280	209	-71	-25.4

Source: Applied Survey Research, 2007 Southern Nevada Homeless Survey, 2007; Applied Survey Research, 2009 Southern Nevada Homeless Survey, 2009.

The resources available to assist these households are limited, even with the addition of the Homeless Prevention and Rapid Re-Housing Program which is specifically designed to provide homeless prevention. The public housing authority has an extensive waiting list for all types of assisted housing, and emergency rental, mortgage and utility assistance for temporary crisis situations are in short supply. Agencies and non-profit organizations utilize other Federal, State and local funding sources in addition to private donations to assist households in crisis situations. The goal of providing rental, mortgage and utility assistance is to enable households to avoid losing their existing housing and the high security, cleaning and utility deposits which are required for new units in the current rental housing market

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

Priority Homeless Needs

The HCP Consortium has based its homeless strategic plan on the priorities identified in *Help Hope Home: Southern Nevada's Regional Plan to End Homelessness, the Southern Nevada 2009 Homeless Census and Survey* and the *Help Hope Home: Southern Nevada's Plan to End Homelessness Implementation Schedule*.

Help Hope Home is the roadmap Southern Nevada is using to implement its plan to end homelessness over the next ten years. Over a two year period, stakeholders were engaged and focus group meetings and input sessions were held to gain community perspective, direction, feedback and data to be used to develop the strategic action plan to end homelessness. The plan has been designed to produce results as well as to report those results back to the community.

The backbone of this plan is based on local data, obtained through the point in time homeless count, a Gaps Analysis, conversations with homeless persons, stakeholders, and local as well as national leaders in the fight to end homelessness. By focusing on managing for results, we can ensure Help Hope Home will be accountable for completing the action steps and meeting the benchmarks it has set.

Needs of Persons Threatened with Homelessness

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

Figure 41: HUD Table 1A - Continuum of Care Gaps Analysis Chart

Part 1: Homeless Population		Sheltered		Un-sheltered	Total	Clark County, NV														
		Emergency	Transitional			Count	Quality													
1.	Homeless Individuals	730	4887	6,307	11,924	N														
2.	Homeless Families with Children	31	307	8	346	N														
	2a. Persons in Homeless with Children Families	112	1275	27	1,414	N														
Total (lines 1 + 2a)		842	6,162	6,334	13,338															
Part 2: Homeless Subpopulations		Sheltered		Un-sheltered	Total															
1.	Chronically Homeless	117	2094			2,211	S													
2.	Severely Mentally Ill	1636	0	0	S															
3.	Chronic Substance Abuse	1225	0	0	S															
4.	Veterans	986	0	0	S															
5.	Persons with HIV/AIDS	68	0	0	S															
6.	Victims of Domestic Violence	637	0	0	S															
7.	Youth (Under 18 years of age)	55	0	0	S															
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	Actual	% of Goal			
					Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete						
Beds	Emergency Shelters	2066	915	1151	0	0	0	0	0	0	0	0	0	0	0	0	###	M	Y	CE
	Transitional Housing	5038	5038	0	0	0	0	0	0	0	0	0	0	0	0	0	###	H	Y	HE
	Permanent Supportive Housing	7014	1440	5574	0	0	0	0	0	0	0	0	0	0	0	0	###	H	Y	HE
	Total	14118	7393	6725	0	0	0	0	0	0	0	0	0	0	0	0	###			
Chronically Homeless		2211	117															H	Y	HEC

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	Actual	% of Goal			
					Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete	Goal	Complete						
Beds	Emergency Shelters	305	305	0	0	0	0	0	0	0	0	0	0	0	0	0	###	M	Y	CE
	Transitional Housing	1506	1506	0	0	0	0	0	0	0	0	0	0	0	0	0	###	H	Y	CHE
	Permanent Supportive Housing	1297	542	755	0	0	0	0	0	0	0	0	0	0	0	0	###	H	Y	HEC
	Total	3108	2353	755	0	0	0	0	0	0	0	0	0	0	0	0	###			

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.

Gaps Analysis

The Gaps Analysis led to the development of a regional plan that illustrates the social impacts of homelessness in this community. Lack of affordable housing, limited homeless services, non-profit capacity and few prevention services redefined this community as a community “at risk”.

Shelter and Housing Data

Shelter beds, transitional housing beds and the permanent supportive housing units information was provided through the Office of the Southern Nevada Regional Homeless Coordinator. The information on these types of housing is gathered annually as part of the Continuum of Care application for funding from HUD.

Housing Gaps Analysis Chart

In order to complete the Unmet Need/Gap of the Gaps Analysis Chart some assumptions were made. First, the current inventory was taken from the Housing Activity Charts. Next, the total number of homeless persons (members of families and unaccompanied individuals) is obtained from the 2009 Street and Shelter Count, and the Homeless Population and Subpopulation Chart was used to ascertain where the various household types (Families w/ children, unaccompanied minors, and unaccompanied individuals) were sleeping the night of the count. The homeless service providers reviewed the HUD recommended calculations for unmet need, and then considered the needs of the homeless clients in our community and the housing services they felt would best meet those needs. The calculations used were based on the outcomes of these considerations and recommendations from the provider community.

Of the 6,307 unsheltered homeless individuals, it is assumed that 50 percent of those who would most benefit from placement into permanent housing first, while 25 percent would benefit from placement directly into transitional housing. The remaining 25 percent can use the system as it has been developed over the years (e.g., enter the emergency shelters, moving from there to either permanent housing or transitional, if necessary). Of the 736 individuals in Emergency Shelter, it is calculated that 50 percent can further use the existing system and benefit by moving into transitional housing, with the remaining 50 percent benefiting from placement directly into permanent supportive housing. Finally, of the 4,722 currently in Transitional Housing 50 percent would benefit from moving through the system by graduating from Transitional Housing into Permanent Housing, with the remaining 50 percent being moved directly into Permanent Housing. This leads to a calculation of an unmet need of 1,151 individual shelter beds and 5,574 Permanent Supportive Housing beds.

The Gaps Analysis for Families contains different calculations. First, there is the assumption that families with minor children should never be “warehoused” in emergency shelter type facilities, however, there is occasion in about 5 percent of the time that those living on the streets and those in emergency shelter have such needs that it is appropriate for them to move through the system by graduating into Transitional Housing and then moving into Permanent Housing. Of the 145 families in transitional housing and the 27 unsheltered families about 35 percent of those can best be served by moving directly into transitional housing and about 25 percent of the 1,274 currently in transitional housing will continue to benefit from transitional housing prior to moving into permanent housing. The majority of our families would benefit from moving directly into permanent housing with support services. In other words, 60 percent of the 27 unsheltered families and 145 in emergency shelter and 75 percent of the families in transitional housing would be best served in permanent supportive housing. The result is a calculation of an unmet need of 755 beds or 124 family units for homeless families with children.

Homeless Inventory (91.210 (c))

Inventory of Homeless Facilities and Services

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

The Las Vegas Valley Continuum currently provides 915 year-round shelter beds, 353 seasonal/voucher beds and 6,569 transitional housing spaces are available to a variety of homeless households. Only 1,982 permanent supportive housing spaces are available in the Las Vegas Valley. There are an extremely limited number of very low cost (under \$400) rental units available.

Emergency Shelter

There are ten agencies in Southern Nevada providing 915 emergency overnight shelter spaces to the homeless. However, an additional 332 beds are available seasonally from November to April. In general, the emergency shelter programs have minimal entry criteria, include time limits (varies by agency), are located in a structure offering protection from the elements, provide restroom facilities and drinking water, are supervised and offers appropriate lighting, heating/cooling and proper ventilation. Most programs have specific target populations and cannot accept all homeless persons or families.

Figure 42: Emergency Shelter Beds Inventory, 2009

KEY: Target Population A	
CO: couples only, no children	SMF: single males and females
HC: households with children	SMF+HC: Single male and female plus households with children
SF: single females	YF: youth females (under 18 years old)
SFHC: single females and households with children	YM: youth males (under 18 years old)
SM: single males	YMF: youth males and females (under 18 years old)
SMHC: single males and households with children	

KEY: Target Population B
DV - Domestic Violence victims only
VET - Veterans only
HIV - HIV/AIDS populations only
DD – Dually Diagnosed

Program Information		Target Population		All Year-Round Beds			Seasonal/Overflow Beds		
Organization Name	Program Name	A (see Key)	B (see Key)	Beds for HH* with children	Units for HH with Children	Beds for HH w/o Children	Total Year- Round Beds	Total Seasonal Beds	Overflow / Voucher Beds
				Catholic Charities	Night Shelter	SMF		0	0
HELP of Southern Nevada	Single Parent Housing Program	SMF+HC		11	4	0	11	0	0
HELP of Southern Nevada	Youth Center	YMF		0	0	16	16	0	0
HopeLink	Inclement Weather	SMF+HC		14	7	1	15	4	21
Las Vegas Rescue Mission	Emergency Shelter	SMF+HC		26	6	46	72	17	0
Safe House	Victims of Domestic Violence Shelter	SMF+HC	DV	48	16	6	54	0	0
Safe Nest	Emergency Shelter	SMF+HC	DV	103	28	103	206	0	0
Salvation Army	Emergency Shelter Services	SMF		0	0	142	142	106	0
Salvation Army	CBOC US Vets	SMF		0	0	6	6	0	0
The Shade Tree	Emergency Shelter	SFHC		103	36	75	178	0	0
WestCare	Youth Shelter-Crisis Stabilization	YMF		0	0	15	15	0	0
Emergency Aid of Boulder City	Emergency Shelter	SMF+HC		0	0	0	0	5	0
TOTAL				305	97	610	915	332	21

*HH=Households
Source: Southern Nevada Continuum of Care Application, 2009

Transitional Housing

There are currently 17 organizations providing 6,569 transitional housing bed spaces to the homeless in Southern Nevada. There are far more transitional housing beds than emergency shelter beds, reflecting the change in focus away from warehousing homeless people in shelters to moving them in to transitional and permanent supportive housing situations more swiftly.

The admission process and criteria for transitional housing programs differ from emergency shelter programs in that transitional housing programs generally assess the prospective resident's appropriateness for the program and her/his willingness and capacity to adhere to program rules. The program rules, in turn, are designed to enhance the resident's self-sufficiency. Case management services are provided, as are other direct services designed to remove the obstacles individuals or families face when attempting to return to self-sufficiency. In addition, many of the programs listed target specific sub-populations, tailoring their services to meet that population's needs. The subpopulation served is sheltered in space that is appropriate to the individual's or family's needs, and the program provides for the residents' nutritional needs, either by providing access to a kitchen facility or by providing catered meals.

Most individuals or families accessing transitional housing programs are referred by emergency shelters and outreach programs, or by social service agencies. Some agencies have their own small continuum of programs, providing emergency, transitional and permanent housing, attracting persons in need. There are over 100 additional units which provide Tenant Based Rental Assistance vouchers through the Southern Nevada Regional Housing Authority to homeless households and severely mentally ill homeless referred through and provided supportive services by Southern Nevada Adult Mental Health Services, Lutheran Social Services and Help of Southern Nevada.

Figure 43: Transitional Housing Inventory, 2009

KEY: Target Population A	
CO: couples only, no children	SMF: single males and females
HC: households with children	SMF+HC: Single male and female plus households with children
SF: single females	YF: youth females (under 18 years old)
SFHC: single females and households with children	YM: youth males (under 18 years old)
SM: single males	YMF: youth males and females (under 18 years old)
SMHC: single males and households with children	

KEY: Target Population B
DV - Domestic Violence victims only
VET - Veterans only
HIV - HIV/AIDS populations only
DD - Dually Diagnosed

Program Information		Target Population		All Year-Round Beds/Units			
		A	B	Beds for HH with Children	Units for HH with Children	Beds for HH w/o Children	Total Year-Round Beds
Organization Name	Program Name						
Catholic Charities	Homeless to Homes	SMF+HC		146	73	24	170
Catholic Charities	Residential Work Program	SF		0	0	400	400
Clark County Social Service	Financial Assistance Service (FAS)	SMF+HC		979	214	3671	4650
Deer Valley Recovery	Transitional housing	SM		0	0	20	20
Family Promise	Sheltering	HC		14	4	0	14
HELP Las Vegas Corp.	HELP @ Bonanza	SMF	VET	0	0	75	75
HELP of Southern Nevada	Youth Center	YMF		0	0	46	46
HELP of Southern Nevada	TBRA-A New Path	SMF+HC		98	29	4	102
HopeLink/HACA	Subsidized Housing	HC		25	15	0	25
Lutheran Social Services	Supportive Housing	HC		25	9	0	25
Neighborhood Housing Services	Parsons Place	SMF		0	0	55	55
Nevada Partnership for Homeless Youth	Independent Living	YM		0	0	16	16
Salvation Army	Rental beds (triple rooms)	SMF		0	0	9	9
Salvation Army	D Dorm Family Units	HC		28	6	0	28
Salvation Army	Lied Transitional Apartments	SMF		0	0	70	70
Salvation Army	Lied Vocational Training Center-2nd fl	SMF		0	0	70	70

Clark County

North Las Vegas

Boulder City

Mesquite

Program Information		Target Population		All Year-Round Beds/Units			
Salvation Army	Pathways Group Home	SM		0	0	42	42
Salvation Army	Mental Health Court beds	SMF		0	0	18	18
Salvation Army	Single room rental units	SMF		0	0	8	8
Salvation Army	Safe Haven	SMF	DD	0	0	25	25
St. Vincent	St Vincent HELP Apartments	SMF		0	0	120	120
The Key Foundation	The Key Foundation	SM	VET	0	0	17	17
The Shade Tree	3rd floor Transitional Housing	SFHC		88	32	90	178
US Vets	SHP-Chronically Disabled Vets	SMF	VET	0	0	10	10
US Vets	Veterans in Progress	SMF	VET	0	0	128	128
Westcare	Healthy Families	HC		34	8	0	34
Westcare	Voyages-adolescent	YF		0	0	16	16
Westcare	Voyages-adult women	SF		18	6	0	18
Westcare	Women's Residential	SF		0	0	34	34
Westcare	HSR youth	YM		0	0	16	16
Westcare	HSR adult	SM		0	0	40	40
Westcare	Young Faces	YF		0	0	16	16
Women's Development Center	Elderly Women	SF		0	0	4	4
Women's Development Center	Transitional Housing	HC		51	19	19	70
	TOTAL			1506	415	5038	6569
*HH=Households Source: Southern Nevada Continuum of Care Application, 2009							

Permanent Supportive Housing

Referrals to permanent supportive housing are made throughout the continuum of services: prevention, outreach, emergency and transitional shelters. Some transitional housing programs also offer permanent, affordable housing and streamline their transitional housing clients into any vacant units. The total units, 1,982 of permanent supportive housing, do not nearly meet the needs of the community.

In addition to the reported Permanent Supportive Housing, this community has been working to increase the supply of housing that is affordable to those households leaving homelessness and/or at-risk of homelessness (households at or below 50 percent of area median income). Local governments have partnered with non-profit housing developers to provide affordable housing to households at-risk of further homelessness due to income restraints.

Figure 44: Permanent Supportive Housing Inventory, 2009

Program Information		Target Population		All Year-Round Beds/Units				Total Year-Round Beds
		A	B	Beds for HH with Children	Units for HH with Children	Beds for HH w/o Children	CH* Beds	
Organization Name	Program Name							
Caminar	Acacia Gardens	SMF	HIV	0	0	8	8	8
Clark County Social Service	Permanent Housing Project	SMF		0	0	70	70	70
Golden Rainbow	Permanent Housing	SMF+HC	HIV	21	9	2	0	23
HELP Las Vegas Corp	HELP @ Owens II	SMF	VET	0	0	75	0	75
HELP Las Vegas Corp	HELP Genesis	HC		100	50	0	0	100
HELP of Southern Nevada	O.U.T.R.E.A.C.H.	SMF		61	15	152	152	213
HELP of Southern Nevada	HELP them HOME	SMF		0	0	25	25	25
Nevada HAND	Horizon Crest Apartments	SMF+HC		0	0	12	12	12
Nevada HAND	Skyview Apartments	SMF+HC		204	80	64	6	268
Southern Nevada Adult Mental Health Services	Supported Living Arrangements	SMF+HC		68	20	159	0	227
Southern Nevada Adult Mental Health Services	HUD I	SMF+HC		56	19	80	60	136
Southern Nevada Adult Mental Health Services	HUD II	SMF+HC		23	8	21	16	44
Southern Nevada Adult Mental Health Services	HUD III	SMF+HC		9	3	34	3	43
Southern Nevada Adult Mental Health Services	HUD IV	SMF		0	0	18	3	18
Southern Nevada Adult Mental Health Services	Group Homes	SMF		0	0	430	0	430
US Vets	SHP-Disabled Vets	SMF	VET	0	0	10	0	10
Veterans Administration	Housing Choice Vouchers	SMF	VET	0	0	105	0	105
Veterans Administration	Housing Choice Vouchers II	YMF	VET	0	0	175	25	175
	TOTAL			542	204	1440	380	1982

*HH=Households; *CH=Chronically Homeless

Source: Southern Nevada Continuum of Care Application, 2009

Clark County

North Las Vegas

Boulder City

Mesquite

Supportive Services

Assessment of homeless individual's needs is conducted by a trained caseworker in all programs providing supportive services. Caseworker's knowledge of services and eligibility requirements is augmented through the Mainstream Programs Basic Training series and the community-wide, web-based Homeless Management Information System (HMIS) that includes an Eligibility Screening tool that facilitates more thorough and regular assessment of client's needs for services. The following provides a summary of the current supportive services available.

Supportive services provided by the community and available to all Southern Nevada households (homeless and housed) include: childcare assistance payments for working parents; public assistance such as food stamps, TANF, medical cards, etc.; employment training and placement programs, home energy assistance, substance abuse treatment, medical and dental care, parenting skills classes, child support enforcement through the County District Attorney's Office; and credit counseling services to assist in budgeting and deficit management.

Mainstream Programs Basic Training (MPBT Series): The Southern Nevada Continuum of Care instituted a series of in-service trainings for all caseworkers in the homeless service agencies. The Mainstream Programs Basic Training (MPBT) series brings together representatives from all mainstream services related to a particular topic. The MPBT forum will serve as distribution point for the FirstStep information and referral software prepared by HUD and HHS. Participation in the MPBT trainings is required of agencies making application through the CoC funding competition.

Case Management and Financial Assistance to Overcome Barriers: Transitional Housing programs engage clients in a case plan that identifies client's needs, assesses their eligibility and appropriateness for other community services, and monitors their progress. Many of them offer direct financial assistance to their program's clients to help overcome barriers to self-sufficiency. Other homeless and at-risk of homelessness households are served by five agencies spread out geographically across the valley providing this kind of financial assistance to individuals and families who are not yet homeless.

Life Skills Programs: Life skills are incorporated into all homeless providers' programs that require case management. Comprehensive life skills programs on particular topics are offered through the Family Resource Centers, Family-to-Family Connection, Nevada Partners, Nevada Association of Latin Americans, and HELP of Southern Nevada.

Substance Abuse Treatment & Counseling: Four non-profit organizations provide 267 in-patient beds for substance abuse treatment to the community's indigent. Outpatient treatment is available from these four as well as many other sources. Many shelters offer on-site 12-Step programs or other substance abuse counseling. Additionally, Veterans have access to Arville House inpatient treatment services provided through the VA, outpatient treatment provided by the VA Health Clinics, and a BADA-certified counselor from the US Vets program. Clark County instituted a Drug Court program in 1992, and has expanded the concept to include the nation's first Juvenile Drug Court, Prison Re-entry Drug Court, and Child Support Drug Court.

Mental Health Services: Southern Nevada Adult Mental Health Services is responsible for mental health care for the indigent, and provides a 24-hour Crisis Center and inpatient as well as outpatient services. The Salvation Army's PATH, PATHWAYS, and Safe Haven projects offer diagnosis, treatment, and ongoing care for homeless mentally ill who may or may not be enrolled in a shelter program. The District Court 16 includes a Mental Health Court, where non-violent mentally ill offenders are provided intensive case management and treatment.

HIV/AIDS: Aid for AIDS of Nevada (AFAN) provides comprehensive case management, including medical appointments and assistance, to persons infected by HIV/AIDS. Through a unique partnership with Clark County Social Service, HIV/AIDS clients receive case management from AFAN and financial assistance, medical assistance and other services – including rental assistance and/or a Shelter Plus Care voucher – from the County.

Education: The needs assessments caseworkers complete on clients as they enter the care system include an assessment of educational needs. The Nevada Department of Employment, Training and Rehabilitation (DETR) and its partnerships with Workforce Investment Act programs is the primary resource for adults needing remedial education, GED assistance, and/or vocational training. The Nevada Partnership for Homeless Youth has made funds available to help homeless youth study for and take the GED tests.

Employment Services: DETR has three JobConnect offices in the valley providing comprehensive employment services – including financial assistance with identification, work cards, work clothes, tools, basic education, etc. DETR also administers the unemployment compensation benefits and provides Vocational Rehabilitation to persons needing to enter a new vocation. Four private non-profit agencies, Salvation Army, Catholic Charities, Las Vegas Rescue Mission and Key Foundation, offer comprehensive employment training, placement and supportive services specifically for homeless individuals, primarily males. Nevada State Welfare administers the Temporary Assistance to Nevada Families, which includes a very strong job training and placement program titled NEON (New Employees of Nevada).

Childcare: The State of Nevada tripled its budget for childcare subsidies to low-income working families. Despite this increase in services, there still exists a waiting list for non-TANF families. There are six childcare agencies that offer childcare on a sliding-fee scale with three specifically assisting families in the homeless shelters with childcare while the families await subsidy from the State. The City of Las Vegas provides grants to childcare facilities located within City limits – including these three.

Medical Care: Clark County provides the majority of health care coverage for the homeless and indigent. The Clark County Social Service (CCSS) Medical Assistance Service provides medical care to indigent and medically needy individuals who are not served by other public or private resources. Services include: outpatient clinic care, inpatient hospital care through University Medical Center (UMC) and other area hospitals, emergency room services, medications, institutional care, adult day care, and medical transportation. The Southern Nevada Health District (SNHD) is the public health agency and provides Public Health Nursing, health clinics and services for indigent persons and children, and provides treatment for Tuberculosis patients.

Nevada Health Centers offers three health clinics (geographically dispersed throughout the valley – one in North Las Vegas, another in southeast Las Vegas and the third in southwest Las Vegas) as well as one Health Care for the Homeless clinic that specifically serves the homeless. In addition to conducting outreach, the HCHP program provides a full array of medical services, including prescriptions to homeless or indigent persons. Clark County, the City of Las Vegas and the City of North Las Vegas CDBG funds built the Enterprise Health Care and Dental Center providing health care to the indigent and medically uninsured.

WestCare operates the community triage center, which provides medical detox services to the homeless and low-income populations (depending upon the time of month, anywhere from 59 percent to 80 percent of the patients are homeless at the time of treatment).

SAFAH-Link Assistance to Move Out of Shelters and Reduce Return to Homelessness: With a Supportive Housing Program grant, the Women’s Development Center offers housing counseling and financial assistance for households leaving emergency or transitional shelters. Financial assistance is provided for the first month’s rent, rent and utility deposits, furniture and kitchen essentials, moving van rental, and other necessities that can be a burden for a family leaving homelessness. Families receive case management for six months after placement, and experience reduced recidivism.

Homeless Prevention

Rent/Mortgage Assistance to Prevent Evictions: Eight agencies (Catholic Charities of Southern Nevada, Clark County Social Service, Emergency Aid of Boulder City, Henderson Allied Community Advocates, HELP of Southern Nevada, Lutheran Social Services, the Nevada Association of Latin Americans, the Salvation Army located in Mesquite), distributed across the valley, offer Rental Assistance to prevent the unnecessary homelessness of households experiencing a temporary crisis, or New Move In Costs to households who are currently homeless and have income, but need assistance with move-in costs. Additionally, many local churches and synagogues assist their congregants and members of their faith community with rental assistance to prevent homelessness. Lutheran Social Services, Jewish Family Service Agency and the Church of Jesus Christ of Later-Day Saints (LDS) offer a variety of formal support services to their community members, including case management, and rental, utility or food assistance.

Using HOME Funds for Tenant-Based Rental Assistance: The City of Henderson has partnered with HACA to provide four “Section 8 look-alike” vouchers for two years for households at-risk of homelessness. The City of Las Vegas has a similar arrangement with HELP of Southern Nevada and Catholic Charities, providing enough HOME funding for 80 vouchers. Clark County has provided the Housing Authority of Clark County with several HOME TBRA grants to provide over 100 scattered-site Transitional Housing vouchers for homeless households. In all cases, households are assisted for up to two years with rental subsidies and intensive case management to ensure the household regains stability and self-sufficiency and has secured permanent housing that is affordable to them upon exit.

Unaccompanied Homeless Youth: Since the Nevada Partnership for Homeless Youth successfully advocated with the 2001 Nevada Legislature to make legislative changes allowing agencies to serve youth without the permission of parents, many services and programs have been opened to unaccompanied youth. In almost every instance, these services are provided with the determination to prevent these children from becoming future years’ chronically homeless persons. There is a drop-in center near the University and one in downtown near the “homeless corridor” providing basic needs and adult guidance, there are four providers of shelter and services to the kids who are ready to leave the streets, and there are comprehensive supportive services – including financial assistance with work cards, GED tests, medical needs, etc. made available to this population.

Emergency Temporary Protective Orders: Emergency Temporary Protective Orders (ETPO) are available 24-hours per day, 7-days per week to Clark County residents. These ETPOs allow a judge to evict the violent perpetrator from the residence, and can even assign temporary child support or spousal support. Hence, survivors of domestic violence attempting to end a violent relationship need not become homeless to do so. Both Safe Nest/TADC and S.A.F.E. House have a Team that works directly with the Las Vegas Metropolitan Police Department and/or Henderson Police Department to ensure that the victims have the necessary resources and do not become homeless.

Utility Assistance: Seven agencies (Catholic Charities of Southern Nevada, Emergency Aid of Boulder City, HELP of Southern Nevada, the Nevada Association of Latin Americans, and the Salvation Army

locations in Henderson, Las Vegas and Mesquite), distributed across the valley, offer Utility Assistance to prevent the unnecessary termination of essential utilities while these households await approval for energy assistance or conservation modifications funded through a Universal Energy Charge enacted in the 2001 Nevada Legislature.

Information & Referral Services: For the past twenty years, HELP of Southern Nevada has provided comprehensive Information and Referral services to all programs offering social support services in Southern Nevada. The information has also recently been made available via the agency's website.

Referrals from the continuum of care service provider network: Most frequently, individuals or families contact an agency they have heard of or are reading about in the newspaper, and the intake worker of that agency conducts an abbreviated needs assessment and offers referrals to services that the client can pursue.

Outreach

Southern Nevada has witnessed a dramatic increase in the number of Outreach Teams that aggressively seek the homeless staying in the wash areas, vacant lots, and abandoned buildings to make contact with the un-sheltered, street homeless.

Organizations United to Reach, Educate and Assist Chronic Homeless (O.U.T.R.E.A.C.H.): The O.U.T.R.E.A.C.H. program has created a mobile crisis intervention team that provides intervention, assessment, treatment referrals and other related services to address the immediate crisis facing chronically homeless persons. The project has access to wrap-around funds to respond to the immediate needs of clients (i.e. identification, housing placement, childcare, transportation, initial medical, dental and mental health appointments) and prepares clients for transition to existing or newly developed case management teams. The case management teams assist clients in entering the social service system and provide on-going monitoring and follow-up to address medical, mental health and substance abuse issues.

Shine the Light: The O.U.T.R.E.A.C.H Team has developed a separate team called "Shine the Light" which goes into the tunnels beneath Las Vegas to actively engage those folks and encourage them to move into services and housing. Within the first 6 months of operation, this group engaged 58 encampments and moved 12 into permanent housing.

LVMPD / HELP Team: The Las Vegas Metropolitan Police Department (LVMPD) has instituted a HELP Team (Homeless Evaluation Liaison Program) in each Area Command (geographically dispersed). The HELP Team members are specially trained to work with the homeless population, service providers, and the community, and have special training to better serve the mentally ill. The police officers assigned to the HELP Team patrol their beat (the "homeless corridor" and camps along the railroad tracks) daily, making positive contact with the chronic homeless and providing crisis intervention and referrals (and oftentimes transportation) to homeless individuals and families. Some Area Commands have formed partnerships with nonprofit organizations that supply the HELP Teams with basic hygiene kits, food kits, blankets and trash bags. Overall, the HELP Teams goals are to direct homeless persons to services rather than jail.

Thursday HELP Team: The Downtown Area Command "escorts" or "sponsors" an Outreach Day each Thursday, providing escorts and introductions to community service providers who otherwise do not go into "the bush" and wash areas. Regular members of the Thursday HELP Team include: Southern Nevada Adult Mental Health Services, Veterans Administration's Community-Based Outreach Clinic, Health Care for the Homeless, and Clark County Social Service. Other programs that have joined on an irregular

basis include church groups, Social Work students, etc. Together, the Thursday HELP Team works to assess the homeless person's problems, and identify how to help them from a range of solutions (psychiatric, income, substance abuse, job training, etc.)

Health Care for the Homeless Team: The Health Care for the Homeless program sponsored by the Nevada Health Centers has an Outreach Team that regularly visits the chronic homeless "in the bush", as well as making contact with homeless staying in the streets or public parks. Traveling in a well-stocked van, a Case Manager and a Licensed Practical Nurse provide unsheltered homeless with medical case management, transportation to appointments, medication monitoring – including dispensing and delivery of prescriptions. A second team is planned.

Straight from the Streets: This grassroots organization was formed to specifically address the needs of the chronic homeless who resist services from the established care system. Straight from the Streets performs its street outreach on average five days per week, providing basic needs items such as water, blankets, food and other hand-outs to comprehensive case management and transportation to appointments so that these unsheltered homeless can apply for public benefits from mainstream programs that provide income supports, health care/medications, housing and employment supports. Straight from the Streets averages a case load of approximately 25 "active" cases and provides follow-up services to the nearly 100 chronically homeless placed into permanent housing through this program.

US Veterans Initiative Outreach Team: US Veterans Initiative has an Outreach Team consisting of four (4) full-time permanent staff members who make regular visits to agencies, community-based organizations and parks/public areas within Clark County to educate staff on veteran-specific services and to meet with homeless veterans individually and in groups. This team reaches the homeless veterans and helps to connect them with the services they need.

Teen Outreach: The Dusk to Dawn program of WestCare Nevada focuses on street outreach for youths, aged 10 – 17. They go out to different areas on different nights, but focus on downtown's Fremont Street and along Paradise Road and provide basic hygiene packs, food, blankets, food vouchers to area restaurants, and transportation to shelters when ready.

Faith-Based Food Distribution: There are many faith-based programs that bring sack lunches, hot meals, and/or hygiene kits to homeless individuals in downtown areas and area parks. Many have organized themselves so that they each take a different day of the week, so as to spread out the assistance and offer a consistent presence.

Projects for Assistance in Transitioning from Homelessness (PATH Outreach): The Salvation Army has five outreach workers based in the Safe Haven, but reach out to rural areas such as Mesquite and Pahrump. The PATH Outreach Team goes regularly to these rural areas and interacts with mainstream services located there as well as local providers and also do "desert outreach" in these rural areas.

Salvation Army Community Response Team: Four workers have a goal of getting the unsheltered homeless person enrolled in the appropriate Salvation Army program (drug/alcohol treatment, mental health supports, vocational training, etc.) and then case manage them to self-sufficiency. One staff member is assigned to respond to community-based calls for help for people in alleyways, emergency rooms of hospitals, other shelters, etc.

Key Foundation, and Friends in the Desert: These programs sponsored by nonprofit homeless service providers go out into the parks, "the bush" and/or the areas outside of the "homeless corridor" weekly, bringing food, clothing or services to the chronic homeless, including homeless veterans.

Homeless PACT Team: The Southern Nevada Adult Mental Health Services has a 7-member PACT Team with an alcohol/drug abuse treatment counselor that is stationed in the “homeless corridor” and attends the LVMPD HELP Team’s Thursday outreach trips. The PACT Team is essentially a “hospital without walls” and the chronically homeless individuals receive case management, medications, individual and group therapy, and housing.

PACT, Forensic Case Management, Continuity of Care: The Southern Nevada Adult Mental Health Services (SNAMHS) provides a variety of programs that respond to the special needs of mentally ill individuals within the community. In addition to the Homeless PACT Team discussed above, SNAMHS has other PACT Teams (Program for Assertive Community Treatment) that serve the at-risk of homelessness population (those leaving jails, hospitals or other structured environments). Clients receive the staffing of a psychiatric unit without admission to the psychiatric hospital. Forensic Case Management works in partnership with the legal system to provide emergency supportive services, including service coordination, for the mentally ill offender. The Continuity of Care (COC) program provides services to consumers who may not immediately meet the criteria for case management, intensive case management or PACT, but are in need of emergency case management services and stabilization.

Safe Haven and Salvation Army’s Day Resource Center (DRC): The Salvation Army DRC and its Safe Haven complement outreach teams in that they have open doors so that homeless people enter and leave voluntarily. These Centers offer a place to be off the streets along with restroom facilities, food, a variety of activities, and connections to the larger continuum of care system. If desired, a homeless person can receive case management services and referrals to needed programs. They also will store mental health medications for any homeless individual.

Shade Tree’s Day Shelter: The Shade Tree Emergency Shelter for Women and Children offers a Day Shelter that operates from 8 a.m. to 4 p.m., seven days a week. The Day Shelter provides “street” women and other homeless women and children a safe place to escape the urban environment with access to food, beverages, and all facilities. Supportive services such as a Public Health Nurse and counselors from Family and Child Treatment are offered on-site to a limited degree.

Clark County Social Service: An Outreach Team is assigned to the “homeless corridor” area and makes regular visits to the homeless shelters to assess individuals for financial assistance, medical assistance, job search and placement services, and other services offered by the County. CCSS also has three remote offices for better access to the homeless and those at-risk of homelessness in other areas of town (offices in North Las Vegas, Henderson, and southeast Las Vegas).

Clark County Outreach Team (CCOT): CCOT provides street outreach to HIV/IDU populations and is a partnership between AFAN, Caminar, the Southern Nevada Health District, Community Counseling Center and WestCare Nevada, Inc. This group targets alleyways, gay bars, the “Westside”, anywhere they expect to find intravenous drug users, and often serve unsheltered homeless people.

Clark County School District: The Clark County School District’s Compensatory Education Division administers the Homeless Education Program which contacts shelters, RV parks, motels/hotels, campgrounds and social service agencies to ensure homeless children are enrolled in school and their families have access to resources they need. As part of this function, they are often the first-referring agency for homeless families.

Safe Nest & LVMPD Partnership: Safe Nest/TADC, a battered women’s shelter and resource center, and Metro have teamed up to provide the Crisis Response Team (CRT). This Team pairs a trained volunteer

with a police officer to provide on-site, emergency counseling and case management, including needs assessment and referrals, to women experiencing the aftermath of a domestic violence situation.

Homeless Youth Drop-In Center: The Sanctuary was opened in the southeast area of town in 2002 to offer clothing, blankets, food, coupons to fast-food restaurants and recreational activities on a “no questions asked” basis to build trust with the homeless (runaway and throwaway) population. The Center for Independent Living is located in the “homeless corridor” and offers drop-in services to youth in that area – including meals, education assistance, and on-site shelter for those desiring to leave the streets.

Homeless Connect: A comprehensive one-day event, Homeless Connect, provides access to over 40 public and private programs that can benefit the homeless. Held annually at Cashman Field Convention Center, located just 1.5 miles from the main homeless shelters, between 2,300 – 3,000 homeless persons access housing services, family support services, educational programs, drug or alcohol treatment programs, employment support programs, legal assistance (including the quashing of warrants and providing pro-bono attorneys), primary health care services, a Job Fair, food, blankets and clothing, and other supportive services such as state identification cards at no charge, vaccinations, HIV testing, etc. It is a collaborative effort by member agencies and local businesses, targets all homeless and at-risk individuals, and is the largest effort of its kind in the country.

Obstacles to Serving Homeless

There are three major obstacles to implementing the region-wide approach that is outlined in the 10 Point Plan - the Southern Nevada Regional Housing and Homeless Plan. The first challenge is identifying and securing adequate resources to implement the plan. Increased regional cooperation in joint funding of several projects in the past year indicates increased future support for the creation of a Regional Homelessness Trust Fund as recommended by the 2001 Homelessness Summit. Second, although the community has achieved the functional equivalent of a Regional Homelessness Trust Fund, additional steps and coordination must take place to continuously fund this important regional funding mechanism.

The community faces the inherent complexities in engaging chronically homeless individuals, many of whom suffer from severe mental illnesses. Services for the mentally ill have not kept pace with the rapid growth in Southern Nevada, causing a gap between need and services. The State of Nevada and local government entities have begun to focus attention to the need, resulting in increased mental health outreach. Additional funding commitments will be required by both the public and private sectors to provide sufficient funding to meet the 10 Point Plan’s priorities for enhanced homeless services.

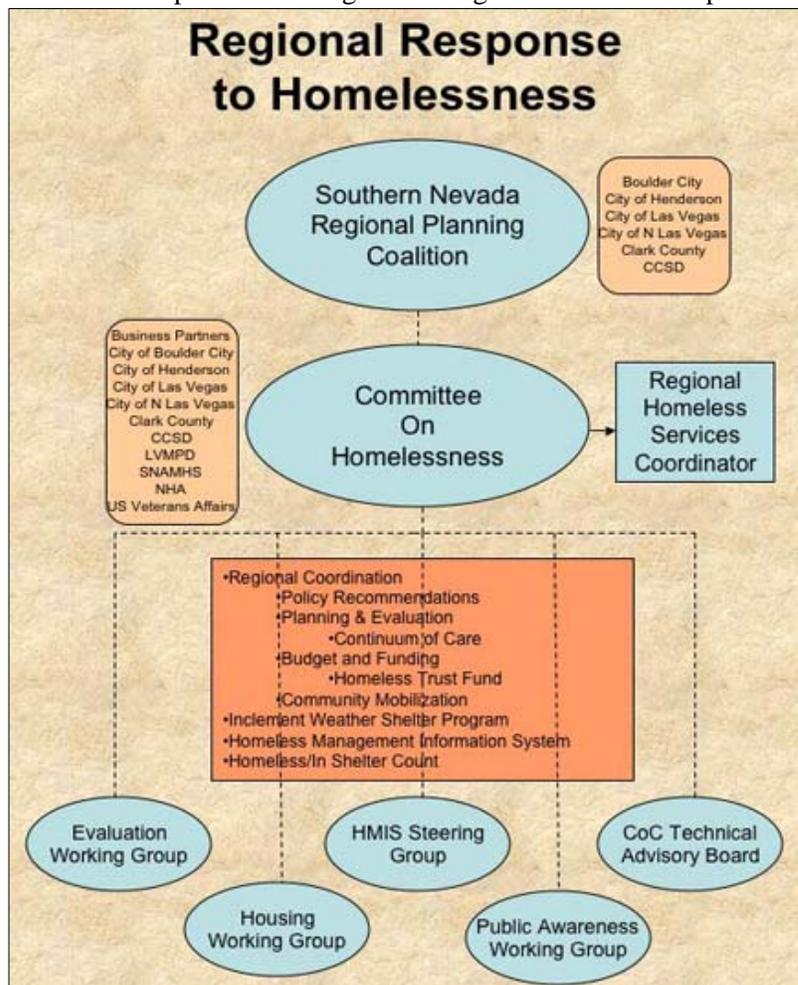
Homeless Strategic Plan (91.215 (c))

Background

On February 22, 2001, the Southern Nevada Regional Planning Coalition (SNRPC) Board established a Homeless Task Force charged with constructing a workable plan to reduce homelessness throughout the region. This task force became the SNRPC Committee on Homelessness (CoH) on September 25, 2003. The membership of the Committee is appointed by the SNRPC and includes designees from each jurisdiction, the Nevada Homeless Alliance, Las Vegas Metropolitan Police Department, Southern Nevada Adult Mental Health Services, United States Veterans Affairs and local business.

The CoH assumed responsibility for developing the proposed regional plan and adopted a planning process on September 16, 2004. The planning process eventually produced *Help Hope Home*, Southern Nevada’s regional plan to end homelessness. The plan was designed through a collaborative process engaging local governments, community providers, faith based organizations, local businesses, and committed individuals who recognized a need to address the issues of homelessness. These planning sessions resulted in Southern Nevada developing a plan that focuses on ending the problem of homelessness, rather than managing it. A focus on housing is a top priority of this plan.

The Office of the Regional Homeless Services Coordinator was also created in 2004 to support the Committee on Homelessness by coordinating a regional response to homelessness through collaborative efforts among local government entities and nonprofit service providers. This response depends upon input from all, and a structure was established to demonstrate that commitment. See graphic *Regional Response to Homelessness* which outlines the structure through which the efforts to end homelessness are undertaken.



Plan Development

Over 150 diverse stakeholders participated in planning and focus groups over a ten month period to provide input on gaps in services to the homeless and those at-risk of homelessness. Stakeholders included the homeless, homeless service providers, representatives from the business community, and neighborhood organizations. The gaps analysis identified over 105 gaps in service that were grouped

under 10 priority areas. In June, 2005 the SNRPC and its CoH approved the following ten original points, which became the Southern Nevada Regional Homeless and Housing 10 Point Plan.

- Enhance coordination between non-profit organizations and government
- Prevent individuals and families from becoming homeless
- Provide seamless client services through effective partnerships
- Foster self-sufficiency through access to education, training and employment opportunities
- Increase the availability of stable and affordable housing
- Facilitate the transition from homelessness through intensive case management
- Ensure the availability of basic needs services
- Increase access to medical, dental and vision care services
- Improve the availability of mental health services
- Improve the availability of substance abuse treatment programs

HCP Consortium Homeless Strategic Plan

Building on the Ten Point Plan and after two years of initial planning and infrastructure building, Southern Nevada rolled out the first *Help Hope Home* Business Case in September 2007 for the region. This Implementation Schedule and a detailed Work Plan supports the business case and identifies the strategies, action steps and evaluation methodology to be used to ensure that progress is made toward the overarching goal of ending homelessness. The HCP Consortium, along with other Southern Nevada jurisdictions, will move forward using the information gained from the community planning sessions, local best practices in use and research data that aligns with the needs of the community. The three key strategies to change are:

1. **HELP- Planning for Outcomes** - Design a roadmap for change, including objectives, activities and evaluation plans for each of the key strategies that will drive community outcomes. Build the infrastructure that will deliver services, increase access to housing opportunities and support through increased collaboration and strategic alliances across the region.
2. **HOPE- Closing the Front Door to Homelessness**- Prevent homelessness whenever possible. Improve the availability of prevention programs, expand the types of prevention strategies, and evaluate their effectiveness in preventing homelessness. Provide people at risk for homelessness with wraparound services. Improve access to wraparound mainstream services that link clients to services and community support to keep the client in safe, affordable housing and address health and wellness issues.
3. **HOME- Opening the Back Door out of Homelessness** - Rapidly re-house people who become homeless. Expand the availability of affordable permanent housing and improve access to sustainable housing options. Implement the transition from the existing tiered shelter system to a system that focuses on providing housing.

The HCP Consortium has integrated the *Help Hope Home* plan into this Consolidated Plan, by reference.. The HCP Consortium Homeless Strategic Plan focuses on two parts of the *Help Hope Home* plan, **Closing the Front Door to Homelessness** through prevention and improved access to services, and **Opening the Back Door out of Homelessness** through expanding the availability of a variety of housing options. This focus is based on the eligible uses of the CDBG, ESG and HOME funds that are the major funding sources available through this Consolidated Plan. All *Help Hope Home* documents are available at www.helphopehome.org

Consolidated Plan Outcomes and Objectives

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

HCP CONSORTIUM HOMELESS STRATEGIC PLAN

Availability, Accessibility and Affordability of Housing, Public Services and Facilities for Homeless

Availability/Accessibility of Decent Housing (DH-1) Opening the Back Door out of Homelessness					
Specific Objective		Source of Funds	Year	Performance Indicators	Expected Number
DH 1.3	Expand the availability of affordable permanent housing with supportive services for homeless and formerly homeless individuals and families	HOME, LIHTF, Bonds, LIHTC, NSP	2010	Completed units	16
			2011		20
			2012		20
			2013		40
			2014		40
MULTI-YEAR GOAL				136	
DH 1.4	Rapidly re-house people who become homeless by maintaining and expanding supply of emergency shelter and transitional housing	ESG, HPRP	2010	People Assisted	3,400
			2011		3,400
			2012		3,400
			2013		3,400
			2014		3,400
MULTI-YEAR GOAL				17,000	
Affordability of Decent Housing (DH-2) Closing the Front Door to Homelessness					
Specific Objective		Source of Funds	Year	Performance Indicators	Expected Number
DH 2.3	Prevent homelessness whenever possible. Improve the availability of prevention programs and expand the types of prevention strategies.	ESG, HPRP, County Funds	2010	People Assisted	500
			2011		400
			2012		100
			2013		100
			2014		100
MULTI-YEAR GOAL				1,200	
DH 2.4	Provide people at risk of homelessness with wraparound services to keep the client in safe, affordable housing and address health and wellness issues	ESG, HPRP, County Funds	2010	People Assisted	200
			2011		100
			2012		100
			2013		100
			2014		100
MULTI-YEAR GOAL				600	
Availability/Accessibility of Suitable Living Environment (SL-1)					
Specific Objective		Source of Funds	Year	Performance Indicators	Expected Number
SL 1.1	Provide homeless individuals and families with services that will help them regain self-sufficiency including job training, GED assistance, health care, child care assistance, transportation assistance, etc.	ESG, HPRP, County Funds	2010	People Assisted	400
			2011		400
			2012		400
			2013		400
			2014		400
MULTI-YEAR GOAL				2,000	

Chronic Homeless

HUD defines a chronically homeless person as:

An unaccompanied individual with a disabling condition who has been:

- Continually homeless for one year or more; or
- Has experienced four or more episodes of homelessness within the past 3 years.

It should be noted that “a disabling condition” in this case is defined as a physical or developmental disability, mental illness, alcohol or drug abuse, depression, Post-Traumatic Stress Disorder (PTSD), HIV/AIDS, or a chronic health condition.

The following are the programs and projects that will be used to address chronic homelessness over the next five years.

- Help Hope Home has identified a number of new housing opportunities that must be created in order to meet current unmet needs, including creating 1084 permanent affordable housing units for first time homeless persons, and 1059 new permanent supportive housing opportunities for chronic homeless. In addition, the plan identifies the needs to create 40 “gateway” housing opportunities, which are part of the overall housing first system. Gateway units are designed to help individuals gain independent living skills before they move into permanent housing in order to increase their chances of being successful living on their own.
- Clark County will continue to provide Tenant-Based Rental Assistance (TBRA) funding to assist in the immediate housing of the chronically homeless mentally ill who are referred to the Southern Nevada Regional Housing Authority by Help of Southern Nevada, Lutheran Social Services, Mohave Mental Health, and Southern Nevada Adult Mental Health Services.
- The local government entities have jointly funded several basic-needs services in the regional planning effort of the CoH, including Winter Shelter beds, the Homeless Management Information System, Summer Shelter (due to extreme heat), and other regional coordination efforts.
- Poverello House, a day site of respite for chronically homeless men, opened a second house in the Henderson area. This house of hospitality offers two hot meals, showers, laundry facilities, games, and camaraderie to the unsheltered, building relationships with them and encouraging them to engage in services. The Henderson house is open to women on Wednesdays.
- Another approach the community has taken to serving the chronically homeless is to ensure a range of shelter options is available – including the free, no-strings shelters and meal programs that assist with meeting the most basic needs of individuals. The Salvation Army and The Shade Tree provided 287 “free, no-strings” emergency shelter beds, and an additional 200 beds are made available through Catholic Charities during the cold winter months. These beds provided basic life-sustaining services with extremely limited behavioral expectations for both the episodically homeless who have experienced a short-term crisis such as employment lay-off, unpaid medical crises, or the break-up of a family, as well as chronically homeless individuals who cannot comply with program rules.
- Catholic Charities at St. Vincent’s Plaza has solidified its continuum of services for the chronically homeless. Participants in the free, no-strings winter shelter and summer day shelter are encouraged to participate in the “Phase One” program which provides low-demand shelter and three meals per day for \$7 per night. “Phase Two” is a Residential Work Program which

assists homeless men to secure day labor, temporary jobs, and full-time permanent positions in the community while providing shelter (with increased privacy and access to other services), meals and transportation assistance. Phase Three includes transitional housing in the St. Vincent/HELP Apartments or placement in one of Catholic Charities affordable housing projects.

- A consortium of veterans groups will continue to host the valley's Stand Down for Homeless Veterans each spring on the US Vets campus. This veteran-specific Stand Down provides veterans with supportive services, a hot meal, camaraderie, and a welcoming introduction to the many services offered in the community for veterans.
- The CoH will continue to sponsor Project Homeless Connect, an annual one day event, which serves over 2,000 homeless individuals annually, including approximately 775 chronically homeless individuals. As a result of their attendance at Project Homeless Connect, clients access services ranging from eye exams to haircuts to clothing to information on various housing and service opportunities in Southern Nevada, including quashing of warrants and special adjudication in an on-site court.
- With property prices decreasing and the number of foreclosed properties, the CoC plans to encourage and assist housing providers in finding funds to purchase these properties to serve as permanent housing for our chronically homeless. The CoC continues to work with providers to develop permanent housing units for chronically homeless. The CoC will continue to work closely with the jurisdictions receiving NSP funds in order to provide opportunities for providers and clients to purchase properties in foreclosure, therefore providing more permanent housing opportunities.

Institutional Structure

Federal, State and Local Agencies

The Office of the Regional Homeless Services Coordinator was also created in 2004 to support the SNRPC Committee on Homelessness by coordinating a regional response to homelessness through collaborative efforts among local government entities and nonprofit service providers. This response depends upon input from all, and a structure was established to demonstrate that commitment. See graphic *Regional Response to Homelessness* which outlines the institutional structure through which the efforts to end homelessness are undertaken.

Non-Profit Organizations

The vast majority of agencies providing housing and services to homeless persons in the region are nonprofit organizations. They have participated in the planning and implementation process through the Regional Plan Focus Groups and the SNRPC Committee on Homelessness and through relationships with local government.

Private Industry Businesses and Civic Organizations

Having the support and involvement of the local business industry and of civic organizations has been an indispensable part of the success of the Continuum of Care system. Many businesses originally became involved in the Homeless Coalition and were aware of homeless issues through their participation in the annual Stand Down for the Homeless (now Project Homeless Connect). Many businesses continue to participate in the Project Homeless Connect on an annual basis and support the Office of the Regional Homeless Coordinator to maximize private support in the fight against homelessness.

Gaps in Institutional Structure

Over the past year several emergency shelter programs had to close due to loss of funding. One program in particular had beds that were being used as detox beds. Another program added emergency shelter beds for households with children. Clark County Social Service experienced an unprecedented increase in the number of people who accessed their services for financial assistance in transitional living situations. In addition, the only women and children emergency shelter in the community re-organized and dedicated additional beds and units to transitional housing. Overall there is still a need for additional emergency shelter.

The institutional response to youth exists through the foster care and juvenile justice system. However, neither is adequate to respond to the needs of homeless unaccompanied youth. There has been enormous progress made in addressing the needs of unaccompanied homeless youth in recent years including the change in state law that allows this homeless subpopulation to receive services from non-profit organizations. However, there are few shelter spaces available to these young people and limited services to assist them.

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

Discharge Planning Policy

Foster Care

The Division of Child and Family Services is responsible for the oversight of all independent living programs in Nevada. The goal of Nevada's Independent Living Program is to provide children making the transition from placement to independence with the skills and resources necessary to make them independent and productive members of society. Nevada's Independent Living Program is a set of services available to all foster youth between the ages of 15.5 until the age of 21. Nevada's Independent Living Program does not refer foster youth to HUD McKinney-Vento funded programs.

The Division considers all eligible foster youth to include those youth who are in the care and custody of the Division, Washoe County Department of Social Services, or Clark County Department of Family Services. The Division considers foster care to be the legal status of the child. The physical placement of the child does not determine the eligibility for independent living services. Independent living services may continue with the child after permanency has been achieved, depending on the needs of the child. There are instances where the youth turns 18 and refuses further services from the Foster Care system or they may runaway and not able to be located. In these cases, the Wardship is terminated.

Health Care

A Health Care workgroup was formed and will continue to meet on a regular basis in order to develop formal discharge protocols for all hospitals throughout the state, with the focus being on safe, stable housing upon discharge into non-HUD McKinney-Vento funded programs. Those represented in the planning group are the Clark County Hospital and Medical Centers, Saint Marys Regional Medical Center/CHW in Reno, private for profit and non-profit hospitals throughout the state, various health

centers throughout the state, non-profit homeless providers throughout the state and CoC representatives from each continuum within the State of Nevada.

Mental Health

A Mental Health workgroup was formed from the Statewide Discharge Planning Summit held in 2007. This group has met on a regular basis and is developing formal discharge protocols for all mental health and substance abuse facilities throughout the state, with the focus being on safe, stable housing upon discharge into non-HUD McKinney-Vento funded programs. Clients admitted to the mental health inpatient system are assigned a Social Worker to facilitate discharge to a safe environment. The Social Worker begins their discharge process at the time of admission. The client is assisted in securing identification and any other documentation necessary upon discharge. The Social Worker assesses the clients discharge needs, refers the client to outpatient services, identifies and mobilized community resources and ensures client has the necessary appointments and aftercare needs met. Reconciliation with family members is encouraged whenever possible and transportation is provided to reunite clients with family and friends who may be in a different geographic area.

The Mental Health and Substance Abuse Discharge workgroup is meeting on a regular basis to develop formal protocols that will be consistent throughout the State of Nevada.

Corrections

A Corrections workgroup was formed from the Statewide Discharge Planning summit held in 2007. The CoC applied to HUD and was granted TA around corrections discharge. The Corrections workgroup has plans to aggressively address issues around discharge planning in order to develop formal discharge protocols for all correctional facilities throughout the state, with the focus being on safe, stable housing upon discharge into non-HUD McKinney-Vento funded programs. The CoC coordinator is a member of the newly formed Statewide Prisoner Re-entry Coalition that is the working group for the Governor appointed Statewide Re-entry Task Force.

Clark County and the City of Las Vegas Detention and Enforcement have been working jointly to implement a discharge plan for the homeless inmates. This plan and its implementation are in the "pilot phase" prior to formalization of the policy.

The Department of Corrections (DOC) for the State of Nevada has policies and procedures in place to ensure that persons leaving publicly funded institutions or systems of care do not end up homeless when discharged from the facility. Nevada Revised Statutes, states that the Director of the Department of Corrections (DOC) may enter into contracts with one or more public or private entities to provide services, as necessary and appropriate, to offenders or parolees participating in a program

COMMUNITY DEVELOPMENT

Community Development (91.215 (e))

Community Development Priorities

The HCP Consortium priority non-housing community development needs eligible for assistance by CDBG eligibility category are specified in HUD Table 2B: Community Development Needs below. The majority of public services are identified as high priorities based upon community input and a recognized need for all facets of public services to receive more funding than is available.

Figure 45: HUD Table 2B-Clark County CDBG Consortium Community Development Needs

Community Development Needs		Needs	Gap	Goal	Priority Need: H, M, L	Dollars to Address	Plan to Fund? Y/N	Fund Source
01 Acquisition of Real Property 570.201(a)		100	100	100	M		N	
02 Disposition 570.201(b)		0	0		M		N	
Public Facilities and Improvements	03 Public Facilities and Improvements (General) 570.201(c)	3	3	3	H	6,280,000	Y	C
	03A Senior Centers 570.201(c)	1	1	1	H	1,000,000	Y	C
	03B Handicapped Centers 570.201(c)	1	1	1	H	7,000,000	Y	C
	03C Homeless Facilities (not operating costs) 570.201(c)	1	1	1	H	400,000	Y	C
	03D Youth Centers 570.201(c)	2	2	2	H	600,000	Y	C
	03E Neighborhood Facilities 570.201(c)	0	0		M		N	
	03F Parks, Recreational Facilities 570.201(c)	3	3	3	H	11,500,000	Y	C
	03G Parking Facilities 570.201(c)	0	0		M		N	
	03H Solid Waste Disposal Improvements 570.201(c)	0	0		H		N	
	03I Flood Drain Improvements 570.201(c)	0	0		M		N	
	03J Water/Sewer Improvements 570.201(c)	0	0		H		N	
	03K Street Improvements 570.201(c)	0	0		H		Y	C
	03L Sidewalks 570.201(c)	700	700	700	H	6,000,000	Y	C
	03M Child Care Centers 570.201(c)	0	0		H		Y	C
	03N Tree Planting 570.201(c)	0	0		L		N	
	03O Fire Stations/Equipment 570.201(c)	0	0		L		N	
	03P Health Facilities 570.201(c)	1	1	1	H	2,000,000	Y	C
03Q Abused and Neglected Children Facilities 570.201(c)	0	0		H		Y	C	
03R Asbestos Removal 570.201(c)	0	0		L		N		
03S Facilities for AIDS Patients (not operating costs) 570.201(c)	0	0		M		N		
03T Operating Costs of Homeless/AIDS Patients Programs	10000	10000	10000	H	500,000	Y	C	
04 Clearance and Demolition 570.201(d)		2	2	2	H	500,000	Y	C
04A Clean-up of Contaminated Sites 570.201(d)		0	0		L		N	
Public Services	05 Public Services (General) 570.201(e)	5000	5000	5000	H	500,000	Y	CE
	05A Senior Services 570.201(e)	800	800	800	H	500,000	Y	C
	05B Handicapped Services 570.201(e)	100	100	100	H	500,000	Y	C
	05C Legal Services 570.201(e)	40	40	40	H	500,000	Y	C
	05D Youth Services 570.201(e)	2000	2000	2000	H	750,000	Y	C
	05E Transportation Services 570.201(e)	100	100	100	H	500,000	Y	CE
	05F Substance Abuse Services 570.201(e)	100	100	100	H	500,000	Y	CE
	05G Battered and Abused Spouses 570.201(e)	100	100	100	H	500,000	Y	CE
	05H Employment Training 570.201(e)	100	100	100	H	500,000	Y	CE
	05I Crime Awareness 570.201(e)	0	0		M		N	

Community Development Needs		Needs	Gap	Goal	Priority Need: H, M, L	Dollars to Address	Plan to Fund? Y/N	Fund Source
	05J Fair Housing Activities (if CDBG, then subject to 570.201(e))	400	400	400	M	100,000	Y	C
	05K Tenant/Landlord Counseling 570.201(e)	0	0		M		N	
	05L Child Care Services 570.201(e)	140	140	140	H	500,000	Y	CE
	05M Health Services 570.201(e)	5000	5000	5000	H	1,000,000	Y	CE
	05N Abused and Neglected Children 570.201(e)	50	50	50	H	300,000	Y	C
	05O Mental Health Services 570.201(e)	50	50	50	H	300,000	Y	CE
	05P Screening for Lead-Based Paint/Lead Hazards Poison 570.201(e)	0	0		M		N	
	05Q Subsistence Payments 570.204	0	0		L		N	
	05R Homeownership Assistance (not direct) 570.204	0	0		L		N	
	05S Rental Housing Subsidies (if HOME, not part of 5% 570.204	0	0		H		N	
	05T Security Deposits (if HOME, not part of 5% Admin c	0	0		H		N	
	06 Interim Assistance 570.201(f)	0	0		N		N	
	07 Urban Renewal Completion 570.201(h)	0	0		N		N	
	08 Relocation 570.201(i)	0	0		N		N	
	09 Loss of Rental Income 570.201(j)	0	0		N		N	
	10 Removal of Architectural Barriers 570.201(k)	0	0		N		N	
	11 Privately Owned Utilities 570.201(l)	0	0		N		N	
	12 Construction of Housing 570.201(m)	0	0		H		Y	H
	13 Direct Homeownership Assistance 570.201(n)	0	0		H		Y	H
	14A Rehab; Single-Unit Residential 570.202	400	400	400	H	625,000	Y	HC
	14B Rehab; Multi-Unit Residential 570.202	0	0		H		Y	HC
	14C Public Housing Modernization 570.202	0	0		M		N	
	14D Rehab; Other Publicly-Owned Residential Buildings 570.202	0	0		N		Y	H
	14E Rehab; Publicly or Privately-Owned Commercial/Indu 570.202	0	0		N		N	
	14F Energy Efficiency Improvements 570.202	0	0		H		N	
	14G Acquisition - for Rehabilitation 570.202	30	30	30	H	2,000,000	Y	HC
	14H Rehabilitation Administration 570.202	0	0		H		Y	HC
	14I Lead-Based/Lead Hazard Test/Abate 570.202	0	0		L		N	C
	15 Code Enforcement 570.202(c)	0	0		H		N	C
	16A Residential Historic Preservation 570.202(d)	0	0		N		N	
	16B Non-Residential Historic Preservation 570.202(d)	0	0		N		N	
	17A CI Land Acquisition/Disposition 570.203(a)	0	0		N		N	
	17B CI Infrastructure Development 570.203(a)	0	0		N		N	
	17C CI Building Acquisition, Construction, Rehabilitat 570.203(a)	0	0		N		N	
	17D Other Commercial/Industrial Improvements 570.203(a)	0	0		N		N	
	18A ED Direct Financial Assistance to For-Profits 570.203(b)	0	0		N		N	
	18B ED Technical Assistance 570.203(b)	0	0		M		N	
	18C Micro-Enterprise Assistance	0	0		H		N	
	19A HOME Admin/Planning Costs of PJ (not part of 5% Ad	0	0		N		N	
	19B HOME CHDO Operating Costs (not part of 5% Admin ca	0	0		N		N	
	19C CDBG Non-profit Organization Capacity Building	0	0		M		N	
	19D CDBG Assistance to Institutes of Higher Education	0	0		N		N	
	19E CDBG Operation and Repair of Foreclosed Property	0	0		M		N	
	19F Planned Repayment of Section 108 Loan Principal	0	0		N		N	
	19G Unplanned Repayment of Section 108 Loan Principal	0	0		N		N	
	19H State CDBG Technical Assistance to Grantees	0	0		N		N	C
	20 Planning 570.205	4	4	4	H	200,000	Y	C
	21A General Program Administration 570.206	5	5	5	H	5,000,000	Y	C
	21B Indirect Costs 570.206	0	0		N		N	

Community Development Needs		Needs	Gap	Goal	Priority Need: H, M, L	Dollars to Address	Plan to Fund? Y/N	Fund Source
21D Fair Housing Activities (subject to 20% Admin cap) 570.206		5	5	5	H	325,000	Y	C
21E Submissions or Applications for Federal Programs 570.206		5	5	5	H	200,000	Y	C
21F HOME Rental Subsidy Payments (subject to 5% cap)		0	0		N		N	
21G HOME Security Deposits (subject to 5% cap)		0	0		N		N	
21H HOME Admin/Planning Costs of PJ (subject to 5% cap)		0	0		H		N	
21I HOME CHDO Operating Expenses (subject to 5% cap)		0	0		H		N	
22 Unprogrammed Funds		0	0		N		Y	
Totals		25243	25243	25243		51080000		

Clark County CDBG Public Service Funding

On November 4, 2003, the Board of County Commissioners voted to pre-allocate the County's Public Services portion of the annual CDBG funding for homeless programs. On January 6, 2004, the Board adopted the second 5-year CDBG Capital Improvement Plan for Fiscal Years 2005-2009 identifying 13 capital projects to be completed using County funds and repaying those funds through its future, anticipated CDBG grant allocations. Since those two actions, the County's annual CDBG grant allocations have experienced a 13 percent decrease in funding. To complete the second 5-year CDBG CIP, it was necessary to extend the repayment of the advanced County funds to Fiscal Year 2010. Additionally, it became necessary to release the pre-commitment of the 15 percent set-aside for Public Service funds for homeless services, and to instead commit these funds to the repayment of County funds advanced in support of the current 5-Year CDBG CIP. Homeless projects previously funded by CDBG now have access to funding through the County's Outside Agency (OAG) Grant process, which provides county funds for a variety of public service programs and projects annually. Clark County has elected to continue to focus its CDBG funding on its new Capital Improvement Plan for FY 2010 to 2014.

Clark County CDBG Capital Improvement Program (CIP)

Clark County has applied for HUD pre-award approval for a third CDBG Capital Improvement Plan (CIP) for the period covering FY 2010-2014 after a yearlong citizen participation process. Upon approval of the plan, Clark County will provide advance local/private funds to implement the locally approved list of projects (Figure 46), which will subsequently be reimbursed from CDBG funds from Fiscal Years 2010 through 2014.

This pre-award approval process is nothing new to either HUD or the Clark County CDBG Consortium. Beginning in the mid-1990's, the Board of County Commissioners authorized County staff to request pre-award funding approval from HUD for such projects as the Cambridge Community Center, the Windsor Park Voluntary Relocation Program and the Walnut Recreation Center. This pre-award funding request entailed the pre-commitment of future federal CDBG funds for a project, with the County/City/Non-Profit then agreeing to make its own funds available in advance of the receipt of the future federal grants. Provided that the project was implemented pursuant to all the federal requirements (i.e. Davis-Bacon, Environmental Reviews, etc.), the County/City could then submit those costs for subsequent federal reimbursement upon the actual receipt of those future federal grants.

On April 20, 1999, the County then moved beyond the approval of individual projects and instead requested approval of a 5-year CDBG Capital Improvement Plan for FY 2000-2004. Clark County has since completed all the projects that were included in that plan. Using this Pre-Award Approval mechanism, the City of Mesquite was also able to provide advance funding to construct and complete the new Mesquite Senior Center.

Based on the great success of the first CIP, on January 6, 2004, the Board of County Commissioner adopted the second 5-year CDBG Capital Improvement Plan for Fiscal Years 2005-2009 identifying 13 capital projects to be completed using County funds to be repaid using future CDBG allocations. Upon HUD approval, implementation of the plan began and, as of March 2010, all projects have completed construction and the County is only awaiting its FY 2010 CDBG allocation to repay itself for the funds advanced to construct these facilities. This repayment period was extended into FY 2010 as the County's annual CDBG grant allocations experienced a 13 percent decrease in funding during the second CIP period. To complete the second 5-year CDBG CIP, it was necessary to extend the repayment of the advanced County funds to Fiscal Year 2010. Therefore, the plan that is proposed for HUD Pre-Award Approval for FY 2010 to 2014 includes less funding for new projects in FY 2010. Beginning in 2011, the CDBG funds will be for all new projects identified in the new FY 2010-2014 CDBG CIP.

Figure 46. Clark County Five-Year CDBG Capital Improvement Plan Fiscal Years 2010-2014

Proposed Project	Total Funding
Parkdale Recreation Center Renovation and Expansion	\$5,693,055
Walnut Recreation Center park	\$2,911,752
Winchester Community Center Renovation	\$586,868
Von Tobel Park Pool Demolition	\$223,011
Desert Inn Park Pool Demolition	\$211,410
HELP of Southern Nevada Building Acquisition	\$2,100,000
Legal Aid Center of Southern Nevada Construction of New Facility	\$3,000,000
Community Counseling Center Renovation	\$1,704,500
Foundation for an Independent Tomorrow Expansion	\$1,183,923
Latin Chamber of Commerce Arturo Campier Senior Center Expansion	\$784,042
The Shade Tree HOPE Center Design	\$360,000
Nevada Partnership for Homeless Youth William Fry Drop-In Center Building Acquisition	\$350,000
Anthony L. Pollard Foundation Playground and Parking Lot Expansion	\$266,775
Nevada Partnership for Homeless Youth Shirley Street II Building Acquisition	\$160,000
Boys and Girls Club Carey Avenue Play Space	\$61,800
Opportunity Village Sean's Park	\$2,000,000
Total	\$21,597,136

This innovative approach has the following benefits:

- Buildings can be constructed more quickly thereby serving the public sooner.
- Facilities can be constructed using current dollars; minimizing the impact of future possible cost inflation.
- Local government can meet the HUD grant threshold of encumbering and spending its grant funds more quickly, as past costs will be expense adjusted upon grant receipt.
- Long term capital planning is possible, thereby facilitating the development of larger projects of community significance, with greater "economies of scale", than smaller, single-year grant projects.

North Las Vegas Citizen Participation

Based on the information gathered through the North Las Vegas Visioning 2025 Strategic Planning process and the recent community meetings, North Las Vegas residents want the city to “create and sustain a community of ‘choice’ for its residents, visitors, and businesses.” Some of the strategies identified in the Visioning 2025 plan are outlined below and are therefore reflected in the Consolidated Plan strategies.

- Promote and manage growth to create livable, citizen-friendly community
- Encourage mixed-use development
- Work with developers to identify innovative strategies for providing entry-level housing
- Create a safe pedestrian environment throughout the entire transportation system that promotes a connection between neighborhood and commercial development
- Redevelop the Downtown in a manner that fully achieves the citizen’s desired vision for the area
- Diversify the North Las Vegas economy
- Encourage the community’s educational facilities to provide the necessary training to the City’s adult population
- Promote the expansion of minority owned businesses in the community
- Promote the expansion of our library system and resources
- Promote the provision of adequate health facilities and services
- Develop increased cultural and recreational opportunities consistent with Visioning 2025 plan
- Create a community in which all residents are safe

Boulder City Citizen Participation

At its December 8, 2009 regular meeting, the City Council of Boulder City approved the proposed CDBG Capital Improvement Plan FY 2010-2014 Pre-Award Projects, conducted a public hearing on the CDBG applications for pre-award and approved these recommendations. The Boulder City Council plans to direct \$274,093 to repay itself for the Boulder City Senior Center, a previously funded CDBG project, \$500,000 for ADA sidewalks and \$25,907 for Contingency, in case of cost overruns. Public Service projects are awarded funding annually at a public hearing held by the City Council of Boulder City.

Mesquite Citizen Participation

Mesquite applied for and received approval of a third 5-Year CDBG Capital Improvement Pre-Award Program for FY 2010-2014. All funding for those years will be used for three parks improvements projects in their CDBG eligible census tract. The Mesquite City Council approved the Five-Year Capital Improvement Plan on January 26, 2010.

Obstacles to Meeting Underserved Needs

A continuing obstacle to meeting underserved needs in Clark County is a lack of sufficient resources to meet all of the community development needs. There is no State-matching fund available for the CDBG program. Additionally, funding for the Clark County Outside Agency Grants which support many of the public services provided to lower income households has been dramatically scaled back due to the current fiscal crisis at the county. It does not appear that these issues will be resolved in the short term and the community will need to be creative in accessing foundation grants and private funding from business and local residents.

Consolidated Plan Outcomes and Objectives

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

CLARK COUNTY CDBG CONSORTIUM COMMUNITY DEVELOPMENT STRATEGIC PLAN
Availability, Accessibility and Affordability of Public Services and Facilities

Availability/Accessibility of Suitable Living Environment (SL-1)					
Specific Objective		Source of Funds	Year	Performance Indicators	Expected Number
SL 1.1	Support acquisition or new construction of public facilities to benefit low and moderate income residents, including homeless	CDBG, County Funds	2010	Completed public facilities	1
			2011		3
			2012		3
			2013		3
			2014		3
MULTI-YEAR GOAL				11	
SL 1.2	Support infrastructure improvements to improve availability and accessibility of services	CDBG, County Funds	2010	Completed infrastructure improvements	50
			2011		50
			2012		50
			2013		50
			2014		50
MULTI-YEAR GOAL				250	
SL 1.3	Support new construction or improvements to facilities for people with special needs including: elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents	CDBG, County Funds	2010	Completed public facilities or improvements	0
			2011		1
			2012		0
			2013		1
			2014		1
MULTI-YEAR GOAL				3	
SL 1.4	Support public services that promote the well-being of residents	CDBG, County Funds	2010	People Assisted	30,000
			2011		30,000
			2012		30,000
			2013		30,000
			2014		30,000
MULTI-YEAR GOAL				150,000	
SL 1.5	Provide quality supportive services so people with special needs can live as independently as possible	CDBG, County Funds	2010	People Assisted	400
			2011		400
			2012		400
			2013		400
			2014		400
MULTI-YEAR GOAL				2,000	

Sustainability of Suitable Living Environment (SL-3)					
Specific Objective		Source of Funds	Year	Performance Indicators	Expected Number
SL 3.1	Support neighborhood preservation and improvement activities such as code enforcement and demolition	CDBG, Other	2010	Housing Units/ People Assisted	0
			2011		2
			2012		0
			2013		0
			2014		0
MULTI-YEAR GOAL				2	
SL 3.2	Support rehabilitation of public facilities to benefit low and moderate income residents	CDBG, County Funds	2010	Completed rehabilitation	1
			2011		1
			2012		1
			2013		1
			2014		1
MULTI-YEAR GOAL				5	

Antipoverty Strategy (91.215 (h))

Extent of Poverty

The Anti-Poverty Strategy describes the programs and policies, which will be utilized to reduce the number of households with incomes below the poverty line, in coordination with affordable housing efforts. According to the 2000 Census, there were 136,081 persons below the poverty level in the HCP Consortium Area, or approximately 12 percent of the population. In particular, minorities are much more likely to be in poverty. Unfortunately, updated poverty data is only available on a county wide level, not for the HCP Consortium. According to the 2007 American Community Survey, there were 188,678 persons below the poverty level in Clark County; on a county wide level, the poverty rate is at 10.5 percent

Figure 47. HCP Consortium Poverty by Race (Individuals)

Race	Number	Percent of Total
White	77,783	9
Black	23,710	21
American Indian & Alaska Native	1,307	14
Asian	5,740	9
Native Hawaiian & Other Pacific Islander	525	10
Other Race	19,583	18
2 or more races	7,433	14
Hispanic or Latino	49,140	18
White not Hispanic	51,834	8

Universe: Population for whom poverty status is determined
Source: US Census 2000 Table SF3 – PCT075A1

Households below the poverty level are significantly lower income than households at 80 percent of area median income, which is the threshold for the use of the federal funds described in this Consolidated Plan. However, the majority of the households served by CDBG, ESG and HOME funds are actually households in poverty. In 2009, a one-person household has an annual income below \$10,830 and a four-person household would have an annual income below \$22,050 to be considered in poverty. These income levels are adjusted when there are children in the household or people over 65 years old.

Figure 48. HCP Consortium Families Under Poverty by Household Type

Family Type	Married		Male – No Wife		Female – No Husband	
	Number	%	Number	%	Number	%
With related children under 18 years:	7,259	7	2,769	17	9,997	27
Under 5 years only	1,563	7	702	17	2,181	33
Under 5 years and 5 to 17 years	3,192	11	769	26	2,969	38
5 to 17 years only	2,504	5	1,298	14	4,847	22
No related children under 18 years	3,498	3	496	5	1,020	7
Total	10,757	5	3,265	12	11,017	21
Total (Married, Male and Female)			25,039	8		

Universe: Families

Source: US Census 2000 Table SF3 – P90

HCP Consortium Anti-Poverty Strategy

Clark County and North Las Vegas will continue to promote housing efforts that incorporate supportive services, which assist extremely low- and low-income housing residents in achieving self-sufficiency. Clark County and North Las Vegas will continue to encourage applications by non-profit organizations and public housing authorities for programs designed to promote self-sufficiency among assisted housing and transitional housing residents. Such programs include the Public Housing and Section 8 Family Self Sufficiency Program, and the Supportive Housing Program. These programs coordinate the use of public and private resources to assist low-income residents in achieving economic independence. Funding for preschools and day care centers will allow low-income households to secure job training and placement with the knowledge that their children are well cared for during working hours.

The HCP Consortium believes that the main opportunities to assist those below poverty level to achieve economic independence in coordination with affordable housing activities is through education and job training apprenticeship programs provided through the public housing authorities and non-profit agencies, and through transitional housing programs operated by non-profit organizations. CDBG and ESG Program funds are annually committed to transitional housing organizations to provide the operating funds necessary to assist residents in entering the workforce. Programs for young people who reside in public housing and low- and moderate-income areas, which focus on building self-esteem and promoting education, are also essential to foster personal achievement and break the cyclical nature of poverty.

Clark County and North Las Vegas have their own economic or industrial development offices and staff. In addition, each community in Southern Nevada has its own Chamber of Commerce as an active promoter of their community and the County. There are several chambers with a special focus on Hispanic, Asian and African American business interests.

Formed in 1956 as a nonprofit corporation, the Nevada Development Authority's (NDA) goal is to foster economic growth and diversification in Southern Nevada. It is comprised of hundreds of business-oriented individuals and aggressively pursues relocating or developing companies that would be compatible with Southern Nevada's environment and community. NDA's primary function is to provide information to companies considering such relocation, as well as firms already doing business here.

The University of Nevada, Las Vegas (UNLV) lends expertise and support to efforts at economic development through such offices as the Center for Business and Economic Research. It was founded in 1975 and provides research and analysis services to clients in both business and government. The Nevada

Small Business Development Center is also operated at UNLV and offers business counseling and expertise to existing and new businesses. (www.cber.org)

The Nevada Micro Enterprise Initiative (NMI), a non-profit small business development organization, provides technical assistance and loans to micro-enterprises throughout Nevada. Certified by the SBA as a Microloan Program, NMI provides entrepreneurial training in the form of pre-start up courses, business plan courses and business tune-up classes. NMI also provides micro-enterprise loans to start-up and existing businesses. (www.4microbiz.org/)

Workforce Connections, formerly known as the Southern Nevada Workforce Investment Board, was established in July 2000. Workforce Connection oversees the implementation of the Workforce Investment Act, providing funding for employment and training services throughout the Southern Nevada Workforce Investment Area. Workforce Connections selects the service providers who offer training and employment services to eligible adults, dislocated workers and youth clients. Services are managed and delivered through comprehensive One-Stop Centers, called Nevada JobConnect. There are three Nevada JobConnect One-Stop Centers located in the Southern Nevada Workforce Investment Area and a Rural JobConnect center located in Pahrump, Nevada. (www.nvworkforceconnections.org)

Nevada Partners for a Skilled Workforce is a 501(c)(3) organization that works to enhance people's self-sufficiency and financial stability through a range of services, including job training, career preparation, education, tax return preparation, and homebuyer assistance. Nevada Partners collaborates with private employers, community groups, faith-based groups and public agencies to employ Southern Nevadans. Clark County has provided millions in financial support through County Outside Agency Grant (OAG) funds to support facility expansion efforts, which are now complete.

The Foundation for an Independent Tomorrow (FIT), established in 1997, is a 501(c)(3) charitable foundation, located in Las Vegas, Nevada. FIT provides unemployed and underemployed southern Nevadans with vocational training and access to supportive services. Clark County plans to fund an expansion of the FIT facility through its FY 2010-2014 CDBG Capital Improvement Plan.

The College of Southern Nevada (CSN) offers a large selection of courses and programs, which include Associate of Applied Science Degree programs in approximately thirty occupational and technical areas that can be utilized in developing skills and expertise, required to meet the goals of the Consortium's Anti-Poverty Strategy.

CSN also has a Continuing Education Division that offers seminars and workshops to assist small business with development and maintenance of their viability. This division also operates a Center for Business and Industry Training, which produces customized training for specific businesses and training to meet the needs of a business intending to locate in the area.

CSN coordinates many of its programs and activities with other County institutions in the University and Community College System as well as the Clark County School District. Provision is also made for business, industry and other constituents to provide advice and counsel to the CCSN through various advisory committees and boards. (www.csn.edu/)

Head Start, operated by Acelero Learning, helps eliminate the poverty cycle by providing comprehensive programs that meet the educational, social, health, dental, nutritional, and psychological needs of low-income and handicapped preschool children. Essential to the success of Head Start is family involvement, parent education, and program planning. Head Start parents serve on Policy Councils/Committees and play a major role in shaping administrative and management decisions.

A wide variety of services to elderly and physically challenged populations are administered/coordinated through various jurisdictional and non-profit providers. Senior centers are located throughout the HCP Consortium area. These centers provide customer access to services such as congregate and home-delivered meals, educational opportunities, recreation and socialization activities, information and referral, advocacy, and transportation. Serving as community focal points, the centers mobilize resources to support and maintain independent living for senior citizens and physically challenged adults.

Jurisdictions in the Consortium support regional transportation planning through the Regional Transportation Commission (RTC). The RTC oversees Citizen Area Transit (CAT), the regional bus company that has expanded services over the past several years. CAT has plans for continued expansion of residential routes, including low-income neighborhoods where Public Housing Authority developments exist; in order provide low-cost transportation to workers. Coordinating transportation planning and transportation services with community-based service agencies through its Para-Transit Service provides accessible transportation to the community.

North Las Vegas Anti-Poverty Strategy

The City of North Las Vegas Economic Development Department is responsible for implementing programs that will achieve job creation and retention, increase incomes by attracting higher-wage job opportunities and subsequently increase the quality of life for residents of North Las Vegas. These programs take shape through a variety of business attraction and business retention and expansion activities. There are two divisions within the Economic Development Department: Business Development and Redevelopment.

It is the focus of the [Business Development Division](#) to create new jobs through the attraction of new businesses and the retention of existing businesses. The [Redevelopment Division](#) focuses on creating commercial reinvestment in specific areas of need within the City to ensure that sufficient services are available to residents.

Redevelopment Agency

The North Las Vegas Redevelopment Agency is responsible for the implementation and administration of all redevelopment plan areas within the City of North Las Vegas. The Board for the Redevelopment Agency is comprised of a Chair, Vice-Chair and three additional board members who are duly elected City Council members. The Agency meets the first Wednesday of each month immediately preceding the City Council meeting. The Agency may also call special meetings as necessary. All meetings are open to the public and are governed by "Roberts Rules of Order Newly Revised." The City Manager serves as the Chief Administrative Office of the Agency. At this time there are two distinct redevelopment plan areas, the North Las Vegas Downtown Redevelopment Area and the North Las Vegas North Redevelopment Area (maps are available).

Business Development

Working with the Nevada Development Authority and the North Las Vegas Chamber of Commerce, staff is responsible for pro-actively marketing North Las Vegas to the development community, both new and existing. New marketing materials are being utilized in client response, in meetings with developers and in marketing outreach. Several job-creating special projects are underway or in the planning stages.

Veteran's Hospital – VA

In September 2004, the Department of Veterans Affairs (VA) announced plans for a more than \$600 million full-service medical center in North Las Vegas, near the intersection of Pecos Road and Route 215. With construction underway and expected to end by 2011, the 90-bed hospital, 120-bed nursing home, full complement of diagnostic and treatment services and Veterans Benefit Office are expected to provide state-of-the-art health care to Nevada's ever-increasing veteran population.

With this decision, Nevada veterans are an important step closer to having 21st century health care in a 21st century facility. The new facility will be fully operational before this century's first decade comes to a close, providing a range of jobs for professional, skilled and semi-skilled workers. Route 215, Pecos Road, Lamb Boulevard and Centennial Parkway serve as the boundaries for the 120-acre project site. VA will acquire the land at no cost, significantly slashing the project's ticket price.

The new full-service facility—the first in the Valley—is expected to alleviate the burden of area VA clinics. Currently, no primary outpatient care clinic exists in southern Nevada. While the new North Las Vegas facility will offer convenience and unprecedented access to medical care for area veterans, primary care clinics across the Valley will remain open to accommodate the medical needs of veterans' in other neighborhoods.

University of Nevada Las Vegas (UNLV)

UNLV has begun a study process examining possible uses for a 2,009-acre parcel of Federal land located near the northern beltway and I-15. UNLV and the City of North Las Vegas, in partnership with other community agencies, are assessing needs in this fast-growing area to guide preliminary plans for the picturesque, mountain view site. Innovative educational, community and cultural uses are envisioned to complement residential and business developments planned for the area, which will become a major economic hub for North Las Vegas in the future.

Cheyenne Technology Corridor

The Cheyenne Technology Corridor (CTC) epitomizes partnerships. Cheyenne Avenue, from Decatur Boulevard to Pecos Road and between Gowan and Evans, was designated the CTC, an integrated accessible, and diversified technology district. The CTC was started with the vision of five developers and buy-in from the City of North Las Vegas, and joined by the Community College of Southern Nevada (CCSN), the North Las Vegas Airport, and other technology-service companies as key contributors. Four years later, the partnership shows no sign of slowing down. In fact, even the alliance of developers is overwhelmed by its success.

The public-private partnership that fuels the corridor includes Lyle Brennan Investments, Harsch Investment Properties, Jackson-Shaw Company, and Stoltz Management. The CTC's five-mile stretch boasts office, industrial and retail space. Together, their projects will include nearly two million square feet of mixed used development. While the developers sometimes find themselves competing for the same tenants, they know that success for one project means success for the alliance and CTC as a whole.

The CTC's award-winning mix of benefits has attracted the likes of California Plasticard, Inc., Celebrate Homes, Emory Riddle University, Federal Express, MedicWest Ambulance, Sunterra Corporation, and U. S. Foods, to name a few. The unique partnership between the City of North Las Vegas and CTC's developers has likewise attracted attention. In 2003, the partnership earned the International Economic Development Council's (IEDC) International Economic Development award.

The city's investment of fiber optic cable, that runs the length of the CTC, is a key element in attracting high-end and high-tech tenants. The fiber optic network makes it easy for new companies to get their communications and other high-tech systems running smoothly. Local telecommunications providers supply both wired and wireless connectivity, and Las Vegas' leading co-location and interconnect facility enables companies to store their servers and other telecom equipment in a secure state-of-the-art location.

NON-HOMELESS SPECIAL NEEDS

Non-homeless Special Needs (91.205 (d) and 91.210 (d)) Analysis (including HOPWA)

The special needs population includes elderly and frail elderly, persons with disabilities, persons with alcohol and other addictions, persons diagnosed with AIDS and related diseases, and public housing residents. Self-sufficiency is not a realistic goal for certain segments of the special needs population due to age and/or need for services. The housing needs analysis estimates, to the extent feasible, the number of persons within each special needs group requiring supportive housing and describes their supportive housing needs. Information on the facilities and services available to people with special needs is outlined in the Housing Market Analysis and will not be repeated here.

The non-homeless special needs population and priority needs are identified in HUD Table 1B: Non-Homeless Special Needs Population Needs (see Figure 49). All special needs groups are identified as high priority as there are consistently few resources to assist these groups with housing being a particularly difficult need to meet. The cost of providing social services within housing is very high and therefore not common. The housing units themselves often require special modifications to make them livable, particularly for people with physical disabilities. The cost of making those modifications, either through rehabilitation or as part of new construction, increases costs significantly.

While the Clark County HOME Consortium currently provides Tenant-Based Rental Assistance to homeless households with special needs (families and people with severe mental illness), the TBRA program may be expanded in the next five years to include other special needs groups. As market forces make the Low Income Housing Tax Credit program and Private Activity Bond Programs difficult to use to produce affordable housing, the HOME Consortium may increase its funding for rental assistance as one way to meet some of the tremendous need in the community for affordable housing. The challenge will be to expand the affordable housing stock so that sufficient rental units will be available to rent at a price that is reasonable.

Figure 49: HUD Table 1B - Non-Homeless Special Needs Populations Needs

Non-Homeless Special Needs		Needs	Currently Available	GAP	Goal	Priority Need: H, M, L	Plan to Fund? Y N	Fund Source: CDBG (C), HOME (H), HOPWA (A), ESG (S), Other (O)
Housing Needed	52. Elderly	91,869	46,407	45,462	1240	H	Y	H
	53. Frail Elderly	10,191	7,160	3,031	180	H	Y	H
	54. Persons w/ Severe Mental Illness	17,500	1,272	16,228	500	H	Y	H
	55. Developmentally Disabled	3,300	973	2,327	100	H	Y	HC
	56. Physically Disabled	36,769	3,500	33,269	100	H	Y	HC
	57. Alcohol/Other Drug Addicted	9,672	382	9,290	0	H	Y	H
	58. Persons w/ HIV/AIDS & their families	4,174	41	4,133	0	H	Y	HA
	59. Public Housing Residents	6,791	3,814	2,977	0	H	Y	H
	Total	180,266	63,549	116,717	2,120			
Supportive Services Needed	60. Elderly	91,869	46,407	45,462	2000	H	Y	CO
	61. Frail Elderly	10,191	7,160	3,031	90	H	Y	O
	62. Persons w/ Severe Mental Illness	17,500	1,272	16,228	500	H	Y	CO
	63. Developmentally Disabled	3,300	973	2,327	100	H	Y	CO
	64. Physically Disabled	36,769	3,500	32,269	400	H	Y	CO
	65. Alcohol/Other Drug Addicted	9,672	382	9,290	0	H	Y	CO
	66. Persons w/ HIV/AIDS & their families	4,174	3,464	710	0	H	Y	CA
	67. Public Housing Residents	6,791	3,814	2,977	0	H	Y	CO
	Total	180,266	67,972	112,294	3,090			

Specific Special Needs Objectives (91.215)

Special Needs Strategic Plan

Information on the resources available and expected to be used is available under the heading [Resources](#) in the “Other Narratives” section at the end of this document. Please refer to the [Housing](#) and [Community Development](#) Strategic Plans for the Special Needs Strategic Plan as each of the strategies to be undertaken for the Special Needs population is described therein.

Housing Opportunities for People with AIDS (HOPWA)

HOPWA funding is provided to Southern Nevada through the city of Las Vegas Neighborhood Services Department. Please see their Consolidated Plan for more information on this program.

OTHER NARRATIVE

Includes any Strategic Plan information that was not covered by a narrative in any other section.

Fair Housing

Clark County has contracted with Planning/Communications, Inc. to provide an updated Analysis of Impediments to Fair Housing for the unincorporated county, North Las Vegas, Boulder City and Mesquite. Once that document is complete, in September 2010, it will be provided to HUD for review and the FY 2010-2014 Consolidated Plan will be amended to include the new Analysis of Impediments and Fair Housing Plan. Until that time, Clark County and North Las Vegas will continue to refer to the Analysis of Impediments that was completed in May 2004 and is outlined below.

The following section describes the County's issues as related to fair housing addressed by the Analysis of Impediments to Fair Housing Choice (AI) study for Clark County completed in May 2004.

Figure 50. Clark County and North Las Vegas Fair Housing Plan

Impediment	Recommendation	Timeline for Completion
Accessibility Compliance	Educate housing providers, developers, architects and internal department staff on accessibility requirements	Ongoing
	Stamp plans "approved but not for ANSI or accessibility" to properly put developers on notice	March 2005
Reasonable Accommodation	Encourage and support training for housing providers	April 2005
Predatory Lending	Establish a regional policy on subordination requests under the HOME program	May 2005
Group Homes	Work with the State legislature to reconcile definitions and provisions to prevent future lawsuits	January 2006
	Remove from the land use code all references to "related individual"; make licensing disputes for group homes a separate division and fast track requests, as an accommodation	December 2005
	Publish policy that distinguishes plans approval from CCR's that may have Fair Housing violations contained therein	February 2005
Title VI	Train all units of each jurisdiction on legal requirements of Title VI	February 2005
	Assess each unit of local government to determine status (direct recipient, indirect recipient, contractor, assignee, transferee, etc.)	March 2005
	Where appropriate, institute departmental Limited English Proficiency Programs	July 2005
	Monitor and provide subrecipients with technical assistance to comply with Title VI	January 2005
Anti-Discrimination Education	Develop public service announcements on television and the Internet about discrimination	August 2005
Fair Lending	Participate in efforts to increase fair and equal access to credit	Ongoing

Multifamily Housing Accessibility and Reasonable Accommodation

The Department of Housing and Urban Development endorsed the International Code Council (ICC) published Code Requirements for Housing Accessibility (CRHA) and the National Association of Home Builders (NAHB) Fair Housing Equivalency Guide as inclusive of Federal Fair Housing Guidelines. HUD endorsed both documents with a “safe harbor” provision, which asserts that compliance with these guidelines presumes compliance with the Fair Housing Act. Clark County adopted the 2006 IBC and will be adopting the 2009 IBC in 2010 with an effective date of July 2011.

All architectural plan examiners have certifications for accessibility issues, as do most of the field inspectors. Construction is required to be completed per approved plans or inspections are halted until compliance is met. Checklists, handouts, and brochures are made available emphasizing accessibility.

Lending

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

Education

Clark County and North Las Vegas staff participates on the Community Housing Resource Board (CHRB), which is a volunteer advocacy organization in support of Fair Housing in Clark County. The CHRB offers a yearly Fair Housing Conference for property managers, resident managers, leasing agents, lenders, mortgage brokers, homebuilders, developers, architects, and real estate licensees. The Conference provides specific education courses that meet the State of Nevada requirements for real estate licensees. The CHRB also sponsors quarterly lunches on various Fair Housing topics.

Dispersal of Housing

Clark County Bond Cap and HOME funds have been committed and used in the construction of new rental housing in non-traditional areas, where minority concentrations do not exist. Many of these projects are also located close to suburban job centers and provide lower cost housing for service industry workers. Clark County will continue to support projects and give preference to project applications that disperse affordable housing through the valley. The County has made dispersal in non-transitional areas an important part of the review process for HOME/LIHTF and Bond applications.

Clark County is working with the State of Nevada, the Department of the Interior, Bureau of Land Management (BLM) and HUD to utilize public lands for affordable housing under the Southern Nevada Public Lands Management Act of 1998. The Act provides for the use of BLM land for affordable housing development. To date, two rental housing developments have been constructed on land obtained through the SNPLMA regulations under 7(b). Both are located in areas that have not traditionally seen the development of affordable housing as are the other reserved parcels. Clark County plans to continue to pursue development on the other 1,200 acres of BLM land it has reserved for this purpose.

Appendix A: Resources

Following is an overview of the programs and resources available to assist the implementation of the Housing Strategic Plan, the Continuum of Care for the Homeless Strategic Plan and the Community Development Strategic Plan. All of the programs and resources identified below may be utilized, as appropriate, in order to implement the objectives outlined in each strategic plan.

Name of Program	Description	Eligible Activities
Federal Programs - Entitlement/Formula		
Community Development Block Grant (CDBG) Approximate annual allocation: \$5,000,000	Grants awarded on a formula basis for housing and community development activities. Primarily, recipients must be low- to moderate-income (up to 80% MFI), or reside in a low/moderate-income area.	Neighborhood revitalization, economic development, and improved community facilities, infrastructure improvements and affordable housing
Emergency Shelter Grant Approximate annual allocation: \$250,000	Grants are awarded to non-profit providers to provide year round emergency and transitional shelter beds with services, to provide emergency shelter, transitional housing and supportive services.	Renovation and conversion of buildings for use as emergency shelters for the homeless, services, operations and homeless prevention
Home Investment Partnerships Program (HOME) Approximate annual allocation: \$3,000,000	Flexible grant program awarded on a formula basis to implement local housing strategies. Recipients must be low- to moderate-income (up to 80% MFI) for homeownership, with low-income (up to 50% and 60%) targeting for rental housing. Requires 25% non-federal matching funds.	Housing acquisition, rehabilitation, new construction, tenant-based assistance, homebuyers assistance, planning and support services
Capital Fund Program Approximate annual allocation: \$6,000,000	A formula-based funding program utilized by the Southern Nevada Regional Housing Authority to make physical and management improvements to public housing developments.	Capital improvements and related management improvements in public housing
Section 8 Rental Assistance Program Approximate annual allocation: \$89 million	Rental assistance payments to owners of private market rate units, or directly to tenants (vouchers). Section 8 tenants must be low-income (up to 50% MFI). Administered by the Southern Nevada Regional Housing Authority.	Rental certificates for housing where rental assistance is difference between rent and 30% of adjusted income
Housing Opportunities for Persons with AIDS (HOPWA) Approximate annual allocation: \$1,000,000 to City of Las Vegas	Grant administered through the City of Las Vegas Neighborhood Services Department for housing assistance and supportive services for low-income persons with HIV or AIDS.	Short-term mortgage, utility, and rental assistance, housing information services; housing acquisition, rehabilitation, and construction; operating costs for housing facilities; tenant-based and project-based rental assistance; supportive services

Name of Program	Description	Eligible Activities
Federal Programs - Competitive		
Supportive Housing Program (SHP)	Promotes development of supportive housing and services for homeless. Applicants to HUD may be government entities; private non-profits; or public non-profit community mental health associations.	Acquisition, rehab, new construction, or leasing of transitional housing, permanent housing for homeless with disabilities, safe haven for severely mentally ill homeless, or supportive services only
Shelter Plus Care Program	Provides rental housing assistance in connection with supportive services to be provided with other sources of funds. Assistance provided to homeless persons with disabilities and their families. Selection is on nationwide competitive basis.	Provides rental assistance
Section 202 Low-Income Elderly Housing	Grants to non-profit developers of supportive housing for the elderly. Rental assistance is available to low-income elderly persons (up to 50% MFI).	Development of rental housing with supportive services
Section 811 Supportive Housing for Persons with Disabilities	Grants to non-profit developers of supportive housing for persons with disabilities, including group homes, independent living facilities, and intermediate care facilities. Provides two types of financing: capital advances and project rental assistance. Rental assistance is available to low-income disabled persons (up to 50% MFI).	Provides assistance to expand supply of housing with supportive services for persons with disabilities
FHA Single Family Mortgage Insurance Program	<p>The <i>Section 203(b)</i> Program is the primary FHA effort used to assist low- and moderate-income homebuyers. The program applies to the purchase of one-to-four family dwellings as well as to the refinancing of existing residences. FHA insures the mortgage loan and provides coverage to the lender in case of borrower default.</p> <p><i>Section 203(k)</i> is used to insure the financing of the acquisition and rehabilitation of existing one-to-four unit properties. Certain loan limits and downpayment requirements apply.</p>	Acquisition and rehab of housing for extremely low income through rent subsidy

Name of Program	Description	Eligible Activities
State Programs		
Low-Income Housing Tax Credit (LIHTC)	Federal tax credits available to individuals and corporations that invest in low-income rental housing. Tax credits are sold to people with high tax liability and proceeds are used to create rental housing. Tax credit allocations are awarded through the state on a competitive basis. 20% of project units must be set aside for households earning 50% MFI, or 40% of units at 80% MFI. However, projects competing for 9% tax credits typically set income targeting at 40% MFI or below to remain competitive.	Acquisition, rehabilitation, construction, or other housing for low income and special needs populations
Low Income Housing Trust Fund (LIHTF)	The Account for Low-Income Housing (Trust Fund) is a state-funded program for affordable housing. Funds are allocated by formula to expand and improve the supply of rental and owner housing. Funding is supported with a real property transfer tax of ten cents for each \$500 of value or fraction thereof. All funds allocated must be used to benefit individuals and families whose incomes do not exceed 60% of the area median income. Serves as match credit for federal HOME program	Supports affordable housing development through new construction and rehabilitation of multifamily projects. LIHTF may also be used to provide financing for down payment assistance and homeowner rehabilitation of single family residences, and to provide emergency assistance to families who are in danger of becoming homeless.
Single Family Mortgage Purchase Program	The Nevada Housing Division offers a First-Time Homebuyer Program to low- and moderate- income first time homebuyers by providing a fixed interest rate 30-year loan with additional assistance available for down payment and closing costs. This program is funded through the Private Activity Bond Program.	Downpayment assistance and first mortgage for first-time homebuyers.
Private Resources/Financing Programs		
FHLB Affordable Housing Program (AHP)	Long-term housing financing provided as both grants and loans for qualified homeownership and rental housing development projects. Assistance limited to households earning up to 80% MFI, although program is competitive and often requires lower targeting. Funds distributed through semi-annual competitive grant process.	Finance purchase, construction/rehab of owner-occupied housing for target population; purchase construction/rehab of rental housing, at least 20% of units will be occupied by very low income households
FHLB Community Investment Program (CIP)	Offers advances at or slightly below the cost of funds to lenders to finance housing and community development projects that include commercial development in low- or moderate-income neighborhoods. Eligible households may earn up to 115% MFI.	Acquisition mortgages, construction loans, rehab loans, permanent financing, lines of credit, funding for the Rural Economic and Community Development Program or community economic development that benefits low and moderate income neighborhoods

Name of Program	Description	Eligible Activities
Multi-Family Project Bond Financing	State issued tax-exempt bonds for affordable housing development. Per IRS Code for bonds, not less than 20% of the units must be for households at 50% AMI or 40% at 60% AMI. Applicants are non-profit and for-profit housing developers and limited partnerships. All bond financed projects are required to obtain 50% or more of the needed bond issuance authority from the local government in which the project is located.	Financing medium to large-scale affordable housing projects. Almost all affordable housing projects that utilize bond financing are greater than \$5,000,000 in size.
Local Resources		
City of North Las Vegas Redevelopment Funds	These are redevelopment funds for non-profit organizations to serve low and moderate income households.	Affordable housing development or rehabilitation
Land Donations	Donation of City or County owned land for the development of affordable rental or owner housing.	Affordable housing development
Private Activity Bond Volume Cap (Bond Cap)	Bond Cap funds are available through local jurisdictions to provide bond and tax credit financing for affordable multifamily or single family housing programs. The funds are made available through an application process at Clark County. The developers secure 50% of their bond financing through the State of Nevada Housing Division.	New construction or acquisition/rehabilitation of affordable multi-family housing

