

**METROPOLITAN NASHVILLE-DAVIDSON COUNTY, TENNESSEE**

**FIVE YEAR CONSOLIDATED PLAN  
FOR  
HOUSING AND COMMUNITY DEVELOPMENT  
(June 1, 2018 – May 31, 2023)  
&  
PROGRAM YEAR ONE ACTION PLAN  
(June 1, 2018 – May 31, 2019)**

**Prepared by:**

Metropolitan Development and Housing Agency  
701 South Sixth Street  
Nashville, Tennessee 37206



**On Behalf of:**

The Metropolitan Government of  
Nashville and Davidson County



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**METRO NASHVILLE-DAVIDSON COUNTY  
FIVE YEAR CONSOLIDATED PLAN  
&  
2018 ACTION PLAN**

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## Executive Summary

### ES-05 Executive Summary - 24 CFR 91.200(c), 91.220(b)

#### 1. Introduction

Metropolitan Nashville-Davidson County is an entitlement community eligible to receive direct assistance under the U.S. Department of Housing and Urban Development's (HUD's) Community Development Block Grant (CDBG) program; is a participating jurisdiction under the HOME Investment Partnerships Program (HOME); and is a formula grantee under the Emergency Solutions Grant (ESG) and the Housing Opportunities for Persons with AIDS (HOPWA) program. Every five years, Metro Nashville must prepare a Consolidated Plan to describe how these funds will be used to address housing and community development needs. CDBG, HOME, and ESG must be expended within Nashville-Davidson County for participants who meet applicable eligibility criteria and for eligible activities as outlined by program regulations and each year's Action Plan. HOPWA funds target the needs of persons living with HIV/AIDS and their families in the Nashville-Davidson—Murfreesboro-Franklin Metropolitan Statistical Area (MSA). All programs must benefit low income persons or households ( $\leq 80\%$  of the area median income) or low income areas.

The Metropolitan Development and Housing Agency (MDHA) is designated as the lead agency for the development and administration of the Consolidated Plan and its related programs. Within MDHA, these functions are undertaken by the Community Development Department. To ensure the Consolidated Plan reflects the City's priorities, aligns with its initiatives, and incorporates local plans and reports, MDHA collaborated with several Metro agencies throughout the planning process.

The Five Year Consolidated Plan covers the period June 1, 2018 through May 31, 2023. The Consolidated Plan is updated each year (Annual Update) to reflect proposed activities and goals for the program year (Action Plan). Annual Updates/Action Plans serve as Nashville's application for federal funds each year. Included with the Consolidated Plan is the Program Year 1 (2018) Action Plan for the period June 1, 2018 through May 31, 2019. Allocations and project budgets in the 2018 Action Plan reflect actual allocations for the Program Year. In addition, approximately \$230,000 in CDBG program income and \$305,000 in HOME program income are expected to be received during the 2018 Program Year. Therefore, anticipated resources are as follows:

<b>PROGRAM YEAR 1 ANTICIPATED RESOURCES</b>			
<b>Grant</b>	<b>2018 Annual Allocation</b>	<b>Estimated Program Income</b>	<b>Total</b>
CDBG	\$ 5,095,429.00	\$ 230,000.00	\$ 5,325,429.00
ESG	\$ 417,516.00	\$ 0.00	\$ 417,516.00
HOME	\$ 2,581,408.00	\$ 305,000.00	\$ 2,886,408.00
HOPWA	\$ 1,216,011.00	\$ 0.00	\$ 1,216,011.00
<b>TOTAL</b>	<b>\$ 9,310,364.00</b>	<b>\$ 535,000.00</b>	<b>\$ 9,845,364.00</b>

## 2. Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview

The Strategic Plan was formed from the Needs Assessment, Market Analysis, and input from over 400 stakeholders and members of the public. Where possible, HUD default data was updated with more current data from the 2012-2016 American Community Survey (ACS) and 2010-2014 HUD's Comprehensive Housing Affordability Strategy (CHAS). Local plans and reports such as the *2017 Community Needs Evaluation*, the *Housing Nashville Report*, and *NashvilleNext*, provided a local context and a framework for establishing priority needs. The format of the Consolidated Plan and 2018 Action are consistent with HUD's Consolidated Plan Template.

Priorities of the Consolidated Plan are to:

1. Increase the number of decent, safe affordable units and help low and moderate income households access affordable housing.
2. Preserve existing affordable housing units and help low and moderate income households retain housing.
3. Support facilities and services for the homeless and persons with HIV/AIDS.
4. Create pathways to self-sufficiency for low and moderate income persons and families.
5. Revitalize distressed neighborhoods and underserved areas.
6. Undertake grant management, planning, and other eligible administrative tasks under CDBG, HOME, ESG, and HOPWA.

Activities proposed to be undertaken this program year are intended to address the Consolidated Plan priorities and the primary objectives of the four Consolidated Plan programs: to develop viable urban communities by providing decent housing and a

suitable living environment and expanding economic opportunities principally for low and moderate income persons. Related outcomes are increasing availability and accessibility, improving affordability, and promoting sustainability of communities. The primary means toward this end is to extend and strengthen partnerships at all levels of government and the private sector, including for-profit and nonprofit organizations, in the production and operation of affordable housing and maximizing federal resources.

The table below summarizes the proposed activities for addressing Consolidated Plan priorities. Proposed activities are consistent with – to the greatest extent possible under federal regulations – the recommendations of *NashvilleNext*, *Metro’s Housing Nashville Report*, and MDHA’s 2017 Fair Housing Analysis. More information about each activity is available in Section AP-35.

<b>Priority 1</b>	<b>Increase the number of decent, safe affordable units and help LMI households access affordable housing.</b>
<b>Activity</b>	<b>New Construction</b>
HOME	New Construction - Rental
HOME	New Construction – Owner
HOME	New Nonprofit Partner Set-aside
<b>Activity</b>	<b>Address Housing Barriers</b>
CDBG	Fair Housing Activities
<b>Priority 2</b>	<b>Preserve existing affordable housing units and help LMI tenants and homeowners retain housing.</b>
<b>Activity</b>	<b>Retain affordable housing stock</b>
CDBG	Targeted Homeowner Rehabilitation (Napier-Sudekum Choice Neighborhoods Planning Area)
CDBG	Homeowner Rehabilitation (Housing Target Areas)
CDBG	Weatherization Assistance (Countywide)
CDBG	Rental Rehab (Countywide)
CDBG	HVAC Replacement (Countywide)
CDBG	Housing Services/Delivery
<b>Activity</b>	<b>Maintain Housing Stability</b>
CDBG	Renter Counseling (MDHA Public/Affordable Housing Residents)

<b>Priority 3</b>	<b>Support facilities and services for the homeless and persons with HIV/AIDS</b>
<b>Activity</b>	<b>Assist Homeless Persons and Persons with HIV/AIDS</b>
CDBG	Services for the Homeless
ESG	Homeless Management Information System
ESG	Rapid Re-housing
ESG	Prevention
ESG	Shelter Operations/Essential Services
ESG	Outreach
HOPWA	Sponsor Administration.
HOPWA	Short Term Rent, Mortgage, and Utilities
HOPWA	Facility Operations/Permanent Housing
HOPWA	Supportive Services - Permanent Housing Placement
<b>Priority 4</b>	<b>Create pathways to self-sufficiency for LMI persons and families.</b>
<b>Activity</b>	<b>Create economic opportunities for LMI persons</b>
CDBG	Employment Services (Section 3 Opportunities)
CDBG	Microenterprise Assistance
<b>Activity</b>	<b>Support Youth Programs</b>
CDBG	Summer Youth Programs
CDBG	Youth Employment Programs
<b>Priority 5</b>	<b>Revitalize distressed neighborhoods and underserved areas.</b>
<b>Activity</b>	<b>Invest in Underserved Areas</b>
	Public Facilities/Improvements
<b>Priority 6</b>	<b>Undertake grant management, planning, and other eligible administrative tasks authorized under CDBG, HOME, ESG, and HOPWA.</b>
<b>Activity</b>	<b>Provide oversight and management of grants.</b>
CDBG	Administration and Planning
HOME	Administration
ESG	Administration
HOPWA	Administration

### 3. Evaluation of past performance

Each year, MDHA reports its progress in meeting the five-year and annual goals in the Consolidated Annual Performance and Evaluation Report (CAPER). This report is required to be submitted to HUD within 90 days after the program year ends. Previous years' CAPERs are available on MDHA's website: <http://www.nashville-mdha.org/?p=1857>. MDHA has consistently satisfied program mandates and has successfully targeted funds to benefit low- and moderate-income persons and neighborhoods. In its most recent letter approving the 2016 CAPER, HUD determined that our overall progress is excellent and that activities appear to be in accordance with program requirements.

While the accomplishments reported in the CAPER are used to measure the success of meeting the goals for a program year, the evaluation of past performance is a continual process. For example, the quantity and quality of responses to funding opportunities indicate the demand for a particular activity, the capacity needs of an organization, and whether the expectations of MDHA and program requirements were communicated clearly. Results of audit/monitoring activities are used as management tools to strengthen MDHA and funding partners. Regular participation of MDHA staff in local forums, community meetings, and neighborhood events provide partners and citizens the opportunity to communicate needs, concerns, and ideas.

#### **4. Summary of citizen participation process and consultation process**

To ensure the Consolidated Plan and 2018 Action Plan truly address these needs in Metro Nashville, the citizen participation and consultation processes were designed to garner considerable public input on the development of the Plan, as well as on the Draft. Through the Kickoff Public Hearing, five (5) Consolidated Plan Workgroup meetings, seven (7) community meetings/public input sessions, and thirteen (13) stakeholder consultations, 181 [unduplicated] persons and 84 [unduplicated] agencies/groups/organizations participated in the development of the Consolidated Plan. Additional input on the development of the draft Plan was obtained through a countywide survey that generated 201 responses. Comments on the draft Consolidated Plan will be obtained during the 30-day public comment period (May 8 through June 7, 2018) and at four public hearings to be held during this time. Details about the public hearings and how the public can submit comments are provided in the Public Notice (Appendix D).

Information on how persons with disabilities or sensory impairments or in need of translation services can request accommodation is provided in all Public Notices, in emails advertising community meetings/public input sessions, and posted on the Consolidated Plan webpage in Spanish, Chinese, Vietnamese, Arabic, and Somali. Public Notices are translated to Spanish, and Spanish translation was available at the community meeting held on April 6 and will be available at the Public Hearing to be held on May 23, 2018.

Following the conclusion of the Public Comment Period, the Consolidated Plan and 2018 Action will be presented to the MDHA Board of Commissioners and the Metropolitan Council for approval, prior to its submittal to HUD.

## **5. Summary of public comments**

A summary of public comments received during the kickoff public hearing held on March 1, 2018 is provided in Appendix E .

A summary of public comments on the draft Consolidated Plan and 2018-2019 Action Plan submitted in writing during the public comment period and received at public hearings held in May 2018 is provided in Appendix F.

## **6. Summary of comments or views not accepted and the reasons for not accepting them**

A summary of public comments or views received during any public hearing that were not accepted and the reasons for not accepting them is included in summaries of public comments (Appendices E and F).

## **7. Summary**

Nashville is a growing city – between 2000 and 2016, the population of Davidson County grew by 17%, from 569,891 to 667,885. With its popularity has come immense pressure on the housing market, with cost burden being the most common housing problem experienced by Nashvillians of all income ranges. However, this problem is particularly acute for households with income less than 50% of the area median income (AMI). Further, Nashville’s growth has not occurred equally across the county – the landscape of some neighborhoods has been changed dramatically by new development and the loss or potential loss of precious affordable housing, while investment and new development have yet to make to other areas. The goals and priorities of this Consolidated Plan seek to create new affordable housing, especially for households with incomes  $\leq$  60% AMI and incentive this development in areas of opportunity; to preserve existing affordable housing to stabilize the fabric of neighborhoods and allow homeowners to age in their homes; and to bring new investment to underserved areas.

## The Process

### PR-05 Lead & Responsible Agencies 24 CFR 91.200(b)

1. Describe agency/entity responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source

MDHA is responsible for preparing the Consolidated Plan and the administration of each grant program and funding source.

Agency Role	Name	Department/Agency
CDBG Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department
HOPWA Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department
HOME Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department
ESG Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department

Table 1 – Responsible Agencies

### Narrative

By Resolution R94-1396, the Metropolitan Council designated MDHA as the lead agency responsible for the development and administration of the Consolidated Plan and its related grant programs. These functions are undertaken by MDHA's Community Development Department.

### Consolidated Plan Public Contact Information

Angela Hubbard, Director of Community Development  
Metropolitan Development and Housing Agency  
712 South 6<sup>th</sup> Street  
Nashville, Tennessee 37206  
(Phone) 615-252-8507  
(Fax) 615-252-8533  
(Email) [ahubbard@nashville-mdha.org](mailto:ahubbard@nashville-mdha.org)

Treva Gilligan, Assistant Director of Community Development  
712 South 6<sup>th</sup> Street  
Nashville, Tennessee 37206  
(Phone) 615-252-6732  
(Fax) 615-252-8533  
(Email) [tjilligan@nashville-mdha.org](mailto:tjilligan@nashville-mdha.org)

For comments and general inquiries:  
[consolidatedplan@nashville-mdha.org](mailto:consolidatedplan@nashville-mdha.org)

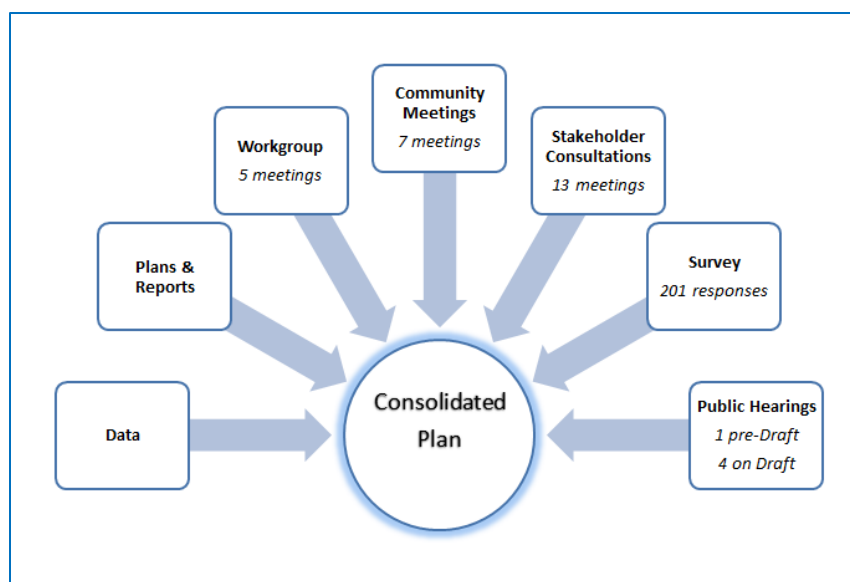
## PR-10 Consultation - 91.100, 91.200(b), 91.215(l)

### 1. Introduction

While data analyses provide strong indicators on housing and community development needs, real assessments can only be gathered through public input. To ensure this Consolidated Plan truly addresses these needs in Metro Nashville, citizen participation and stakeholder consultation activities were designed to help:

- Validate the accuracy of data;
- Determine priority needs and target areas;
- Increase coordination among partners;
- Expand outreach efforts; and
- Build support for Consolidated Plan activities.

Through the Kickoff Public Hearing, five (5) Consolidated Plan Workgroup meetings (described below), seven (7) community meetings/public input sessions, and thirteen (13) stakeholder consultations, 181 [unduplicated] persons and 84 [unduplicated] agencies/groups/organizations participated in the development of the Consolidated Plan. Additional input on the development of the draft Plan was obtained through a countywide survey that generated 201 responses. Comments on the draft Consolidated Plan will be obtained during the 30-day public comment period and at 4 public hearings to be held during this time. The final Consolidated Plan will reflect comments obtained through these efforts along with analyses of local, state, and national data and local plans and reports.



A summary of the survey responses is provided in Appendix B; a summary of comments received at the Kickoff Public Hearing on March 1, 2018 is provided in Appendix E; and a summary of comments received orally at public hearings and in writing during the public comment period on the draft Consolidated Plan is provided in Appendix F. Notes from community meetings/public input sessions and stakeholder consultations are on file at MDHA. Please call 615-252-8505 or email [consolidatedplan@nashville-mdha.org](mailto:consolidatedplan@nashville-mdha.org) to review these notes.

### Consultation

In addition to general public input on the Consolidated Plan, regulations require consultation with specific stakeholders, including but not limited to:

- Public and private agencies that provide assisted housing, health services, and social services (including those focusing on services to children, elderly persons, persons with disabilities, persons with HIV/AIDS and their families, homeless persons);
- Community-based and regionally-based organizations that represent protected class members and organizations that enforce fair housing laws;
- Broadband internet service providers and organizations engaged in narrowing the digital divide;
- Agencies whose primary responsibilities include management of flood prone areas, public land, or water resources;
- The Nashville-Davidson County Continuum of Care (CoC);
- Publicly funded institutions and systems of care that may discharge persons into homelessness (such as health-care facilities, mental health facilities, foster care or youth facilities, and corrections programs);
- Business and civic leaders;
- Metropolitan-wide planning and transportation agencies;
- HOPWA service providers;
- MDHA's Affordable Housing and Rental Assistance Departments.

To ensure focused, productive discussion, small group meetings were held on Homelessness, Housing, and Non-housing Community Development. A Consolidated Plan Workgroup developed a matrix of these key Consolidated Plan areas and identified stakeholders representing these areas, regardless of whether the stakeholders have participated in a Consolidated Plan Program. Invitations to small group consultations (listed below) were extended to some of these stakeholders; and stakeholders, as well as the public, were invited to attend public input/community meetings and complete the

online survey. Further, MDHA offered to schedule appointments with stakeholders who could not attend a meeting.

<b>Stakeholder Consultations</b>			
<b>Date</b>	<b>Meeting Name</b>	<b>Interest Area</b>	<b>Target Audience</b>
3/2/2018	Metro Homelessness Commission	Homelessness	Members of the Metro Homelessness Commission
3/5/2018	Ad Hoc Affordable Housing Committee of Metro Council	Con Plan Overview	Committee members
3/7/2018	Housing Navigator Meeting	Homelessness	Housing Navigators
3/15/2018	Continuum of Care (CoC)/Homeless Coalition	Homelessness	Members of the CoC & Homeless Coalition
3/20/2018	Housing Stakeholder Meeting	Homeownership	Partners with a focus on affordable housing for homeownership
3/21/2018	HOPWA Stakeholder Consultation	HOPWA	Partners who service HOWPA clientele in the MSA.
3/21/2018	Housing Stakeholder Meeting	Housing Preservation	Partners with a focus on affordable housing for homeownership
3/22/2018	Housing Stakeholder Meeting	New Construction/Rental	Partners with a focus on affordable housing for rental purposes
3/27/2018	Housing Stakeholder Meeting	Funders/Lenders	Partners who lend or fund affordable housing activities
4/3/2018	Community Development/Anti-Poverty Stakeholder Meeting	Community Development	Partners who impact Community Development in Nashville
4/13/2018	PHA Consultation	Public/Assisted Housing	MDHA Affordable Housing Staff
4/17/2018	Presentation	Con Plan & Fair Housing	Participants at 2018 Fair Housing Conference
4/18/2018	Strategic Planning	Housing & CD	MDHA & Metro Staff, Other Partners

**Provide a concise summary of the jurisdiction's activities to enhance coordination between public and assisted housing providers and private and governmental health, mental health and service agencies (91.215(I)).**

The focused format of the stakeholder consultations was aimed at coordinating with housing and service providers. As Table 2 indicates, this method resulted in a number of housing and service providers contributing to the Plan. Additional coordination efforts are described below.

Consolidated Plan Workgroup

The development of the Consolidated Plan was guided by a Consolidated Plan Workgroup, which was comprised of staff from the following organizations:

- MDHA Community Development Department
- Mayor's Office of Housing
- Metro Homelessness Commission
- Metro Human Relations Commission
- Metro Planning Department (brief engagement)
- Metro Social Services
- Nashville Promise Zone VISTAs
- The Housing Fund.

Beginning in October 2017, the Workgroup met monthly (except during December), to review and coordinate data and local plans and reports, identify stakeholders, discuss outreach strategies, and align Consolidated Plan activities with local initiatives.

Public Housing Authority

MDHA is the public housing authority (PHA) in Metro Nashville and provides public/affordable housing through its Affordable Housing Department and rental assistance (i.e., Section 8 Vouchers) through the Rental Assistance Department and undertakes redevelopment of its properties through the Recapitalization Department. These functions are guided by the Five Year PHA Plan and are separate and distinct from the Community Department, which administers the Consolidated Plan and its related programs. Input on the needs of public/affordable housing residents and voucher-holders and how to address these needs was obtained through consultation with the leadership from these MDHA departments. Further, department directors participate in weekly staff meetings with MDHA executive leadership to review projects and coordinate efforts.

The Five Year PHA Plan, the Envision Cayce Master Plan, and the draft Napier/Sudekum Choice Neighborhoods Plan are among the other planning efforts considered when developing this Plan.

#### Partnership between MDHA and the Metro Homelessness Commission (MHC)

MDHA currently serves as the Collaborative Applicant for the Nashville-Davidson County CoC, while MHC is the designated entity for planning and coordinating efforts to address homelessness locally. Staff collaborate closely on projects and initiatives to ensure alignment; and for development of this Plan, MDHA tapped MHC to lead stakeholder consultations and public input meetings on homelessness.

In addition, a partnership between MDHA and MHC allows for the utilization of up to 18 housing choice vouchers per month to support housing people experiencing literal homelessness. The goal is to focus on the most vulnerable populations who have experienced or are at risk of chronic homelessness and offer permanent supportive housing. Since this partnership began in May 2013, over 800 people have received a voucher.

#### Coordination with Private and Governmental Health, Mental Health, and Service Agencies

MHC participates in a local effort led by the Metro Health Department called the Community Mental Health Systems Improvement (CMHSI) project that focuses on the most vulnerable people who experience behavioral and mental health issues and touch the health, mental health, criminal justice and social sectors. The effort has resulted in the plan to build an emergency psychiatric facility, which is in the implementation stage.

In addition, planning efforts are underway to improve coordination between the health, mental health, and criminal justice systems and include how to best address people's housing instability. This is a follow-up to an earlier attempt to create a Hospital to Home program, which is now integrated into this new effort.

In the meantime, one local hospital, Vanderbilt University, has created a systems approach around a street psychiatry program that looks at ways to integrate and connect the approaches of health, mental health and homeless services. Vanderbilt University is partnering with community social service providers to link people with permanent supportive housing and has hired housing navigators that participate in the community's coordinated entry system.

## **Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness**

For the development of this Plan, the Metropolitan Homelessness Commission (MHC) led the efforts to seek input from the different community stakeholders including the Continuum of Care (CoC) members on how to best address homelessness in Nashville/Davidson County. MHC is the local government entity charged to build a housing crisis resolution system that focuses on ending homelessness across the jurisdiction, which essentially is duplicating the efforts of the CoC. Thus, with the guidance from HUD-provided technical assistance providers, the Cloudburst Group, the Nashville-Davidson County CoC and the Metropolitan government are currently seeking to strengthen CoC governance by creating a unified leadership structure. Through this community-led process, the CoC membership hopes to leverage local resources and integrate them with available federal and state resources to implement more effective efforts that end homelessness. This year+ effort has already resulted in the increased participation of CoC members and in new organizations joining the CoC.

The CoC has created different committees that work on filling gaps and address specific populations. In particular, a Veterans workgroup has drafted an action plan for Nashville to be aligned with the federal government's goals and plans to effectively end homelessness. A youth and young adult workgroup drafted the Key Action Plan, an annually updated plan to address youth homelessness. This planning effort, for the first time, brought together stakeholders serving these particular populations. Most recently, this workgroup has put forth an application for the Youth Homelessness Demonstration Program (YHDP) grant. An additional focus will be on ending family homelessness by bringing education partners to the table to collaborate with the CoC's family providers.

Nashville, through its *How's Nashville* campaign, has created a focused effort on reducing chronic homelessness with an increased housing first approach for people experiencing chronic and long-term homelessness. The most recent push includes a partnership between the MHC with the local public transit provider, the Metropolitan Transit Authority (MTA), to offer free annual bus passes to people who are experiencing or are at risk of chronic homelessness.

Through the coordinated entry system (CES), the MHC brings together CoC providers who meet twice monthly in care coordination meetings for different populations. The care coordination meetings are set up to focus on families with children, individuals, and veterans. Plans are underway to integrate a special care coordination meeting for

unaccompanied youth and young adults which are currently included in the meetings on individuals. The care coordination meetings examine the By Name Lists for each population. To be on a By Name List, households are literally homeless and have been assessed via the VI-SPDAT, the housing triage tool. Nashville is utilizing the VI-SPDAT for individuals, the Family-VI-SPDAT for families, and the TAY-VI-SPDAT for youth. At risk populations will be identified by a preliminary common assessment through the Homeless Management Information System (HMIS) prior to administering the VI-SPDAT.

Additionally, the CoC received a renewable grant to create three CES Coordinators who provide education to the community at large and engage any person who may be experiencing a housing crisis that has yet to be connected to services.

Once assessed, the community has an agreed upon a process to serve the most vulnerable people through a housing navigation process. The tools commonly utilized for the housing navigation process include the MTA annual bus pass program described above; access to SRO units at a local nonprofit provider; connection to available case management slots following a Critical Time Intervention (CTI) model; and a partnership between MHC and MDHA that provides up to 18 housing choice vouchers for people experiencing literal homelessness.

For Veterans, MDHA, together with the Mayor's Office, created a landlord incentive program to encourage landlords' participation in utilizing VASH vouchers. Furthermore, housing navigators have access to move-in costs through a special fund administered by the Metropolitan Homelessness Commission that pays for the first month's rent, utility deposits, security deposits, and if funding is available, other move-in costs including some arrears up to \$1,000 per household.

For several years, MHC has used CDBG funds to leverage move-in cost payments (utility and security deposits as well as first month rent) for people experiencing literal homelessness who have actively been working with housing navigators. Housing navigators are trained by the MHC staff and are required to utilize the coordinated entry system to apply for move-in costs. Currently, approximately 19 provider organizations representing street outreach, emergency shelter, mental health care, AIDS/HIV, youth/young adults, and other director service providers participate in the housing navigation process. Housing navigators collaborate in monthly and bi-weekly meetings to address the specific needs of people experiencing homelessness with a housing-focused approach.

An effort with the health department, mental health community organizations, hospital representatives, correctional facilities, and homeless services coordinators is underway to collaborate on how to improve the intersection of these different sectors and improve services coordination among highly vulnerable populations in a housing crisis.

**Describe consultation with the Continuum(s) of Care that serves the jurisdiction's area in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS**

In addition to administering the Consolidated Plan and its related programs (CDBG, HOME, HOPWA and ESG) for Metropolitan Nashville, MDHA currently serves as the Continuum of Care Collaborative Applicant and the HMIS Lead. Efforts to develop a unified homeless governance structure have led to the creation of working committees staffed with diverse representations of partner agencies. The governance and its committee structure work to streamline performance standards across multiple funding sources. These efforts help create, revise and align the policies and procedures for Coordinated Entry System (CES), Homeless Management Information System (HMIS) and the Performance Evaluation Processes.

MDHA partnered with the Metropolitan Homelessness Commission (MHC) to lead the community efforts to determine the homeless needs and priorities for the Consolidated Plan. MHC conducted a stakeholder meeting with CoC members and Homeless Coalition members; a stakeholder meeting with members of the Metropolitan Homelessness Commission, and a stakeholder meeting with housing navigators, as well as facilitated public input sessions. The priorities revealed through these meetings include continued focus on a housing first approach to prevent individuals from becoming homeless and quickly rehousing them if they lose housing; increased attention to supportive services to help homeless individuals maintain housing and reduce recidivism; and increased use of the CES to address barriers to housing entry. These priorities will serve as direction to align CoC and ESG resources.

In efforts to further align ESG with CoC priorities, plans include increased coordination between the CoC and ESG performance standards. The CoC Governance Board has been working on updating the draft of the Performance Standards and MDHA is beginning to incorporate those standards as a part of its ESG application process. In 2017, one member of the CoC's Performance Evaluation Committee (PEC) also served on the ESG Review Committee. Discussions are underway to potentially merge the PEC and ESG review committees to review proposed projects. Unfortunately, because

of the timing of federal funding announcements, the funding cycles for the CoC and ESG are not aligned to allow for complete coordination.

The HMIS Committee serves as the advisory and oversight body to the CoC and HMIS Lead. Its primary purpose is to provide guidance to the CoC and HMIS Lead on planning; policy development; systems improvement, including regular data quality review; and to ensure the administration of HMIS in accordance with HUD guidelines.

The goals and duties of the HMIS Committee include:

- Informing the vision for HMIS and setting priorities to align with goals established by the CoC.
- Reviewing and monitoring strategic initiatives for HMIS.
- Developing and recommending approval of policies to CoC Governance for local HMIS and the HMIS Lead and staff, including MOUs and data sharing agreements.
- Assuring appropriate data privacy mechanisms are in place, and informing the process to manage data breeches as needed.
- Providing a platform to resolve provider concerns or issues.

MHC and MDHA staff closely collaborate to ensure the components of the Coordinated Entry System are fully integrated into HMIS. In addition, the joint staff conducted combined HMIS and CES trainings for housing navigators and HMIS users. Metro government agencies have increased their communications through the creation of an interdepartmental council, which actively moved the City's response to homelessness from an enforcement-only approach to an engagement-first approach and focuses on linking people to needed services rather than arresting them for essentially being homeless. These efforts increase community outreach and education about streamlining processes and aligning funding to help more people.

While a lot of work has been done around the alignment of procedures, policies, and resources, the opportunity to make a big leap forward to build an efficient systems approach oriented on providing different options to assist people transition out of homelessness is still in the development phase. The HMIS Advisory Committee identified areas of improvement and approved an action plan to shape policies and procedures of HMIS, implement data quality and privacy plans, etc.

## **2. Describe Agencies, groups, organizations and others who participated in the process and describe the jurisdiction's consultations with housing, social service agencies and other entities**

A wide range of groups and organizations, from the public and private sectors and representing all areas covered by the Consolidated Plan, participated in the Consultation process. The table below lists groups and organizations that were represented at stakeholder meetings and/or public input/community meetings.

<b>1</b>	<b>Agency/Group/Organization</b>	Affordable Housing Resources
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a community meeting and provided input on housing needs and helped identify priorities. Agency is a nonprofit that provides homeownership opportunities to LMI families
<b>2</b>	<b>Agency/Group/Organization</b>	All-In All Starz, Inc. (American Baptist College)
	<b>Agency/Group/Organization Type</b>	Neighborhood Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a community meeting and provided input on housing and community development needs. Agency operates a multicultural community-based STEM learning center serving North Nashville and Joelton communities.
<b>3</b>	<b>Agency/Group/Organization</b>	All Together Madison
	<b>Agency/Group/Organization Type</b>	Neighborhood Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in a consultation on non-housing community development needs and strategies. Organization is focused on economic and community revitalization in the Madison community.
<b>4</b>	<b>Agency/Group/Organization</b>	AmeriCorps Volunteers in Service to America (VISTAs)
	<b>Agency/Group/Organization Type</b>	Other
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	VISTAs attended consultations on affordable housing, non-housing community development, and strategic planning. VISTAs are assigned to the Nashville Promise Zone (NPZ) and work to address the NPZ's goals.

<b>5</b>	<b>Agency/Group/Organization</b>	Catholic Charities
	<b>Agency/Group/Organization Type</b>	Services – Children Services - Elderly Services – Homeless Civic Leaders Other (Services – Immigrants and Refugees)
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC and housing navigators. Agency provides a number of services directed to homeless persons and other vulnerable populations.
<b>6</b>	<b>Agency/Group/Organization</b>	Centerstone
	<b>Agency/Group/Organization Type</b>	Services – Health (Behavioral)
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC and housing navigators and in a community meeting on homelessness. Nonprofit agency provides community-based behavioral care, with a full range of mental health services, substance abuse treatment and intellectual and developmental disability services.
<b>7</b>	<b>Agency/Group/Organization</b>	City of Murfreesboro
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Non-homeless Special Needs HOPWA Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	City representative contributed to HOPWA strategy. City is a CDBG entitlement in the Nashville-Davidson—Murfreesboro-Franklin NSA.
<b>8</b>	<b>Agency/Group/Organization</b>	Communities in Schools of Tennessee
	<b>Agency/Group/Organization Type</b>	Services – Children Services – Education
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Anti-Poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization attended the Kickoff Public Hearing. Agency provides programs to reduce the dropout rate and increase on-time graduation rates.

9	<b>Agency/Group/Organization</b>	Conexión Américas
	<b>Agency/Group/Organization Type</b>	Neighborhood Organization (Latino Community)
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency hosted and participated in a community meeting on housing and community development. Agency advocates for and supports the social, economic, and civic integration of Latino families. Agency is a Nashville Promise Implementation Partner.
10	<b>Agency/Group/Organization</b>	Council on Aging
	<b>Agency/Group/Organization Type</b>	Services – Elderly Persons
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a consultation on housing and community development. Agency provides services for older adults and their caregivers.
11	<b>Agency/Group/Organization</b>	Dismas House
	<b>Agency/Group/Organization Type</b>	Housing Other (Serves Former Offenders)
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a community meeting on housing and community development. Agency assists former offenders with re-entry to society through supportive housing.
12	<b>Agency/Group/Organization</b>	Downtown Presbyterian Church
	<b>Agency/Group/Organization Type</b>	Civic Leaders Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in the CoC consultation. Organization is located in downtown Nashville and provides meals to the homeless.

<b>13</b>	<b>Agency/Group/Organization</b>	Elmington Capital
	<b>Agency/Group/Organization Type</b>	Business Leaders Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Group participated in housing stakeholder consultation on new construction – rental. Group is a privately owned commercial real estate and development firm and develops affordable housing in Nashville.
<b>14</b>	<b>Agency/Group/Organization</b>	Fifteenth Avenue Baptist CDC
	<b>Agency/Group/Organization Type</b>	Housing Civic Leader
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in housing stakeholder consultation on new construction – rental housing. Agency is a Community Development Corporation and provides affordable housing.
<b>15</b>	<b>Agency/Group/Organization</b>	Fairfield Inn & Suites
	<b>Agency/Group/Organization Type</b>	Business Leader
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in public input session on homelessness.
<b>16</b>	<b>Agency/Group/Organization</b>	First Tennessee Bank
	<b>Agency/Group/Organization Type</b>	Business Leaders Private Sector Banking/Financing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in housing consultation with funders and lenders. Organization supports community development and affordable housing through various financial products.

17	<b>Agency/Group/Organization</b>	Greater Nashville Regional Council
	<b>Agency/Group/Organization Type</b>	Regional Organization Planning Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a strategic planning session with MDHA and Metro staff and other partners. Agency serves 13 counties in Middle Tennessee in the development of plans and programs related to economic growth, community design and development, and quality of life. Agency prepares the Comprehensive Economic Development Strategy for the region.
18	<b>Agency/Group/Organization</b>	Habitat for Humanity of Greater Nashville
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in housing stakeholder consultation on homeownership. Agency builds affordable homes for sale to LMI buyers.
19	<b>Agency/Group/Organization</b>	Kookaburra Development & Strategy
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in the Kickoff Public Hearing and housing stakeholder consultations on new construction – rental and homeownership. Organization provides consultative services for affordable housing projects and initiatives.
20	<b>Agency/Group/Organization</b>	LDG Development
	<b>Agency/Group/Organization Type</b>	Business Leaders Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Group participated in housing stakeholder consultation on new construction – rental. Group develops multi-family affordable housing in the area.
21	<b>Agency/Group/Organization</b>	Legal Aid Society
	<b>Agency/Group/Organization Type</b>	Services – Fair Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a community meeting on homelessness. Agency provides legal assistance to low income and vulnerable families.

22	Agency/Group/Organization	Lipscomb University
	Agency/Group/Organization Type	Civic Leaders Other – University
	What section of the Plan was addressed by Consultation?	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Organization participated in a community meeting on housing and community development. Organization is a private, coeducational liberal arts college in Nashville.
23	Agency/Group/Organization	Martha O'Bryan Center
	Agency/Group/Organization Type	Services – Children Services – Education
	What section of the Plan was addressed by Consultation?	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Agency hosted and participated in a community meeting on housing and community development. Agency offers programs to empower children, youth, and adults in poverty and is a Nashville Promise Zone Implementation Partner.
24	Agency/Group/Organization	Mary Parrish Center
	Agency/Group/Organization Type	Services – Victims of Domestic Violence
	What section of the Plan was addressed by Consultation?	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Agency participated in the CoC and housing navigator consultations on homelessness. Agency provides transitional housing and services for survivors of domestic and sexual violence.
25	Agency/Group/Organization	Mayor's Office of Economic & Community Development
	Agency/Group/Organization Type	Other government – Local
	What section of the Plan was addressed by Consultation?	Housing Needs Assessment Market Analysis
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Staff participated in housing stakeholder on housing preservation. Office facilitates partnerships and provides incentives for economic development.
26	Agency/Group/Organization	Mayor's Office of Health & Wellness Policy
	Agency/Group/Organization Type	Other government – Local
	What section of the Plan was addressed by Consultation?	Non-homeless Special Needs HOPWA Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Staff participated in the HOPWA consultation. Office focuses on initiatives to help Nashvillians improve health and well-being.

27	<b>Agency/Group/Organization</b>	Mayor's Office of Housing
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy Other (Citizen Participation) Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Representatives serve on the Consolidated Plan Workgroup and have participated in the Kickoff Public Hearing and stakeholder consultations on housing and homelessness. Office provides funding and incentives to build and preserve affordable housing, oversees the community land trust, and develops plans and reports on affordable housing.
28	<b>Agency/Group/Organization</b>	Mayor's Office of New Americans
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Other (Strategic Planning)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in the strategic planning session on housing and community development. Office works to engage immigrants and empower them to participate in local government and their communities.
29	<b>Agency/Group/Organization</b>	MDHA Affordable Housing Department
	<b>Agency/Group/Organization Type</b>	PHA
	<b>What section of the Plan was addressed by Consultation?</b>	Public Housing Needs Anti-poverty Strategy Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Department leadership and staff participated in a consultation on needs of residents and the strategic planning session. Department oversees MDHA's inventory of public and affordable housing.
30	<b>Agency/Group/Organization</b>	MDHA Recapitalization Department
	<b>Agency/Group/Organization Type</b>	PHA
	<b>What section of the Plan was addressed by Consultation?</b>	Public Housing Needs Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Department staff participated in stakeholder consultation on non-housing community development and the strategic planning session. Department is responsible for master planning and redevelopment of MDHA public and assisted housing sites.

31	<b>Agency/Group/Organization</b>	MDHA Rental Assistance Department
	<b>Agency/Group/Organization Type</b>	PHA
	<b>What section of the Plan was addressed by Consultation?</b>	Public Housing Needs Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Department leadership provided information on the needs of voucher-holders and participated in the strategic planning session. Department oversees the administration of voucher programs (Housing Choice Vouchers, VASH, Shelter-Plus-Care vouchers).
32	<b>Agency/Group/Organization</b>	MDHA Urban Development Department
	<b>Agency/Group/Organization Type</b>	PHA Other (Development)
	<b>What section of the Plan was addressed by Consultation?</b>	Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Department leadership participated in strategic planning session on housing and community development. Department implements and oversees redevelopment districts and transit-oriented development districts and assists developers with development incentives.
33	<b>Agency/Group/Organization</b>	Meharry Medical College
	<b>Agency/Group/Organization Type</b>	Health Agency Publicly Funded Institution/System of Care
	<b>What section of the Plan was addressed by Consultation?</b>	Non-homeless Special Needs HOPWA Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Representatives participated in the HOPWA consultation. Agency provides health services to minority and underserved communities.
34	<b>Agency/Group/Organization</b>	Mending Hearts
	<b>Agency/Group/Organization Type</b>	Services – Homeless (Women)
	<b>What section of the Plan was addressed by Consultation?</b>	Other (Homeless Women) Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in CoC consultation on homelessness. Agency provides housing and supportive services to women who may be homeless due to addiction and/or co-occurring mental health disorders.
35	<b>Agency/Group/Organization</b>	Mental Health Cooperative
	<b>Agency/Group/Organization Type</b>	Services – Health
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in the housing navigator consultation on homelessness. Agency provides community-based management, psychotherapy, psychiatry, crisis services, and primary care as part of its system of care and serves low-income families.

36	<b>Agency/Group/Organization</b>	Metro Action Commission
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Market Analysis Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy Economic Development Anti-poverty Strategy Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in consultations on non-housing community development and with members of the Metro Homelessness Commission and in the strategic planning session. Agency provides programs to help families break the cycle of poverty.
37	<b>Agency/Group/Organization</b>	Metro Homelessness Commission
	<b>Agency/Group/Organization Type</b>	Other government – Local Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in the Consolidated Plan Workgroup, attended the Kickoff Public Hearing, led all consultations and public input sessions on homelessness. Agency is the local planning and coordination body for homelessness and spearheads the CES effort.
38	<b>Agency/Group/Organization</b>	Metro Human Relations Commission
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Other (Citizen Participation) Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff served as member of the Consolidated Plan Workgroup and participated in the strategic planning session.
39	<b>Agency/Group/Organization</b>	Metro Nashville Police Department
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff attended consultation with members of the Metro Homelessness Commission.

40	<b>Agency/Group/Organization</b>	Metro Parks and Recreation
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participates in consultation on non-housing community development. Department oversees City’s public parks, open spaces, and greenways and operates facilities and programs throughout the county.
41	<b>Agency/Group/Organization</b>	Metro Planning Department
	<b>Agency/Group/Organization Type</b>	Other government – Local Planning Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in early meetings of the Workgroup and in the strategic planning sessions. Department developed the City’s General Plan, NashvilleNext, which guides how Nashville grows through 2040.
42	<b>Agency/Group/Organization</b>	Metro Public Health Department
	<b>Agency/Group/Organization Type</b>	Health Agency Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff attended consultation with members of the Metro Homelessness Commission. Agency serves as the City’s Public Health Department with a mission to protect, improve, and sustain the health and well-being of all Nashvillians.

43	<b>Agency/Group/Organization</b>	Metro Social Services
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy Market Analysis Economic Development Anti-poverty Strategy Other (Citizen Participation) Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in the Consolidated Plan Workgroup, a community meeting on housing and community development, and the strategic planning session. Department leadership participated in the consultation with members of the Metro Homelessness Commission. Among providing a number of programs serving residents in need, the Department publishes the annual Community Needs Assessment.
44	<b>Agency/Group/Organization</b>	Mid-Cumberland Human Resources Agency Youth CAN
	<b>Agency/Group/Organization Type</b>	Services – Children
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Families with children Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in CoC consultation on homelessness. Agency provides program to help youth ages 16-24 with educational, training, and career opportunities.
45	<b>Agency/Group/Organization</b>	Nashville Career Advancement Center
	<b>Agency/Group/Organization Type</b>	Other government - Local Services – Employment
	<b>What section of the Plan was addressed by Consultation?</b>	Market Analysis Homeless Strategy Economic Development Anti-poverty Strategy Other (Strategic Plan)
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in consultation on non-housing community development and in in the consultation with members of the Metro Homelessness Commission as well as the strategic planning session. Agency works to provide people ages 14+ with increased access to sustainable careers and is governed by the Middle TN Workforce Development Board.

46	<b>Agency/Group/Organization</b>	Nashville Cares
	<b>Agency/Group/Organization Type</b>	Services – Persons with HIV/AIDS
	<b>What section of the Plan was addressed by Consultation?</b>	Non-homeless Special Needs HOPWA Strategy Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in HOPWA consultation and consultations on homelessness with the CoC and members of the Metro Homelessness Commission. Agency provides supportive services to persons with HIV/AIDS and is a HOPWA Sponsor.
47	<b>Agency/Group/Organization</b>	Nashville Downtown Partnership
	<b>Agency/Group/Organization Type</b>	Business Leaders
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC and with members of the Metro Homelessness Commission.
48	<b>Agency/Group/Organization</b>	Nashville Health
	<b>Agency/Group/Organization Type</b>	Services – Health
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in housing consultation on new construction – rental. Nonprofit agency aims to help Nashville become healthier by collaboratively identifying major health population challenges, proposing transformative solutions, and facilitating execution.
49	<b>Agency/Group/Organization</b>	Nashville Rescue Mission
	<b>Agency/Group/Organization Type</b>	Services - Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in the consultation with members of the Metro Homelessness Commission. Agency is the largest emergency shelter provider in the City and also provides life recovery programs.

50	<b>Agency/Group/Organization</b>	Nashville Public Library
	<b>Agency/Group/Organization Type</b>	Other government – Local
	<b>What section of the Plan was addressed by Consultation?</b>	Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Staff participated in consultation on non-housing community development. In addition to managing the City's public library facilities, agencies operates programs, including literacy programs and the Nashville After Zone Alliance.
51	<b>Agency/Group/Organization</b>	Neighborhood Health
	<b>Agency/Group/Organization Type</b>	Health Agency Services – Health
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in CoC consultation on homelessness. Agency operates 12 locates in Middle TN that offer affordable medical, dental, and emotional care. Agency is a Federally Qualified Health Center.
52	<b>Agency/Group/Organization</b>	New Level CDC
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a community meeting on housing and community development. Agency develops affordable housing and provides housing counseling services and has been designated as a CHDO.
53	<b>Agency/Group/Organization</b>	Oasis Center
	<b>Agency/Group/Organization Type</b>	Services – Children Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in CoC consultation on homelessness. Agency provides emergency shelter, conducts street outreach, and offers supportive services for homeless youth.
54	<b>Agency/Group/Organization</b>	Omega Realty Services
	<b>Agency/Group/Organization Type</b>	Business Leaders
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Group participated in housing consultation on new construction – rental. Group specializes in single and multi-family residential homes, commercial retail, and mixed-use projects.

55	<b>Agency/Group/Organization</b>	Open Table Nashville
	<b>Agency/Group/Organization Type</b>	Housing Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy Market Analysis Economic Development Anti-poverty
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in community meeting on housing and community development, public input meetings on homelessness, and consultations on homelessness with the CoC and housing navigators. Agency advocates for the homeless, provides outreach services, and is constructing bridge housing for the homeless.
56	<b>Agency/Group/Organization</b>	Operation Stand Down
	<b>Agency/Group/Organization Type</b>	Services – Homeless Other (Veterans)
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs –Veterans Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC, members of the Metro Homelessness Commission, and housing navigators. Agency provides services, such as employment and housing, for Veterans and their families.
57	<b>Agency/Group/Organization</b>	Park Center
	<b>Agency/Group/Organization Type</b>	Services – Homeless Services – Health
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically Homeless Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC, members of the Metro Homelessness Commission, and housing navigators. Agency offers a continuum of services for people with co-occurring disorder of mental illness and substance abuse, including homeless outreach and residential services.

<b>58</b>	<b>Agency/Group/Organization</b>	Pathway Lending
	<b>Agency/Group/Organization Type</b>	Community Development Financial Institution
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Economic Development
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in the Kickoff Public Hearing. Agency provides lending solutions and educational services that support the development, growth, and preservation of underserved small businesses, affordable housing, and sustainable communities.
<b>59</b>	<b>Agency/Group/Organization</b>	Project Return
	<b>Agency/Group/Organization Type</b>	Services – Homeless Other (Formerly Incarcerated)
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Strategy Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC and housing navigators and in a housing consultation on preservation.
<b>60</b>	<b>Agency/Group/Organization</b>	Rebuilding Together Nashville
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in the Kickoff Public Hearing, in a community meeting on housing and community development, and housing consultation on preservation. Agency undertakes rehabilitation of homes for low income families; work includes addressing lead-based paint hazards.
<b>61</b>	<b>Agency/Group/Organization</b>	Rooftop
	<b>Agency/Group/Organization Type</b>	Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development; Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in community meeting on housing and community development. Agency partners with local churches to provide emergency rental assistance to Davidson County residents to prevent homelessness.

62	<b>Agency/Group/Organization</b>	Room in the Inn
	<b>Agency/Group/Organization Type</b>	Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultations on homelessness with the CoC and members of the Metro Homelessness Commission. Agency provides transitional and permanent housing, support services, education and work force development, and a winter shelter for the homeless.
63	<b>Agency/Group/Organization</b>	Safe Haven Family Shelter
	<b>Agency/Group/Organization Type</b>	Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs –Families with Children; Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultation on homelessness with the CoC and housing navigators. Agency operates only shelter in Nashville that accepts entire families.
64	<b>Agency/Group/Organization</b>	Salvation Army
	<b>Agency/Group/Organization Type</b>	Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultation on homelessness with the CoC and housing navigators. Agency provides supportive housing for homeless families, single women, and single men; case management services; and emergency assistance.
65	<b>Agency/Group/Organization</b>	Showers the People
	<b>Agency/Group/Organization Type</b>	Services – Homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in in consultation on homelessness with the CoC. Agency provides mobile shower facilities to homeless individuals.

66	<b>Agency/Group/Organization</b>	St. Luke's Community House
	<b>Agency/Group/Organization Type</b>	Neighborhood Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency hosted and participated in a community meeting on housing and community development. Agency provides programs for children and youth and seniors and serves as one of the Nashville Promise Zone's Implementation Partners.
67	<b>Agency/Group/Organization</b>	Stone Street Housing Foundation
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Group participated in community meeting on housing and community development. Group develops mixed-income housing for sale and rent.
68	<b>Agency/Group/Organization</b>	Street Works
	<b>Agency/Group/Organization Type</b>	Services – Persons with HIV/AIDS
	<b>What section of the Plan was addressed by Consultation?</b>	Non-homeless Special Needs HOPWA Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in the HOPWA consultation and has been a HOPWA Sponsor. Agency provides education, prevention, and care to those affected by HIV/AIDS on the inner-city streets of Nashville.
69	<b>Agency/Group/Organization</b>	Suburban & Urban Real Estate Services
	<b>Agency/Group/Organization Type</b>	Housing Business Leaders
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in housing consultation on homeownership. Organization provides real estate services.
70	<b>Agency/Group/Organization</b>	Tennessee Commission on Aging and Disability
	<b>Agency/Group/Organization Type</b>	Services – Elderly Persons Services – Persons with Disabilities Other government – State
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency attended Kickoff Public Hearing. Agency provides information and assistance to older persons, adults with physical disabilities, caregivers, and professionals looking for services and programs in Tennessee.

71	<b>Agency/Group/Organization</b>	Tennessee Conference on Social Welfare
	<b>Agency/Group/Organization Type</b>	Civic Leaders
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Organization participated in the consultation with members of the Metro Homelessness Commission. Agency provides information, continuing education, and public policy awareness for Tennessee human services professionals.
72	<b>Agency/Group/Organization</b>	Tennessee Fair Housing Council
	<b>Agency/Group/Organization Type</b>	Services – Fair Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in housing consultation on new construction – rental. Agency provides fair housing education, outreach, enforcement, and testing services.
73	<b>Agency/Group/Organization</b>	Tennessee Housing Development Agency
	<b>Agency/Group/Organization Type</b>	Housing Other government - State
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment; Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in housing consultations on new construction – rental and homeownership. Agency is the State Housing Finance Agency for Tennessee and manages the LIHTC, National and Tennessee Housing Trust Funds, and the state of Tennessee HOME allocation.
74	<b>Agency/Group/Organization</b>	Tennessee Human Rights Commission
	<b>Agency/Group/Organization Type</b>	Other government – State Services – Fair Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in community meeting on housing and community development. Agency is state agency charged with safeguarding individuals from discrimination through education and enforcement.

<b>75</b>	<b>Agency/Group/Organization</b>	The Housing Fund
	<b>Agency/Group/Organization Type</b>	Community Development Financial Institution
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in Consolidated Plan Workgroup and hosted/facilitated all consultations on housing. Agency provides financing for affordable housing and community development projects.
<b>76</b>	<b>Agency/Group/Organization</b>	The Land Trust for Tennessee
	<b>Agency/Group/Organization Type</b>	Other (Conservation)
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in housing consultation on preservation. Agency undertakes conservation projects that protect public and private natural and historic landscapes.
<b>77</b>	<b>Agency/Group/Organization</b>	United Way
	<b>Agency/Group/Organization Type</b>	Services – Education Services – Health Other (Financial Stability)
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in a community meeting on housing and community development and in the consultation on homelessness with the CoC. Agency provides education, financial stability, and health programs.
<b>78</b>	<b>Agency/Group/Organization</b>	Universal Health Services
	<b>Agency/Group/Organization Type</b>	Services – Health
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Homeless Special Needs HOPWA Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in HOPWA consultation and operates hospitals and health care facilities in the area.

79	<b>Agency/Group/Organization</b>	Urban Housing Solutions
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultation on homelessness with the CoC. Agency provides affordable housing and permanent supportive housing for the homeless and has been a CHDO and HOPWA Sponsor.
80	<b>Agency/Group/Organization</b>	Vanderbilt University HHS
	<b>Agency/Group/Organization Type</b>	Civic Leaders Other (University)
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultation on homelessness with housing navigators. The Health and Human Services Track prepares students for careers in social work, the medical and dental fields, health policy, etc.
81	<b>Agency/Group/Organization</b>	Vaughn Development Group
	<b>Agency/Group/Organization Type</b>	Housing Business Leaders
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Group participated in housing consultation on new construction – rental. Group provides development consulting services for affordable housing projects.
82	<b>Agency/Group/Organization</b>	Veterans Affairs Department
	<b>Agency/Group/Organization Type</b>	Services – Veterans Other government – Federal
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Needs – Veterans Homeless Needs – Unaccompanied youth Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultation on homelessness with CoC and housing navigators. Agency provides patient care and federal benefits to Veterans and their dependents.

<b>83</b>	<b>Agency/Group/Organization</b>	Woodbine Community Organization
	<b>Agency/Group/Organization Type</b>	Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Needs Assessment Market Analysis Economic Development Anti-poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency hosted and participated in consultation on non-housing community development. Agency develops affordable housing and provides services to help families access housing, serves as a Nashville Promise Zone Implementation Partner, and has been designated as a CHDO.
<b>84</b>	<b>Agency/Group/Organization</b>	YWCA
	<b>Agency/Group/Organization Type</b>	Services – Victims of Domestic Violence
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs – Chronically homeless Homeless Needs – Families with children Homeless Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Agency participated in consultation on homelessness with the CoC. Agency provides shelter, domestic violence services, adult education, and youth services for survivors of domestic violence.

**Table 2 – Agencies, groups, organizations who participated**

### **Identify any Agency Types not consulted and provide rationale for not consulting**

MDHA attempted to engage as many stakeholders as possible for input into the Plan through stakeholder consultations or community meetings/public input meetings. Stakeholders who could not attend a meeting but wanted to provide input were invited to schedule an appointment with MDHA staff. Further, MDHA offered to participate in or address participants in meetings that stakeholders were hosting.

### **Other local/regional/state/federal planning efforts considered when preparing the Plan**

In recent years, a number of plans and reports regarding housing needs, transportation needs, and growth have been published. This Plan seeks to build on the following planning efforts and align with local initiatives.

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
2017 Analysis of Impediments to Fair Housing Choice (formerly 2017 Joint Assessment of Fair Housing)	MDHA	The fair housing analysis took an in-depth look and disparities in housing and opportunities. Goals from this analysis are incorporated into this Plan.
2017 Community Needs Evaluation (February 2018)	Metro Social Services	The CNE provides an overview of social service needs and resources available to meet these needs. The CNE is used as a supplement for the needs assessments and market analyses undertaken through this Plan.
Affordable Housing Primer, Part 1 (January 2018)	Metro Human Relations Commission	This Primer explains the concepts of affordable housing and analyzes gaps between incomes and housing costs and was used as a supplemental resource for this Plan.
Envision Cayce Master Plan (July 2014) and draft Envision Napier and Sudekum Transformation Plan (January 2018)	MDHA	These plans reflect MDHA's commitment to transform areas of distressed public housing into neighborhoods of opportunity. These Plans serve as the basis for some of the geographical priorities in the Consolidated Plan.
Let's Move Nashville Transit and Affordability Taskforce Recommendations (January 2018)	Mayor's Office	Taskforce recommendations offer policy, project, and programmatic recommendations to guide the development of transit corridors. Recommendations regarding affordable housing along transit corridors were considered when developing priorities for the Consolidated Plan.

Nashville Youth Violence Summit Report (March 2016)	Mayor's Office	The purpose of the Report is to increase awareness concerning youth violence and address it through comprehensive community and government planning. The Consolidated Plan proposes to fund youth programs as part of this effort.
Nashville-Davidson County Continuum of Care	MDHA	The CoC seeks to improve coordination of resources to maximize housing and services for homeless persons. This Plan evaluates homeless needs and produces a homelessness strategic plan as well as provides for funding to assist homeless persons and families.
NashvilleNext (Amended August 2017)	Metro Planning Department	NashvilleNext is the City's General Plan to guide growth through 2040. Proposed Consolidated Plan activities are consistent with NashvilleNext.
nMotion, Nashville MTA/RTA Strategic Plan (September 2016)	Metro Transit Authority	This Plan sets forth recommendations to address regional transportation issues as the region continues to grow. Recommendations were considered when developing strategies to address affordable housing along transit corridors.
PHA Five Year Plan (October 1, 2014 – September 30, 2019) & Annual Plan (October 1, 2017 – September 30, 2019)	MDHA	The PHA Plan sets forth MDHA's vision to address the needs of public and affordable housing residents. Activities identified in the Consolidated Plan to support these needs align with the PHA Plan.

The Housing Nashville Report (April 2017)	Mayor's Office of Housing	The Housing Nashville Report produced by the Mayor's Office of Housing provides benchmark data on housing and established priorities for funding, building, preserving, and retaining affordable housing options. The Consolidated Plan incorporates data and recommendations from this Report.
The Nashville Promise Zone (Designated June 2016)	Mayor's Office in collaboration with MDHA	The 6 Promise Zone Goals related to housing, jobs, economic opportunities, education, infrastructure, and safety are reflected in the goals and priorities of the Consolidated Plan.
Transportation as a Key to Housing Affordability – Issue Brief (2018)	Tennessee Housing Development Agency	This Brief studies the impact of housing location and transportation costs. Findings from this brief were considered when determining Consolidated Plan priorities.

**Table 3 – Other local / regional / federal planning efforts**

**Describe cooperation and coordination with other public entities, including the State and any adjacent units of general local government, in the implementation of the Consolidated Plan (91.215(I))**

Although MDHA is the administrator of the Consolidated Plan, it is not a department of the Metropolitan Government. To ensure the Plan reflects the City's priorities and aligns with its initiatives, representatives from the following Metro Offices participated in the Consolidated Plan Workgroup.

- Mayor's Office of Housing
- Metro Homelessness Commission
- Metro Human Relations Commission
- Metro Planning Department (brief engagement)
- Metro Social Services

As indicated in the list of agencies consulted (Table 2) representatives from several local (other MDHA and Metro Departments), state (Tennessee Housing Development Agency and Tennessee Human Rights Commission), and federal (Department of Veterans Affairs) agencies, contributed to the Plan. In addition, MDHA briefed

members of Metro Council's Ad Hoc Affordable Housing Committee on the Consolidated Plan process and answered questions posed by Committee members. Representatives from the entitlement cities (Franklin, Hendersonville, and Murfreesboro) in the Nashville-Davidson—Franklin—Murfreesboro MSA were invited to the HOPWA Consultation.

## **PR-15 Citizen Participation**

### **1. Summary of citizen participation process/Efforts made to broaden citizen participation**

The Citizen Participation Plan is available in Appendix A.

#### **Summarize citizen participation process and how it impacted goal-setting**

The citizen participation process can be divided into three phases (1) the planning phase; (2) consultation and draft development phase; and (3) draft review and comment phase.

##### Planning Phase

The planning phase began in October 2017 with the first meeting of the Consolidated Plan Workgroup. The purpose of the Workgroup was to guide the development of the Consolidated Plan, coordinate and review data and reports, and discuss outreach strategies. Outreach strategies focused on methods to increase participation from minorities, persons with limited English proficiency, persons with disabilities, and low-income persons. Using a matrix of key Consolidated Plan areas (Housing, Homelessness, Non-Housing Community Development/Anti-Poverty), organizations working in these areas and representing these population were identified and invited to stakeholder meetings. To maximize input from the general public, an online survey was developed.

For community meetings, MDHA partnered with several of its Nashville Promise Zone Implementation Partners to hold meetings where these partners already have a deep presence in underserved communities. Also, MDHA partnered with the Metro Homelessness Commission (MHC) to hold stakeholder consultations and public input sessions on homelessness and The Housing Fund (THF) to host consultations on housing. The purpose of these partnerships was to build on the strong relationships MHC and THF have with the respective constituencies.

## Consultation and Draft Development Phase

This phase began on March 1, 2018, when MDHA held a Kickoff Public Hearing at Habitat for Humanity of Greater Nashville. The purpose of this public hearing was to introduce the public to the Consolidated Plan, provide an overview of its purpose, explain how it will be undertaken, and emphasize how the public needed to participate. An audio recording of this meeting was made available on MDHA's Consolidated Plan webpage.

On March 5, 2018, MDHA gave a similar presentation before members of Metro Council's Ad Hoc Affordable Housing Committee. A video of this meeting is available on YouTube and could be accessed through a link on the Consolidated Plan webpage.

On March 16, 2018, MDHA released an online survey to assess housing and community development needs and priorities and announced the first series of community meetings/public input sessions. Weekly emails were sent through April 6 to MDHA's distribution list of over 700 people to remind them to complete the survey and attend a meeting. During this phase, there were thirteen (13) stakeholder meetings (as previously listed), and seven (7) community meetings/public input sessions (listed below) in addition to the Kickoff Public Hearing. The survey closed at 4:00 p.m. on April 13. Input received at meetings and through the Survey was used to inform the Strategic Plan and the priorities and goals of the Consolidated Plan.

<b>Community Meetings/Public Input Sessions</b>				
<b>Date</b>	<b>Meeting Name</b>	<b>Interest Area</b>	<b>Target Audience</b>	<b>Host</b>
3/2/2018	Public Input Session	Homelessness	General public	Metro Homelessness Commission
3/21/2018	How's Nashville Residents Meeting	Homelessness	Individuals with lived experience	Metro Homelessness Commission
3/24/2018	Public Input Session	Homelessness	General Public	Metro Homelessness Commission
4/4/2018	Community Meeting	Housing & Community Development	General public	MDHA
4/5/2018	Community Meeting	Housing & Community Development	General Public	St. Luke's Community House

4/6/2018	Community Meeting	Housing & Community Development	General Public	Conexión Américas
4/12/2018	Community Meeting	Housing & Community Development	General public	Martha O'Bryan Center

Draft Review and Comment Period

The draft Consolidated Plan and 2018 Action Plan were released for public review and comment on May 8, 2018, and the comment period closes at 4:00 p.m. on June 7, 2018. During the 30-day Public Comment Period, MDHA will hold four (4) public hearings. Information on the public hearings is provided below. (Note: The initial Public Notice advertised that the Public Comment Period would begin on May 1 and close on May 31. Due to a delay in publication, the draft was released on May 8, 2018. A revised Public Notice was issued to extend the Public Comment Period until June 7. Also, the revised Notice included actual 2018 Allocations, which were released after the initial Public Notice was published in the papers, and advised of the change in the data of one of the public hearings). The Public Notices are provided in Appendix D and include details on how the public can submit comments.

<b>Public Hearing Schedule</b>		
<b>Date</b>	<b>Time</b>	<b>Location</b>
Tuesday, May 15, 2018	1:00 p.m.	J. Henry Hale Apartments Community Room 1433 Jo Johnston Avenue Nashville, TN 37203
Monday, May 21, 2018	5:30 p.m.	Levy Place Community Room 303 Foster Street Nashville, TN 37207
Wednesday, May 23, 2018	11:30 a.m.	Hispanic Family Foundation* 3927 Nolensville Pike Nashville, TN 37211 <i>*Spanish translation services will be available and children are welcome.</i>
Thursday, May 31, 2018	5:30 p.m.	Randee Rogers Training Center 1419 Rosa L. Parks Boulevard Nashville, TN 37208

## Summary of Outreach Methods

- For **Stakeholder Consultations**, invitations to meetings were emailed to stakeholders identified during the Planning Phase. Consultations with the CoC/Homeless Coalition and members of the Metro Homelessness Commission (MHC) were held during regularly-scheduled meetings and open to members of these organizations.
- **Community Meetings/Public Input Sessions** and the **Survey** were advertised via weekly emails from March 16<sup>th</sup> through April 6<sup>th</sup> to over 700 people on MDHA's list and forwarded by recipients and partner agencies to reach broader constituencies; via MDHA's social media platforms; and posted on MDHA's website and at its offices. Community meetings were held in underserved areas and/or in areas of minority or ethnic concentrations. Information on community meetings was included in MDHA's March Resident Newsletter, which was hand delivered to 5,653 households. In addition, MHC posted public input meetings on homelessness on its website.
- **Public Hearings** were publicized in the following manner:
  - **Print Publication** > Public Notices for the kickoff public hearing and the public hearings on the draft Consolidated Plan were published in *The Tennessean*, the *Tribune*, and in Spanish in *El Crucero*. The Public Notice for the draft Plan also ran in the *Ledger*.
  - **Social Media** > MDHA utilized its Social Media platforms (Facebook, Instagram, Twitter, and LinkedIn) to advertise the public hearings (and community meetings).
  - **Email Outreach** > Emails with the English and Spanish versions of the Public Notices attached are sent to over 700 people on MDHA's email list, and recipients are asked to forward to others.
  - **Posting at Locations** > English and Spanish copies of the Public Notices were posted at some MDHA offices, and partners are to post the Notices, too.
  - **Public Appearance(s)** > MDHA's Community Development Director addressed participants at the May 10<sup>th</sup> Affordable Housing and Growth Forum hosted by Woodbine Community Organization.
  - **Radio Ads** > MDHA's Community Development Director appeared on the May 3<sup>rd</sup> airing of "Common Cents: The Money Show" on WFSK 88.1 FM to advertise the release of the draft Plan on May 7, provide an overview of the Consolidated Plan, and relay information on how the public can comment on the draft. In addition, information on the Consolidated Plan may air on La Ranchera 880 AM.

- **Video and Audio Recordings** > The Public Hearing scheduled for May 15<sup>th</sup> will be filmed by the Metro Nashville Network and will be posted to the Metro Nashville Government YouTube Channel. MDHA will provide a link to the video on its Consolidated Plan webpage through the end of the Public Comment Period. An audio recording of the Kickoff Public Hearing is available on the Consolidated Plan webpage, and audio recording of the 3 remaining hearings on the draft Consolidated Plan will be available as well.

### Reasonable Accommodation

Information on how persons with disabilities or sensory impairments or in need of translation services could request accommodation was provided on all Public Notices, in emails advertising community meetings/public input sessions, and posted on the Consolidated Plan webpage in Spanish, Chinese, Vietnamese, Arabic, and Somali. Public Notices are translated to Spanish, and Spanish translation was available at the community meeting held on April 6 and at the Public Hearing on the draft Plan held on May 23.

The results of these outreach efforts are summarized in the following Table.

### Citizen Participation Outreach

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/ attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (if applicable)
1	Newspaper Ad (The Tennessean)	Non-targeted/broad community	N/A	N/A	N/A	N/A
2	Newspaper Ad (The Tribune)	Minorities	N/A	N/A	N/A	N/A
3	Newspaper Ad (El Crucero)	Non-English Speaking (Spanish)	N/A	N/A	N/A	N/A
4	Internet Outreach (MDHA Website)	Non-targeted/broad community	N/A	N/A	N/A	<a href="http://www.nashville-mdha.org">www.nashville-mdha.org</a>
5	Internet Outreach (Social Media)	Non-targeted/broad community	See Appendix C.	N/A	N/A	@NashvilleMDHA
6	Other: Posting at Public Housing & Other MDHA Properties	Residents of Public and Assisted Housing	N/A	N/A	N/A	N/A

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/ attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
7	Other: Email Distribution	Non-targeted/broad community	N/A	N/A	N/A	N/A
8	Public Meetings	Minorities Non-English speaking persons (Spanish) Persons with Disabilities Non-targeted/broad community Other (Homeless Persons)	43 people attended the community meetings/public input sessions.	Notes are on file at MDHA. Call 615-252-8505 or email <a href="mailto:consolidatedplan@nashville-mdha.org">consolidated plan@nashville-mdha.org</a> .	Comments were used to inform the Strategic Plan and establish priorities and goals.	N/A
9	Stakeholder Meetings	Other (Stakeholders in the areas of Housing; Homelessness; Economic Development/Anti-Poverty; HOPWA)	156 stakeholders participated in consultations.	Notes are on file at MDHA. Call 615-252-8505 or email <a href="mailto:consolidatedplan@nashville-mdha.org">consolidated plan@nashville-mdha.org</a> .	Comments were used to inform the Strategic Plan and establish priorities and goals.	N/A

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/ attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
10	Survey	Non-targeted/broad community	201 people completed the survey.	See Appendix B for a summary of survey responses.	Responses were used to inform the Strategic Plan and establish priorities and goals.	N/A
11	Public Hearing	Minorities Non-English speaking persons (Spanish) Persons with Disabilities Non-targeted/broad community	12 people attended the Kickoff Public Hearing.  <i>Attendance at public hearings on the draft Consolidated Plan will be provided upon conclusion of the public comment period.</i>	See Appendix E for the Kickoff Public Hearing and Appendix F for comments on the draft Consolidated Plan.	See Appendix E for the Kickoff Public Hearing and Appendix F for comments on the draft Consolidated Plan.	N/A
12	Other (Video & Audio Recordings of Public Hearings)	Non-targeted/broad community	51 people viewed the briefing to the Ad Hoc Affordable Housing Committee.  <i>This URL for the May 15<sup>th</sup> meeting will be included in the final Plan.</i>	N/A	N/A	<a href="https://www.youtube.com/watch?v=9afDqOvWLPi&amp;list=PLE145F765DEA54FDB&amp;index=10">https://www.youtube.com/watch?v=9afDqOvWLPi&amp;list=PLE145F765DEA54FDB&amp;index=10</a>

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/ attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
13	Other: MDHA Resident Newsletter	Public housing residents	Newsletter hand-delivered to over 5,600 residents	N/A	N/A	N/A

**Table 4 – Citizen Participation Outreach**

## Needs Assessment

### NA-05 Overview

#### Needs Assessment Overview

The Needs Assessment of the Consolidated Plan, combined with input gathered through the consultation/citizen participation process, provides a picture of affordable housing, special needs housing, community development, and homelessness needs in Davidson County. Information contained in the Needs Assessment along with the Market Analysis drive the identification of the Consolidated Plan's priority needs, which serve as the basis for the Strategic Plan and proposed projects to be funded in the Action Plan.

The Needs Assessment includes the following sections:

#### Housing Needs Assessment

The Housing Needs Assessment presents data on population, income level, number and type of households, and housing problems. For the purpose of this section, housing problems are defined as

1. Lack of complete kitchen facilities.
2. Lack of complete plumbing facilities.
3. Cost burden > paying more than 30% of gross household income on housing costs. For renters, housing costs include rent paid by the tenant plus utilities; for owners, housing costs include mortgage payment, taxes, insurance, and utilities. This section includes data on severe cost burden, as well, which is paying more than 50% of gross household income on housing costs
4. Overcrowding > more than one person per room, not including bathrooms, porches, foyers, halls, or half-room.

HUD default data for this section are from the 2000 Census (Base Year); 2009-2013 American Community Survey (ACS); and the 2009-2013 CHAS (Comprehensive Housing Affordability Strategy). Where available, data is updated or supplemented with 2012-2016 ACS data and 2010-2014 CHAS data. All data encompasses Davidson County.

## Disproportionately Greater Need

A disproportionate greater need exists when the members of a racial or ethnic group at a given income level experiences housing problems (as defined above) at a greater rate (10% or more) than the income level for the County as a whole.

HUD default data for this section is from the 2009-2013 CHAS (Comprehensive Housing Affordability Strategy). Where available, data is updated or supplemented with 2012-2016 ACS data and 2010-2014 CHAS data.

## Public Housing

Information on the number and type of MDHA-owned public housing units and the characteristics of residents is presented. For the purpose of this section, “public housing” includes traditional public housing units subsidized by annual contribution contracts (ACC) and former public housing units that have been converted to “affordable housing” under the Rental Assistance Demonstration (RAD) program. Data on voucher programs is provided, as well.

HUD default data is from the PIC (PIH [Public and Indian Housing] Information Center) and is updated or supplemented with data from MDHA’s Yardi system.

## Homeless Needs Assessment

The Homeless Needs Assessment describes the nature and extent of homelessness in Nashville using data from the Homeless Management Information System (HMIS) and the 2018 Point-In-Time Count (PITC). This data is supplemented with information provided by the Metropolitan Homelessness Commission as noted.

## Non-Homeless Special Needs Assessment

In this section, housing needs for persons who are not homeless but require supportive services are presented. These populations include the elderly, frail elderly, persons with disabilities, and persons with alcohol or other drug addictions. HUD default data is not provided; data used to assess these needs is appropriately cited.

Since Metro Nashville is a HOPWA grantee, this section includes data on the size and characteristics of the population with HIV/AIDS and their families within the Nashville-Davidson—Murfreesboro—Franklin Metropolitan Statistical Area (MSA). HOPWA data

is based on CDC HIV Surveillance Data and the HOPWA CAPER and HOPWA Beneficiary Verification Worksheet.

### Non-Housing Community Development Needs

An assessment of non-housing community development needs (i.e., public facilities, public improvements, and public services) is based on input from consultations/community input and local plans and reports as HUD default data is not provided.

### Maps Used in the Needs Assessment

To provide the most current representation of needs in Davidson County, where available, GIS Maps are used to support the data tables. All maps are based on 2012-2016 ACS data.

## NA-10 Housing Needs Assessment - 24 CFR 91.205 (a,b,c)

### Summary of Housing Needs

Nashville is a growing city – between 2000 and 2016, the population of Davidson County grew by 17%, from 569,891 to 667,885. According to the 2012-2016 American Community Survey (ACS), 5 Year Estimates, 63% of the population is White alone, 28% is Black or African American; 3% of the population is Asian or Some Other Race, respectively; 2% of the population is reported as Two or More Races; and under 1% is American Indian and Alaska Native alone or Native Hawaiian and Other Pacific Islander alone, respectively. Ten percent (10%) of the population is Hispanic or Latino of any race, and 12% of the population is foreign born. Approximately 8% of the population is reported as speaking English “less than very well”.

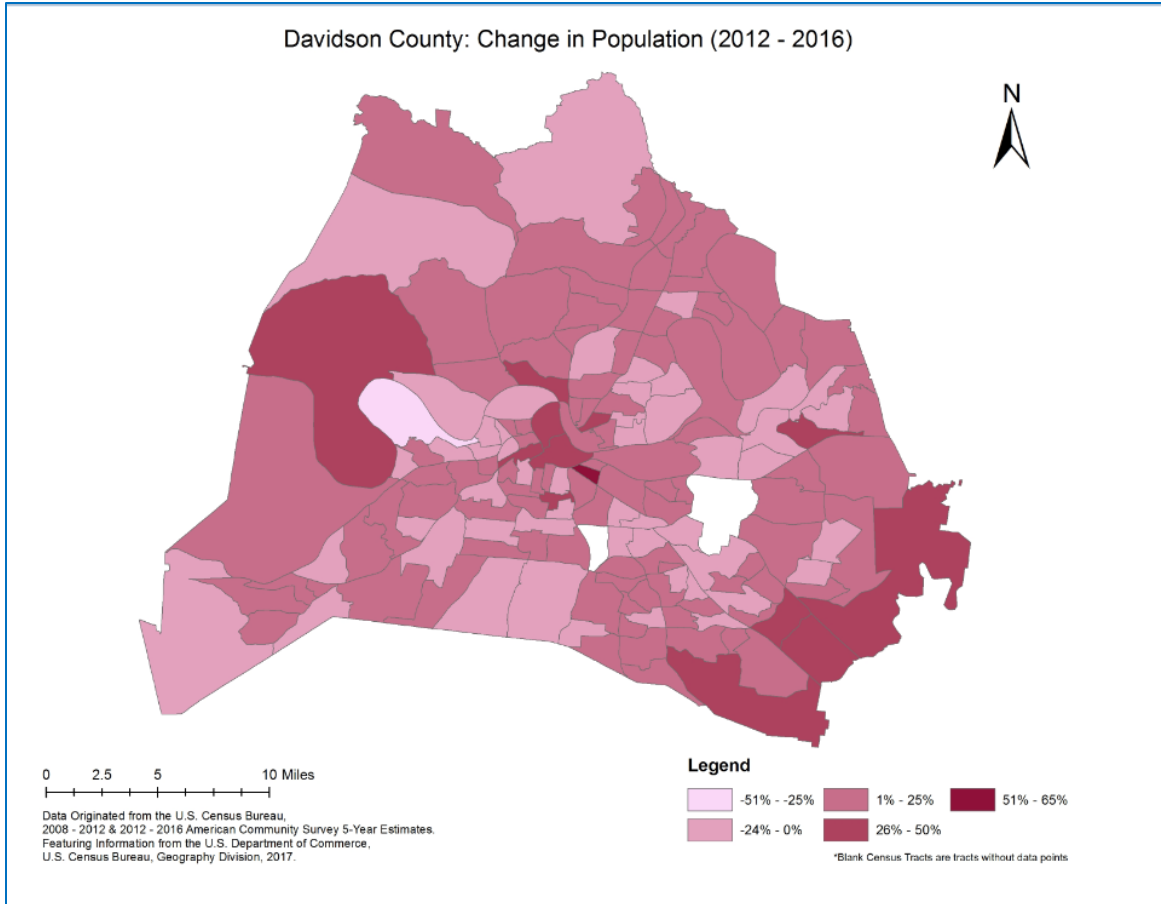
The median age in Davidson County is 34.2, with 80.4% of the population age 16 years or older, including 13.0% age 62 years and older. Over half of the population is female (51.8%). Of the 660,681 civilian noninstitutionalized population, 78,566 (11.9%) are estimated to have a disability. There are 269,078 households in Davidson County. The total number of families in Davidson County according to 2012-2016 ACS Estimates is 150,156, with the average family size being 3.15.

<b>Demographics</b>	<b>Base Year: 2000</b>	<b>Most Recent Year: 2016</b>	<b>% Change</b>
Population	569,891	667,885	17%
Households	237,432	269,078	13%
Median Income	\$39,797.00	\$50,484.00	27%

**Table 5 - Housing Needs Assessment Demographics**

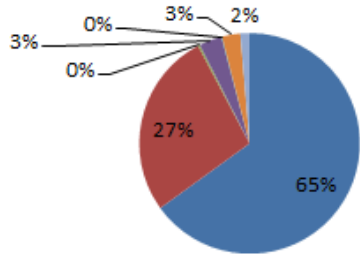
**Alternate Data Source:** 2000 Census (Base Year), 2012-2016 ACS (Most Recent Year)

The following map shows how the population has shifted in Davidson County between 2012 and 2016. Most of the growth has occurred along the southeastern edge of the county and in downtown Nashville, with scattered Census tracts in more rural areas also experiencing population increases.



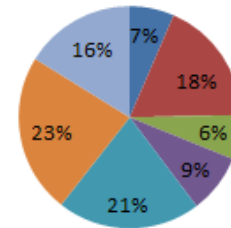
While the median income has risen by 27% between 2000 and 2016, from \$39,797 to \$50,484, 17.7% individuals live in poverty – up from 13% in 2000. Of 150,156 families in Davidson County, it is estimated that 13.1% live below the poverty level. The percent of non-White families living in poverty is disproportionate to their percent of the population, as shown in the following graphs. The same is true for families of Hispanic or Latino origin (of any race), which comprise 8.3% of all families yet 28.1% of families live below the poverty level. (Source: 2012-2016 ACS 5 Year Estimates)

### Racial Composition of Families



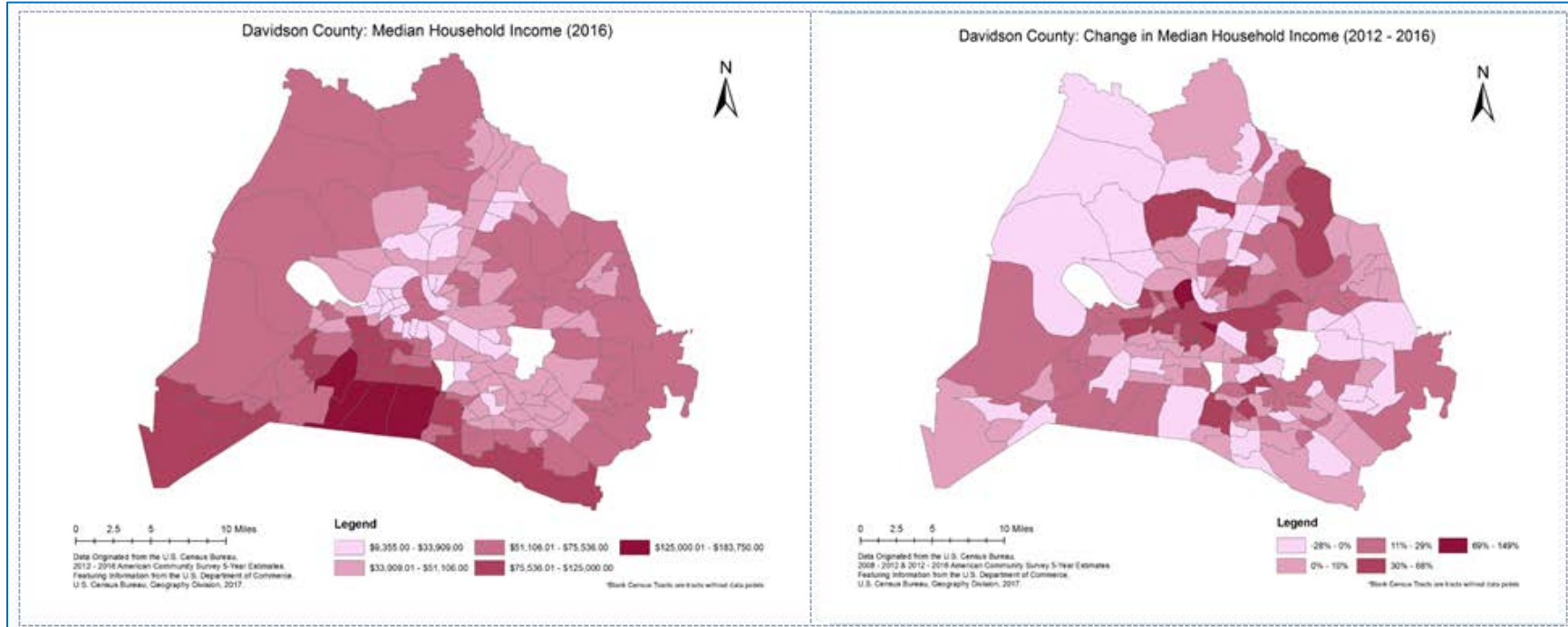
- White alone
- Black or African American
- American Indian and Alaska Native Alone
- Asian alone
- Native Hawaiian and Other Pacific Islander alone
- Some Other Race
- Two or More Races

### % of Families in Poverty by Race



- White alone
- Black or African American
- American Indian and Alaska Native Alone
- Asian alone
- Native Hawaiian and Other Pacific Islander alone
- Some Other Race
- Two or More Races

The following maps reflect median income distribution among Census tracts in Davidson County, and how median income distribution has changed since 2012.



The following table provides a breakdown of household composition by HUD Area Median Family Income (HAMFI). HAMFI is the median family income calculated by HUD for each jurisdiction in order to determine Fair Market Rents (FMRs) and income limits for HUD programs. HAMFI will not necessarily be the same as other calculations of median incomes (such as a simple Census number), due to a series of adjustments that are made (For full documentation of these adjustments, consult the **HUD Income Limit Briefing Materials**). Whenever the terms "area median income" (AMI) or "median family income" (MFI) are used in the CHAS, assume it refers to HAMFI. The most current data available for this table is from the 2009-2013 CHAS.

For the purpose of the table below, small family households are defined as families with 2 to 4 members; large family households are families with 5 or more members.

**Number of Households Table**

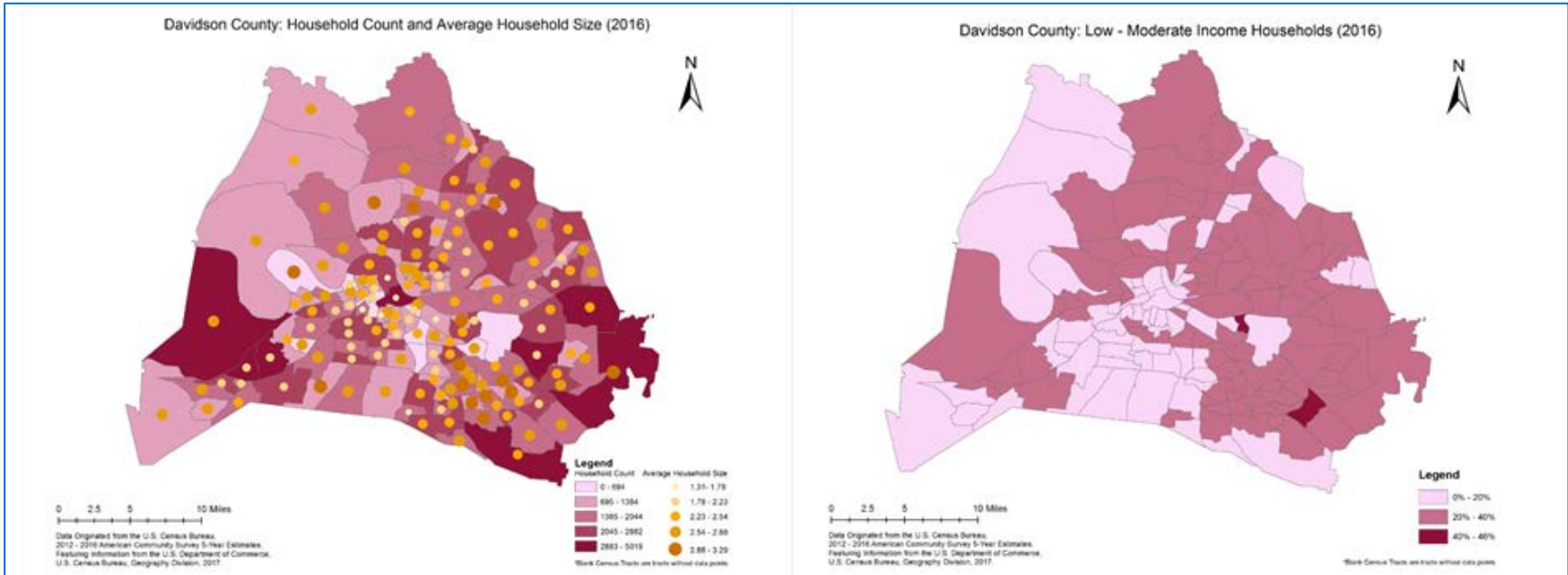
	<b>0-30% HAMFI</b>	<b>&gt;30- 50% HAMFI</b>	<b>&gt;50- 80% HAMFI</b>	<b>&gt;80- 100% HAMFI</b>	<b>&gt;100% HAMFI</b>
Total Households	37,674	31,934	46,969	28,610	111,574
Small Family Households	12,194	10,594	16,164	10,505	53,644
Large Family Households	2,989	2,035	3,388	1,714	5,565
Household contains at least one person 62-74 years of age	4,724	4,989	6,639	4,443	18,471
Household contains at least one person age 75 or older	3,373	4,430	4,660	2,156	7,301
Households with one or more children 6 years old or younger	8,369	5,672	7,364	3,976	10,157

**Table 6 - Total Households Table**

**Data Source:** 2009-2013 CHAS

According to Table 6, nearly half (45%) of total households are low- or moderate-income (LMI) (household income  $\leq$  80% HAMFI). This is particularly acute for households with one or more children 6 years old or younger (60% of households are LMI); households containing at least one person age 75 or older (57% of households are LMI); and large family households (54% of households are LMI). Approximately 42% of households containing at least one person 62-74 years of age are LMI, while 38% of small family households are LMI.

The following maps, which are based on 2012-2016 ACS 5 Year Estimates, show (1) the distribution of all households in Davidson County as well as the average household size per Census tract compared to (2) the distribution of LMI households in the county.



## Housing Needs Summary Tables

The table below displays the number of households with housing problems. Problems are listed from most severe (at the top of the table) to least severe. If households have more than one of these problems, they are included in the count of households with the most severe housing problems. For example, if a household is both cost-burdened and lives in sub-standard housing, they would be counted in the category of households living in substandard housing.

### 1. Housing Problems (Households with one of the listed needs)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
<b>NUMBER OF HOUSEHOLDS</b>										
Substandard Housing - Lacking complete plumbing or kitchen facilities	303	138	209	64	714	106	104	108	75	393
Severely Overcrowded - With >1.51 people per room (and complete kitchen and plumbing)	590	370	205	59	1,224	44	64	124	20	252
Overcrowded - With 1.01-1.5 people per room (and none of the above problems)	1,365	845	719	369	3,298	180	89	385	153	807
Housing cost burden greater than 50% of income (and none of the above problems)	17,390	5,965	1,317	194	24,866	5,127	4,408	2,769	757	13,061
Housing cost burden greater than 30% of income (and none of the above problems)	2,675	9,875	9,500	1,535	23,585	1,049	2,749	7,723	4,260	15,781

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
Zero/negative Income (and none of the above problems)	2,893	0	0	0	2,893	739	0	0	0	739

**Table 7 – Housing Problems Table**

**Data Source:** 2009-2013 CHAS

**2. Housing Problems 2 (Households with one or more Severe Housing Problems: Lacks kitchen or complete plumbing, severe overcrowding, severe cost burden)**

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
<b>NUMBER OF HOUSEHOLDS</b>										
Having 1 or more of four housing problems	19,675	7,305	2,432	687	30,099	5,462	4,663	3,405	1,007	14,537
Having none of four housing problems	6,990	13,265	22,990	12,374	55,619	1,953	6,705	18,139	14,544	41,341
Household has negative income, but none of the other housing problems	2,893	0	0	0	2,893	739	0	0	0	739

**Table 8 – Housing Problems 2**

**Data Source:** 2009-2013 CHAS

The following maps show the distribution of occupied units – renter and owner – in Davidson County that lack kitchen and plumbing facilities, respectively.

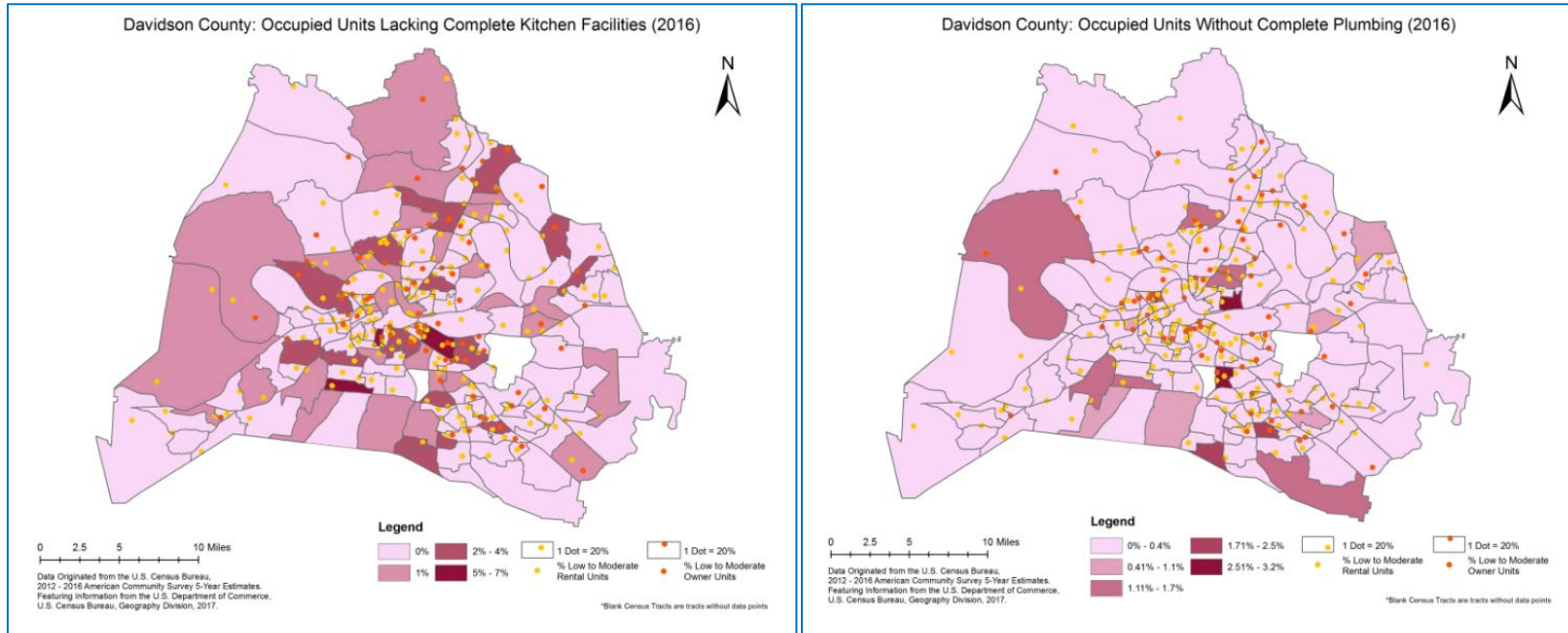


Table 8 is based on 2009-2013 CHAS data as 2010-2014 CHAS data currently does not provide a breakdown of Severe Housing Problems by tenure and income. The following table was derived from 2010-2014 CHAS data on Households with at Least 1 Housing Problem and shows that LMI renters and owners are more likely to have at least one housing problem than not. Each housing problem is dissected in the subsequent tables.

Households with at Least 1 Housing Problem		
Income by Housing Problems	Renter	Owner
Household Income <= 30% HAMFI	75%	80%
Household Income >30% to <=50% HAMFI	86%	63%
Household Income >50% to <=80% HAMFI	50%	51%
Household Income >80% to <=100% HAMFI	19%	33%
Household Income >100% HAMFI	6%	9%

Table prepared by MDHA.

Date Source: 2010-2014 CHAS

The next two tables display the number of households with housing cost burdens more than 30% HAMFI and 50% HAMFI, respectively, by household type, tenancy, and household income. For the purpose of the following tables:

- Small related = the number of family households with 2 to 4 related members.
- Large related = the number of family households with 5 or more related members.
- Elderly = a household whose head, spouse, or sole member is at least 62 years of age.
- Other = all other households.

### 3. Cost Burden > 30%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
<b>NUMBER OF HOUSEHOLDS</b>								
Small Related	8,034	6,072	3,123	17,229	1,729	2,475	4,095	8,299
Large Related	2,013	1,060	499	3,572	532	538	1,004	2,074
Elderly	2,710	2,106	892	5,708	2,355	2,577	2,179	7,111
Other	9,228	7,569	6,448	23,245	1,866	1,771	3,441	7,078
Total need by income	21,985	16,807	10,962	49,754	6,482	7,361	10,719	24,562

Table 9 – Cost Burden > 30%

Data Source: 2009-2013 CHAS

#### 4. Cost Burden > 50%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
<b>NUMBER OF HOUSEHOLDS</b>								
Small Related	6,970	1,863	229	9,062	1,543	1,607	961	4,111
Large Related	1,659	230	100	1,989	447	343	172	962
Elderly	1,963	937	278	3,178	1,713	1,336	734	3,783
Other	8,395	3,070	693	12,158	1,714	1,205	928	3,847
Total need by income	18,987	6,100	1,300	26,387	5,417	4,491	2,795	12,703

**Table 10 – Cost Burden > 50%**

**Data Source:** 2009-2013 CHAS

More current CHAS data does not provide an analysis by household type, but it does have data on Cost Burden by tenancy and household income.

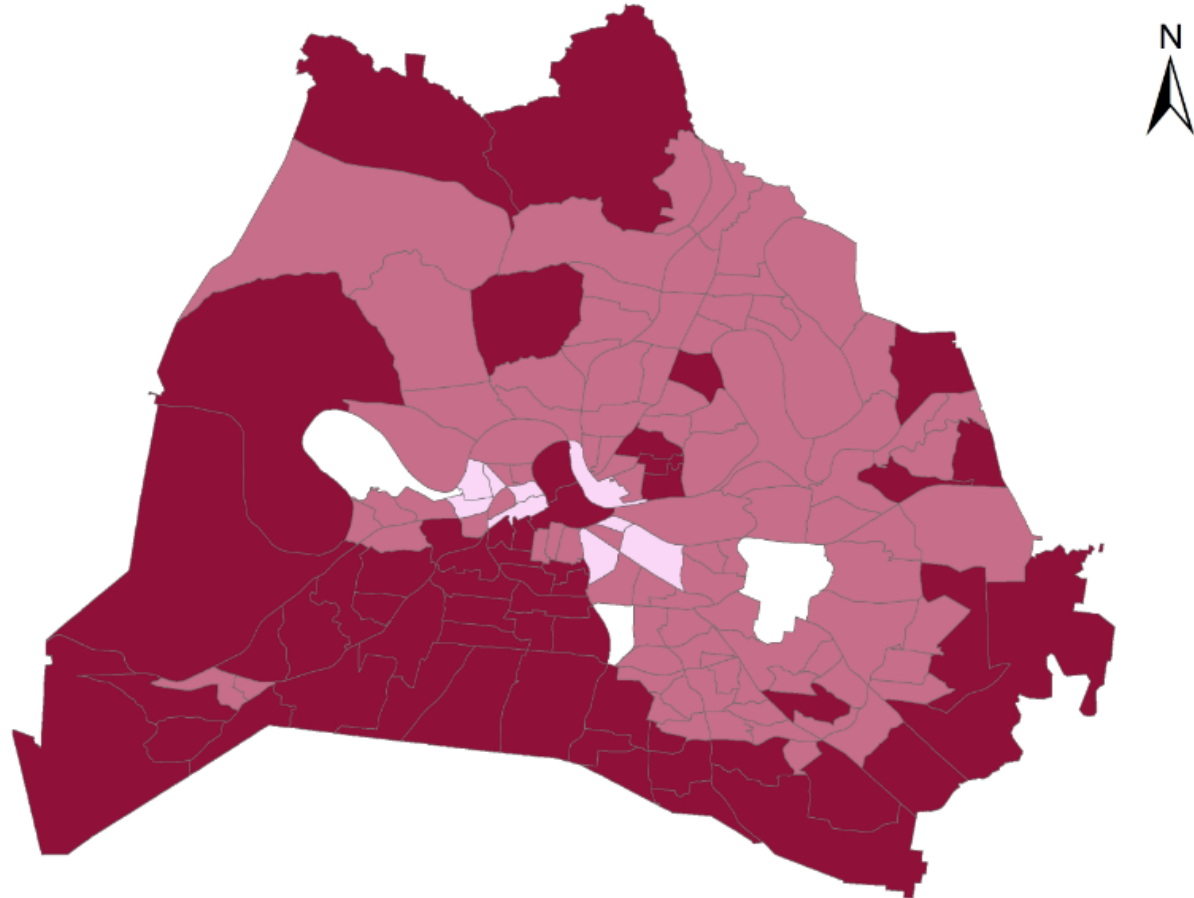
Household Income	Cost Burden			
	Renter		Owner	
	>30%	>50%	>30%	>50%
Household Income <= 30% HAMFI	18%	16%	5%	4%
Household Income >30% to <=50% HAMFI	15%	6%	5%	3%
Household Income >50% to <=80% HAMFI	10%	1%	7%	2%
Household Income >80% to <=100% HAMFI	2%	0%	3%	1%
Household Income >100% HAMFI	1%	0%	5%	1%

*Table prepared by MDHA.*

*Date Source: 2010-2014 CHAS*

The following series of maps show the distribution of extremely low (30% AMI), very low (50% AMI), and low-income households (80% AMI) in Davidson County and cost burden status. (Based on 2012-2016 ACS 5 Year Estimates.)

### Davidson County: Extremely Low Income Housing Cost Burden Status (2016)



0 2.5 5 10 Miles

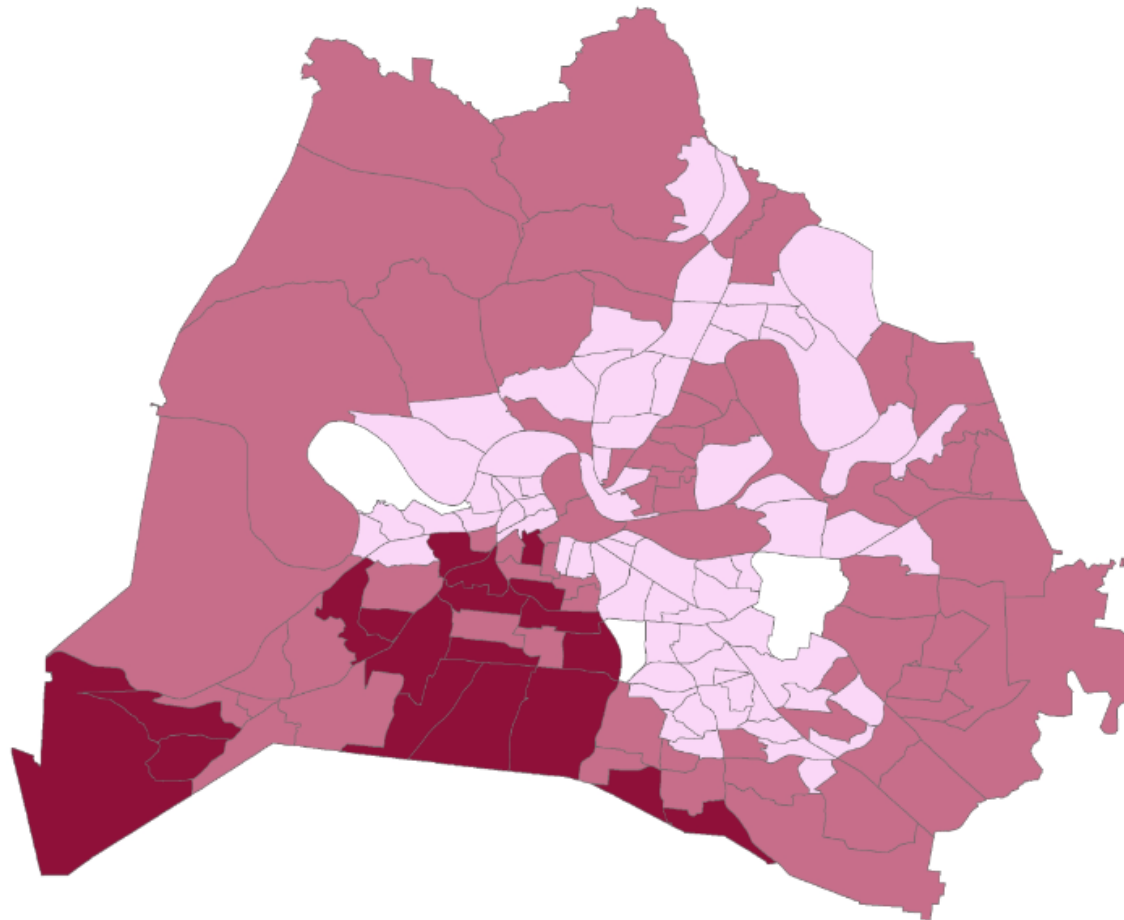
Data Originated from the U.S. Census Bureau,  
2012 - 2016 American Community Survey 5-Year Estimates.  
Featuring Information from the U.S. Department of Commerce,  
U.S. Census Bureau, Geography Division, 2017.

#### Legend

- Below Cost Burdened Status (< 30%)
- Cost Burdened (30% - 50%)
- Severely Cost Burdened (> 50%)

\*Blank Census Tracts are tracts without data points

### Davidson County: Very Low Income Housing Cost Burden Status (2016)



0 2.5 5 10 Miles

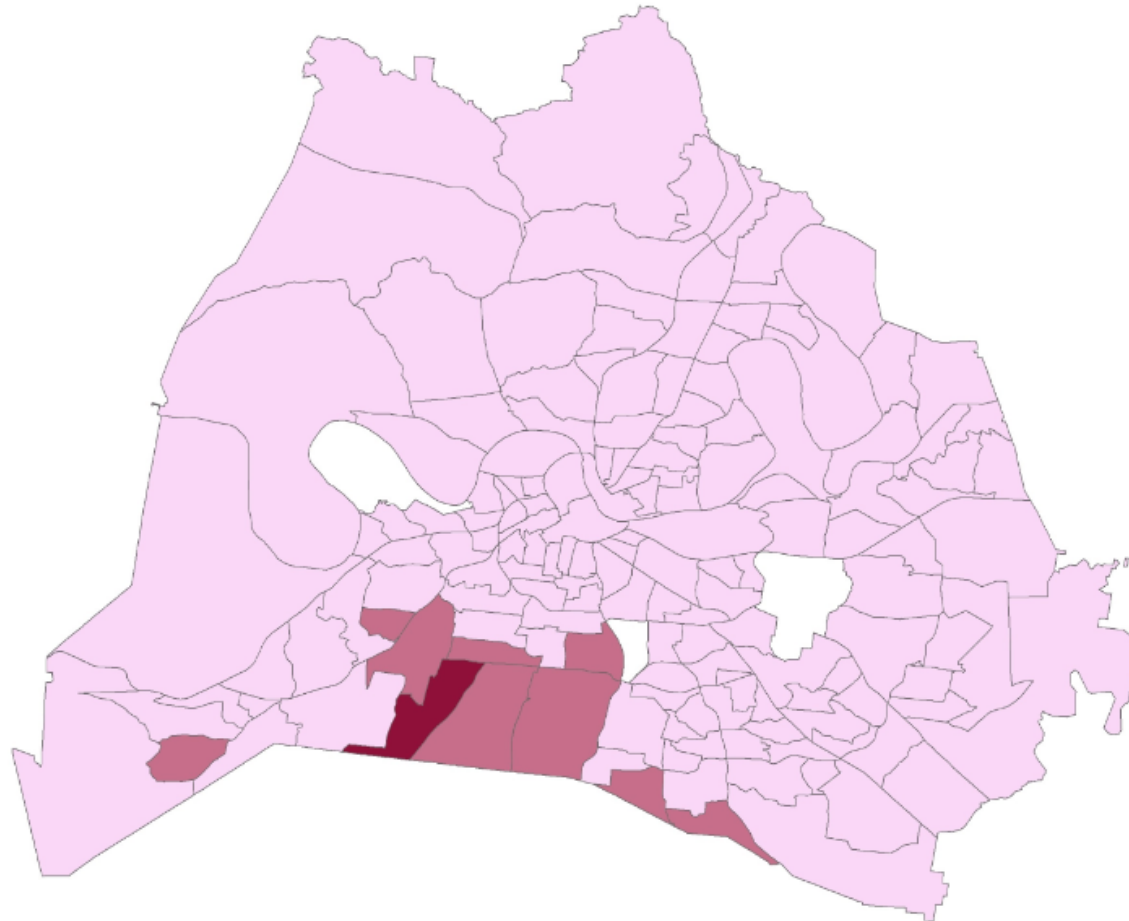
Data Originated from the U.S. Census Bureau,  
2012 - 2016 American Community Survey 5-Year Estimates.  
Featuring Information from the U.S. Department of Commerce,  
U.S. Census Bureau, Geography Division, 2017.

#### Legend

- Below Cost Burdened Status (< 30%)
- Cost Burdened (30% - 50%)
- Severely Cost Burdened (> 50%)

\*Blank Census Tracts are tracts without data points

### Davidson County: Low Income Housing Cost Burden Status (2016)



0 2.5 5 10 Miles

Data Originated from the U.S. Census Bureau,  
2012 - 2016 American Community Survey 5-Year Estimates.  
Featuring Information from the U.S. Department of Commerce,  
U.S. Census Bureau, Geography Division, 2017.

#### Legend

- Below Cost Burdened Status (< 30%)
- Severely Cost Burdened (> 50%)
- Cost Burdened (30% - 50%)

\*Blank Census Tracts are tracts without data points

## 5. Crowding (More than one person per room)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
<b>NUMBER OF HOUSEHOLDS</b>										
Single family households	1,795	965	770	274	3,804	199	58	358	58	673
Multiple, unrelated family households	89	139	154	90	472	38	95	150	115	398
Other, non-family households	70	109	30	64	273	0	0	0	0	0
Total need by income	1,954	1,213	954	428	4,549	237	153	508	173	1,071

**Table 11 – Crowding Information – 1/2**

**Data Source:** 2009-2013 CHAS

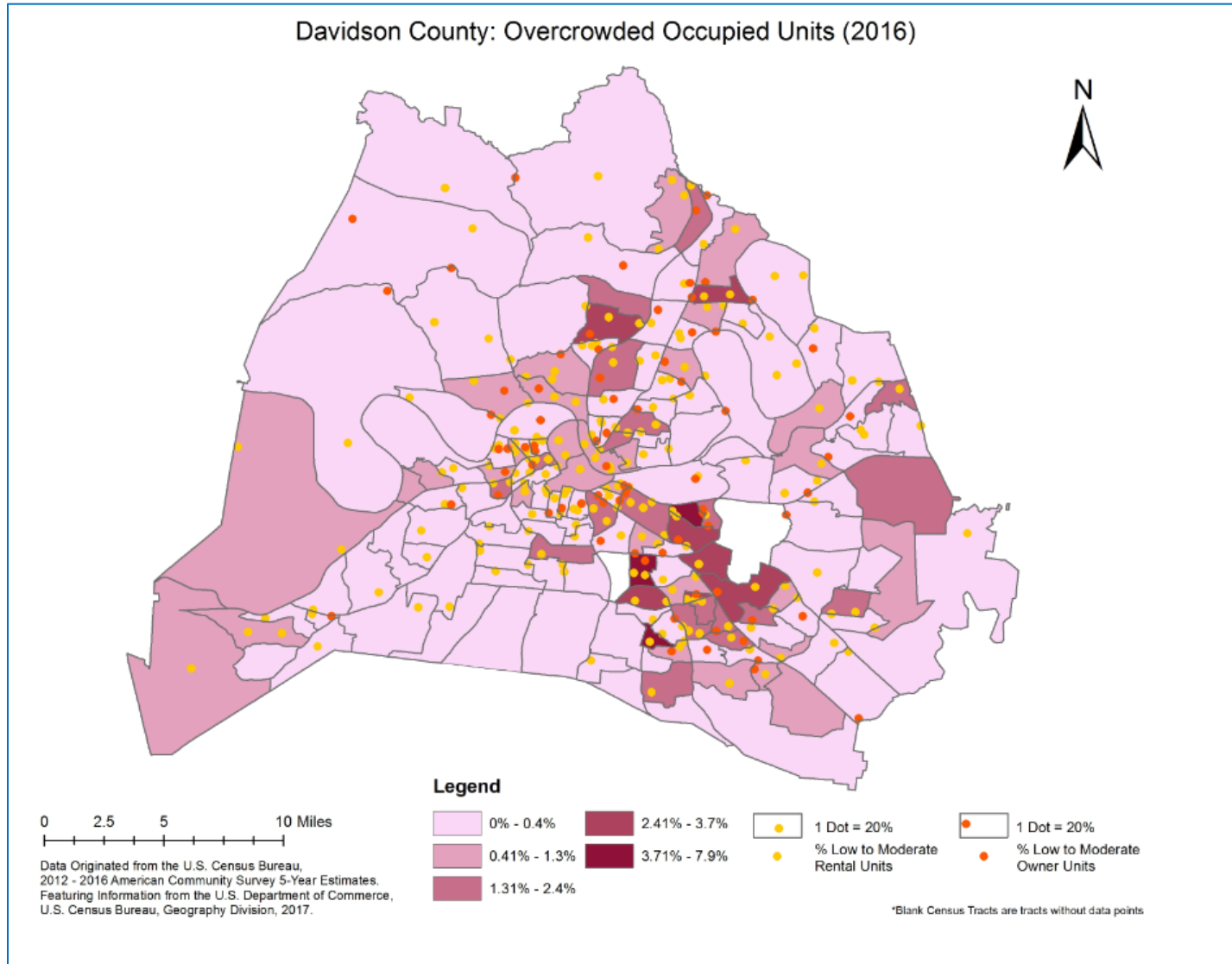
	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
Households with Children Present	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

**Table 12 – Crowding Information – 2/2**

**Data Source:** No data available.

Although there is no CHAS or other data to complete Table 12, 2012-2016 ACS 5 Year Estimates provide data on the presence of children in households. There are 143,937 children under age 18 in Davidson County. Of 145,206 owner-occupied units, approximately 28% of households contain children under age 18 related to the householder. Of 123,872 renter-occupied units, approximately 26% of households contain children under age 18 related to the householder. Approximately 27% of renter families are below the poverty level. Of 150,156 families in Davidson County, 73,739 families have children under age 18 related to the householder. Twenty-two percent (22%) or 16,226 of these families are below the poverty level.

The following map shows the distribution of overcrowded occupied units – renter and owner – in Davidson County.



**Describe the number and type of single person households in need of housing assistance.**

According to 2012-2016 ACS 5 Year Estimates, of 269,078 households in Davidson County, 93,398 (35%) are single person households. Of this number, 45% own homes while 55% rent. Of the 145,206 owner occupied units in the county, 29% are owned by single person households. Of the 123,872 renter occupied units, 41% (50,788) are occupied by single person households. Given that there are 40,531 no bedroom and 1 bedrooms occupied units in Davidson County (374 no bedroom and 2,683 1 bedroom owner occupied units and 4,084 no bedroom and 33,390 1 bedroom renter occupied units, there is a need for additional no bedroom and 1 bedrooms options for single persons households, especially for LMI households. As shown previously, LMI renters are more likely to be cost burdened than owners.

**Estimate the number and type of families in need of housing assistance who are disabled or victims of domestic violence, dating violence, sexual assault and stalking.**

Persons with Disabilities

The 2012-2016 ACS 5 Year Estimates show that 11.9% (78,566) of the civilian noninstitutionalized population (660,681) have a disability. As demonstrated below, over half of persons age 75 and over have a disability. Ambulatory difficulty (having serious difficulty walking or climbing stairs) is the most prevalent type of disability, with independent living disability (because of a physical, mental, or emotional problem, having difficulty doing errands alone such as visiting a doctor’s office or shopping) and cognitive difficulty

Age	% with a Disability	Type of Disability	% of Type of Disability
Under 5 years	0.6%	With a hearing difficulty	2.9%
5-17 years	5.4%	With a vision difficulty	2.5%
18-34 years	5.2%	With a cognitive difficulty	5.0%
35-64 years	14.4%	With an ambulatory difficulty	6.9%
65-74 years	26.0%	With a self care difficulty	2.6%
75 years and over	53.6%	With an independent living difficulty	5.2%

*Table prepared by MDHA.*

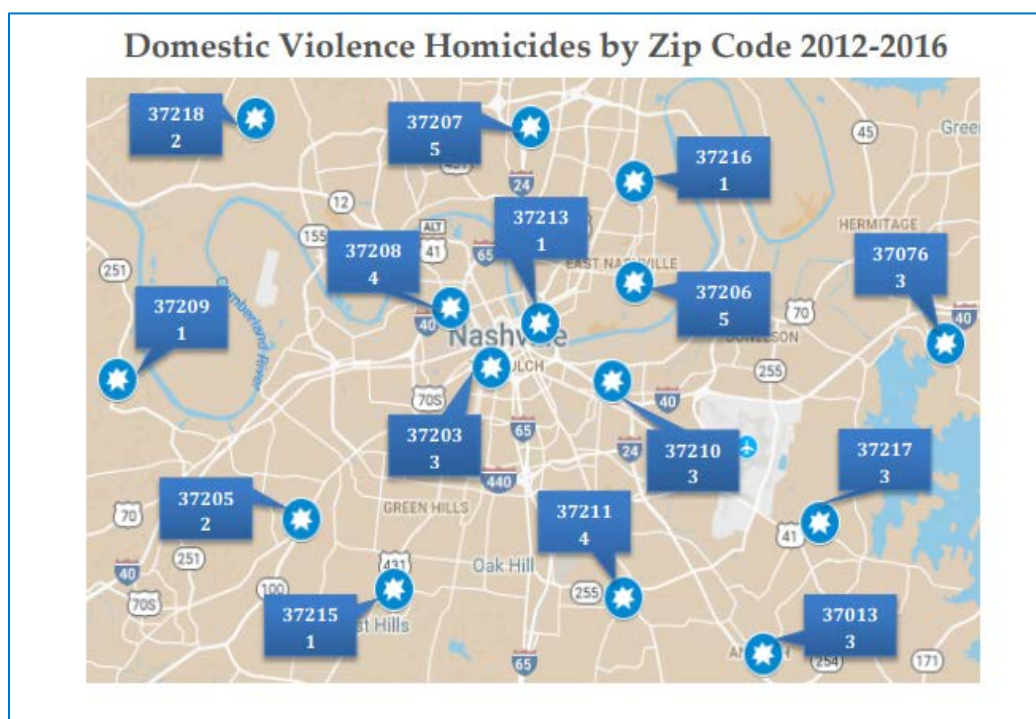
*Data Source: 2012-2016 ACS 5 Year Estimates*

ACS data also shows that 3,817 persons with a disability are grandparents responsible for grandchildren under age 18.

## Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking

Across Tennessee, there were 78,100 reported cases of domestic violence in 2016 according to the Tennessee Bureau of Investigation, CJIS Support Center's 2016 Domestic Violence Report (June 2017). In Davidson County, domestic violence shelters receive approximately 20 domestic violence calls per minute.

In November 2017, the Metro Office of Public Safety, Domestic Abuse Death Review Team, published the 2016 Annual Report on domestic homicides in Nashville-Davidson County. There were 7 domestic violence homicides in Nashville in 2016 compared to 14 in 2015. The map below shows the number of domestic violence homicides by zip code from 2012 to 2016.



Map from Metro Office of Public Safety, Domestic Abuse Death Review Team 2016 Annual Report.

According to data provided by the Metro Nashville Police Department to MDHA, the total number of calls (not cases) for domestic disturbances on MDHA property in 2016 was approximately 1,175. Of that number, 239 Intimate Partner Arrests were made. A report by *WKRN* claims that as of February 17, 2018, there have been 65 reports of forcible rape for 2018 compared to 52 during the same period of time in 2017 and that from February 2016 to February 2017, the number of forcible rapes in Nashville has increased by 7%. (By Julie Edwards, *WKRN*, updated February 22, 2018.)

In recent years, there has been increased focus on human trafficking. According to its website, The National Human Trafficking Hotline received 370 calls and reported 110 human trafficking cases in 2017. (<https://humantraffickinghotline.org/state/tennessee>) End Slavery Tennessee reports that 50 cases of human trafficking have been reported in the Nashville area between December 2007 and March 2018. (<https://estn.crowdmap.com/main>) These crimes typically affect women and minors, with poverty as an indicator. Of 141,802 persons living in poverty, 18.5% (62,250) are female, and 29% (41,098) are under age 18.

### **What are the most common housing problems?**

By far, the most common housing problem is cost burden for all income ranges (Table 7). Severe Cost Burden was the most common housing problem for renter and owner households at 0-30% AMI. In Davidson County, 46% of renter households and 25% of owner households have cost burden and 23% have severe cost burden. (2010-2014 CHAS) Overcrowding is the second most common housing problem across all income ranges.

### **Are any populations/household types more affected than others by these problems?**

Renter and owner households at 0-30% AMI are most affected by Severe Cost Burden as illustrated in Table 7, which shows 17,390 renter households at 0-30% AMI are reported to have Severe Cost Burden compared to Overcrowding - the next most common household problem for this income range (reported at 1,365). For renter and owners households at incomes >30-50% AMI and >50-80% AMI, cost burden is the most common problem as well. According to the map of Extremely Low Income Housing Cost Burden status, very few areas of Davidson County are below cost burden status; and areas below cost burden are where several MDHA public/affordable housing properties are located.

**Describe the characteristics and needs of Low-income individuals and families with children (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered 91.205(c)/91.305(c). Also discuss the needs of formerly homeless families and individuals who are receiving rapid re-housing assistance and are nearing the termination of that assistance**

For households currently active in Rapid Re-housing programs across Nashville,

- 46% are households with children;
- 8% have disabling conditions identified at the start of services;
- 93% are coming from literal homeless situations where 34% are engaged in places not meant for human habitation;
- 50% are accessing mainstream resources (like food stamps or TANF);
- 56% rely on Medicaid or Medicare for Health Insurance;
- 50% have access to regular monthly income;
- 7% of households met the definition of chronic homelessness; and
- 40% of households included Veterans.

On average, families utilizing RRH are housed within 74 days of entering a RRH program

Nashville is seeing a variety of needs associated with families and individuals nearing the end of their rapid rehousing assistance.

- Housing at an affordability to be maintained after the RRH assistance ends.
- Affordable and accessible daycares with hours beyond the typical 7am-6pm schedule
- Education, training, and employment programs, as well as, employment options paying a living wage.
- Affordable and accessible housing in a variety of safe neighborhoods to give greater flexibility with daycares, schools, jobs, and access to grocery stores
- Improvements with TANF including better cash assistance and longer access to childcare vouchers.
- Ongoing support services including mental health counseling/treatment, in-home case management, etc. for the households who are uninsured or underinsured and need long term support services after time-limited case managements including critical time intervention (CTI) run out.

**If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates:**

No estimates of at-risk populations are available at this time.

The Nashville-Davidson County coordinated entry system is expanding to implement collection of data of people at risk of homelessness. The community is still working on an operational definition for at-risk groups which currently differ according to agency and funding source. Examples include the following:

- Providers collaborating through the CES primarily use ESG funding for households that already have an eviction filed. The funds are used to prevent that eviction.
- New funding from the state is available for at-risk families, and plans are underway to use prevention funds for households that are 10 days or more behind on rent/mortgage or utility payments, at risk for eviction/foreclosure, and/or accessing the CES due to a housing crisis.
- SSVF programs follow their Category 1 at-risk definition: “If a very low-income Veteran family is residing in permanent housing and is at risk of becoming *literally* homeless but for the grantee’s assistance.”
- For the ESG and CoC programs, HUD defines at risk of homelessness as having income below 30% MFI, lacking sufficient resources needed to obtain other permanent housing, and meeting one of seven conditions listed by HUD in its related regulations, including exiting a publicly-funded institution and living in the home of another due to economic hardship.
- One youth provider utilizes the following indicators to determine whether a youth is at-risk of homelessness:
  - Economic hardship/family history of housing instability;
  - Any issue that creates a pattern of running away;
  - Severe family conflict, including abuse and abandonment (physical, sexual, emotional abuse);
  - Foster care history or aging out of foster care;
  - Being forced to leave home due to pregnancy, substance abuse, or non-acceptance of sexual orientation.

**Specify particular housing characteristics that have been linked with instability and an increased risk of homelessness**

As previously discussed, cost burden is by far the most common housing problem and threatens housing stability. In Davidson County, 44% of renter households and 25% of owner households have cost burden and 23% of renters have severe cost burden. Approximately 33% of renters with incomes  $\leq 50\%$  AMI have cost burden. The latest ACS data shows a poverty rate in Nashville-Davidson County of 17.7%. Getting someone out of homelessness is not necessarily getting them out of poverty. So even though someone may be housed, they may not have a savings to fall back on if needed in times of emergency. They may not be budgeting as needed. They may still rely heavily on community resources but do not know if these are always available to them.

## NA-15 Disproportionately Greater Need: Housing Problems – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

### Introduction

A disproportionately greater housing need exists when the members of racial or ethnic group at a given income level experience housing problems at a greater rate (10% points or more) than the income level as a whole. The following tables analyze housing problems experienced by different racial and ethnic groups across income ranges. The four housing problems are: 1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost Burden greater than 30%

#### 0%-30% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	28,857	5,219	3,632
White	12,322	2,486	1,747
Black / African American	12,374	2,357	1,385
Asian	435	39	89
American Indian, Alaska Native	84	0	0
Pacific Islander	35	0	0
Hispanic	3,091	198	384

Table 13 - Disproportionally Greater Need 0 - 30% AMI

Data Source: 2009-2013 CHAS

#### 30%-50% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	24,579	7,333	0
White	11,929	4,527	0
Black / African American	8,726	2,238	0
Asian	492	63	0
American Indian, Alaska Native	70	4	0
Pacific Islander	0	0	0

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Hispanic	3,143	308	0

**Table 14 - Disproportionally Greater Need 30 - 50% AMI**

Data Source: 2009-2013 CHAS

**50%-80% of Area Median Income**

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	23,064	23,929	0
White	13,284	13,958	0
Black / African American	6,687	6,614	0
Asian	305	693	0
American Indian, Alaska Native	34	74	0
Pacific Islander	35	45	0
Hispanic	2,343	2,018	0

**Table 15 - Disproportionally Greater Need 50 - 80% AMI**

Data Source: 2009-2013 CHAS

**80%-100% of Area Median Income**

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	7,496	21,103	0
White	5,086	13,268	0
Black / African American	1,462	5,693	0
Asian	148	507	0
American Indian, Alaska Native	39	0	0
Pacific Islander	25	20	0
Hispanic	630	1,364	0

**Table 16 - Disproportionally Greater Need 80 - 100% AMI**

Data Source: 2009-2013 CHAS

## Discussion

Approximately 77% of households with incomes 0-30% AMI experience a housing problem. Of White households in this income group, the percent experiencing a housing problem is 3 percentage points less (74%) than that of Nashville as a whole, while the percent of Black/African American and Asian households (77%, respectively) is the same as that of Nashville. However, the percent of Hispanic households with a housing problem is disproportionately higher at 84%. All (100%) American Indian/Alaskan Native and Pacific Islander households in this income category experience a housing problem.

In looking at households with incomes 30-50% AMI, 77% of households in Nashville experience a housing problem. Again, the percent of White households with a housing problem is slightly less than that of the county (72%); and the percent of Black/African American households with a housing problem is slightly higher (80%). The percent of Asian, American Indian/Alaskan Native, and Hispanic households with a housing problem is disproportionately higher at 89%, 95%, and 91% respectively.

For the most part, the percent of households with a housing problem of any group decreases as income increases and are within 10 percentage points of Nashville as a whole. The exceptions are American Indian/Alaskan Native, in which all households in the 80-100% AMI category have a housing problem and Pacific Islanders, in which 56% of households have a housing problems. For that income range, only 26% of households in Nashville experience a housing problem.

## NA-20 Disproportionately Greater Need: Severe Housing Problems – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

### Introduction

A disproportionately greater housing need exists when the members of racial or ethnic group at a given income level experience housing problems at a greater rate (10% points or more) than the income level as a whole. The following tables analyze severe housing problems experienced by different racial and ethnic groups across income ranges. (See Tables 9 and 10 for analyses of cost burden by income range; however, these analyses do not include race or ethnicity). The four severe housing problems are: 1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

#### 0%-30% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	25,137	8,943	3,632
White	10,837	3,966	1,747
Black / African American	10,588	4,163	1,385
Asian	415	59	89
American Indian, Alaska Native	84	0	0
Pacific Islander	35	0	0
Hispanic	2,716	567	384

**Table 17 – Severe Housing Problems 0 - 30% AMI**

Data Source: 2009-2013 CHAS

#### 30%-50% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	11,968	19,970	0
White	6,227	10,179	0
Black / African American	3,640	7,348	0
Asian	294	260	0

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
American Indian, Alaska Native	60	14	0
Pacific Islander	0	0	0
Hispanic	1,612	1,833	0

**Table 18 – Severe Housing Problems 30 - 50% AMI**

**Data Source:** 2009-2013 CHAS

**50%-80% of Area Median Income**

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Jurisdiction as a whole	5,837	41,129	0
White	3,152	24,094	0
Black / African American	1,596	11,704	0
Asian	158	843	0
American Indian, Alaska Native	0	108	0
Pacific Islander	10	70	0
Hispanic	792	3,559	0

**Table 19 – Severe Housing Problems 50 - 80% AMI**

**Data Source:** 2009-2013 CHAS

**80%-100% of Area Median Income**

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Jurisdiction as a whole	1,694	26,918	0
White	1,044	17,307	0
Black / African American	304	6,864	0
Asian	28	633	0
American Indian, Alaska Native	15	24	0
Pacific Islander	0	45	0
Hispanic	290	1,714	0

**Table 10 – Severe Housing Problems 80 - 100% AMI**

**Data Source:** 2009-2013 CHAS

**Discussion**

Approximately 67% of households with incomes 0-30% AMI experience a severe housing problem. Of White households in this income group, the percent experiencing a housing problem is 2 percentage points less (65%) than that of Nashville as a whole, while the percent of Black/African American is one percent less (66%). The percent of Asian and Hispanic households with a housing problem is higher at 74% each. All (100%) American Indian/Alaskan Native and Pacific Islander households in this income category experience a housing problem.

In looking at households with incomes 30-50% AMI, the percent of households in Nashville experiencing a housing problem drops to 37%. All groups are within 10% of this, with the exception of American Indian/Alaskan Native at 81% and Asian at 53%.

For the most part, the percent of households with a housing problem of any group decreases as income increases and are within 10 percentage points of Nashville as a whole. The exception is American Indian/Alaskan Native, in which 38% of households in the 80-100% AMI category have a housing problem. For that income range, only 6% of households experience a housing problem.

## NA-25 Disproportionately Greater Need: Housing Cost Burdens – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

### Introduction:

As with the preceding tables, a disproportionately greater housing need exists when the members of racial or ethnic group at a given income level experience housing problems at a greater rate (10% points or more) than the income level as a whole. The following table analyzes cost burden experienced by different racial and ethnic groups. Cost burdened households pay between 30% and 50% of their income on housing-related costs, while severely cost burdened households pay more than 50% of their income on housing-related costs. Income range is included in the analysis.

<b>Housing Cost Burden</b>				
<b>Housing Cost Burden</b>	<b>&lt;=30%</b>	<b>30-50%</b>	<b>&gt;50%</b>	<b>No / negative income (not computed)</b>
Jurisdiction as a whole	163,467	48,652	40,925	3,754
White	112,525	27,824	20,719	1,782
Black / African American	36,168	14,522	15,008	1,410
Asian	4,580	870	663	109
American Indian, Alaska Native	253	72	159	0
Pacific Islander	75	50	45	0
Hispanic	7,895	4,598	3,713	439

**Table 11 – Greater Need: Housing Cost Burdens AMI**

**Data Source:** 2009-2013 CHAS

### Discussion:

Note: Data in this data may conflict with cost burden data reported elsewhere. Data in Table 21 utilizes 2009-2013 CHAS data. In other parts of the report, 2010-2014 CHAS data on cost burden is used; however, that CHAS data does provide cost burden by race and ethnicity. Therefore, 2009-2013 CHAS data is used to support this analysis. Table 21 shows that 19% of all households in Davidson County have a cost burden between 30-50%, while 16% experience severe cost burden. Pacific Islander (29%) and Hispanic (28%) households are disproportionately cost burdened. Severe cost burden disproportionately affects American Indian/Alaskan Native (33%) and Pacific Islander (26%) households.

## NA-30 Disproportionately Greater Need: Discussion – 91.205(b)(2)

### Are there any Income categories in which a racial or ethnic group has disproportionately greater need than the needs of that income category as a whole?

American Indian/Alaskan Native, Pacific Islander and Hispanic households have disproportionately great need of experiencing a housing problem than the need of the county as a whole. In the 0-30% income range, 100% of American Indian/Alaskan Native and Pacific Islander households experience a housing problem, as do 84% of Hispanic households (84%); the need of the county as a whole in this income range is 77%.

Likewise, American Indian/Alaskan Native (95%) and Hispanic (91%) households in the 30-50% income range disproportionately experience a housing problem; there are no Pacific Islander households in this income range. In this category, 89% of Asian households experience a housing problem, and the need for the county as a whole is 77%.

Even as income ranges go higher, American Indian/Alaskan Native and Pacific Islander households continue to experience disproportionate need. This trend is reflected in the data for severe housing problems, as well.

With regard to cost burden, Pacific Islander (29%) and Hispanic (28%) households are disproportionately cost burdened. Approximately 19% of households in the county are cost burdened. Severe cost burden disproportionately affects American Indian/Alaskan Native (49%) and Pacific Islander (36%); approximately 16% of households in Davidson County have severe cost burden.

### If they have needs not identified above, what are those needs?

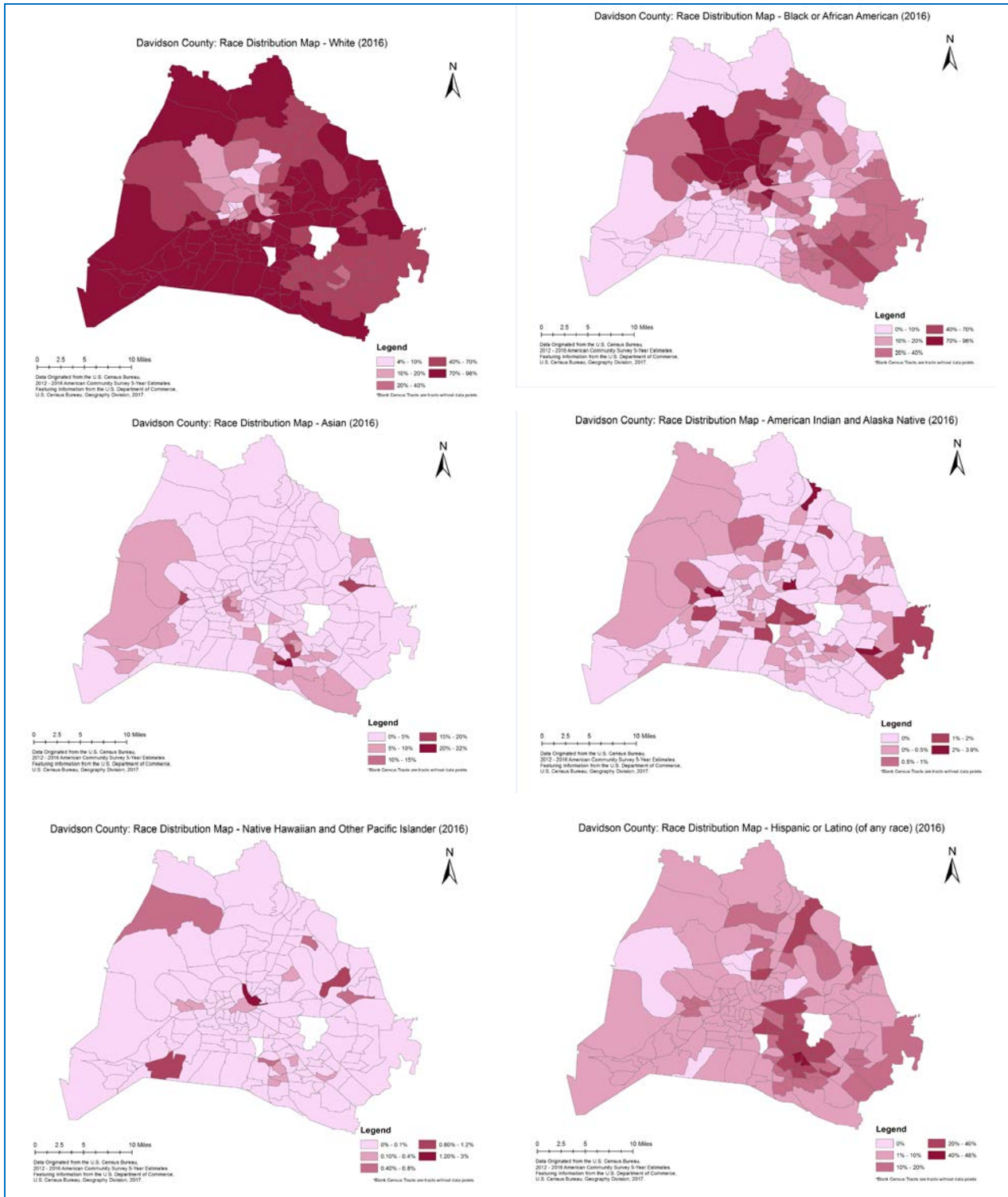
In MDHA's 2017 fair housing analysis, the following were identified as factors contributing to disproportionate housing need:

- Lack of available of affordable units in a range of sizes
- Displacement of residents due to economic pressures
- Displacement of and/or lack of housing support for victims of domestic violence, dating violence, sexual assault, and stalking
- Lending discrimination

- Loss of Affordable Housing
- Source of income discrimination

**Are any of those racial or ethnic groups located in specific areas or neighborhoods in your community?**

The following maps show the distribution of the groups analyzed in this section. As the maps indicate, White and Black/African American, and Hispanic groups are segregated in certain parts of the county. White households tend to be concentrated along the southern part and very northern part of Davidson County. Black/African American households tend to be concentrated in the North Nashville and Bordeaux areas, while Hispanic families are concentrated in the southeast area of the county, along the Nolensville Pike and I-24 corridors.



## NA-35 Public Housing – 91.205(b)

### Introduction

MDHA is the public housing authority (PHA) in Davidson County and manages 22 public housing/affordable housing properties. In December 2013, MDHA strategically decided to change its business model from public housing annual contribution contracts (ACC) to project-based rental assistance contracts under the Rental Assistance Demonstration (RAD) program. To date, 15 properties have converted under RAD, and the remaining properties should be converted by August 2018.

<b>Converted Properties</b>	
<b>Property Name</b>	<b>Conversion Date</b>
Levy Place	07/2016
John Henry Hale	09/2016
Cumberland View	12/2016
Andrew Jackson	03/2017
Madison Towers	02/2017
Edgefield Manor	03/2017
Parkway Terrace	04/2017
Napier Place	8/2017
Sudekum Apartments	8/2017
Edgehill Apartments	8/2017
Gernert Apartments	8/2017
Parthenon Towers	10/2017
Hadley Park	10/2017
Carleen Batson Waller	10/2017
Vine Hill Towers	4/2018
<b>Properties to be Converted</b>	
<b>Property Name</b>	<b>Anticipated Conversion Date</b>
Cayce Place	5/2018
Barrett Manor	5/2018
Vine Hill Apartments	5/2018
Preston Taylor Apartments	5/2018
Preston Taylor Neighborhood Housing	5/2018
Cheatham Place	6/2018
Neighborhood Housing	6/2018

The data on Public Housing is provided by the HUD Office of Public and Indian Housing (PIH) and does not distinguish between public housing properties still under ACC contracts and affordable housing properties converted under RAD. Therefore, all properties listed in the preceding table are included in “Public Housing” data. Data on Mod-Rehab, Vouchers, and Special Purpose Vouchers have been updated via MDHA’s YARDI system. Yardi data that was not available for Mod-Rehab, Vouchers and Special Purpose Vouchers is indicated by N/A.

**Totals in Use  
Program Type**

	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project - based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers in use	0	114	5,208	5,969	54	6503	400	4	867

**Table 12 - Public Housing by Program Type**

\*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

**Data Source:** PIC (PIH Information Center); MDHA YARDI System

### Characteristics of Residents

	Program Type							
	Certificate	Mod-Rehab	Public Housing	Vouchers				
				Total	Project -based	Tenant -based	Special Purpose Voucher	
						Veterans Affairs Supportive Housing	Family Unification Program	
Average Annual Income	0	6121	9,646	11,041	12362	14494	14078	19735
Average length of stay	0	20.1 mos.	4	5	9.25 mos.	92 mos.	30 mos.	45 mos.
Average Household size	0	1	2	2	1	2.5	1.3	5
# Homeless at admission	0	114	0	53	29	593	157	0
# of Elderly Program Participants (>62)	0	19	905	603	0	21	991	157
# of Disabled Families	0	48	1,085	1,590	0	29	2363	153
# of Families requesting accessibility features	0	N/A	5,208	5,969	N/A	N/A	N/A	N/A
# of HIV/AIDS program participants	0	N/A	0	0	N/A	N/A	N/A	N/A
# of DV victims	0	N/A	0	0	N/A	N/A	N/A	N/A

**Table 23 – Characteristics of Public Housing Residents by Program Type**

**Data Source:** PIC (PIH Information Center); MDHA YARDI System

### Race of Residents

Race	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project -based	Tenant -based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White	0	47	606	742	22	700	125	1	182
Black/African American	0	65	4,575	5,211	32	4,447	218	3	684
Asian	0	1	15	9	0	20	1	0	0
American Indian/Alaska Native	0	1	6	5	0	17	1	0	0
Pacific Islander	0	1	6	2	0	700	0	0	0
Other	0	0	0	0	0	0	0	0	0

\*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

**Table 24 – Race of Public Housing Residents by Program Type**

**Data Source:** PIC (PIH Information Center); MDHA YARDI System

### Ethnicity of Residents

Ethnicity	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project – based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Hispanic	0	2	81	61	2	58	1	0	9
Not Hispanic	0	113	5,127	5,908	52	6258	313	4	781

**\*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition**

**Table 13 – Ethnicity of Public Housing Residents by Program Type**

**Data Source:** PIC (PIH Information Center); MDHA YARDI System; MDHA YARDI System

## **Section 504 Needs Assessment: Describe the needs of public housing tenants and applicants on the waiting list for accessible units:**

MDHA does not assess accessibility needs for persons on waiting lists; accessibility needs are determined when an applicant is selected for housing.

## **Most immediate needs of residents of Public Housing and Housing Choice voucher holders**

For residents of public/affordable housing properties, needs can be grouped into the following categories:

- Employment – particularly jobs that pay a living wage, especially for persons age 18-40. Residents often need a GED plus post-secondary education or training/skills to access living wage jobs.
- Soft Skills – such as time management, interoffice actions, workplace etiquette
- Life Skills – such as budgeting/financial literacy, housekeeping, conflict resolution, parenting, meal prep/nutrition.
- Transportation and Child Care.

For Voucher-holders, the primary need is affordable housing/landlords willing to accept vouchers.

## **How do these needs compare to the housing needs of the population at large**

These needs generally compare to those of persons in the 0-30% AMI range.

## **Discussion**

Population growth and the rental market in Nashville have had a negative impact on the availability of affordable units, making it challenging for voucher-holders to secure housing. As a result, MDHA has allowed 1,400 of its housing choice vouchers to be used as project-based vouchers. Further, MDHA actively seeks to recruit new landlords to the Section 8 programs.

In March 2013, MDHA embarked on a planning process dubbed “Envision Cayce” to create a master plan for revitalizing Cayce public housing. The subsequent plan calls for creating a vibrant mixed-use, mixed-income neighborhood in an area that currently has a high concentration of poverty and few amenities and is isolated from the rest of the community. The mixed-income component includes a commitment to 1-for-1

replacement of all 716 units of public housing, as well as workforce and market rate housing, fully integrated.

The first mixed-income building at Cayce – Kirkpatrick Park – is under construction and will be comprised of 94 units – 36 affordable, PBRA-assisted units (0-80% AMI); 20 workforce units (80-120% AMI); and 38 market rate/unrestricted units. Site work has begun on the second mixed income property – Boscobel I – which will have 96 total units, including 50 affordable units; 24 workforce units; and 22 market rate/unrestricted units. MDHA plans to break ground on the third project in June 2018. Information about Envision Cayce is available at: <http://www.nashville-mdha.org/?p=1616>.

MDHA hopes to “Envision” similar redevelopment at its other older, family properties. In 2016, MDHA was awarded a \$500,000 Choice Neighborhoods Planning grant to support “Envision Napier and Sudekum”. Planning efforts will focus on transforming distressed public housing as well as the surrounding neighborhoods of concentrated poverty into viable mixed-income areas. More information is available at: <http://www.nashville-mdha.org/choice-neighborhoods/>.

Planning is also underway for Edgehill Apartments.

## NA-40 Homeless Needs Assessment – 91.205(c)

### Introduction:

The following information was collected from the 2018 Nashville/Davidson County Continuum of Care (CoC) Point-in-Time Count (first chart) and the Metropolitan Homelessness Commission’s need assessment data from the Community Cold Weather Response Plan (“Shelter Data” chart).

Population	Estimate the # of persons experiencing homelessness on a given night		*Estimate the # experiencing homelessness each year	*Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	2018 PIT COUNT	2018 PIT COUNT	Based on System Performance Report year 10.01.2016-09.30.2017 (Used CoC APR)	Data comes from enrollments into HMIS where the client had NO PRIOR HISTORY.		
				<b>Total</b>	<b>Total</b>	<b>Total</b>
	<b>Sheltered</b>	<b>Unsheltered</b>		<b>444</b>	<b>1526</b>	<b>265</b>
Persons in Households with Adult(s) and Children	195	0	860	N/A	N/A	154
Persons in Households with Only Children	5	0	156	N/A	N/A	N/A

Persons in Households with Only Adults	1482	616	1845	N/A	N/A	N/A
Chronically Homeless Individuals	200	437	168	N/A	N/A	N/A
Chronically Homeless Families	0	0	15	N/A	N/A	N/A
Veterans	172	87	716	N/A	N/A	N/A
Unaccompanied Child	5	0	156	N/A	N/A	N/A
Persons with HIV	62	6	34	N/A	N/A	N/A

*Table prepared by MHC and MDHA.*

## Discussion of Data in columns 4-7:

To best align data reporting, this chart includes data pulled from two HUD reports: the Continuum of Care (CoC) Annual Performance Report and HUD's System Performance Measurements. Each report uses specific logic and instructions as provided by HUD to calculate certain measurements. Each measurement relies on consistent HMIS Participation from all homeless bed providers.

Currently, Nashville's HMIS has a bed coverage rate of 21%. The data located in the chart above is pulled using HUD's System Performance Reports for the FY2017 timeframe. Column (4) includes data pulled from HUD's Continuum of Care (CoC) Annual Performance Report (APR) which includes household data as well as subpopulation data (Chronically Homeless Households, Veterans, Unaccompanied Children and Persons with HIV). The totals in columns 5, 6 & 7 were calculated using the following HUD measures and do not include population breakdowns:

- Measure (1.2): Length of Time Persons Remain Homeless
- Measure (2b): The extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness
- Measure (5.2): Number of Persons who Become Homeless for the First Time

## Emergency Shelter Bed Occupancy Rate during Extreme Cold Weather

Between November 1, 2017 and March 31, 2018, when temperatures fell to 25 degrees Fahrenheit or below (ambient temperature), 22 community partners (nonprofit and local government agencies) participated in an increased effort to reach out to people living outdoors (on streets and in encampments) and convince them to access shelter beds. Temperatures were determined by examining weather.com for zip code 37203 at 5pm the night prior to opening a Metro overflow shelter in addition to local emergency shelter beds. During this past winter season 2017/18, an increased outreach and shelter effort was activated on 23 nights and resulted in the following bed utilization:

### **Community Shelter Data 2017/2018 (including Metro overflow shelter beds)**

Date	Temperature	Available Beds	Actual Bed Utilization	Utilization Rate
Dec. 7	24°F	1198	949	79.2%
Dec. 8	25°F	1237	961	77.7%
Dec. 9	24°F	1175	946	80.5%
Dec. 12	25°F	1201	977	81.4%
Dec. 24	25°F	1217	920	75.6%
Dec. 26	23°F	1195	930	77.8%

Dec. 27*	18°F	1192	1081	90.7%
Dec. 28	24°F	1222	1021	83.6%
Dec. 30*	15°F	1218	933	76.6%
Dec. 31*	18°F	1228	1028	83.7%
Jan. 1*	14°F	1232	1098	89.1%
Jan. 2*	17°F	1255	1092	87.0%
Jan. 3*	13°F	1214	1049	86.4%
Jan. 4*	12°F	1352	1131	83.7%
Jan. 5*	10°F	1283	1044	81.4%
Jan. 6*	16°F	1230	994	80.8%
Jan. 12	21°F	1262	1055	83.6%
Jan. 13*	13°F	1280	937	73.2%
Jan. 14*	18°F	1245	932	74.9%
Jan. 15*	16°F	1210	903	74.6%
Jan. 16*	8°F	1252	946	75.6%
Jan. 17*	13°F	1225	922	75.3%
Jan. 18	21°F	1278	958	75%
<b>Total Days:</b>		<b>Total Beds Planned:</b>	<b>Actual Beds Provided (occupied beds):</b>	<b>Utilization Rate:</b>
<b>23</b>		<b>28,401</b>	<b>22,807</b>	<b>80.3%</b>

*Table prepared by the Metropolitan Homelessness Commission.*

If data is not available for the categories "number of persons becoming and exiting homelessness each year," and "number of days that persons experience homelessness," describe these categories for each homeless population type (including chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth):

Information that is available is provided and explained above.

### Nature and Extent of Homelessness: (Optional)

Race:	Sheltered:	Unsheltered (optional)
White	828	403
Black or African American	777	194
Asian	8	2
American Indian or Alaskan Native	18	0
Native Hawaiian or Other Pacific Islander	8	2
Multiple Races	43	15
Total	1682	616
Ethnicity:	Sheltered:	Unsheltered (optional)
Non-Hispanic	1605	553
Hispanic	77	63
Total	1682	616

Table prepared by MDHA.

Date Source: PITC

### Estimate the number and type of families in need of housing assistance for families with children and the families of veterans.

On the night of the 2018 Point-in-Time count, 61 households with children were in either emergency shelter or transitional housing in the city; 195 people were in these 61 households. Of these persons in families, 87% were non-Hispanic, and 70% were Black. There were also 172 veterans sheltered and 87 unsheltered. Of the veteran population, 98% were non-Hispanic, and the predominant races were White (171 of 259, or 66%) and Black (75 of 259, of 29%).

### Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.

Of the persons found in unsheltered locations, the majority were White (403 of 616, or 65%), with 194 of 616, or 31%, being Black. Nearly 90% were non-Hispanic, with 10% Hispanic.

### Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

The Nashville Continuum of Care changed the methodology of the PIT count this year and introduced a survey for people encountered outdoors. About one third of all people counted outdoors participated in the survey. Nonetheless, the PIT count has been pretty steady for the past three years.

To analyze the data collected from the surveys, MDHA is partnering with Vanderbilt University's Department of Human and Organizational Development. Although the report is not yet complete, we know at this point that of people who responded to the survey:

- 76% were male
- 65% were white
- 76% were 25-55
- 33 were with a partner and 41 (counting those 33) had some other household members with them
- 50% said that they had NOT used shelter in the past year – they looked much like those who said that they HAD used shelter in the past year – whites were a little more likely never to have used shelter
- 17% had been in foster care and 17% said they were homeless due to violence
- The median length of homelessness was slightly over a year (half had been homeless a year or less, and half longer).

## NA-45 Non-Homeless Special Needs Assessment - 91.205 (b,d)

### Introduction:

This section discusses the characteristics and needs of persons in various subpopulations of Metro Nashville who are not always homeless but may require supportive services, including the elderly, frail elderly, persons with disabilities (mental, physical, developmental), persons with HIV/AIDS and their families, persons with alcohol or drug addiction, victims of domestic violence, and persons with criminal records and their families.

### HOPWA

<b>Current HOPWA formula use:</b>	
Cumulative cases of AIDS reported	5270
Area incidence of AIDS	131
Rate per population	4.3
Number of new cases prior year (3 years of data)	88
Rate per population (3 years of data)	5
<b>Current HIV surveillance data:</b>	
Number of Persons living with HIC (PLWH)	4769
Area Prevalence (PLWH per population)	261
Number of new HIV cases reported last year	194

**Table 14 – HOPWA Data**

**Data Source:** CDC HIV Surveillance

### HIV Housing Need (HOPWA Grantees Only)

<b>Type of HOPWA Assistance</b>	<b>Estimates of Unmet Need</b>
Tenant based rental assistance	490
Short-term Rent, Mortgage, and Utility	2736
Facility Based Housing (Permanent, short-term or transitional)	80

**Table 15 – HIV Housing Need**

**Data Source:** HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

### Describe the characteristics of special needs populations in your community:

According to the 2016 American Community Survey 5 Year Estimates, 73,467 (11%) Davidson County residents are elderly (62+), with 30,723 (4.6%) residents considered frail elderly (75+). There are 78,566 (11.9%) persons with disabilities in Davidson County.

The Center for Disease Control and Prevention's annual HIV Surveillance Report (2016, vol. 28) provides an overview of current epidemiology of HIV disease in the U.S. The most current report provides data for year 2016 for the Nashville-Davidson-Murfreesboro MSA. Within the MSA in 2015, approximately 4,769 persons were living with HIV and approximately 2,391 persons were living with AIDS. The Tennessee Department of Health estimates that in 2016, 4,147 residents of Davidson County were living with HIV, or approximately 0.6% of county residents.

An annual survey sponsored by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) provides the primary source of information on the use of illicit drugs and alcohol among non-institutionalized persons aged 12 years old or older.<sup>4</sup> In 2016, an estimated 20.1 million persons in the U.S. were classified with substance dependence or abuse in the past year (7.5 percent of the population aged 12 or older). Of these, 2.3 million were classified with dependence or abuse of both alcohol and illicit drugs, 7.4 million had dependence or abuse of illicit drugs but not alcohol, and 15.1 million had dependence or abuse of alcohol but not illicit drugs. In 2016, the rate of substance dependence or abuse for persons aged 12 or older in the South was 7.0 percent. Applying an average of the national (7.5%) and regional (7.0%) rates of drug and alcohol abuse to Davidson County provides a rough estimate of the scale of these problems on a local level. Approximately 50,000 (7.25%) Davidson County residents struggle with drug and/or alcohol dependence. (<https://www.samhsa.gov/data/>)

Across Tennessee, there were 78,100 reported cases of domestic violence in 2016 according to the Tennessee Bureau of Investigation, CJIS Support Center's 2016 Domestic Violence Report (June 2017). In Davidson County, domestic violence shelters receive approximately 20 domestic violence calls per minute. According to data from the Metropolitan Nashville Police Department, 1,175 reports of domestic violence occurred at MDHA public housing properties in 2016. Of those, an estimated 239 cases involved intimate partner violence (married, dating, friend, or cohabitating).

Persons with a criminal background and their families also have been identified as a special needs subpopulation in Metro Nashville in terms of requiring assistive services for housing, employment, and other social services. However, data measuring the specific numbers in this subpopulation is not readily available.

### **What are the housing and supportive service needs of these populations and how are these needs determined?**

The primary housing and supportive needs of these subpopulations (the elderly, frail elderly, persons with disabilities, persons with HIV/AIDS and their families, persons with

alcohol or drug addiction, victims of domestic violence, and persons with a criminal record and their families) were determined by input from both service providers and the public through public meetings and stakeholder interviews as a part of the community input for the Metropolitan Nashville and MDHA fair housing which was updated in the Summer of 2017. These needs include affordable, safe housing opportunities in areas with access to transportation, commercial and job centers, and social services, and for education regarding fair housing rights and actions that can be taken in the event those rights are violated. Persons with disabilities often require accessible features and ground floor housing units. Persons with disabilities are shown to be fairly evenly distributed across communities Metro Nashville. However, their locations may not provide the access to services they need.

In addition to the housing conditions themselves, persons with disabilities need access to sidewalks and transportation options as well. These needs also apply to the elderly population that often finds that disabilities arise as they age. Victims of domestic violence need safe housing, removal of barriers to relocation, and for perpetrators to be held accountable. Persons with mental health and or substance abuse issues need access to housing with fewer barriers due to past history, stigmas, etc. Persons with HIV/AIDS need housing options that are able to work with issues stemming from stigmas, lack of employment and other issues due to health complications. Persons with criminal records and their families may be disqualified from public housing or Section 8 rental assistance; as a result, assistance with housing for low-income members of this subpopulation must be provided by other nongovernmental organizations.

Many of the supportive needs of these subpopulations are available through existing nongovernmental organizations. However, there is a strong need for greater collaboration and education among Metro Nashville's agencies and nonprofits in order to serve the various special needs subpopulations more efficiently and comprehensively.

**Discuss the size and characteristics of the population with HIV/AIDS and their families within the Eligible Metropolitan Statistical Area (EMSA):**

The EMSA is comprised of the following counties: Cannon, Cheatham, Davidson, Dickson, Hickman, Macon, Robertson, Rutherford, Smith, Sumner, Trousdale, Williamson, and Wilson. Estimates vary somewhat between data sources (the CDC, Tennessee Department of Health, the Metro Public Health Department for Nashville / Davidson County and the Ryan White Needs Assessment, and MDHA HOPWA reporting) regarding HIV/AIDS statistics.

According to the 2012-2016 ACS 5 Year Estimates, the population within the Nashville EMSA is 1,794,570, or 27% of the state's total population. In 2016, the total number of persons living with HIV/AIDS (PLWHA) in Tennessee was approximately 17,489, according to the Tennessee Enhanced HIV/AIDS Reporting System reported by the State Department of Health. Within the EMSA, approximately 4,749 people were living with HIV/AIDS in 2016 (2,405 living with HIV and 2,344 living with AIDS) according to the Ryan White Needs Assessment conducted by the Metro Public Health Department. The Nashville EMSA represents 27% of the state's PLWHA population.

Between 2012 and 2016, the number of individuals diagnosed with HIV increased by 678 persons within the MSA, with 141 new cases of HIV disease diagnosed in 2016. There were 23 new cases of AIDS diagnosed in 2016 within the EMSA, a 43% decrease from 2015. (Ryan White Part A Nashville Transitional Grants Area 2017 Needs Assessment data provided by Metro Public Health Department)

Of the 4,749 PLWHA in 2016, 78% (3,683) were male and 22% (1,066) were female. As far as race/ethnicity and gender composition, Non-Hispanic white males represented the largest group of PLWHA in the EMSA, accounting for 37% (1,739) of all cases, followed by non-Hispanic black males at 34% (1,630), then non-Hispanic black females (15%, 697), non-Hispanic white females (6%, 280), Hispanic males (5%, 230), and Hispanic females (1%, 56).

The 2017 Ryan White Needs Assessment data provides a more detailed analysis of the EMSA's HIV / AIDS epidemiology profile, including prevalence figures and trends.

## Discussion:

MDHA is responsible for the administration and implementation of the HOPWA program for the EMSA in Middle Tennessee on behalf of Metro Nashville. HOPWA funds are used to increase housing stability for low-income persons living with HIV/AIDS and their families by providing financial assistance and other supportive services.

For the 2018 program year, Metro will receive \$1,216,011 in HOPWA funds – an increase of \$142,538 from 2017. MDHA awards program funds to area nonprofit organizations through a competitive process. Over the course of the Five Year Plan, it is expected that Sponsor agencies will receive approximately 97% of the HOPWA allocation, with 3% retained by MDHA for administrative duties. The current area project sponsors are: Nashville CARES, Meharry Medical College Wellness Center, and Urban Housing Solutions, Inc. These HOPWA Sponsors use funds to provide affordable

housing; education; case management; housing services, such as rent and utility deposits; food/nutrition and transportation assistance; outreach; and other client-related services to persons with HIV/AIDS who are both housed and homeless. Forty-two percent (42%) of 2017 program funds were allocated to rental assistance, and MDHA plans to maintain this level of allocation over the new five-year planning cycle. MDHA has set a goal to provide housing and supportive services to 13,000 households over a five-year period.

The primary housing and supportive services needs for low-income PLWHA are for rental and utility payment assistance and medical care services. There is currently a waiting list for HOPWA Housing Subsidy Assistance Services. According to data gathered for the EMSA's 2016-2017 HOPWA CAPER, the 2016-2017 estimate for households that had unmet housing subsidy assistance needs was 3,306. Of those, 490 had an unmet need for tenant based rental assistance; 2,736 had an unmet need for assistance with short-term rent, mortgage, and/or utility payments; and 80 had an unmet need for other housing facilities such as community residences and SRO dwellings. (2016-2017 HOPWA CAPER).

The Ryan White Needs Assessment estimated that 27.2% of HIV-positive individuals aware of their status were not receiving HIV primary medical care services in 2016.

## **NA-50 Non-Housing Community Development Needs – 91.215 (f)**

### **Describe the jurisdiction’s need for Public Facilities:**

There is a need for community centers/neighborhood centers – “one-stop-shops” – that offer a variety of programs and services ranging from recreational opportunities to job training/workforce development classes where child care was available to central intake for public services. These facilities should be located in low-income areas and easily accessible via public transportation. One suggestion in NashvilleNext is to diversify the use of public buildings and facilities in the services they offer (such as libraries, schools, and community centers).

### **How were these needs determined?**

These needs were determined through stakeholder consultations, community meetings/public input sessions, and the survey. The alignment of social services, health care, workforce development opportunities, and other critical services within centers was recommended in NashvilleNext.

### **Describe the jurisdiction’s need for Public Improvements:**

By far, the biggest need is sidewalks to make neighborhoods more walkable and connect to bus stops. More public improvements are needed in low-income areas such as North Nashville, Bordeaux, Antioch, and Madison.

### **How were these needs determined?**

These needs were determined through stakeholder consultations, community meetings/public input sessions, and the survey as well as coordination with the Metro Planning Department. A recommendation NashvilleNext is to encourage physical activity and promote social and mental well-being by improving public space (such as public streets, sidewalks, and parks), reducing barriers to all pedestrians, and providing green space. NashvilleNext also recommends strengthening neighborhoods by making them safe and easy to get around, paying special attention to safety and access for Nashvillians who are within special needs populations, including persons with disabilities, the elderly, veterans, or have low incomes.

### **Describe the jurisdiction's need for Public Services:**

Predominate public service needs include mental health services, programs for children, job training, and financial literacy.

### **How were these needs determined?**

These needs were determined through stakeholder consultations, community meetings/public input sessions, and the survey. In addition, a NashvilleNext recommendation centers on creating positive pathways for children and youth who are facing threats to their well-being. Another recommendation calls for expanding workforce training and development for creative jobs.

## Housing Market Analysis

### MA-05 Overview

#### Housing Market Analysis Overview:

The Market Analysis provides a picture of the environment in which MDHA must administer its grant programs (CDBG, HOME, ESG, and HOPWA) for the next five years. The Needs Assessment and Market Analysis drive the identification of the Consolidated Plan's priority needs, which serve as the basis for the Strategic Plan and proposed projects to be funded in the Action Plan.

As with the Needs Assessment, HUD provided default data from the 2000 Census (Base Year); 2009-2013 American Community Survey (ACS); and the 2009-2013 CHAS (Comprehensive Housing Affordability Strategy); and the PIC. Where available, data is updated or supplemented with 2012-2016 ACS data, 2010-2014 CHAS data, and other relevant sources. GIS maps that are used to support the data are based on 2012-2016 ACS 5 Year Estimates.

The Market Analysis is comprised of the following sections:

#### General Characteristics of the Housing Market

This section highlights the significant characteristics of Nashville's Housing Market, including supply, demand, and condition and cost of housing. In addition, other local, state, and federally funded programs that assist with housing development/preservation are listed along with the income ranges targeted by each program. A list of assisted housing units that may be lost from the affordable housing inventory during the five year Consolidated Plan period is provided as well.

#### Lead-Based Paint Hazards

An estimate of the number of housing units in Davidson County that are occupied by LMI families that contain lead-based paint hazards is provided in this section.

#### Public and Assisted Housing

This section includes the identification of public/affordable housing developments, a description of the physical condition of these units, and a discussion on the restoration and revitalization needs. This section addresses MDHA's strategies for improving the

management and operation of its housing and for improving the living environment of its tenants.

### Facilities, Housing, and Services for Homeless Persons

In this section is an inventory of facilities, housing, and services that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. The inventory of services includes both services targeted to homeless persons and mainstream services, such as health, mental health, and employment services to the extent these services complement services targeted to homeless persons.

### Special Needs Facilities and Services

This section describes the housing stock available to serve persons with disabilities and other low-income persons with special needs, including persons with HIV/AIDS and their families. To the extent that information is available, this section also describes facilities and services that assist persons who are not homeless but who require supportive housing and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing.

### Barriers to Affordable Housing

A discussion on regulatory barriers to affordable housing, such as public policies that affect the cost of housing, and incentives to develop, maintain, or improve affordable housing in Nashville is presented in this section. Barriers considered include tax policies affecting land and other property, land use controls, zoning ordinances, and policies that affect the return on residential investment.

### Needs and Market Analysis Discussion

The Market Analysis concludes with a discussion on needs and opportunities in areas of minority concentration and low income areas.

## MA-10 Number of Housing Units – 91.210(a)&(b)(2)

### Introduction

Using data from the 2012-2016 ACS 5 Year Estimates, the following table lists all residential properties in Davidson County and includes all occupied units (269,078) and vacant units (25,716).

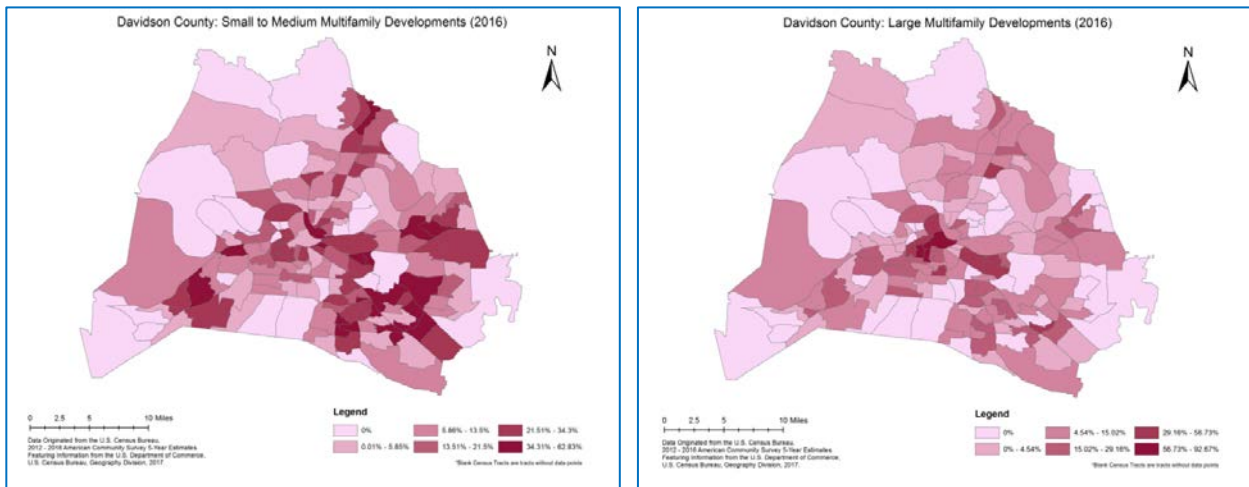
**All residential properties by number of units**

Property Type	Number	%
1-unit detached structure	155,813	52.85%
1-unit, attached structure	21,854	7.41%
2 units	16,304	5.53%
3 or 4 units	11,059	3.75%
5-9 units	21,267	7.21%
10 or more units	64,214	21.78%
Mobile Home, boat, RV, van, etc	4,283	1.45%
<b>Total</b>	<b>294,794</b>	<b>100.00%</b>

**Table 28 – Residential Properties by Unit Number**

**Data Source:** 2012-2016 ACS 5 Year Estimates

The following maps show (1) small to medium (5-19 units) multifamily developments and (2) large multifamily(20 or more units) developments in Davidson County.



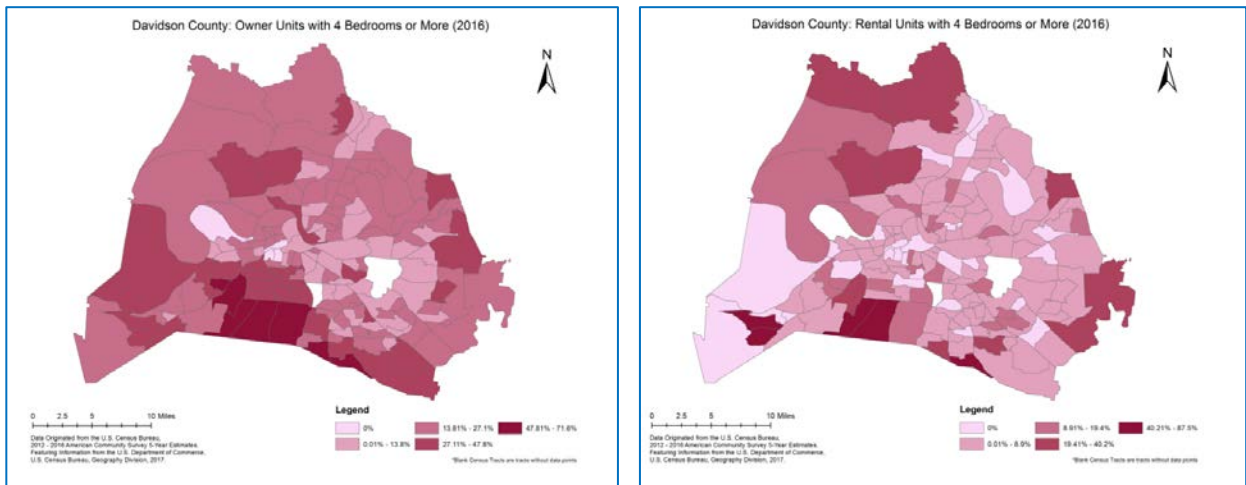
### Unit Size by Tenure (Occupied Units Only)

	Owners		Renters	
	Number	%	Number	%
No bedroom	374	0.3%	4,084	3.3%
1 bedroom	2,683	1.8%	33,390	27.0%
2 bedrooms	29,815	20.5%	56,079	45.3%
3 bedrooms	76,672	52.8%	25,256	20.4%
4 or more bedrooms	35,662	24.6%	5,063	4.1%
<b>Total</b>	<b>145,206</b>	<b>100.0%</b>	<b>123,872</b>	<b>100.0%</b>

Table 19 – Unit Size by Tenure

Data Source: 2012-2016 ACS

The following map shows the location of (1) owner units with 4 bedrooms or more and (2) rental units with 4 bedrooms or more based on 2012-2016 ACS 5 Year Estimates.



### Describe the number and targeting (income level/type of family served) of units assisted with federal, state, and local programs.

The following matrix lists the public resources (federal, state, and local) that may be available to assist with housing activities. Resources are listed in the highest income range that can be served and may serve lower incomes.

Activity	Public Resources/Target Incomes*		
	*Resources are listed in highest income category that can be served and can address lower income ranges.		
	0-60% AMI	61-80% AMI	81-120% AMI
New Construction (Rental)	<ul style="list-style-type: none"> <li>• <i>Federal</i> – HOME</li> <li>• <i>Local</i> - Barnes Fund</li> <li>• <i>Local</i> - PILOT</li> <li>• <i>Local</i> - TOD TIF (Donelson Only)</li> <li>• <i>Federal</i> - MDHA Faircloth allocation</li> <li>• <i>Local</i> - G.O. Bonds</li> <li>• <i>State</i> – Tennessee Housing Trust Fund</li> <li>• <i>Federal</i> – National Housing Trust Fund</li> </ul>		<ul style="list-style-type: none"> <li>• <i>Federal</i> - NSP</li> <li>• <i>Local</i> - HIPP</li> <li>• <i>Federal</i> - CDBG-DR (MDHA Bordeaux project only)</li> <li>• <i>Local</i> - New MDHA development</li> </ul>
New Construction (Homeownership)	<ul style="list-style-type: none"> <li>• <i>Local</i> - TOD TIF (Donelson Only)</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - HOME</li> <li>• <i>Local</i> - Barnes Fund</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - NSP</li> <li>• <i>Local</i> - HIPP</li> </ul>
Rental Assistance	<ul style="list-style-type: none"> <li>• <i>Federal</i> - ESG</li> <li>• <i>Federal</i> - CoC</li> <li>• <i>Federal</i> - Vouchers</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - CDBG</li> <li>• <i>Federal</i> - HOPWA</li> </ul>	
Downpayment Assistance	<ul style="list-style-type: none"> <li>• <i>Federal</i> - MDHA FSS Programs</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - HOME (as part of homeownership project)</li> </ul>	<ul style="list-style-type: none"> <li>• <i>State</i> – THDA</li> </ul>
Housing Navigation	<ul style="list-style-type: none"> <li>• <i>Local</i> - MHC</li> <li>• <i>Federal</i> - CoC</li> </ul>		
Affirmatively further fair housing.		<ul style="list-style-type: none"> <li>• <i>Federal</i> - CDBG</li> </ul>	
Rental Housing (Rehab/Reconstruction)	<ul style="list-style-type: none"> <li>• <i>Local</i> - Barnes</li> <li>• <i>Federal</i> - WAP</li> <li>• <i>Local</i> - PILOT</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - CDBG</li> <li>• <i>Local</i> - MDHA recapitalization of distressed public housing</li> </ul>	
Homeowner Housing (Rehab)	<ul style="list-style-type: none"> <li>• <i>Federal</i> - WAP</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - CDBG</li> <li>• <i>Federal</i> - Barnes</li> <li>• <i>Federal</i> - CDBG-DR (THF program only)</li> </ul>	
Anti-Displacement Programs	<ul style="list-style-type: none"> <li>• <i>Federal</i> - ESG &amp; CoC</li> <li>• <i>Local</i> - Tax Freeze/Relief Assistance; Metro CFP Projects</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Federal</i> - CDBG</li> <li>• <i>Federal</i> - HOPWA</li> <li>• <i>Local</i> - (Community Land Trust)</li> </ul>	

Since 1994, over \$42 million in CDBG funds have been used for housing activities, predominately for housing rehab. For Program Years 2103-2016, approximately \$6.6 million in CDBG funds have been used to rehab homes for LMI households. This comprises approximately 35% of the CDBG allocations for those years.

Since 1992 - when the HOME Program began - through 2016, over \$85 million has been used to create/preserve 4,564 units of affordable housing. The following table shows how HOME funds have been utilized.

<b>HOME Production Report (1992-2016)</b>					
<b>Activity</b>	<b>Rental</b>	<b>Homebuyer</b>	<b>Homeowner</b>	<b>Total</b>	<b>% of Units</b>
Rehabilitation	1,329	12	935	2,276	49.87%
New Construction	549	414	N/A	963	21.10%
Acquisition	228	1,097	N/A	1,325	29.03%
<b>Total</b>	<b>2,106</b>	<b>1,523</b>	<b>935</b>	<b>4,564</b>	<b>100.00%</b>

**Provide an assessment of units expected to be lost from the affordable housing inventory for any reason, such as expiration of Section 8 contracts.**

The table below lists Low-Income Housing Tax Credit (LIHTC) properties in which the compliance period/extended use period ends or property owners can “Opt Out” of the program during the Consolidated Plan Period (by May 31, 2023). Also included in the list are Project Based Section 8 properties with contracts that will expire by May 31, 2023. Based on the table below 4,265 LIHTC units and 1,005 Section 8 units could be lost in next 5 years. However, it should be noted that 2 LIHTC properties – Vine Hill Homes and Preston Taylor Homes are MDHA properties and will be income restricted at least 20 years from the date of RAD conversion. At the time of publication, developers were pursuing an opportunity to preserve the affordability of the Trevecca Towers (Section 8) properties. Even with these units preserved, 4,462 of existing affordable units are potentially at risk.

<b>LIHTC Property</b>	<b># of Units</b>	<b>Compliance Period Ends</b>	<b>Extended Use Ends</b>	<b>"Opt Out" Date</b>
Spring Branch Apts	88	2016	2031	2016
Berkshire Place Apartments	202	2015	2030	2015
Trinity Hills Apts	100	2015	2030	2015
Tennessee Village Apts aka Village West	288	2006	2021	2006
Valley Brook I	102	2009	2024	2009
Valley Brook II	140	2009	2024	2009
Boscobel Duplex	2	2009	2024	2009

Greens of Rivergate	140	2010	2025	2010
Forest Park	104	2010	2040	2010
Park at Hillside	290	2014	2029	2014
Skyview Apts	88	2013	2028	2013
Lane Garden Apartments(AKA Riverchase)	212	2016	2031	2017
Meadow Creek Apartments	84	2018	2033	2018
Cobblestone Corners	96	2014	2029	2019
Nashwood Park Apts	100	2014	2029	2019
Burning Tree	280	2020	2035	2020
Chippington Towers	426	2020	2035	2020
Argyle Avenue Seniors	80	2015	2030	2020
Vine Hill Homes*	136	2015	2030	2020
Grandstaff Apartments	90	2015	2030	2020
Bellewood Park Apts	100	2015	2030	2020
Preston Taylor Homes*	187	2016	2031	2021
Hickory Forest	90	2021	2036	2021
Margaret Robertson	100	2021	2036	2021
Millennium Apts	25	2017	2032	2022
Skyline Village	80	2017	2032	2022
Mercury Court	20	2017	2032	2022
Villas at Metro Center	91	2017	2032	2022
Woodbine Cumberland Meadows	14	2017	2032	2022
Laurel House	48	2017	2032	2022
Dandridge Towers	152	2017	2032	2022
Alta Lake Apts (AKA Lakeside Apts)	156	2019	2034	2022
Hickory Hollow Towers	154	2022	2037	2022
<b>TOTAL LIHTC UNITS</b>	<b>4265</b>			
<b>Section 8 Property</b>	<b># Units</b>	<b>Expiration Date</b>		
Berkshire Place Apartments	195	8/31/2018		
Trinity Hills Village Apts	100	12/31/2018		
Phyllis Wheatley Apts	81	5/30/2019		
Trevecca Towers II	162	5/31/2019		
Skyview Apartments	88	4/16/2020		
Trevecca Towers I and East	150	5/31/2022		
Trevecca Towers I and East	173	5/31/2022		
Shelby Hills Apts	56	5/31/2023		
<b>TOTAL SECTION 8 UNITS</b>	<b>1005</b>			

## Does the availability of housing units meet the needs of the population?

While it may appear that there is enough housing in Nashville (294,794) to meet the demand (269,078), the cost burden data from the Needs Assessments clearly indicate that the availability of housing units in Nashville does not meet the needs of the population. The potential loss of LIHTC or PBRA units will compound this problem.

In 2017, the Mayor's Office of Housing published *The Housing Nashville Report*. (See <https://www.nashville.gov/Mayors-Office/Housing.aspx>), which included a Housing Supply Needs and Gaps analysis for 2000-2015 that paints the picture of affordable housing needs in Nashville. The following tables show the analysis for owner and renter housing, respectively. It should be noted, that the analyses and recommendations are based on Median Household Income (MHI) for Davidson County.

**Table 1**  
**Summary of Owner Housing Needs and Gaps, 2000-2015**

	Owner			Cost Burden (Critical Need)
	Demand (Households)	Supply (Units)	Gap (Units)	
[Notes]	[1],[2]	[3],[4]		[5]
<b>2000 MHI Level</b>				
Less than 30%	7,711	1,179	-6,532	n/a
30 to 60%	13,324	8,221	-5,103	n/a
60 to 80%	12,100	18,920	6,820	n/a
80 to 120%	24,471	56,520	32,049	n/a
Greater than 120%	<u>73,781</u>	<u>46,534</u>	<u>-27,247</u>	n/a
<b>Total</b>	<b>131,387</b>	<b>131,374</b>	<b>-13</b>	<b>n/a</b>
<b>2015 MHI Level</b>				
Less than 30%	9,321	5,954	-3,367	6,731
30 to 60%	16,977	17,421	444	10,080
60 to 80%	13,423	35,456	22,033	6,206
80 to 120%	26,455	43,249	16,794	6,768
Greater than 120%	<u>82,719</u>	<u>46,968</u>	<u>-35,751</u>	<u>5,077</u>
<b>Total</b>	<b>148,895</b>	<b>149,048</b>	<b>153</b>	<b>34,862</b>
<b>2000-2015 Changes</b>				
Less than 30%	1,610	4,775	3,165	n/a
30 to 60%	3,653	9,200	5,547	n/a
60 to 80%	1,323	16,536	15,213	n/a
80 to 120%	1,984	<b>-13,271</b>	<b>-15,255</b>	n/a
Greater than 120%	<u>8,938</u>	<u>434</u>	<u>-8,504</u>	<u>n/a</u>
<b>Total</b>	<b>17,508</b>	<b>17,674</b>	<b>166</b>	<b>n/a</b>

Source: U.S. Census; American Community Survey; Economic & Planning Systems

[Note 1] 2000 tract-level data: Decennial Census 2000 HCT 011

[Note 2] 2015 tract-level data: ACS B25118 5-year estimates, recalibrated to county-level data: B25118 ACS 1-year estimate

[Note 3] 2000 tract-level data: Decennial Census 2000 HCT 084

[Note 4] 2015 tract-level data: ACS B25075 5-year estimates; recalibrated to county-level data: B25075 ACS 1-year estimates

[Note 5] 2015 county-level data: ACS B25095 1-year estimates

H:\E3043-Nashville TN Inclusionary Housing\Data\E3043-Housing Gaps-041317.xlsx\TABLE 1- Owner Gaps (tract)

Source: *The Housing Report*, Mayor's Office of Housing, 2017

**Table 2  
Summary of Renter Housing Needs and Gaps, 2000-2015**

[Notes]	Renter			Cost Burden (Critical Need)
	Demand (Households)	Supply (Units)	Gap (Units)	
	[1],[2]	[3],[4]	[5]	[6]
<b>2000 MHI Level</b>				
Less than 30%	21,227	11,330	-9,897	n/a
30 to 60%	22,680	34,593	11,913	n/a
60 to 80%	15,244	34,762	19,518	n/a
80 to 120%	21,692	17,588	-4,104	n/a
Greater than 120%	<u>25,177</u>	<u>4,419</u>	<u>-20,758</u>	<u>n/a</u>
<b>Total</b>	<b>106,020</b>	<b>102,692</b>	<b>-3,328</b>	<b>n/a</b>
<b>2015 MHI Level</b>				
Less than 30%	26,346	8,974	-17,372	16,997
30 to 60%	28,121	27,739	-382	22,660
60 to 80%	15,837	40,959	25,122	8,494
80 to 120%	22,787	34,499	11,712	5,266
Greater than 120%	<u>32,159</u>	<u>10,030</u>	<u>-22,129</u>	<u>1,970</u>
<b>Total</b>	<b>125,250</b>	<b>122,201</b>	<b>-3,049</b>	<b>55,388</b>
<b>2000-2015 Changes</b>				
Less than 30%	5,119	-2,356	-7,475	n/a
30 to 60%	5,441	-6,854	-12,295	n/a
60 to 80%	593	6,197	5,604	n/a
80 to 120%	1,095	16,911	15,816	n/a
Greater than 120%	<u>6,982</u>	<u>5,611</u>	<u>-1,371</u>	<u>n/a</u>
<b>Total</b>	<b>19,230</b>	<b>19,509</b>	<b>279</b>	<b>n/a</b>

Source: U.S. Census; American Community Survey; Economic & Planning Systems

[Note 1] 2000 tract-level data: Decennial Census 2000 HCT 011

[Note 2] 2015 tract-level data: ACS B25118 5-year estimates, recalibrated to county-level data: B25118 ACS 1-year estimate

[Note 3] 2000 tract-level data: Decennial Census 2000 HCT 062

[Note 4] 2015 tract-level data: ACS B25063 5-year estimates; recalibrated to county-level data: B25063 ACS 1-year estimates

[Note 5] The difference between total demand and total supply relates to the number of rental units with "no cash rent"; as such, they cannot be classified by inc

[Note 6] 2015 county-level data: ACS B25074 1-year estimates

H:\E3043-Nashville TN Inclusionary Housing\Data\E3043-Housing Gaps-041317.xlsx\TABLE 2 - Renter Gaps (tract)

Source: *The Housing Report*, Mayor's Office of Housing, 2017

Further, the analysis projects the need for owner and renter housing from 2015 to 2025.

**Table 7  
Projection of Owner Housing Needs, 2015-2025**

	2015	2025	Total Δ	Ann. Δ
<b>Demand (Households by Tenure by MHI Level)</b>				
Less than 30%	9,321	10,394	1,073	107
31% to 60%	16,977	19,412	2,435	244
61% to 80%	13,423	14,305	882	88
81% to 120%	26,455	27,778	1,323	132
<u>Greater than 120%</u>	<u>82,719</u>	<u>88,678</u>	<u>5,959</u>	<u>596</u>
<b>Subtotal Owner</b>	<b>148,895</b>	<b>160,567</b>	<b>11,672</b>	<b>1,167</b>
<b>Supply (Housing Units by Tenure by MHI Level)</b>				
Less than 30%	5,954	9,137	3,183	318
31% to 60%	17,421	23,554	6,133	613
61% to 80%	35,456	46,480	11,024	1,102
81% to 120%	43,249	34,402	-8,847	-885
<u>Greater than 120%</u>	<u>46,968</u>	<u>47,257</u>	<u>289</u>	<u>29</u>
<b>Subtotal Owner</b>	<b>148,895</b>	<b>160,567</b>	<b>11,672</b>	<b>1,167</b>
<b>Gaps</b>				
Less than 30%	-3,367	-1,257	2,110	264
31% to 60%	444	4,142	3,698	462
61% to 80%	22,033	32,175	10,142	1,268
81% to 120%	16,794	6,624	-10,170	-1,271
<u>Greater than 120%</u>	<u>-35,751</u>	<u>-41,420</u>	<u>-5,669</u>	<u>-709</u>
<b>Subtotal Owner</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: U.S. Census, ACS DP-4, B25118; Economic & Planning Systems  
 H:\ES043-Nashville TN Inclusionary Housing\Data\ES043-Housing Gaps-04 B 9.xlsx\TABLE 2 a - Owner Gaps Proj

**Table 8  
Projection of Renter Housing Needs, 2015-2025**

	2015	2025	Total Δ	Ann. Δ
<b>Demand (Households by Tenure by MHI Level)</b>				
Less than 30%	26,346	29,759	3,413	341
31% to 60%	28,121	31,748	3,627	363
61% to 80%	15,837	16,232	395	40
81% to 120%	22,787	23,517	730	73
<u>Greater than 120%</u>	<u>32,159</u>	<u>36,814</u>	<u>4,655</u>	<u>465</u>
<b>Subtotal Owner</b>	<b>125,250</b>	<b>138,070</b>	<b>12,820</b>	<b>1,282</b>
<b>Supply (Housing Units by Tenure by MHI Level)</b>				
Less than 30%	8,974	7,403	-1,571	-157
31% to 60%	27,739	23,170	-4,569	-457
61% to 80%	40,959	45,090	4,131	413
81% to 120%	34,499	45,773	11,274	1,127
Greater than 120%	10,030	13,771	3,741	374
<u>No cash rent</u>	<u>3,049</u>	<u>2,863</u>	<u>-186</u>	<u>-19</u>
<b>Subtotal Renter</b>	<b>125,250</b>	<b>138,070</b>	<b>12,820</b>	<b>1,282</b>
<b>Gaps</b>				
Less than 30%	-17,372	-22,355	-4,983	-623
31% to 60%	-382	-8,579	-8,197	-1,025
61% to 80%	25,122	28,858	3,736	467
81% to 120%	11,712	22,256	10,544	1,318
<u>Greater than 120%</u>	<u>-22,129</u>	<u>-23,043</u>	<u>-914</u>	<u>-114</u>
<b>Subtotal Renter</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: U.S. Census, ACS DP-4, B25118; Economic & Planning Systems  
 H:\ES043-Nashville TN Inclusionary Housing\Data\ES043-Housing Gaps-04 B 9.xlsx\TABLE 2 b - Renter Gaps

Source: *Housing Nashville Report*, Mayor's Office of Housing, 2017

### **Describe the need for specific types of housing:**

With overcrowding the second most common housing problem across all income ranges, there is a need for housing to accommodate families, particularly large families. However, as discussed in Needs Assessment, there is a need for more housing for single person households. Unlike families that experience overcrowding due to the lack of housing units to accommodate the household size, single persons may be “overhoused” because they cannot find smaller housing. This exacerbates the cost burden for single person households. Also, there is a need for low barrier housing to allow homeless persons greater access to housing.

# MA-15 Housing Market Analysis: Cost of Housing - 91.210(a)

## Introduction

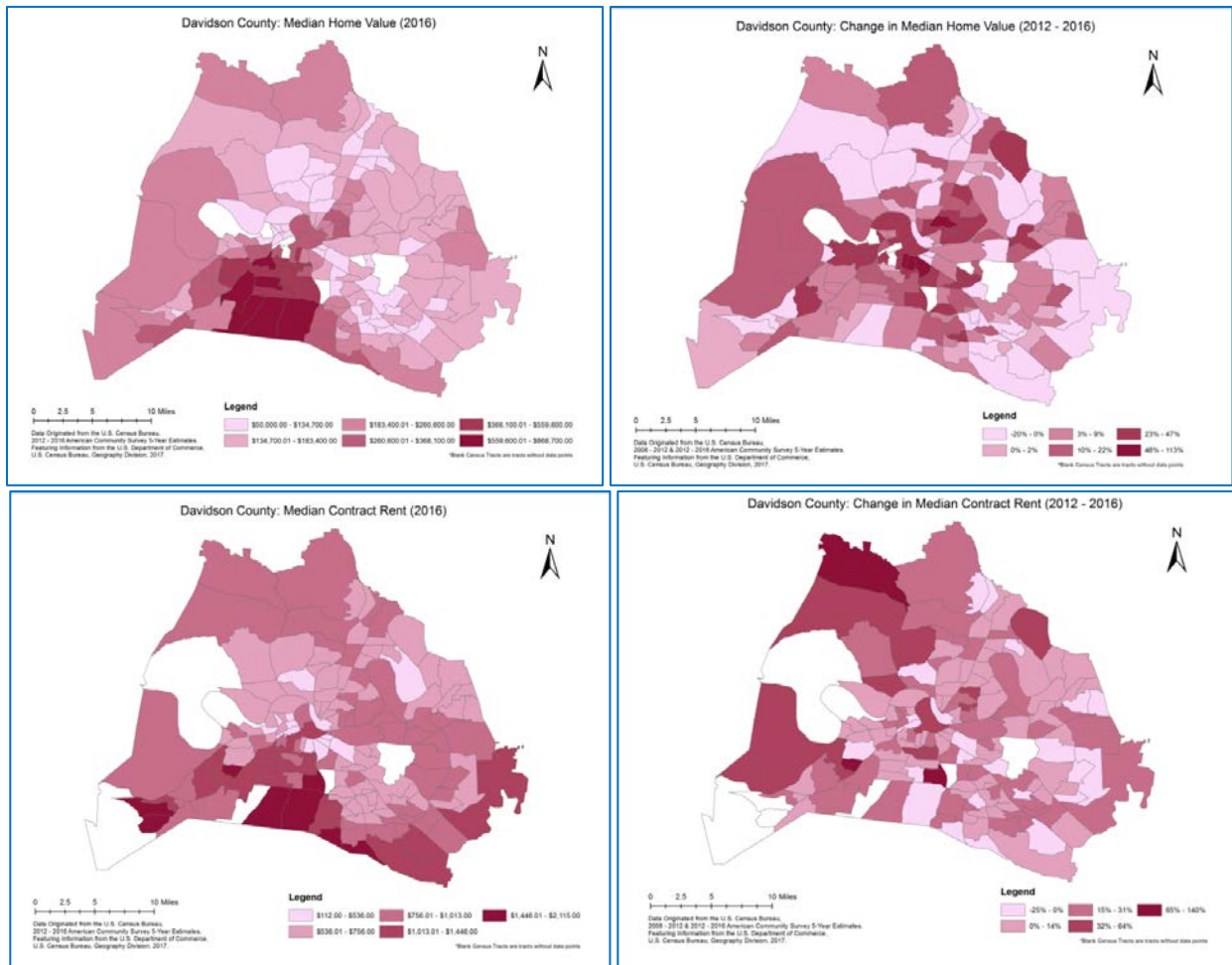
### Cost of Housing

	Base Year: 2000	2013	Most Recent Year 2016	% Change (2000- 2016)
Median Home Value	114,200	167,500	177,700	56%
Median Contract Rent	530	691	756	43%

**Table 20 – Cost of Housing**

**Data Source:** 2000 Census (Base Year); 2009-2013 ACS (provided by HUD); 2012-2016 5 ACS Year Estimates

The following maps show the median home value and median contract rent for each census tract in Davidson County as well as the change median home value/contract rent over time.



Rent Paid	Number	%
Less than \$500	18,006	15%
\$500-999	74,150	60%
\$1,000-1,499	20,665	17%
\$1,500-1,999	5,113	4%
\$2,000 or more	2,246	2%
No Cash Rent	3,692	3%
<b>Total</b>	<b>123,872</b>	<b>100%</b>

Table 31 - Rent Paid

Data Source: 2012-2016 ACS

### Housing Affordability

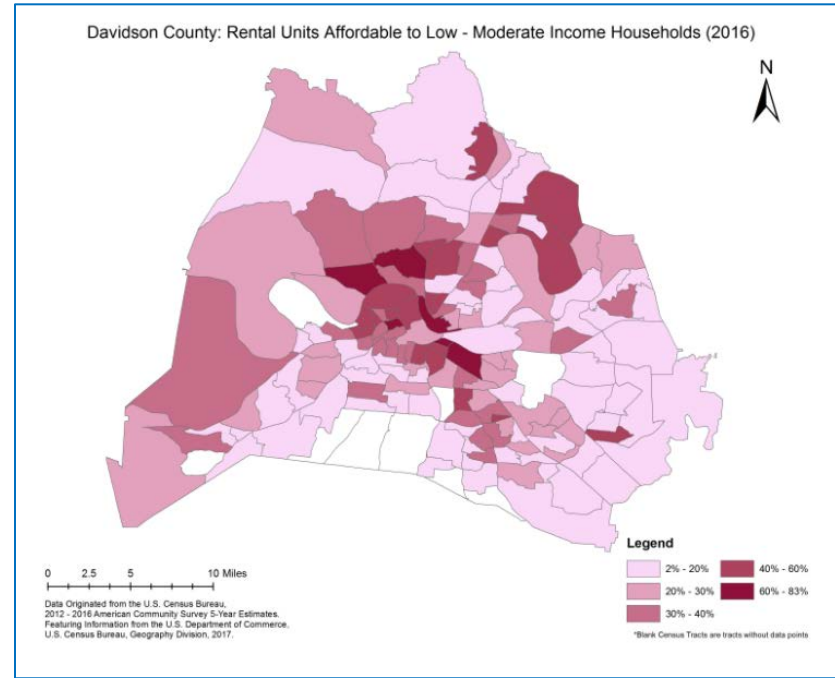
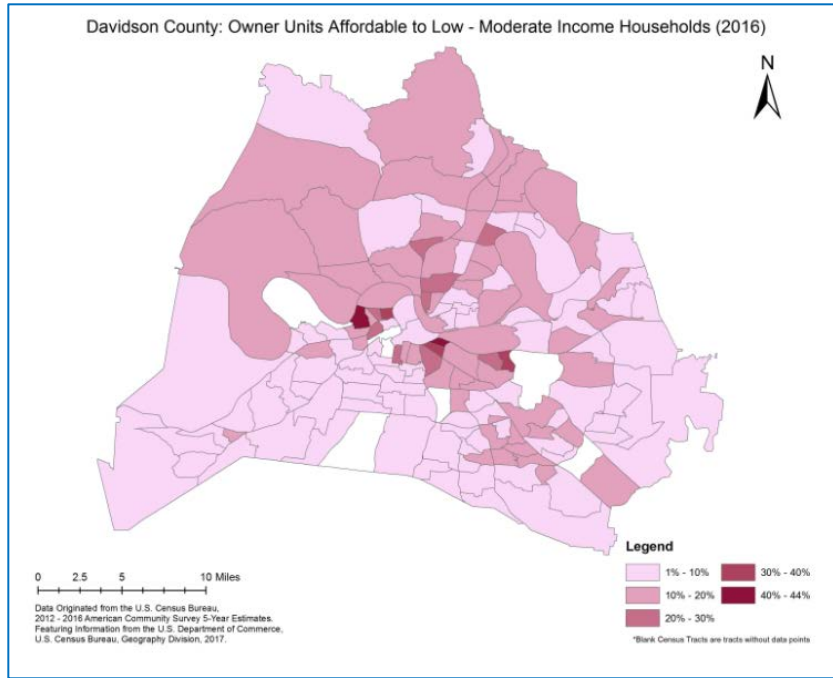
% Units affordable to Households earning	Renter	% Renter	Owner	% Owner
30% HAMFI	8,690	7%	No Data	
50% HAMFI	29,565	25%	8,931	10%
80% HAMFI	78,776	67%	33,663	36%
100% HAMFI	No Data		50,884	54%
<b>Total</b>	<b>117,031</b>		<b>93,478</b>	

Table 32 – Housing Affordability

Data Source: 2009-2013 CHAS

Please note that the data in Table 32 is from the 2009-2013 CHAS as more current data is not available.

The following maps show owner and rental housing affordable to LMI households for each census tract in Davidson County.



### Monthly Rent

Monthly Rent (\$)	Efficiency (no bedroom)	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
Fair Market Rent	731	816	1002	1,327	1,564
High HOME Rent	700	780	959	1,252	1,378
Low HOME Rent	601	644	773	893	996

Table 33 – Monthly Rent

Data Source:

HUD FMR and HOME Rents; HUD FMR Rents Updated to 2018

## Is there sufficient housing for households at all income levels?

Cost burden and housing affordability data show the lack of affordable housing across all income ranges, but it is most severe for households with incomes ≤50% HAMFI.

According to The Housing Nashville Report, there is a gap of 17,372 renter units for 0-30% MHI range, and a gap of 3,367 for owner housing in this same income range. For the 30-60% MHI range, there is a gap of 382 units of affordable housing.

<b>2000-2015 OWNER &amp; RENTER/ SUPPLY BY MHI</b>							
	<b>Tenure</b>	<b>Owner Demand</b>	<b>Owner Supply</b>	<b>Owner Gaps</b>	<b>Renter Demand</b>	<b>Renter Supply</b>	<b>Renter Gaps</b>
Affordable Housing	Less than 30%	9,321	5,954	<b>-3,367</b>	26,346	8,974	<b>-17,372</b>
	30%-60%	16,977	17,421	444	28,121	27,739	<b>-382</b>
Workforce Housing	60%-80%	13,423	35,456	22,033	15,837	40,959	25,122
	80%-120%	26,455	43,249	16,794	22,787	34,499	11,712
Market Rate	Greater than 120%	82,719	46,968	<b>-35,751</b>	32,159	10,030	<b>-22,129</b>
	Subtotal	148,895	160,567	11,672	125,250	122,201	<b>-3,049</b>

Source: *Housing Nashville Report*, Mayor's Office of Housing, 2017

## How is affordability of housing likely to change considering changes to home values and/or rents?

The *Housing Nashville Report* predicts that by 2025, the gap for affordable housing for incomes between 0-60% MHI could increase to 30,934 units. Any loss of LIHTC or PBRA units would widen this gap.

<b>2015-2025 OWNER &amp; RENTER/ SUPPLY BY MHI PROJECTIONS</b>							
	<b>Tenure</b>	<b>Owner Demand</b>	<b>Owner Supply</b>	<b>Owner Gaps</b>	<b>Renter Demand</b>	<b>Renter Supply</b>	<b>Renter Gaps</b>
Affordable Housing	Less than 30%	10,394	9,137	<b>-1,257</b>	29,759	7,403	<b>-22,356</b>
	30%-60%	19,412	23,554	4,142	31,748	23,170	<b>-8,578</b>
Workforce Housing	60%-80%	14,305	46,480	32,175	16,232	45,090	28,858
	80%-120%	27,778	34,402	6,624	23,517	45,773	22,256
Market Rate	Greater than 120%	88,678	47,257	<b>-41,421</b>	36,814	13,771	<b>-23,043</b>
	Subtotal	160,567	160,567	0	138,070	138,070	0

Source: *Housing Nashville Report*, Mayor's Office of Housing, 2017

**How do HOME rents / Fair Market Rent compare to Area Median Rent? How might this impact your strategy to produce or preserve affordable housing?**

According to 2012-2016 ACS 5 Year Estimates, the median rent is \$756. This means that half of units rent lower than this amount and half rent above this amount. According to Table 31, 60% of rent paid falls between \$500-\$999. The median rent is higher than Low HOME, High HOME, and FMR rents for Efficiencies and falls between Low HOME and High HOME rent for 1 bedroom units. However, median rent is less than High HOME and FMR rents for 1 bedroom units and less than all HOME and FMR rents for 2, 3, and 4 bedroom units.

With strong data pointing to the need for affordable housing for the very low income, the strategy is to use HOME funds to produce more units that will be available for households with incomes 0-50% AMI.

## MA-20 Housing Market Analysis: Condition of Housing – 91.210(a)

### Introduction

The “selected” conditions of housing presented in the table below are similar to housing problems in the Needs Assessment and are defined as (1) lacking complete plumbing facilities; (2) lacking complete kitchen facilities; (3) more than one person per room; and (4) cost burden greater than 30%. Updated ACS data for this analysis is not available; however, the data is consistent with the Housing Problems Analysis shown in Table 8.

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
With one selected Condition	37,339	27%	52,166	45%
With two selected Conditions	727	1%	3,189	3%
With three selected Conditions	122	0%	56	0%
With four selected Conditions	0	0%	0	0%
No selected Conditions	102,186	73%	60,960	52%
<b>Total</b>	<b>140,374</b>	<b>101%</b>	<b>116,371</b>	<b>100%</b>

Table 34 - Condition of Units

Data Source: 2009-2013 ACS

### Describe the jurisdiction’s definition for “substandard condition” and “substandard condition but suitable for rehabilitation”:

Similarly, MDHA defines substandard housing as having at least one of the following conditions:

1. Physical Defects such as lack of complete plumbing (i.e., no usable flush toilet or piped water)
2. Lack complete kitchen facilities such as an installed sink with piped water or a refrigerator, or does not have electricity or a safe source of heat.
3. Is overcrowded, with more than one person per room.
4. Meets the definition of Cost Burden (paying more than 30% of household income for housing expenses, or severe cost burden (paying more than 50%).

Housing with a “substandard condition but suitable for rehabilitation” must be structurally or financially feasible. MDHA will provide rehab assistance to address health and safety items and install weatherization measures even if a substandard

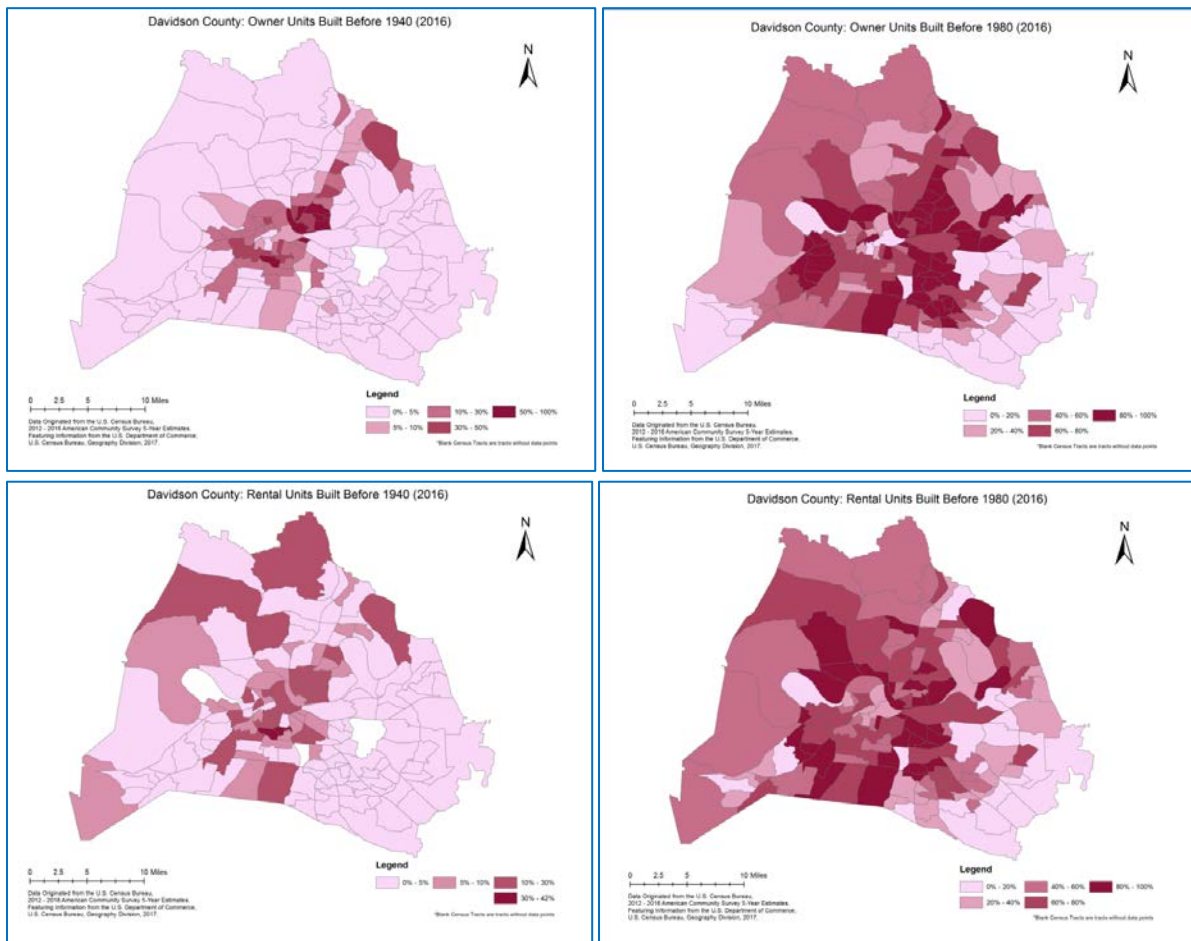
condition exists. However, homes that need reconstruction are not suitable for the Rehab Program.

Year Unit Built	Year Unit Built Owner-Occupied		Year Unit Built Renter-Occupied	
	Number	%	Number	%
2014 or later	1,162	0.8%	619	0.5%
2010 to 2013	3,049	2.1%	3,221	2.6%
2000 to 2009	26,137	18.0%	15,856	12.8%
1980-1999	37,754	26.0%	39,887	32.2%
1960-1979	36,592	25.2%	41,869	33.8%
1940-1959	29,622	20.4%	16,227	13.1%
1939 or earlier	10,890	7.5%	6,194	5.0%

**Table 35 – Year Unit Built**

**Data Source:** 2012-2016 ACS 5 Year Estimates

At least half of owner-occupied units (53%) and renter-occupied units (52%) were built before 1980. The following series of maps show the location of owner and rental housing built before 1940 and 1980, respectively.



### Risk of Lead-Based Paint Hazard

Risk of Lead-Based Paint Hazard	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
Total Number of Units Built Before 1980	77,104	53%	64,290	52%
Housing Units build before 1980 with children present	10,024	13%	5,786	9%

**Table 36 – Risk of Lead-Based Paint**

**Data Source:** 2012-2016 ACS 5 Year Estimates (Total Units) 2009-2013 CHAS (Units with Children present)

The use of lead-based paint in housing was banned in 1978. For the purpose of this analysis, the number of units built before 1980 serves as the baseline for units that may contain lead-based paint. While 2012-2016 ACS 5 Year Estimates are available for Year Built, there is not current data on the number of housing units built before 1980 with children present. Therefore, that number was derived using the percentage reported for the default data (2009-2013 CHAS).

Infants and young children are more likely to be exposed to lead than older children or adults. Children may chew paint chips, or, children may contaminate their hands with lead and then put their finger into their mouth. Young children absorb lead more easily than older children or adults. The estimates above indicate that 13% of owner-occupied homes and 9% of renter-occupied homes built prior to 1980 have children present.

### Vacant Units

	Suitable for Rehabilitation	Not Suitable for Rehabilitation	Total
Vacant Units*			25,716
Abandoned Vacant Units			
REO Properties			
Abandoned REO Properties			

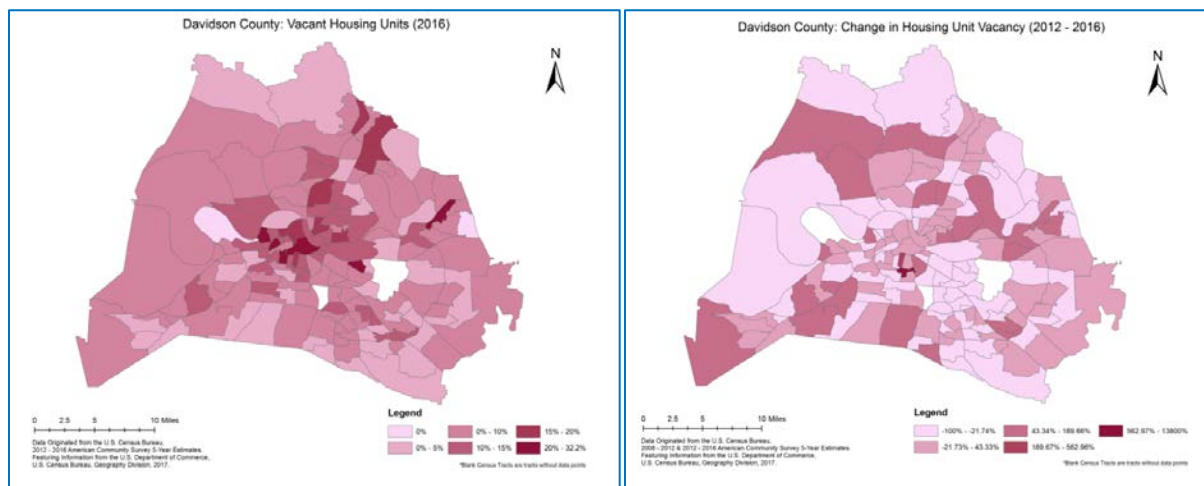
**Table 37 - Vacant Units**

Type of Vacant Units	#
For rent	6,603
Rented, not occupied	3,630
For sale only	2,397
Sold, not occupied	1,626
For seasonal, recreational, or occasional use	2,479
For migrant workers	160
Other vacant	8,821
<b>TOTAL</b>	<b>25,716</b>

Table prepared by MDHA

Data Source: 2012-2016 ACS 5 Year Estimates

The following maps show the location of vacant units in Davidson County as well as the change in housing unit vacancy over time.



### Need for Owner and Rental Rehabilitation

With over half of occupied units built before 1980, there is a great need for owner and rental rehab in Davidson County. The age of a home typically factors into the condition of a housing unit. With 25% of homeowners being cost burdened, the ability to make necessary repairs and improvements is challenging. As previously discussed, cost burden is more acute for low income households. This is evidence by the demand for MDHA’s Homeowner Rehab and Weatherization Assistance Program, which are over-subscribed every year. In addition, rehabilitating deteriorated housing helps to stabilize older neighborhoods, and measures such as accessibility improvements help the elderly and persons with disabilities remain in their homes. Metro’s *Housing Nashville* established “retaining existing affordable housing” as one of its priorities.

### Estimated Number of Housing Units Occupied by Low or Moderate Income Families with LBP Hazards

Housing constructed before 1978 (1980 default year for the data) is likely to contain lead-based paint. Based on the percentage of occupied units built before 1980, it can be assumed that at least half of the households in Davidson County are at risk of lead-based paint exposure. For the current Program Year, the average year built for homes assisted through MDHA’s Homeowner Rehab program is 1963, and 68.5% of homes were built before 1980.

## MA-25 Public and Assisted Housing – 91.210(b)

### Introduction

MDHA is the public housing authority (PHA) in Davidson County and manages 22 public housing/affordable housing properties and administers over 7,000 vouchers. In December 2013, MDHA strategically decided to change its business model from public housing annual contribution contracts (ACC) to project-based rental assistance contracts under the Rental Assistance Demonstration (RAD) program. To date, 15 properties have converted under RAD, and the remaining properties should be converted by August 2018.

### Totals Number of Units

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project - based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units/vouchers available	0	118	5,399	6,104	57	7034	468	8	875
# of accessible units									
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Table 38 – Total Number of Units by Program Type

Data Source: PIC (PIH Information Center); MDHA YARDI System

### Describe the supply of public housing developments:

MDHA manages over 5,000 public/affordable housing units occupied by low income families, typically with incomes below 30% AMI. Waitlists for these properties are in the thousands. Approximately 68% of MDHA's public/affordable housing properties are located in racially and ethnically concentrated areas of poverty.

**Describe the number and physical condition of public housing units in the jurisdiction, including those that are participating in an approved Public Housing Agency Plan:**

HUD's Real Estate Assessment Center (REAC) conducts physical property inspections of properties that are owned, insured or subsidized by HUD, including public housing and multifamily assisted housing. About 20,000 such inspections are conducted each year to ensure that assisted families have housing that is decent, safe, sanitary and in good repair. The following is a list of public housing and multifamily assisted properties in Davidson County and their most recent REAC scores.

### Public Housing Condition

Public Housing Development	Average Inspection Score	Date
Preston Taylor Neighborhood Housing	98	2/6/2014
Cayce Place	91	2/28/2014
Napier Place	97	3/7/2014
Vine Hill Apartments	99	1/29/2015
Levy Place	93	2/5/2015
Historic Preston Taylor Apartments	93	2/12/2015
Edgefield Manor	91	2/3/2015
Edgehill Apartments	94	2/2/2015
Cheatham Place	89	2/9/2015
Andrew Jackson Courts	98	10/7/2015
Parthenon Towers	97	10/6/2015
Neighborhood Housing	99	10/19/2015
Vine Hill Towers	99	10/13/2015
Multi-family Development	Average Inspection Score	Date
Trinity Hills Village Apts	98	9/20/2013
Villa Maria Manor	97	9/11/2013
Cwa Apartments I	92	9/16/2013
Nashville Christian Towers	96	9/10/2013
Heartland Christian Tower	100	12/3/2013
Spruce Street House Of Hope	100	12/5/2013
Peggy Alsup Arbors	99	12/3/2013
Fifteenth Avenue Baptist Village Manor	99	12/5/2013
Spruce Street Golden Manor	100	12/5/2013
Richland Hills Apartments	85	3/26/2014
Wedgewood Towers Apartments	98	2/14/2014
Summerwind Apartments	98	7/23/2014
Forest Hills Apartments	97	5/9/2014
Berkshire Place Apartments	90	11/14/2014
Fallbrook Apartments	92	5/28/2014
Trevecca Towers I And East	78	12/23/2014
Grace Manor	97	9/15/2014
Dandridge Towers	96	11/25/2014
Hickory Forest	98	11/24/2014
Richardson Court	95	7/8/2014
Arc/Hds Nash County Group Home	94	5/28/2014
Cwa Apartments li	81	10/9/2014
Trevecca Towers li	95	12/22/2014
Metrocenter Teachers Apartments	66	7/15/2015
Skyview Apartments	92	10/28/2014
Knollcrest Apartments	96	11/22/2014
Home Mission Haven	99	12/16/2014

Project Independence	94	12/11/2014
Thm Cumberland Manor	41	3/17/2015
The Villas At Metrocenter Apartments	85	9/16/2015
Shelby Hills Apartments	85	8/17/2015
Parc At Metro Center	81	6/12/2015
Stahlman Building	97	3/18/2016
Hickory Point Apartments	84	3/27/2015
Laurel House Apartments	93	2/26/2016
Haley's Park	64	8/3/2015
Hagy Commons	85	8/4/2015
Kelly Miller Smith Towers	94	9/3/2015
Disciples Village Nashville	93	10/30/2015
Haynes Garden Apts	76	12/28/2015
Phyllis Wheatley Apts	70	12/30/2015
Radnor Towers	95	11/9/2015
Overlook Ridge	93	12/1/2015
John L. Glenn Residential Center	82	4/7/2016
The Preserve At Metro Center	83	4/7/2016

**Table 39 - Public Housing Condition**

**Describe the restoration and revitalization needs of public housing units in the jurisdiction:**

According to MDHA's 5 Year PHA Plan (June 2014), the Agency completed major property renovations to Edgefield Manor Cottages and several Neighborhood Housing Units consisting of approximately 149 apartment renovations.

Agency has completed major renovation work at the I.W. Gernert Cottages and has completed about 140 apartment renovations of the 211 total apartments at Madison Towers. The Madison Tower work was completed by end of year 2014, and reflects that approximately 310 apartments have completely been renovated. The apartment renovations on these facilities consist of exterior site work improvements, complete interior apartment renovations consisting of new kitchens, cabinets, interior finishes, plumbing fixtures and new mechanical high efficiency heating and air-conditioning units.

The 5 Year PHA Plan continues effort to improve MDHA properties with a focus on renovating the Neighborhood Housing properties. This commitment has been previously slated in past year plans, and the Agency is committed to maintaining consistent planning for its residents. This work provided an additional 56 apartments that MDHA has completely renovated. These renovations included new interior finishes, new apartment fixtures, new cabinets, new high efficiency heating and air-conditioning mechanical units and exterior work.

This year's plan continues to follow the Agency five year plans to improve the Agency Properties that have not had any major renovation improvements. It is the Agency intention to continue improving our properties to provide affordable housing opportunities in a safe environment for all our residents and in doing so improve the appearance and livability of our properties for our residents.

MDHA plans to completely demolish and rebuild housing units at its older properties, starting with James Cayce Homes. In March 2013, MDHA embarked on a planning process dubbed "Envision Cayce" to create a master plan for revitalizing Cayce public housing. The subsequent plan calls for creating a vibrant mixed-use, mixed-income neighborhood in an area that currently has a high concentration of poverty and few amenities and is isolated from the rest of the community. The mixed-income component includes a commitment to 1-for-1 replacement of all 716 units of public housing, as well as workforce and market rate housing, fully integrated.

The first mixed-income building at Cayce – Kirkpatrick Park – is under construction and will be comprised of 94 units – 36 affordable, PBRA-assisted units (0-80% AMI); 20 workforce units (80-120% AMI); and 38 market rate/unrestricted units. Site work has begun on the second mixed income property – Boscobel I – which will have 96 total units, including 50 affordable units; 24 workforce units; and 22 market rate/unrestricted units. MDHA plans to break ground on the third project in June 2018. Information about Envision Cayce is available at: <http://www.nashville-mdha.org/?p=1616>.

MDHA hopes to "Envision" similar redevelopment at its other older, family properties. In 2016, MDHA was awarded a \$500,000 Choice Neighborhoods Planning grant to support "Envision Napier and Sudekum". Planning efforts will focus on transforming distressed public housing as well as the surrounding neighborhoods of concentrated poverty into viable mixed-income areas. More information is available at: <http://www.nashville-mdha.org/choice-neighborhoods/>.

Planning is also underway for Edgehill Apartments.

### **Describe the public housing agency's strategy for improving the living environment of low- and moderate-income families residing in public housing:**

The "Envision" concept is intentionally designed to bring opportunities to the currently distressed sites. Master planning not only incorporates new housing typology and design, it incorporates neighborhood elements and people strategies. Through open meeting, events, and needs assessments, residents have a hand in how their community is planned.

In addition to the Envision effort, MDHA proposed the following actions in its 2017 PHA Plan:

1. Continue to participate in Connect Home, a HUD initiative to increase the number of low income households with access to broadband internet service. MDHA has partnered with other agencies, including, Google, Metro Nashville Public Schools, Metro Nashville Public Libraries, and the Martha O'Bryan Center. Year one results and year two goals include:

<b>New Internet Connections</b>	<b>Year 1 Actual (Oct. 15–Sept. 16)</b>	<b>Year 2 Goals (Oct. 16–Sept. 17)</b>
# of newly connected public housing households <b>w/ kids (ages 4-19)</b>	Cayce Place 72 Edgehill 97 Total: 169	211
# of newly connected kids (ages 4-19) in public housing households (if known)	169	211
# of newly connected public housing households <b>of all kinds</b> (households w/ kids, senior housing, etc.)	Cayce Place 72 Edgehill: data unavailable	
<b>Devices &amp; Digital Literacy Trainings</b>	<b>Year 1 Actual (Oct. 15–Sept. 16)</b>	<b>Year 2 Goals (Oct. 16–Sept. 17)</b>
# of free or low-cost <b>computers &amp; laptops</b> distributed to public housing households	Cayce Place 72 Edgehill 97 Total 169	211
# of free or low-cost <b>tablets</b> distributed to public housing households	0	
# of residents who completed digital literacy trainings	Cayce Place 72 Edgehill 97	211

2. Pursue best housing practices by improving the quality and capability of Agency staff in all areas. In the first year, concentrate on property maintenance staff for enhanced training, testing, and placement. *Have all Section 8 Specialists complete Nelrod HCV Income and Rent Calculation training and pass certification exam by 2017.*

*Affordable Housing began a leasing assistants' training program for new leasing assistants in 2017. Certified Financial Management training will be added for 2017.*

## MA-30 Homeless Facilities and Services – 91.210(c)

### Introduction

Metropolitan Nashville-Davidson County has a consolidated city-county government, which encompasses the same geographic area as the Nashville-Davidson County Continuum of Care (CoC). MDHA, which is the local PHA and Consolidated Plan lead agency, serves as the lead entity of the CoC. In addition, the Metropolitan Government of Nashville-Davidson County created the Metropolitan Homelessness Commission (MHC) as the city’s body to address homelessness. The CoC and MHC are working closely together to explore the opportunity of creating a consolidated board structure to serve as the CoC Governance Board. This move has created an increased interest and expanded stakeholder participation in the work of the CoC.

The following bed inventory is based on the 2017 HUD Housing Inventory Count (HIC) Report and the Nashville Cold Weather Community Response Plan inventory, which lists seasonal and overflow beds.

**Facilities and Housing Targeted to Homeless Households**

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)	199	11	140	777	n/a
Households with Only Adults	993	373	421	423	n/a
Chronically Homeless Households	n/a	n/a	n/a	199	n/a
Veterans	9	n/a	9	429	n/a
Unaccompanied Youth	2	20	10	10 (Fisk Court)	7 (Fisk Court)

**Table 40 - Facilities and Housing Targeted to Homeless Households**

**Describe mainstream services, such as health, mental health, and employment services to the extent those services are used to complement services targeted to homeless persons**

Social service agencies in Nashville-Davidson County report that they refer people to mainstream services including health; mental health; employment; and federal programs such as TANF, LIHEAP, SNAP, Medicare/Medicaid, Social Security offices, etc.

Implementation of the coordinated entry system (CES) increased collaboration around the services provided to people experiencing homelessness. Specifically, Nashville-Davidson County has implemented a housing navigation process among 19 service provider partners. Housing navigators are case managers, street outreach workers, and social workers who are employed by social service agencies working with people experiencing homelessness. All housing navigators must participate in an annual training provided by MHC to learn how to enter people into the CES using HMIS as the database and link them to services including some mainstream services. The goal is to provide a coordinated and streamlined effort for people experiencing homelessness. A monthly housing navigator meeting provides ongoing educational and information exchange opportunities to help housing navigators learn about mainstream and other resources that can benefit their clients.

Housing navigators work for street outreach programs, mental health providers, one health provider running a Downtown clinic focused on people experiencing homelessness, emergency shelter providers, and social service agencies that serve all subpopulations in the county. While these partnerships continue to be valuable, conversations continue about how to strengthen mainstream connections and bring in state and local government providers to leverage available resources.

Efforts are underway to strengthen the collaboration between different sectors to coordinate services across health care/hospital, mental health, correctional, and shelter providers.

**List and describe services and facilities that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. If the services and facilities are listed on screen SP-40 Institutional Delivery Structure or screen MA-35 Special Needs Facilities and Services, describe how these facilities and services specifically address the needs of these populations.**

The following is a list of service providers that participate in the CoC, partner with MHC, and/or are listed in the community's resource guide (called Where to Turn in Nashville). All serve the needs of people who have been experiencing homelessness. At this time, our community lacks a coordinated effort to partner more effectively with the faith-based community, in particular with congregational programs. However, community leaders believe that the effort to consolidate the work of the CoC Governance Board and the Metropolitan Homelessness Commission will result in a more extensive outreach to all stakeholders including congregations.

<b>Emergency Shelter Providers</b>	
Nashville Rescue Mission	Provides year-round emergency shelter for people experiencing literal homelessness in two locations: One for single adult men, the other for single adult women and women with children under the age of 18. The programs provide a bed, a shower and three meals and offer case management assistance to link people with transitional and permanent housing programs.
Room In The Inn	Runs a Day Shelter program year-round for all populations, with a main focus on single adults experiencing long-term homelessness (high percentage of chronic homeless populations). Runs a seasonal winter shelter program in partnership with congregations to offer between 200 and 300 beds each night between Nov. 1 and March 31. As part of the seasonal winter sheltering, Room In The Inn runs a weekly youth shelter (rotating locations with Oasis Center and LaunchPad). Provides a Guest House as an alternative to arrests for publicly intoxicated persons. Provides recuperative care beds for medically fragile individuals recovering from recent hospitalization, illness, or injury.
Safe Haven Family Shelter	Provides 10 emergency shelter rooms for families with children who are literally homeless. The families can be single-parent and/or dual parent households.
Metro Government	Provides seasonal overflow shelter that opens at 25 degrees Fahrenheit. Shelter capacity depends on available shelter locations, which are make-shift locations at Metro facilities (Fairgrounds, Parks Centers, etc.)
Oasis Center	Provides year-round youth beds for 13-17 year-olds. Offers seasonal winter sheltering for 18-24-year-olds in partnerships with LaunchPad and Room In The Inn from Nov. 1-March 31.
LaunchPad	Offers seasonal winter sheltering for 18-24-year-olds in partnerships with Oasis Center and Room In The Inn from Nov. 1-March 31.
YWCA	Runs the largest domestic violence shelter in Middle Tennessee.
<b>Transitional Housing Providers</b>	
Aphesis House	Provides transitional services for men seeking recovery after seasons of incarceration, addiction, and homelessness.

Dismas House	Transitional housing facility for men who have been released from a Tennessee correctional facility.
Isaiah 58	Provides halfway homes for men and women.
Magdalene House	Provides housing, education and job training for women with histories of substance abuse and prostitution.
Matthew 25	Provides supportive transitional housing, job placement assistance, alcohol and drug counseling, life skills training, and housing location services to homeless men. Transitional Housing is for men only who are 21+, already employed, homeless OR Veterans who are working or not working, but are willing and able to work.
Men of Valor	Provides a re-entry program for men while they are still incarcerated and beyond.
Mending Hearts	Provides a recovery program for women with prior addiction to drugs and/or alcohol.
Morning Star Sanctuary	Provides transitional housing (and emergency beds) for both adults and children who have left domestic violence situations.
Operation Stand Down	Serves veterans with GPD, SSVF, outreach, and other comprehensive services to prevent and end veteran homelessness.
Phases	Provides an employment-oriented halfway house for women overcoming addiction.
Recovery Community	Provides safe and affordable housing for both men and women with alcohol and drug dependency issues. It also offers recovery support services, case management and intensive outpatient treatment.
Renewal House	Provides a residential program for mothers offering safe, drug-free living combined with wrap-around services such as intensive case management, life skills and parenting education and vocational assistance. Mothers and children live together in independent apartments for up to 15 months while the mother receives treatment for her addiction.
Room In The Inn	Runs GPD program beds for Veterans.
The Mary Parrish Center	Provides a transitional housing program for women and children who have become homeless as a direct result of domestic and/or sexual violence.
Nashville Rescue Mission	Provides transitional housing program for men and women in recovery.
The Next Door	Provides a six month residential transitional living program that offers recovery support services for women with an addiction to alcohol and drugs.
The Salvation Army	Provides safe, affordable transitional housing and social work case management for people who are homeless in two programs: one for families and single women, the other for men.
Transitions Housing	Provides safe housing and services for men and women trying to recover from addiction.
Welcome Home Ministries	Provides affordable transitional housing for mostly homeless men recovering from addiction, and supportive services for Veterans of War in partnership with the Department of Veterans Affairs (GPD).

Women of Worth Recovery Home	Provides sober living environment and recovery programs for women overcoming addiction.
YANA Recovery House	Provides supportive living environment for women recovering from alcoholism and other addictions.
YWCA	Provides ongoing support, including utility and rental payments, to many of the women who have successfully completed the YWCA's shelter program.
<b>Permanent Housing for people experiencing homelessness</b>	
MDHA	Public Housing Agency of Nashville.
Room In The Inn	Provides 38 permanent supportive housing units mostly for people who experienced long-term homelessness and graduated from their programs.
Urban Housing Solutions	Urban Housing Solutions owns and operates 30 properties in Nashville and Madison at a low market rate. Specialized housing for the following individuals and/or households: Single adults who are homeless; Households in which all members are homeless and at least one member has a documented mental illness, physical or developmental disability; Households in which all members are homeless and at least one member is in recovery from drug and/or alcohol addiction; Households in which one or more members is documented as HIV-positive; Persons who are deaf or hard of hearing; Adults with intellectual and developmental disabilities.
Welcome Home Ministries	Offers permanent housing units for Veterans.
<b>Supportive Services – all programs mentioned above provide some form of supportive services. The following providers are highlighted to show specialized services.</b>	
Catholic Charities	Focuses on implementing Rapid Re-housing to transition people out of their programs into permanent housing as quickly as possible.
Centerstone	Provides Critical Time Intervention case management for people who have transitioned from literal homelessness to permanent housing. Referrals are made through the community's coordinated entry system.
Mental Health Cooperative	Provides intensive case management, psychiatric/clinic services and 24-hour emergency psychiatric services, children and youth psychiatric services.
Park Center	Provides various outpatient services for persons diagnosed with a serious and persistent mental illness, including housing, clinic and case management, psychiatric rehabilitation day program, co-occurring disorder services, employment training and support and SSI/SSDI Outreach (SOAR).
Safe Haven Family Shelter	Focuses on implementing Rapid Re-housing to transition people out of their programs into permanent housing as quickly as possible.
The Salvation Army	Focuses on implementing Rapid Re-housing to transition people out of their programs into permanent housing as quickly as possible.
US Dep. Of Veterans Affairs	Provides comprehensive services to eligible Veterans experiencing homelessness from street outreach to case management, medical services and other benefits, and provide

	support services once Veterans are in housing.
<b>Street Outreach – the following agencies have street outreach teams to serve different populations (as listed)</b>	
Mental Health Cooperative	Focus on people with mental health issues, but will work with all populations experiencing literal homelessness to connect them to services. Have trained housing navigators on the outreach team.
Metro Social Services	The outreach team works with the Metropolitan Homelessness Commission on linking people outdoors to the CES and coordinating with other housing navigators to avoid duplication of services. Focus on all populations experiencing literal homelessness.
Oasis Center	Focus on youth. Have trained housing navigators on the outreach team.
Open Table Nashville	Serve all populations experiencing literal homelessness to connect them to permanent housing as quickly as possible. Have trained housing navigators on the outreach team.
Operation Stand Down	Focus on Veterans. Have trained housing navigators on the outreach team.
Park Center	Focus on people with mental health issues, but will work with all populations experiencing literal homelessness to connect them to services. Have trained housing navigators on the outreach team.
VA	Focus on Veterans. Have trained housing navigators on the outreach team.

## MA-35 Special Needs Facilities and Services – 91.210(d)

### Introduction

Persons with incomes at or below 80% AMI and who have been medically diagnosed with HIV/AIDS are eligible to receive HOPWA-funded assistance. MDHA works closely with the several nonprofits and Metro agencies to identify needs of the HIV/AIDS community and uses HOPWA funds to address gaps that cannot be met by various resources. MDHA awards HOPWA entitlement funds to area nonprofits (Sponsors) that provide affordable housing; education; case management; housing services, such as rent and utility deposits; food and nutrition support; transportation assistance; outreach; and other client-related services to persons with HIV/AIDS. Forty-two percent of 2017 program funds were allocated to rental assistance, and MDHA plans to maintain this level of allocation for the foreseeable program years.

During the last program year, HOPWA Sponsors provided short-term rent, mortgage and / or utility payments (STRMU) to 273 households, assisting 443 persons living with HIV/AIDS and their family members. HOPWA funds were provided to 53 households for rent subsidies at permanent housing (PH). Program funds also were used to assist with needs other than housing. Sponsors reported that 2,168 individuals were provided supportive services such as bus passes for transportation to medical appointments, assistance with utility payments, nutrition services such as home-delivered meals, and case management.

**HOPWA Assistance Baseline Table**

Type of HOWA Assistance	Number of Units Designated or Available for People with HIV/AIDS and their families
TBRA	0
PH in facilities	53
STRMU	273
ST or TH facilities	0
PH placement	157

**Table 41– HOPWA Assistance Baseline**

**Data Source:** HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

**Including the elderly, frail elderly, persons with disabilities (mental, physical, developmental), persons with alcohol or other drug addictions, persons with HIV/AIDS and their families, public housing residents and any other categories the jurisdiction may specify, and describe their supportive housing needs**

The primary housing and supportive needs of these subpopulations (the elderly, frail elderly, persons with disabilities, persons with HIV/AIDS and their families, persons with alcohol or drug addiction, victims of domestic violence, and persons with a criminal record and their families) were determined by input from both service providers and the public through public meetings and stakeholder interviews as a part of the community input for the Metropolitan Nashville and MDHA's fair housing analysis which was conducted in the Summer of 2017. These needs include affordable, safe housing opportunities in areas with access to transportation, commercial and job centers, and social services, and for education regarding fair housing rights and actions that can be taken in the event those rights are violated.

Persons with disabilities often require accessible features and ground floor housing units. Persons with disabilities are shown to be fairly evenly distributed across communities Metro Nashville. However, their locations may not provide the access to services they need. In addition to the housing conditions themselves, persons with disabilities need access to sidewalks and transportation options as well. These needs also apply to the elderly population that often finds that disabilities arise as they age.

Victims of domestic violence need safe housing, removal of barriers to relocation, and for perpetrators to be held accountable. Persons with mental health and or substance abuse issues need access to housing with fewer barriers due to past history, stigmas, etc. Persons with HIV/AIDS need housing options that are able to work with issues stemming from stigmas, lack of employment and other issues due to health complications. Persons with criminal records and their families may be disqualified from public housing or Section 8 rental assistance, and accordingly, assistance with housing for low-income members of this subpopulation must be provided by other nongovernmental organizations.

### **Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing**

Information gathered through mental health service providers of Metro Nashville indicates that supportive housing is one of the greatest needs for people with mental health and substance abuse disorders after being discharged from inpatient treatment. Area hospitals have a positive reputation for staffing social workers to assist with locating and coordinating housing before discharge.

The Hospital-to-Home project works to coordinate reentry for homeless individuals that have a high rate of hospital visits, high health care costs, and poor health outcomes. The project provides health care and supportive services to homeless persons leaving health care institutions in the community.

The Tennessee Department of Mental Health and Substance Abuse Services partners with Centerstone Community Mental Health Centers, Inc. to provide transitional housing and supportive services options to individuals exiting mental health facilities. At discharge, additional outreach and services are provided to help maintain stability.

The Tennessee Cooperative Agreement to Benefit Homeless Individuals-State (TN-CABHI) initiative will work to provide assistance to homeless veterans and chronically homeless individuals with mental illness or substance abuse issues. The initiative will coordinate with the Metro Homelessness Commission to provide better access and availability of services and treatments options.

**Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. 91.315(e)**

MDHA will make it a priority to provide new affordable housing opportunities with the construction of new affordable housing, implementation of rapid rehousing and rental deposit programs for the homeless, permanent housing placement services for persons living with HIV/AIDS and by addressing housing barriers. Another housing priority will be to preserve affordable housing availability through various rental and homeowner rehabilitation projects, renter counseling for public housing residents, short-term and rental assistance and facility based operations support for persons living with HIV/AIDS, and homeless prevention activities.

In order to meet the priority to support homeless person and persons with HIV/AIDS, MDHA will continue to provide supportive services for persons with HIV/AIDS and to support the operations of homeless shelters and street outreach.

MDHA will also provide self-sufficiency opportunities to low-income persons and small businesses through its youth programs, employment programs, and microenterprise activities.

Additionally, MDHA will promote neighborhood revitalization through activities that will invest in underserved areas.

## Barriers to Affordable Housing – 91.210(e)

### Negative Effects of Public Policies on Affordable Housing and Residential Investment

The following are the negative effects of public policies that have been identified as barriers to affordable housing during the consultation process and in ongoing discussions on the City's affordable housing crisis.

1. *Availability and cost of land* > Land is at a premium, especially along transportation corridors and near services and commercial activity where it is desirable to create affordable housing in these areas so that LMI households have greater access to transportation and other opportunities. However, the cost of land makes it financially challenging to create affordable housing without a subsidy or incentive.
2. *Lack of mandatory inclusionary zoning* > The State of Tennessee does not allow cities to implement inclusionary zoning.
3. *Zoning/density* > Zoning or density requirements sometimes make affordable housing development infeasible. Minimum density requirements can make some affordable housing projects cost-prohibitive. Conversely, “down zoning” prevents certain types of housing from being constructed.
4. *Property taxes* > Following the 2017 reappraisal, property values across Nashville increased by an average of 37%. Some areas saw much sharper increases than others, as discussed in SP-10. For homeowners with limited income, higher property taxes created precarious financial situations that threatened housing stability. Property taxes also affect affordable housing developers, especially those with rent-restricted properties (such as LIHTCs) that cannot raise rents to offset increased property taxes.
5. *Scarcity of funding* > With the exception of 2018, Federal funds for affordable housing have been declining since 2010, and 9% LIHTCs are awarded on a competitive basis limiting the extent of use in Davidson County. Only in recent years (since 2013) has Nashville had a housing trust fund.
6. *Prohibition on local hire requirements* > The State of Tennessee prohibits localities from requiring that contractors working on city-funded construction

projects hire local residents, which would allow local residents opportunities to earn wages and assist with housing costs.

In addition to these policies, other barriers to affordable housing include:

- Negative perception (NIMBYism)
- Housing discrimination
- Criminal history
- Credit challenges.

## MA-45 Non-Housing Community Development Assets – 91.215 (f)

### Introduction

The following tables provide a snapshot of local economic conditions in Nashville, comparing the ability of the local work force to satisfy the needs of local businesses. Data sources are cited after each table.

### Economic Development Market Analysis

#### Business Activity

Business by Sector	Number of Workers	Number of Jobs	Share of Workers %	Share of Jobs %	Jobs less workers %
Agriculture, Mining, Oil & Gas Extraction	331	364	0	0	0
Arts, Entertainment, Accommodations	39,003	54,330	14	13	-1
Construction	9,055	17,154	3	4	1
Education and Health Care Services	56,049	86,743	21	21	1
Finance, Insurance, and Real Estate	20,010	30,057	7	7	0
Information	8,127	12,629	3	3	0
Manufacturing	17,020	19,840	6	5	-1
Other Services	10,528	16,470	4	4	0
Professional, Scientific, Management Services	25,742	37,460	10	9	0
Public Administration	0	0	0	0	0
Retail Trade	32,357	46,587	12	11	0
Transportation and Warehousing	11,714	21,067	4	5	1
Wholesale Trade	13,299	25,341	5	6	1
Total	243,235	368,042	--	--	--

**Table 3 - Business Activity**

**Data Source:** 2009-2013 ACS (Workers), 2013 Longitudinal Employer-Household Dynamics (Jobs)

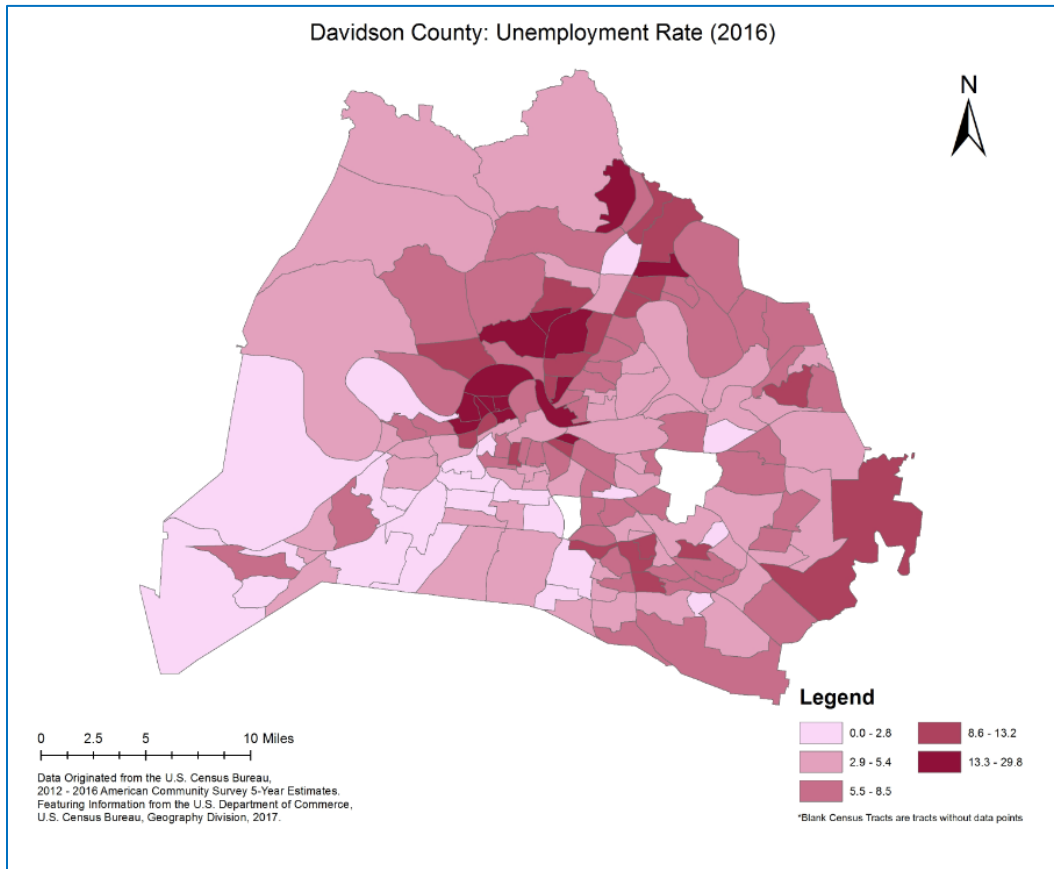
## Labor Force

Total Population in the Civilian Labor Force	354,145
Civilian Employed Population 16 years and over	322,971
Unemployment Rate	8.80
Unemployment Rate for Ages 16-24	27.33
Unemployment Rate for Ages 25-65	6.06

**Table 4 - Labor Force**

**Data Source:** 2009-2013 ACS

The following map uses 2012-2016 ACS 5 Year Estimate to show the unemployment rate for each Census tract in Davidson County.



Occupations by Sector	Number of People
Management, business and financial	82,928
Farming, fisheries and forestry occupations	15,646
Service	31,749
Sales and office	86,845
Construction, extraction, maintenance and repair	21,673
Production, transportation and material moving	15,144

Table 44 – Occupations by Sector

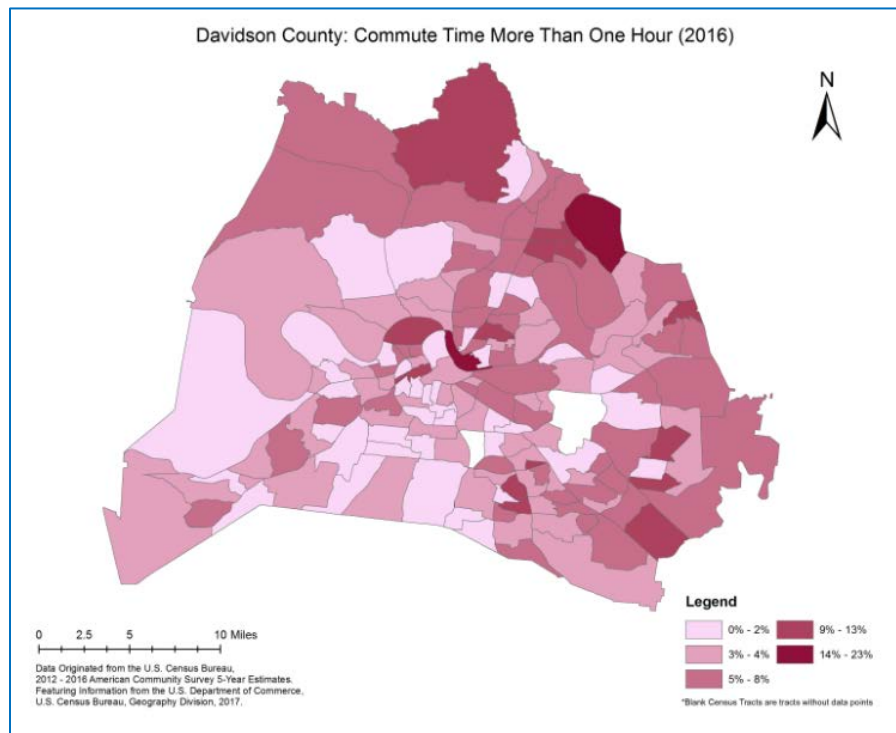
Data Source: 2009-2013 ACS

Travel Time		
Travel Time	Number	Percentage
< 30 Minutes	206,527	69%
30-59 Minutes	84,572	28%
60 or More Minutes	9,932	3%
<b>Total</b>	<b>301,031</b>	<b>100%</b>

Table 45 - Travel Time

Data Source: 2009-2013 ACS

The following map shows the percentage of residents in each census tract with commute time more than an hour.



**Education:**

**Educational Attainment by Employment Status (Population 16 and Older)**

Educational Attainment	In Labor Force		Not in Labor Force
	Civilian Employed	Unemployed	
Less than high school graduate	23,372	4,418	17,307
High school graduate (includes equivalency)	54,807	6,539	21,526
Some college or Associate's degree	73,881	6,246	16,616
Bachelor's degree or higher	115,245	4,661	15,858

**Table 46 - Educational Attainment by Employment Status**

**Data Source:** 2009-2013 ACS

**Educational Attainment by Age**

	Age				
	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
Less than 9th grade	1,645	4,837	4,345	5,851	5,511
9th to 12th grade, no diploma	7,258	9,181	8,127	12,756	7,497
High school graduate, GED, or alternative	19,074	22,396	19,382	41,125	21,110
Some college, no degree	30,419	23,720	16,918	33,419	13,186
Associate's degree	1,822	7,127	5,340	10,362	2,287
Bachelor's degree	10,467	35,360	20,983	31,353	9,001
Graduate or professional degree	675	15,081	12,630	20,574	8,966

**Table 47 - Educational Attainment by Age**

**Data Source:** 2009-2013 ACS

**Educational Attainment – Median Earnings in the Past 12 Months**

Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	17,653
High school graduate (includes equivalency)	24,737
Some college or Associate's degree	31,012
Bachelor's degree	42,402
Graduate or professional degree	56,565

**Table 48 – Median Earnings in the Past 12 Months**

**Data Source:** 2009-2013 ACS

**Based on the Business Activity table above, what are the major employment sectors within your jurisdiction?**

Current data provided by the Nashville Career Advancement Center (NCAC) reveals the largest annual opening projections are in the Sectors of:

- Healthcare Practitioners and Technical Occupations and Healthcare Support Occupations, which includes numerous occupations in the healthcare sector, such as Physicians assistants, Radiologic Technologists, EMT, Paramedics, Dental and Medical Assistants.
- Construction and extraction occupations, which includes Construction Trades Workers, Helpers in Construction Trades, and Other Construction Related Workers.
- Computer Programmers, Database Administrators, Advanced Manufacturing Production Workers, Welders and Heavy and Tractor-Trailer Truck Drivers.

SOC	Description	2014 Jobs	2024 Jobs	2014 - 2024 Change	Annual Openings	Avg. Hourly Earnings
11-0000	Management Occupations	78,958	92,903	13,945	3,723	\$41.17
13-0000	Business and Financial Operations Occupations	52,015	64,851	12,836	2,727	\$31.29
15-0000	Computer and Mathematical Occupations	23,622	31,336	7,714	1,229	\$33.94
17-0000	Architecture and Engineering Occupations	17,083	19,673	2,590	837	\$33.44
25-0000	Education, Training, and Library Occupations	63,962	71,483	7,521	2,578	\$22.13
27-0000	Arts, Design, Entertainment, Sports, and Media Occupations	25,190	30,212	5,022	1,279	\$23.03
29-0000	Healthcare Practitioners and Technical Occupations	70,033	91,462	21,429	4,143	\$33.29
31-0000	Healthcare Support Occupations	31,288	40,767	9,479	1,869	\$13.50
35-0000	Food Preparation and Serving Related Occupations	100,969	123,947	22,978	6,628	\$10.59
37-0000	Building and Grounds Cleaning and Maintenance Occupations	39,874	45,841	5,967	1,624	\$11.80
39-0000	Personal Care and Service Occupations	37,831	45,750	7,919	1,893	\$11.82
41-0000	Sales and Related Occupations	119,606	138,066	18,460	6,032	\$17.66
43-0000	Office and Administrative Support Occupations	191,759	218,796	27,037	7,539	\$16.96
47-0000	Construction and Extraction Occupations	48,668	53,595	4,927	1,727	\$17.49
49-0000	Installation, Maintenance, and Repair Occupations	51,308	60,173	8,865	2,410	\$20.56
51-0000	Production Occupations	102,211	118,088	15,877	4,692	\$16.59
53-0000	Transportation and Material Moving Occupations	92,957	111,073	18,116	4,597	\$16.02
		1,147,334	1,358,015	210,681	55,526	\$20.45

Table provided by NCAC

## **Describe the workforce and infrastructure needs of the business community:**

The business community needs are specific education and training, or hard skills and soft skills. The top soft skills the business community is seeking are:

- Customer Service
- Problem Solving
- Interpersonal Skills
- Customer Service Skills
- Time Management
- And, Flexibility

In the Promise Zone there is a need for living wage, or middle skill, jobs.

**Describe any major changes that may have an economic impact, such as planned local or regional public or private sector investments or initiatives that have affected or may affect job and business growth opportunities during the planning period. Describe any needs for workforce development, business support or infrastructure these changes may create.**

Current economy allows for more employment opportunities for individuals with less skills. This results in individuals not investing in skill upgrades. During less successful economic time periods the skill upgrades are necessary for the individuals to be considered or maintained in employment.

According to the National League of Cities, “Nashville is a vibrant city at a critical moment. As a city with such rapid population growth, a diversified and booming economy, strong and changing neighborhoods, and significant international attention, Nashville faces the challenge of sustaining and expanding economic growth while also ensuring that all residents can benefit from that prosperity. While the city has experienced increased development, significant job growth, and low unemployment across the city-county, Nashville has also seen increased poverty and inequality, especially in specific neighborhoods and for communities of color.”

**How do the skills and education of the current workforce correspond to employment opportunities in the jurisdiction?**

In general, participants in the Middle Tennessee Region need at least a High School Diploma or High School Equivalency Diploma. A good percentage of individuals in the region have achieved “1 to 3 Years of College or a Technical School”, and small

percentages have attained an “Associate’s Degree.” Most entry level positions require certification, “1 to 3 Years of College or a Technical School”, or industry recognized short-term training credentials.

Compared to Davidson County, the Promise Zone underperforms in degree/certification attainment which would lead to living wage, or middle skill, jobs. According to 2016 data, 44.5% of residents in Davidson County have an Associate’s Degree or higher (2016), compared to 31.87% of residents in the Nashville Promise Zone. Also compared to Davidson County, the Promise Zone has a higher population of jobholders who hold multiple jobs. This can be an indicator of an insufficiency of living wage jobs/workers who can qualify for living wage jobs – 7.56% for Davidson County but 9.56% for the Promise Zone (2015).

**Describe any current workforce training initiatives, including those supported by Workforce Investment Boards, community colleges and other organizations. Describe how these efforts will support the jurisdiction's Consolidated Plan.**

The Middle Tennessee Workforce Development Board focuses on providing workforce training in the specified in-demand sectors. Additionally, the participants must meet specific eligibility criteria that places them in a priority population.

In 2017 Nashville was named a Talent Hub by Lumina Foundation. Nashville’s work will ensure equitable access (Equity Focus: African-Americans, Low-income households) to Nashville’s prosperity through postsecondary education attainment leading to careers. Working together, the community will build an environment where there is no “wrong door” for adults who desire to enter or re-enter college. Proposed work will support adult postsecondary attainment in the highest need areas of the city: Nashville’s Promise Zone neighborhoods. By leveraging Tennessee’s free technical and community college tuition for adults (beginning Fall 2018) and Federal Student Aid, coupled with Middle Tennessee Reconnect community’s proven model of high-touch advising services and resources, leveraging the Financial Empowerment Zone, Mayor’s Office and faith and community-based organizations, the community will align programs and services to increase college enrollment, persistence and success. Nashville State Community College and TCAT Nashville are committed to building a student-centered, completion-oriented culture for adults. Employers will also play a key role in the Talent Hub by providing students and graduates internships, learn-and-earn opportunities, and full-time careers in high-growth sectors upon completion of a postsecondary degree or credential.

**Does your jurisdiction participate in a Comprehensive Economic Development Strategy (CEDS)? If so, what economic development initiatives are you undertaking that may be coordinated with the Consolidated Plan? If not, describe other local/regional plans or initiatives that impact economic growth.**

The Greater Nashville Regional Council (GNRC) prepares the CEDS for the 13-county Middle Tennessee area. The most current CEDS is available at: [http://www.gnrc.org/wp-content/uploads/2011/12/CEDS\\_FY18-22\\_Adopted.pdf](http://www.gnrc.org/wp-content/uploads/2011/12/CEDS_FY18-22_Adopted.pdf). To ensure consistency with the CEDS and coordination with GNRC's efforts, the Council participated in the Consolidated Plan strategic planning session. The 5 goals outlined in the CEDS are

1. Educate to Train > The key to a strong economy is a well-trained workforce with an educational background that not only provides the necessary skills to perform the required job duties, but also promotes quality craftsmanship and professionalism.
2. Innovate to Lead > Regions that promote an entrepreneurial spirit, ingenuity, and innovation are better positioned to dictate employment and investment trends in their chosen industries.
3. Invest to Build > The economy must be built upon sound infrastructure that moves people, goods, energy, and resources efficiently throughout the market.
4. Grow to Prosper > The marketplace must be positioned to expand if it is to maximize the return on investment and provide new opportunities for the next generation.
1. Plan to Sustain > Sustainable growth is a result of intention and long-term planning and will ensure that communities across the region have the opportunity to share in prosperity without sacrificing core values.

Regarding other initiatives that impact economic growth, the Middle Tennessee Workforce Development Board participates in Regional Planning with other Workforce Boards in the State. The Region encompassed 40 counties.

In 2017 Nashville was awarded an Equitable Economic Development Fellowship by The National League of Cities. Through its participation in the EED Fellowship, Nashville will work to develop a people-centered strategy for retention and growth of urban manufacturing jobs in the Promise Zone. While Nashville has experienced increased development, significant job growth, and low unemployment across the county, it has also seen increased poverty and inequality, especially in specific neighborhoods and for communities of color. Being designated as a Promise Zone provides the opportunity to

access preference points to leverage federal funding across a number of federal agencies to eliminate poverty in the targeted geographic area of the Zone, which encompasses many of the City's high-poverty neighborhoods.

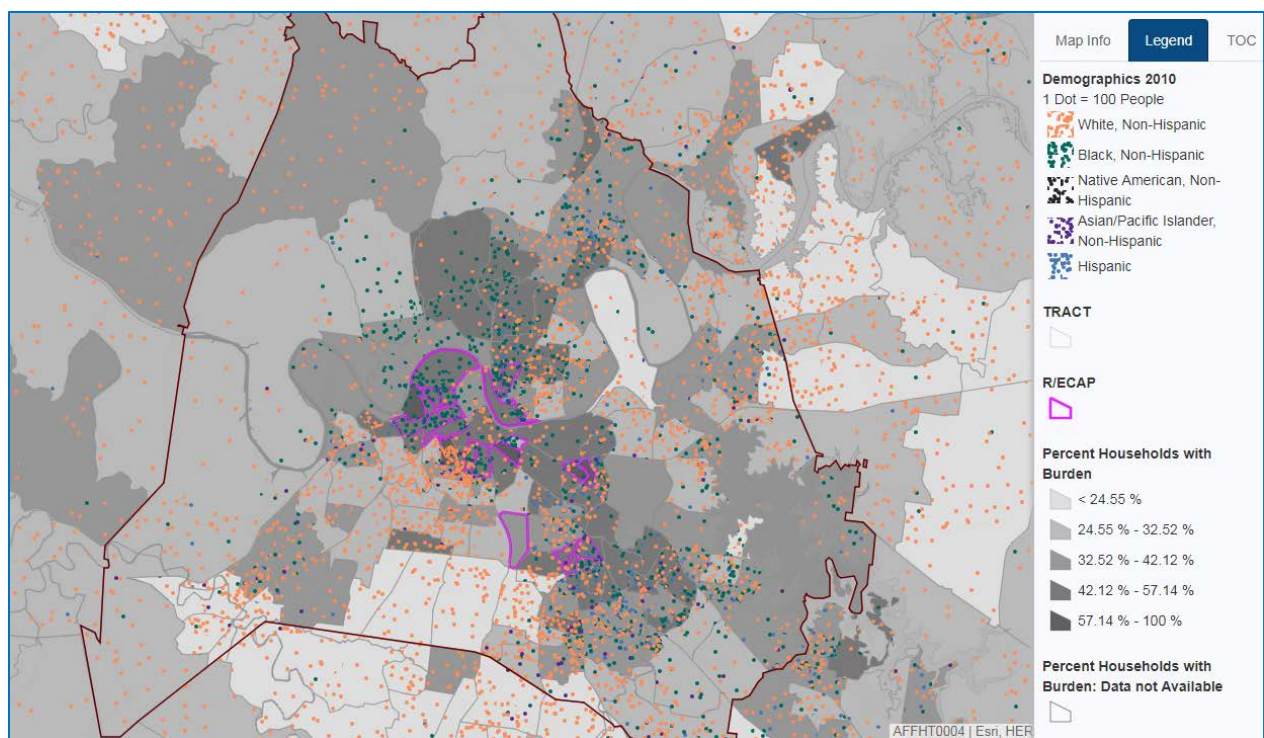
Currently the Nashville International Airport is undergoing significant expansions, with \$1.2 billion in construction underway or planned. As result, there is an initiative to hire Promise Zone residents for the project, as stated in the RFP by Metropolitan Nashville Airport Authority (MNA). The Nashville Promise Zone Implementation Partners, along with the Mayor's Office, have been asked to advise on the best way of accomplishing this goal.

## MA-50 Needs and Market Analysis Discussion

For this discussion, “area of low income concentration” is defined as a census tract that has a poverty rate that exceeds 40% or more of individuals in the census tract living at or below the poverty line. An “area of minority concentration” is defined as a census tract with a non-white population of 50% or more. These definitions are consistent with the definition of racially/ethnically concentrated areas of poverty (R/ECAPs) discussed in MDHA’s 2017 fair housing analysis. R/ECAPs are outlined in purple on the maps below.

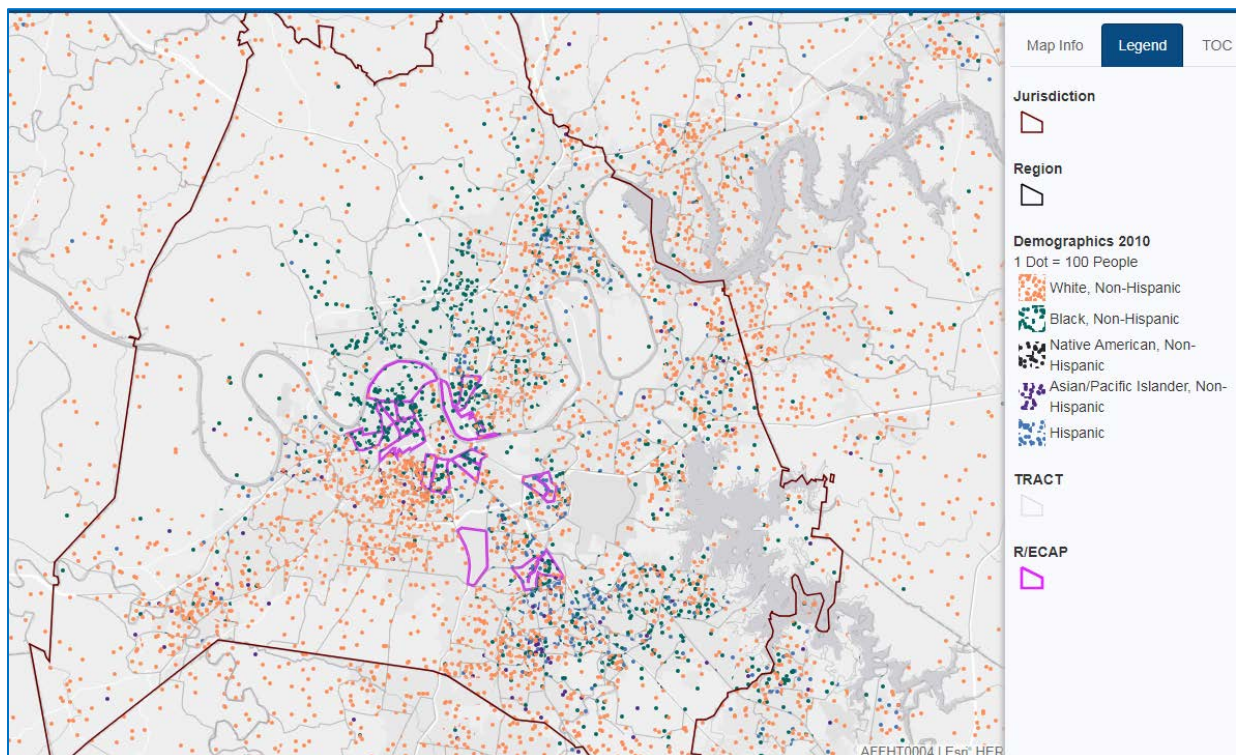
### Are there areas where households with multiple housing problems are concentrated? (include a definition of "concentration")

The following map shows housing needs (all 4 housing problems) by census tracts by race/ethnicity. The darker the shading, the greater the percentage of housing needs in the Census tracts. In Nashville, the areas with the greatest housing needs are concentrated toward the center of the city, extending to the northeast and southeast sections of town – in areas shown to be segregated. Although the R/ECAPs have high percentages of housing burdens, these issues can be found throughout the city. Black residents are the predominant group living in areas with the greatest housing burdens. There are also pockets of Hispanic residents living in these areas.



## Are there any areas in the jurisdiction where racial or ethnic minorities or low-income families are concentrated? (include a definition of "concentration")

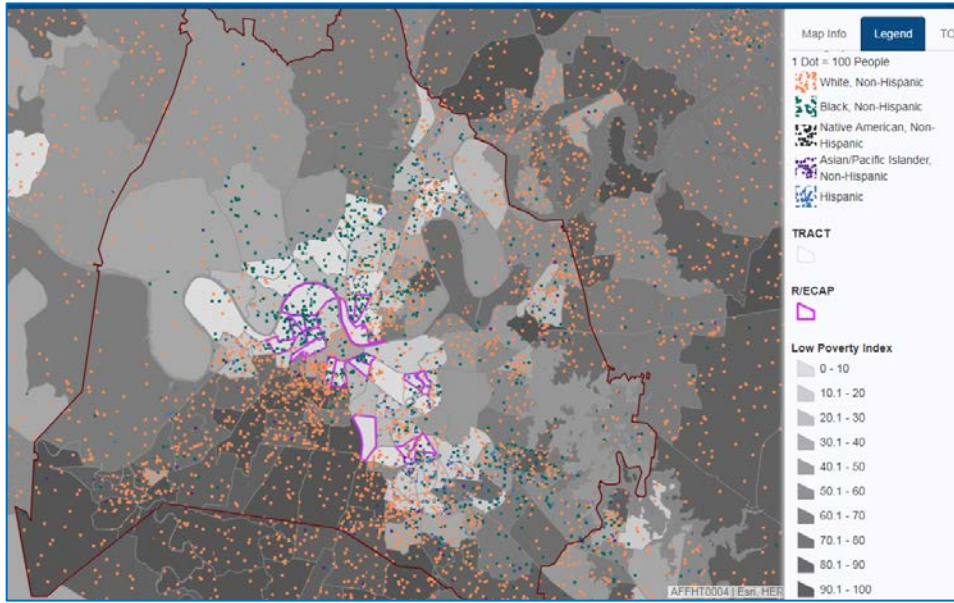
This map shows the distribution of the population by race and ethnicity in Nashville. As illustrated by the map, North Nashville, Bordeaux, as well as R/ECAP areas, are highly segregated, African-American areas. White populations are concentrated in areas to the south of downtown – Green Hills, Oak Hill, and Forest Hills – and more rural areas of the county. The southeastern area of the county shows integration but reflects a concentration of the Hispanic population.



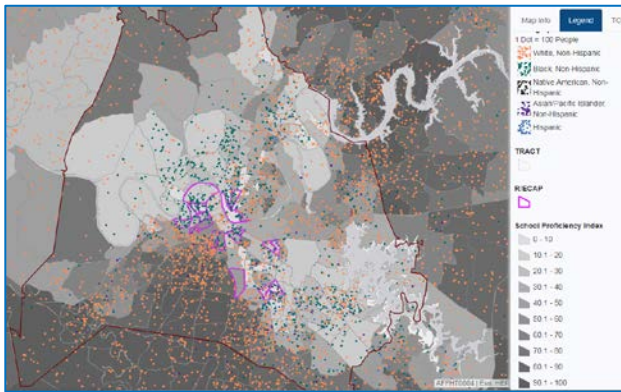
## What are the characteristics of the market in these areas/neighborhoods?

The following maps show a strong correlation between living in higher poverty areas and lower school performance, lower access to the labor market, greater reliance on public transportation, and a concentration of publicly supported housing. These areas are also segregated between White populations (better school performance, greater access to the labor market, less reliance on public transportation, less exposure to poverty, and little or no publicly supported housing) and Black and Foreign-born populations (lower school performance, less access to the labor market, greater reliance on public transportation, higher exposure to poverty, and concentrations of publicly supported housing).

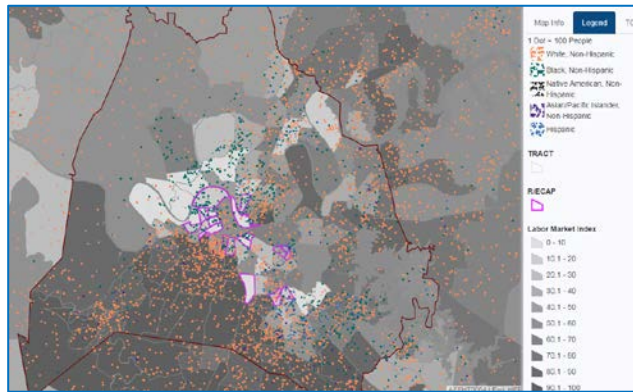
### Low Poverty Neighborhoods



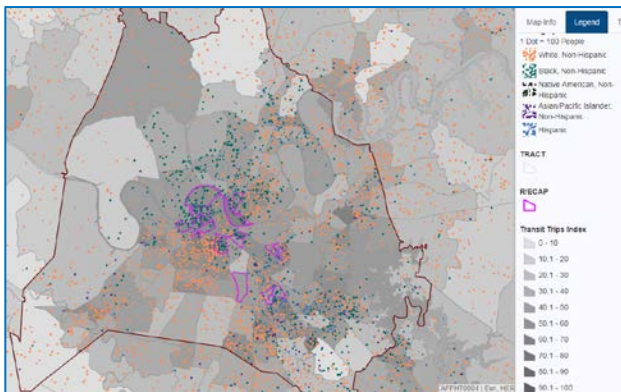
### School Proficiency



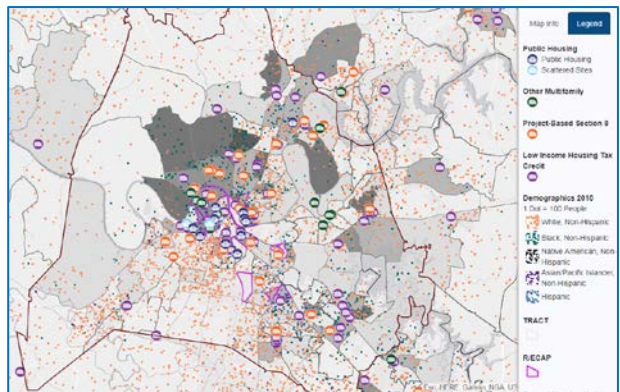
### Labor Market



### Transit Trips



### Publicly Supported Housing



## Are there any community assets in these areas/neighborhoods?

These areas are culturally rich and historically significant. The North Nashville area is home to three Historically Black Colleges and Universities – Fisk, Meharry Medical College, and Tennessee State University. Many of these areas border Nashville’s thriving downtown and/or are major transit corridors. Also, many of these areas are in the Nashville Promise Zone

## Are there other strategic opportunities in any of these areas?

There are several current and potential initiatives to increase access to opportunity for residents in these areas. These initiatives include:

### CDBG Place-Based Strategy

In developing the 2013-2018 Consolidated Plan, MDHA received significant input regarding the uneven distribution of resources in areas with high concentrations of poverty, which are also have high concentrations of minority populations. As a result, MDHA implemented a place-based strategy for community development to target the use of CDBG funds for certain activities. Census tracts in which MDHA Public Housing is located are within the Tier 2 targeted and funding has been used to assist with planning efforts, business technical assistance, neighborhood facility projects, and infrastructure improvements.

Opportunities exist with this Plan to create geographically priorities for CDBG and other funds.

### Promise Zone Designation

On June 6, 2016, Nashville was named a Promise Zone community. The Nashville Promise Zone boundary is 46-square miles and includes North Nashville and several of MDHA’s public housing properties, which are highly segregated, as well as part of the Nolensville Road corridor where the Hispanic population is concentrated. A close partnership between MDHA, the Mayor’s Office and with six (6) Implementation Partners will work to address the goals of creating jobs; increasing economic activity; improving educational opportunities; reducing violent crime; increasing access to affordable housing; and improving community infrastructure. One of the benefits of receiving Promise Zone designation is the ability of organizations that serve residents in the Promise Zone to receive preference points in certain federal funding opportunities announced by Promise Zone partner agencies.

### Transit Oriented Development

Transit Oriented Development (TOD) is one of the initiatives in Nashville’s Housing Toolkit included in the *Housing Nashville* report. TOD is focused on using public

investment for mixed-income, mixed-use development along Nashville’s highest capacity corridors – Gallatin Pike, Murfreesboro Road, Nolensville Pike, Charlotte Pike, and the Northwest Corridor.

## Strategic Plan

### SP-05 Overview

#### Strategic Plan Overview

The Strategic Plan identifies the priority needs for the Metro Nashville-Davidson County Consolidated Plan and describes the strategies that will be undertaken over the next five years to address these needs. The Strategic Plan is shaped by the Needs Assessment, Market Analysis, and public input.

The following sections are included in the Strategic Plan:

#### Geographic Priorities

Geographic areas in Davidson County prioritized for funding allocations are described in this section.

#### Priority Needs

Priority needs are the needs that will be addressed by the goals outlined in the Strategic Plan, as well as the rationale for establishing allocation priorities, is included.

#### Influence of Market Conditions

This section includes a discussion on how the characteristics of the housing market influenced decisions on using funds for rental assistance, the production of new units, rehabilitation of existing units, and the acquisition of units.

#### Anticipated Resources

The estimated resources that are expected to be available to address priority needs are provided in this section.

#### Institutional Delivery System

This section describes the framework for how MDHA will carry out the administration of the Plan.

## Goals

In this section are the specific goals for addressing the priority needs with outcome indicators.

## Public Housing

How the Plan will meet the needs of public housing residents and public housing development is discussed in this section.

## Barriers to Affordable Housing

This section outlines strategies for ameliorating any negative effects of public policies that serve as barriers to affordable housing identified in the Market Analysis. Barriers considered include: tax policies affecting land and other property, land use controls, zoning ordinances, and policies that affect the return on residential investment.

## Homelessness Strategy

The Homelessness Strategy describes strategies for reducing and ending homelessness through outreach, shelter activities, rapid re-housing, and homeless prevention and the consideration of housing and supportive services needed in each stage of the process.

## Lead-Based Paint Hazards

How MDHA will address lead-based paint hazards is presented in this section.

## Anti-Poverty Strategy

The Anti-Poverty Strategy summarizes initiatives for reducing the number of poverty-level families in Nashville.

## Monitoring

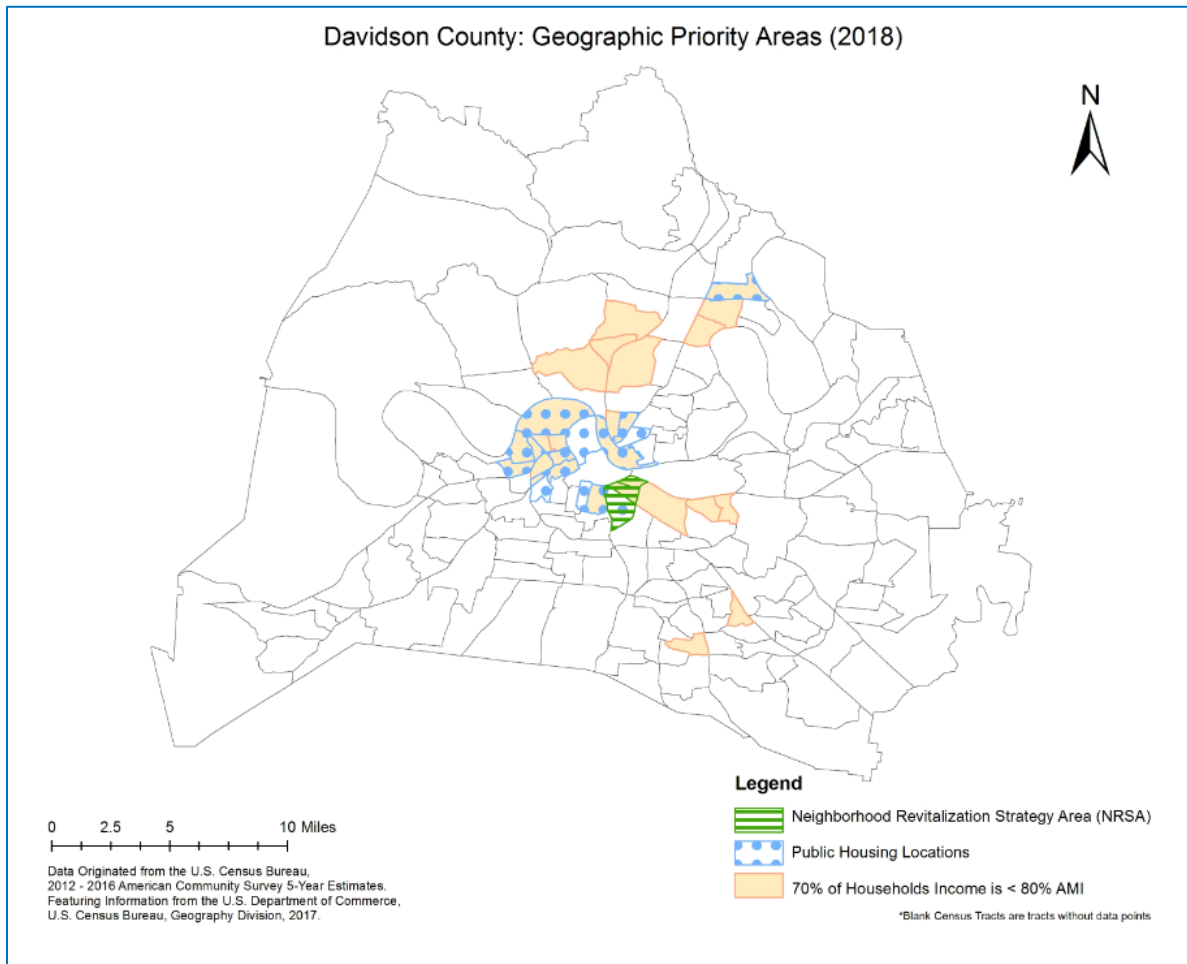
This section describes the standards and procedures MDHA will use to monitor projects and programs and ensure long-term compliance with program requirements.

## SP-10 Geographic Priorities – 91.215 (a)(1)

### Geographic Area

The Strategic Plan proposes to target certain funds/activities in three designated areas in Davidson County: 1) CDBG Targeted Areas, 2) Napier-Sudekum Choice Neighborhoods Initiative (CNI) Planning Area, and 3) Housing Target Areas, as described in the tables below.

The following maps show the CDBG Targeted Census Tracts and the Napier-Sudekum CNI Planning Area. In the first map, the shaded areas are CDBG Targeted Census Tracts. The green area is the Napier-Sudekum CNI Planning Area, which is shown separately in a subsequent map. Blue dots indicate Census tracts in which MDHA-owned public/affordable housing is located.



**Table 49 - Geographic Priority Areas**

<b>1</b>	<b>Area Name:</b>	<b>CDBG Target Areas</b>
	<b>Area Type:</b>	Local Target area
	<b>Other Target Area Description:</b>	N/A
	<b>HUD Approval Date:</b>	TBD
	<b>% of Low/ Mod:</b>	Target Areas are comprised of 26 Census tracts in Davidson County in which at least 70% of households in the Census tract have incomes ≤80% AMI. The % of LMI households for each Census tract is provided in the subsequent table.
	<b>Revital Type:</b>	Comprehensive
	<b>Other Revital Description:</b>	N/A
	<b>Identify the neighborhood boundaries for this target area.</b>	See list of Census tracts that follows this table.
	<b>Include specific housing and commercial characteristics of this target area.</b>	There are 33,380 households in the 26 Census tracts. In addition, there are 13 MDHA-owned public/affordable housing properties in these areas.
	<b>How did your consultation and citizen participation process help you to identify this neighborhood as a target area?</b>	The fair housing analysis conducted in 2017 identified Census tracts in Davidson County reflecting disparities in access to opportunity. These areas tend to be segregated by race or ethnicity and have high rates of poverty. There is a strong correlation between living in higher poverty areas and lower school performance, lower access to the labor market, greater reliance on public transportation, greater concentrations of public housing, and food deserts. When asked on the Survey conducted for this Plan, many respondents indicated these same areas.
<b>Identify the needs in this target area.</b>	Needs that have been identified include sidewalks and parks; programs for youth; anti-poverty programs (such as financial literacy programs; workforce development/job training); and more retail/commercial options.	
<b>What are the opportunities for improvement in this target area?</b>	CDBG funds for public facilities and improvements, as well as microenterprise assistance will be targeted to these areas. Some of these areas may be in Housing Target Areas as well, where funds are targeted for homeowner and rental rehab of existing affordable housing, which add tools for revitalization.  19 of the 26 Census tracts are in the Nashville Promise Zone.	

<b>Are there barriers to improvement in this target area?</b>	Limited availability of public funds and challenges in attracting private investment.
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The following table lists the Census tracts in this targeted area. The table is sorted by the percentage of households with incomes under \$50,000 in descending order, with the largest percentage listed first. To determine the Census tract number for a property, see Exhibit 3.

Census Tract	Estimate; Total HH's:	HH's Under \$50,000	Percentage under \$50,000	Promise Zone	Council Districts	MDHA Sites
148	1001	945	94%	Subzone 3	19	Napier Place, Sudekum Apartments
193	1259	1153	92%	Subzone 1	5, 6	Cayce Place, Edgefield Manor
142	878	790	90%	Subzone 5	19, 21	Andrew Jackson Courts
139	679	606	89%	Subzone 5	21	
107.02	1750	1527	87%		7, 8	
159	1163	1012	87%	Subzone 3	19, 17	
136.02	146	124	85%	Subzone 5	21	Hadley Park Towers
136.01	1296	1099	85%	Subzone 5	21	Historic Preston Taylor Apartments, Hadley Park Towers
104.02	2363	1934	82%		9	Madison Towers
162	1384	1081	78%	Subzone 2	17, 19	Edgehill Homes, Gernert Studio Apartments
126	837	650	78%	Subzone 1	5	
160	410	318	78%	Subzone 3	17	
110.01	2169	1682	78%		2, 8	
118	1014	785	77%	Subzone 1	5	Levy Place
143	771	594	77%	Subzone 5	21	
137	2403	1838	76%	Subzone 5	2, 21	Cumberland View
158.04	2140	1617	76%	Subzone 3	13	
144	674	503	75%	Subzone 5	19, 21	J. Henry Hale Apartments
109.04	1250	922	74%		3	

127.01	2147	1575	73%	Subzone 5	2	
190.05	1229	897	73%	Subzone 4	26	
138	694	504	73%	Subzone 5	21	
191.08	1196	868	73%		30	
158.03	890	639	72%	Subzone 3	19, 15, 13	
107.01	1726	1217	71%		7, 8, 9	
109.03	1911	1345	70%		3,8	

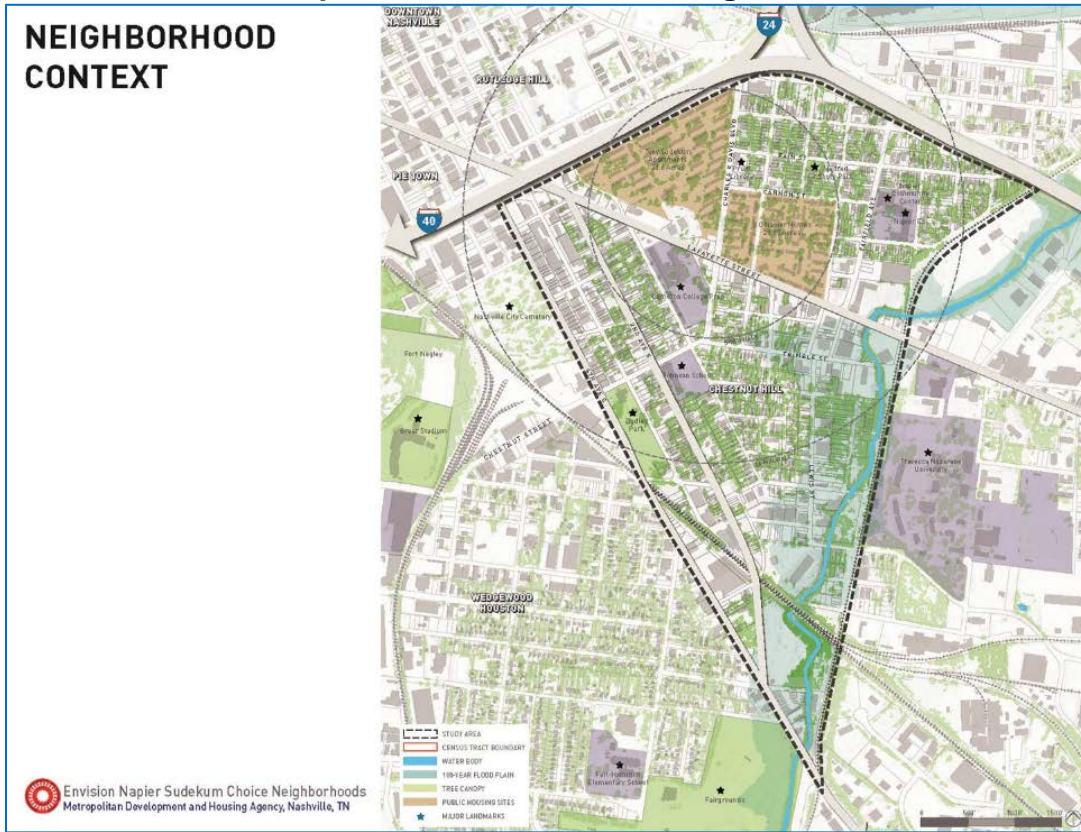
<b>2</b>	<b>Area Name:</b>	<b>Napier-Sudekum CNI Planning Area</b>
	<b>Area Type:</b>	Local Target area
	<b>HUD Approval Date:</b>	NRSA Application submitted with the Consolidated Plan. See Appendix G.
	<b>% of Low/ Mod:</b>	The targeted area's low to mod-income population includes over 70% of residents with income less than 80% AMI (72.24%).
	<b>Revital Type:</b>	Comprehensive
	<b>Other Revital Description:</b>	N/A
	<b>Identify the neighborhood boundaries for this target area.</b>	The boundaries are defined by Interstate 40 to the north and east, the railroad to the south, and 4 <sup>th</sup> Avenue to the west.
	<b>Include specific housing and commercial characteristics of this target area.</b>	The majority of the residential areas are located in the northern and western parts of the planned area. Light industrial properties are located on the southeaster side and commercial properties are located mostly along LaFayette Street and the northern side of 4 <sup>th</sup> Avenue. Napier Homes and Sudekum Apartments house most of the multi-family apartments and single family homes account for most of the remaining housing stock. Most of the commercial properties include retail, fast food and convenience stores.

<p><b>How did your consultation and citizen participation process help you to identify this neighborhood as a target area?</b></p>	<p>This area was selected as a target area and potential Neighborhood Revitalization Strategy Area (NRSA) due to its award of a \$500,000 Choice Neighborhoods Planning Grant in 2016 and its inclusion in the Nashville Promise Zone.</p> <p>The Choice Neighborhoods planning process, which launched in November 2016, has included twenty months of intense, community driven efforts to revitalize and redevelop the area. Multiple committees and work groups were formed to ensure maximum participation and engagement of the community leaders, stakeholders and residents. MDHA and the Design Team offered various opportunities for community involvement during the process and utilized multiple interactive charrettes and events to encourage residents to become a part of the planning. To date the process has included 9 Community Advisory Groups (CAG) meetings, 7 resident-only meetings, 7 town hall meetings, 34 work group sessions, and 3 community charrettes.</p>
<p><b>Identify the needs in this target area.</b></p>	<p>During a stakeholder consultation meeting, several areas of need were identified in the target area along with suggested project opportunities to create improvements in the area. They are detailed as follows:</p> <p><i>Public facilities</i> (e.g., community centers, parks) – There is no <u>real</u> public park in the immediate area of the community, only a pocket park. A 4-acre park in the center of the neighborhood is proposed and would include access to the existing public library. Also, a new community center is proposed for the area next to the park. With additional redevelopment plans for the area, the hope is to incentivize developers to build a new grocery store for the community to address the food desert concerns.</p> <p><i>Public improvements &amp; infrastructure</i> (e.g., sidewalks, stormwater improvements) – All of the existing infrastructure in the community is outdated and needs updates to sidewalks, stormwater, etc. There is also possibility of a new</p>

	<p>street grid implementation to meet safety standards which will also require updated infrastructure activities.</p> <p><i>Public services</i> (e.g., healthy food initiatives, summer youth programs, youth employment opportunities) – With a new community center, daycare programs, summer youth programs, and healthy food classes could be incorporated into the communities services. There is also a need for employment services such as Section 3 job training and career navigation assistance. The goal is to provide Section 3 training on the front end to potential hires from the public housing community in the area. This includes job skill training and addressing barriers to hiring. Then, these trainees can be referenced to general contractors for preference when hiring for the many construction opportunities planned for the area.</p> <p><i>Economic development</i> (e.g., microenterprise assistance) – A potential self-sufficiency opportunity includes microenterprise assistance for small or start-up businesses that could locate in the area.</p> <p><i>Housing needs</i> - The areas around MDHA’s property, particularly across Lafayette Street are already seeing the signs of gentrification. This is creating an even bigger lack of affordable housing in the immediate area of the community. Conversely, a number of dilapidated single family homes adjacent to Napier are in need of home rehab.</p>
<p><b>What are the opportunities for improvement in this target area?</b></p>	<p>The goal is to find ways to get ahead of the gentrification and try to preserve the affordable housing stock. If the NRSA application is approved, this could allow for low and middle income families to remain in the area and help preserve additional housing stock. Also, the leveraging of Barnes, CHDO, and other funds could encourage new affordable housing opportunities. The Promise Zone opens another potential avenue for resources to support revitalization efforts.</p>

	<p>The community vision includes a mixed income community that is intergenerational. It would be a community that would create opportunities for families to thrive via economic self-sufficiency, community safety, health and wellness, and education for all levels.</p> <p>Further details of specific activities will be included in the NRSA application submitted with the Consolidated Plan. The NRSA application will span the same 5 year timeframe as the new Consolidated Plan. However, if MDHA receives a Choice Neighborhoods Implementation Grant, the NRSA would extend through the term of that grant.</p>
<p><b>Are there barriers to improvement in this target area?</b></p>	<p>There is a general feeling that the community is cut off around Lafayette. According to stakeholders, there have been challenges in the past to provide upgrades to areas adjacent to MDHA's properties. The public library expansion helped (it has become the heart of the neighborhood), but local investment has been actually very limited. The other major upgrade was to Napier Elementary school – but that was 15 years ago. There is a general lack of awareness and disinterest.</p> <p>There is lack of vision to see the potential for the area. Most private investors in commercial space look for density – until they can see the density increase, there is no interest. There are a lot of negative perceptions regarding safety and crime in the area which make it undesirable for investors. If changes were made to the street facing business sites, it could make the area more appealing and attract private investment.</p> <p>Mobility and transportation are also issues. It is difficult to cross Lafayette safely – there are no crosswalks or sidewalks.</p>

## Napier-Sudekum CNI Planning Area



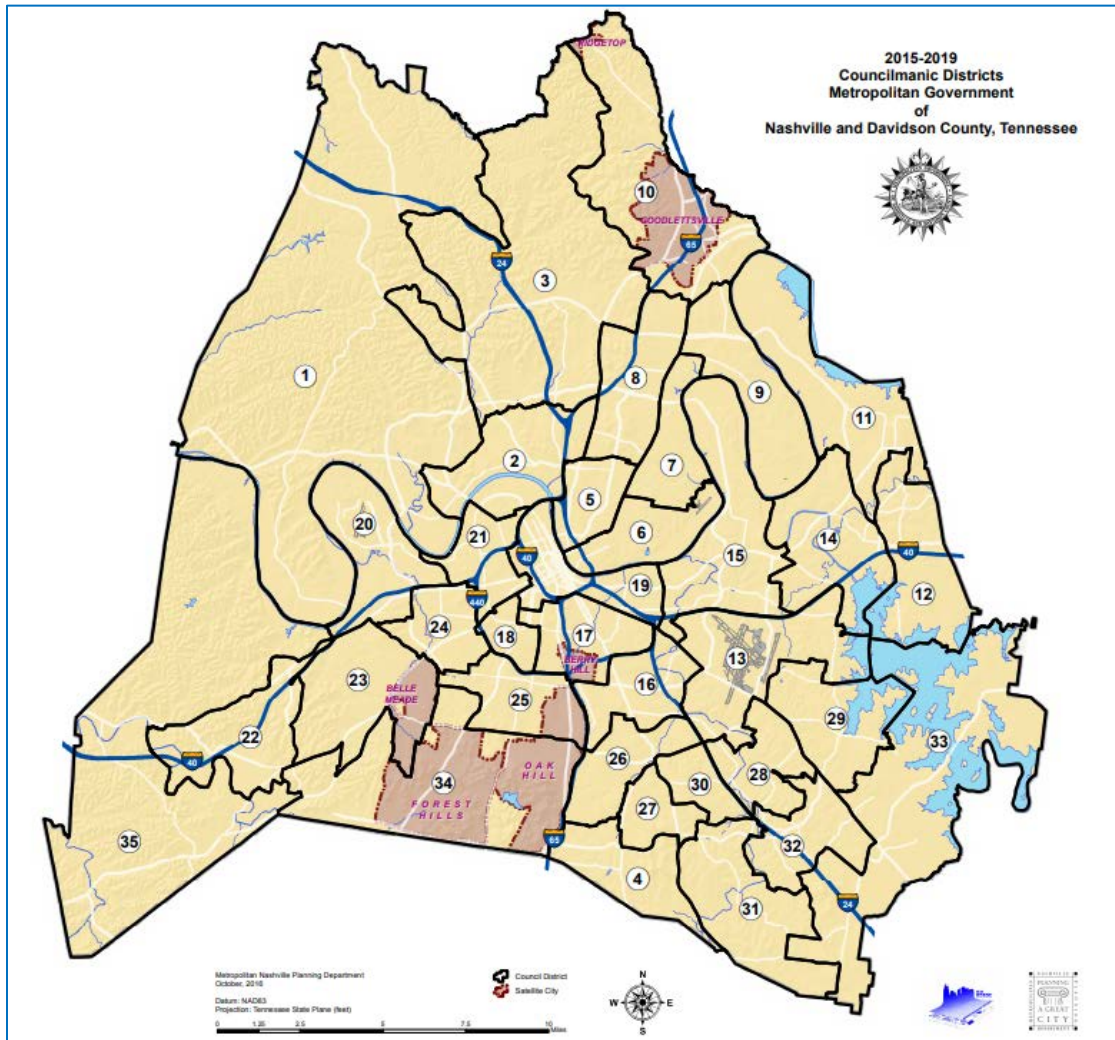
<b>3</b>	<b>Area Name:</b>	Housing Target Areas
	<b>Area Type:</b>	Metro Council Districts
	<b>Other Target Area Description:</b>	N/A
	<b>HUD Approval Date:</b>	TBD
	<b>% of Low/ Mod:</b>	
	<b>Revital Type:</b>	Housing
	<b>Other Revital Description:</b>	Housing preservation and new housing construction
	<b>Identify the neighborhood boundaries for this target area.</b>	14 Metro Council Districts listed in the next table as well as areas in which MDHA-owned public/affordable housing is located (blue dots on previous map).
<b>Include specific housing and commercial characteristics of this target area.</b>	The 14 Council Districts in the Housing Target Area experienced at least a 40% increase in property values during the 2017 reappraisal. According to Metro's Open Data Portal, seven of the Districts are in the top 14 for Property Standards Violations (since 5/1/2015); 10 are in the top 14 for percentage of Building Permits Issued (since 5/1/2013); and seven are in the top 14 for Total Value of Permits.	

	<p>22 MDHA-owned properties house over 5,000 units occupied by low-income households; seven of these are older, distressed properties in which MDHA plans to redevelop into mixed-income, mixed-use communities.</p>
<p><b>How did your consultation and citizen participation process help you to identify this neighborhood as a target area?</b></p>	<p>Input for the 2017 fair housing analysis as well as for this Plan expressed strong concern about the loss of affordable housing due to Nashville’s growth, which is displacing residents from their homes. This input is substantiated by the <i>Housing Nashville Report</i>.</p> <p>Analyses and input also revealed the need for reducing concentrations of poverty as MDHA proposes for its sites.</p>
<p><b>Identify the needs in this target area.</b></p>	<p>Preserve existing affordable housing in gentrifying areas and create new affordable units.</p>
<p><b>What are the opportunities for improvement in this target area?</b></p>	<p>Local discussions on affordable housing have brought these needs into the spotlight, and more nonprofit and for-profit developers are interested in providing affordable housing.</p> <p>Master planning for four MDHA sites is complete (Cayce) or underway (Napier, Sudekum, and Edgehill); with MDHA’s first mixed-income housing under construction and the second one breaking ground on May 10, 2018. MDHA will replace all public housing one-for-one while adding workforce (80-120%) and market rate units.</p>
<p><b>Are there barriers to improvement in this target area?</b></p>	<p>The primary challenges will be outreach and garnering participation in the homeowner and rental rehab programs. For new affordable housing, the challenge will be securing affordable land and financing.</p>

The table on the next page lists the 14 Metro Council Districts in the Housing Target Areas. Highlighted cells indicate that the respective District is among the top 14 in that category. Areas with MDHA properties are indicated on the map at the beginning of this section; some properties may be located within the target Council Districts.

District	% increase in Appraisals	Property Standards Violations	Property Standards Violations %	Building Permits Issued	Building Permits Issued %	Building Permits Issued with Value	Building Permits Issued with Value %	Total Value of Permits	Total Value of Permits %
5	93%	1070	4.59%	1719	4.66%	1714	4.67%	\$334,780,771.00	3.14%
21	77%	1136	4.87%	1651	4.48%	1638	4.46%	\$647,479,734.00	6.07%
7	66%	1087	4.66%	1683	4.57%	1678	4.57%	\$183,242,306.00	1.72%
19	63%	468	2.01%	3144	8.53%	3126	8.52%	\$3,268,170,236.00	30.64%
20	61%	545	2.34%	2655	7.20%	2653	7.23%	\$406,803,470.00	3.81%
17	55%	752	3.22%	2783	7.55%	2764	7.53%	\$578,407,990.00	5.42%
6	53%	1018	4.36%	1782	4.83%	1770	4.82%	\$278,377,843.00	2.61%
16	52%	1628	6.98%	947	2.57%	943	2.57%	\$141,388,851.00	1.33%
2	49%	659	2.82%	1249	3.39%	1237	3.37%	\$289,553,900.00	2.71%
30	45%	801	3.43%	257	0.70%	257	0.70%	\$17,039,594.00	0.16%
15	41%	670	2.87%	1031	2.80%	1030	2.81%	\$231,147,465.00	2.17%
27	41%	412	1.77%	416	1.13%	416	1.13%	\$89,628,634.00	0.84%
8	41%	1142	4.90%	634	1.72%	628	1.71%	\$60,120,710.00	0.56%
14	40%	646	2.77%	767	2.08%	766	2.09%	\$122,886,099.00	1.15%

For context, below is a map of Metro Council Districts.



## General Allocation Priorities

Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA)

The basis for allocating investment geographically is twofold: (1) to bring investments to underserved or distressed neighborhoods; and (2) to create/preserve affordable housing in areas of opportunity with greater access to transportation, schools, services, and lower exposure to poverty. These are goals of the fair housing analysis as well as priority needs of this Plan.

In addition to targeting funds to certain geographical areas as described above, funds for housing programs are also prioritized for the following populations:

- Large families
- Persons with disabilities
- Elderly (age 62+)
- Very low-income households ( $\leq 50\%$  AMI).

#### Housing for Persons with AIDS

The only program that is administered by MDHA that would lend itself to providing services to those who may not be located within the Metro Nashville-Davidson County boundary is through the disbursement of HOPWA funding. This funding stream is distributed through the broader Nashville-Davidson—Murfreesboro—Franklin Metropolitan Statistical Area (MSA), comprised of Cannon, Cheatham, Davidson, Dickson, Hickman, Macon, Robertson, Rutherford, Smith, Sumner, Trousdale, Williamson, and Wilson Counties. HOPWA funds are not intended to be targeted towards a specific geographic area, but rather towards a specific population, which is people living with AIDS/HIV and their families.

## SP-25 Priority Needs - 91.215(a)(2)

### Priority Needs

**Table 50 – Priority Needs Summary**

<b>1</b>	<b>Priority Need Name</b>	<b>Construct New Affordable Housing</b>
	<b>Priority Level</b>	High
	<b>Population</b>	Extremely Low Low Moderate Large Families Families with Children Elderly Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse Veterans Elderly Frail Elderly Persons with Mental Disabilities Persons with Physical Disabilities Persons with Developmental Disabilities Persons with Alcohol or Other Addictions
	<b>Geographic Areas Affected</b>	Countywide Housing Target Areas
	<b>Associated Goals</b>	New Affordable Housing Opportunities
	<b>Description</b>	Because the need for more affordable housing units was by far the top priority for the community, all HOME funding (less 10% for Administration) will be used for new construction. Further, more rental housing was identified as a larger need than homeownership, and at least 75% of HOME funds used will be used to construct new rental housing targeted to households with incomes ≤60% of AMI.
	<b>Basis for Relative Priority</b>	This was the highest ranked need according to public input, and data in this Plan and the <i>Housing Nashville Report</i> show the dire need for more affordable housing units.
<b>2</b>	<b>Priority Need Name</b>	<b>Address Housing Barriers</b>
	<b>Priority Level</b>	High

	<b>Population</b>	Extremely Low Low Moderate Large Families Families with Children Elderly Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse Veterans Persons with HIV/AIDS Elderly Frail Elderly Persons with Mental Disabilities Persons with Physical Disabilities Persons with Developmental Disabilities Persons with Alcohol or Other Addictions Persons with HIV/AIDS and their Families
	<b>Geographic Areas Affected</b>	Countywide Housing Target Areas
	<b>Associated Goals</b>	New Affordable Housing Opportunities
	<b>Description</b>	To ensure that persons who need affordable housing the most (particularly persons with protected characteristics) can access it, CDBG funds will be used to support fair housing activities designed to inform persons of their fair housing rights and help them identify and report housing discrimination.
	<b>Basis for Relative Priority</b>	Data from the 2017 fair housing analysis indicated that persons with protected characteristics are most often in need of affordable housing and that housing discrimination is a barrier to accessing housing opportunities.
<b>3</b>	<b>Priority Need Name</b>	<b>Retain Affordable Housing Stock</b>
	<b>Priority Level</b>	High
	<b>Population</b>	Extremely Low Low Moderate Large Families Families with Children Elderly Elderly Frail Elderly Persons with Physical Disabilities

	<b>Geographic Areas Affected</b>	Countywide Napier-Sudekum CNI Planning Area Housing Target Areas
	<b>Associated Goals</b>	Affordable Housing Preservation
	<b>Description</b>	Because of Nashville’s growth and the loss (and potential further loss) of affordable housing, at least 50% of CDBG funds will be used to preserve existing affordable housing for homeowners and renters to help LMI households remain in their homes. Some housing rehab programs will be targeted to areas experiencing or at-risk of experiencing housing loss, while other programs are available countywide.
	<b>Basis for Relative Priority</b>	Public input for this Plan and the 2017 fair housing analysis revealed numerous stories of how “people have been pushed out of their homes” because they could not afford to remain in their homes or felt pressure from the surrounding development. Once housing is lost, it is difficult to secure other affordable housing.
<b>4</b>	<b>Priority Need Name</b>	<b>Maintain Housing Stability</b>
	<b>Priority Level</b>	High
	<b>Population</b>	Extremely Low Low Moderate Families with Children Public Housing Residents
	<b>Geographic Areas Affected</b>	Housing Target Areas
	<b>Associated Goals</b>	Affordable Housing Preservation
	<b>Description</b>	For persons with very low incomes ( $\leq 30\%$ AMI), maintaining housing stability keeps them from at risk of becoming homeless since the ability to obtain affordable housing is extremely challenging for persons in this income range once housing is lost. MDHA houses over 5,000 families with incomes in this range, and CDBG funds will support a renter counseling program designed to help its tenants understand their responsibilities and strengthen their ability to maintain housing in the event of unforeseen hardship or extenuating circumstances.
	<b>Basis for Relative Priority</b>	While there is a great need for retain existing housing stock due to the shortage of affordable housing in Nashville, there is an equally great need to help low income renters remain in their housing.
<b>5</b>	<b>Priority Need Name</b>	<b>Assist Homeless Persons &amp; Persons with HIV/AIDS</b>
	<b>Priority Level</b>	High

	<b>Population</b>	Extremely Low Low Chronic Homelessness Families with Children Mentally Ill Chronic Substance Abuse Veterans Persons with HIV/AIDS Victims of Domestic Violence Unaccompanied Youth Persons with HIV/AIDS and their Families
	<b>Geographic Areas Affected</b>	Countywide Metropolitan Statistical Area
	<b>Associated Goals</b>	Support for Homeless & Persons with HIV/AIDS
	<b>Description</b>	All funding from ESG and HOPWA will be used to address this need. ESG funds will be used to support homeless shelters with operations and essential services, street outreach efforts, rapid re-housing and homeless prevention assistance, and HMIS data collection and reporting. HOPWA funds will provide assistance for short-term rent, mortgage, and utilities; facility operations/permanent housing; and supportive services.  In addition to ESG and HOPWA, CDBG funds will be used to provide limited emergency assistance for homeless persons who have secured housing through the Metro Homeless Commission or utilizing a voucher administered by MDHA.
	<b>Basis for Relative Priority</b>	Persons who are homeless and persons with HIV/AIDS are the City's most vulnerable populations.
<b>6</b>	<b>Priority Need Name</b>	<b>Create Economic Opportunities for LMI Persons</b>
	<b>Priority Level</b>	High
	<b>Population</b>	Extremely Low Low Moderate Non-housing Community Development
	<b>Geographic Areas Affected</b>	Countywide CDBG Target Areas Housing Target Areas
	<b>Associated Goals</b>	Self-sufficiency Opportunities

	<b>Description</b>	<p>CDBG funds will be utilized to provide microenterprise assistance to businesses that have five or fewer employees (one or more of whom owns the business and is LMI) and for employment services to LMI persons. Capitalizing on Nashville’s creative, entrepreneurial spirit, microenterprise assistance is designed to help small business owned by LMI persons overcomes barriers to success.</p> <p>MDHA’s redevelopment plans as well as construction projects to be funded with HOME funds create employment opportunities for LMI persons. Employment services will connect persons with opportunities.</p>
	<b>Basis for Relative Priority</b>	Poverty and income data show the need for economic opportunities for LMI persons.
<b>7</b>	<b>Priority Need Name</b>	<b>Support Youth Programs</b>
	<b>Priority Level</b>	High
	<b>Population</b>	Extremely Low Low Moderate Families with Children Non-housing Community Development
	<b>Geographic Areas Affected</b>	Countywide
	<b>Associated Goals</b>	Self-sufficiency Opportunities
	<b>Description</b>	CDBG funds will support summer youth programs for youth ages 6-18 from LMI households, as well as youth employment programs, during the summer months (June 1-July 31). Summer youth programs provide new or enhanced activities that will further participants’ interest academic, artistic, and athletic interests, and promote job skills development and/or healthy lifestyles. Youth employment programs will operate in tandem with Metro’s Opportunity NOW program.
	<b>Basis for Relative Priority</b>	Constructive youth programming helps address generational poverty and is one of the recommendations from the <i>Nashville Youth Violence Summit Violence Report (2016)</i> . Comments from the public echoed the need for more programs for youth.
<b>8</b>	<b>Priority Need Name</b>	<b>Invest in Underserved Areas</b>
	<b>Priority Level</b>	High

	<b>Population</b>	Extremely Low Low Moderate Non-housing Community Development
	<b>Geographic Areas Affected</b>	Napier-Sudekum CNI Planning Area CDBG Target Areas
	<b>Associated Goals</b>	Neighborhood Revitalization
	<b>Description</b>	CDBG funds will be invested in low income, underserved areas to provide basic infrastructure needs, such as sidewalks or bus stops, and to construct or expand public facilities, such as community assistance or parks. Microenterprise assistance will be targeted to these areas to help spur economic development.
	<b>Basis for Relative Priority</b>	The 2017 fair housing analysis showed that low-income areas are segregated by race or ethnicity, and persons living in these areas have high rates of exposure to poverty and crime, very limited access to good schools or healthy foods, and rely on public transportation.
<b>9</b>	<b>Priority Need Name</b>	<b>Provide Oversight and Management of Grants</b>
	<b>Priority Level</b>	High
	<b>Population</b>	Extremely Low Low Moderate Large Families Families with Children Elderly Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse Veterans Persons with HIV/AIDS Victims of Domestic Violence Unaccompanied Youth Elderly Persons with HIV/AIDS and their Families Non-housing Community Development
	<b>Geographic Areas Affected</b>	Countywide Metropolitan Statistical Area Napier-Sudekum CNI Planning Area CDBG Target Areas
	<b>Associated Goals</b>	Administration and Planning

<b>Description</b>	MDHA will provide oversight and management of the CDBG, HOME, ESG, and HOPWA grants.
<b>Basis for Relative Priority</b>	Prudent oversight of these grants ensures compliance and the timely expenditure of funds.

**SP-30 Influence of Market Conditions – 91.215 (b)**

**Influence of Market Conditions**

<b>Affordable Housing Type</b>	<b>Market Characteristics that will influence the use of funds available for housing type</b>
Tenant Based Rental Assistance (TBRA)	<p>CDBG and HOME funds will not be used for TBRA. Instead, these funds will be used for home rehab and new construction. HOME is the only source of federal funds directly awarded to Nashville for new construction. Utilizing these funds for TBRA would reduce the amount of funding available to develop new affordable housing.</p> <p>In Nashville, MDHA’s Rental Assistance Department administers voucher programs (Housing Choice Vouchers, Shelter Plus Care, VASH). Because of Nashville’s growth and the rise in rents, it is challenging for voucher-holders to locate housing. MDHA is actively recruiting new landlords to participate in the program, and Metro provides an incentive to landlords to accept VASH vouchers.</p>
TBRA for Non-Homeless Special Needs	While HOPWA funds are not currently used or proposed to be used for TBRA, MDHA will explore the potential use at the request of HOPWA providers.
New Unit Production	Because of the need for new affordable units, all HOME funds will be used for new construction, with at least 75% for new rental housing for households at ≤60% AMI.
Rehabilitation	With the drastic change in home values and the resulting or potential displacement of LMI families, at least 50% of CDBG funds will be used for rehab programs. A particular challenge is limited contractors to participate due to opportunities available on other construction projects in town, and this adversely impacts the pace of rehab programs.
Acquisition, including preservation	<p>Acquisition of land is an eligible cost under the HOME program; however, acquisition is not currently proposed for CDBG.</p> <p>Recently, Metro created a Community Land Trust to acquire property and establish long-term affordability.</p>

**Table 1 – Influence of Market Conditions**

**SP-35 Anticipated Resources - 91.215(a)(4), 91.220(c)(1,2)**

**Introduction**

On May 1, 2018, HUD announced the 2018 Allocations for CDBG, HOME, ESG, and HOPWA. Therefore, Allocation Amounts listed in the table below are actual amounts. Expected amounts available for the remainder of the Consolidated Plan are based on funding at 2018 levels. CDBG Program Income (PI) is estimated and is the average amount of PI collected for the program. HOME PI reflects PI as of April 30, 2018.

**Anticipated Resources**

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	public - federal	Admin and Planning Economic Development Housing Public Improvements Public Services	5,095,429	230,000	0	5,325,429	21,301,716	Expected amounts reflect level funding based on 2018 allocations.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
HOME	public - federal	Homebuyer assistance Multifamily rental new construction New construction for ownership	2,581,408	305,000	0	2,886,408	11,545,632	Expected amounts reflect level funding based on 2018 allocations.
HOPWA	public - federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services	1,216,011	0	0	1,216,011	4,864,044	Expected amounts reflect level funding based on 2018 allocations.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
ESG	public - federal	Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	417,516	0	0	417,516	1,670,064	Expected amounts reflect level funding based on 2018 allocations.

Table 52 - Anticipated Resources

In addition to the Consolidated Plan formula grants, funding from other Federal programs and local funds will be used to address Consolidated Plan priorities: Continuum of Care (CoC) funds, Neighborhood Stabilization Program (NSP) I and II Program Income, and CDBG Disaster Recovery (CDBG-DR) Program Income. For 2017-2018, the Nashville-Davidson County CoC has received over \$3.2 million through the annual competition for homeless assistance programs to be undertaken by MDHA and nonprofit organizations. MDHA has approximately \$500,000 in NSP PI on hand with an estimated \$120,000 expected to be received annually during five-year period covered by this Consolidated Plan from rental income from two multifamily rental projects previously acquired and constructed under the NSP programs. MDHA plans to use NSP PI to fund housing activities that will benefit persons with incomes of up to 120% AMI to fill the gap for housing units for persons with incomes between 80 – 120% AMI as identified in the Mayor's *Housing Report Needs and Gap Analysis* as other programs are limited to providing units for persons whose income does not exceed 60 to 80% AMI. NSP1 PI funds will be targeted to provide units countywide, while NSP2 PI funds will be targeted to the 17 census tracts identified in the NSP2 application. It is possible that some projects will be able to use PI from both sources. The funds will be loaned or granted as gap financing to nonprofit and for profit developers for eligible NSP activities through a Request for Proposal process. The minimum affordability period will be consistent with the HOME program requirements, where the affordability period ranges from 5 to 20 years based on the amount of the per-unit investment. Any PI generated from loans to developers will be used to fund additional projects.

On average, \$165,000 in CDBG-DR PI is generated annually through housing activities undertaken by The Housing Fund (THF). No Program Income is currently on hand as THF continues to use funds to acquire, rehab, and sell homes in flood-impacted areas to LMI buyers. It is expected that the CDBG-DR grant will be closed out in early 2020; at that time, CDBG-DR PI will become PI to the CDBG program.

MDHA receives pass through funding from the Tennessee Housing Development Agency (THDA) for the U.S. Department of Energy Weatherization Assistance Program (WAP) and for the U.S. Department of Health and Human Services Low Income Home Energy Assistance Program (LIHEAP), which are used jointly to install weatherization measures for very low income households. At the time of draft publication, current 2017 allocation amounts are used as 2018 allocations have not been announced by THDA.

During the five year Consolidated Plan period, MDHA and Metro will consider Section 108 Loan Guarantee opportunities to further the goals of this Plan.

The Metropolitan Government also funds affordable housing and homeless assistance programs. For 2019, the Mayor's proposed budget includes \$10,000,000 for the Barnes Fund and \$450,000 for the Housing Incentive Pilot Program (HIPP). The 2019 budget also includes \$618,000 for homeless services programs for assessment and intervention services for homeless individuals and those at risk of becoming homeless so they can obtain or maintain permanent supportive housing and a little over \$2 million to fund the Metro Homelessness Commission and its programs. The Health Care for the Homeless Program has a proposed budget of \$355,200. Further, the Mayor recently announced the use of \$25,000,000 in General Obligation Bonds to construct a new homeless services center with 100 new units of permanent supportive housing for the homeless above.

**Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied**

Leverage

MDHA attempts to use federal funds to leverage additional resources in several ways. Except for homeowner rehab assistance, applications for funding should demonstrate the ability to leverage funds. This is part of the Financial Capacity evaluation criteria for requests for proposals. MDHA's grant writer researches Federal, state, local, and private funding opportunities to apply for funds that further MDHA's mission based on the priorities established in the Consolidated Plan and Public Housing Plan.

To leverage HOME dollars, MDHA continues efforts to fund projects that leverage other resources for affordable housing development. For example, recently funded projects leveraged funds from U.S. HUD/SHOP Grant, Federal Home Loan Bank AHP funds, private funds from corporations, foundations, churches, and individuals. Additionally, the Barnes Fund, Metro's local Housing Trust Fund, makes funds available that are used to leverage HOME dollars. Another opportunity to leverage HOME funds is with Low Income Housing Tax Credits (LIHTC). MDHA actively pursues other funding opportunities to leverage HOME and CDBG funds to create affordable housing through the Community Reinvestment Act (CRA), HUD-insured loans, the Rental Assistance Demonstration (RAD) program, and the State Housing Trust Fund (HFT). Where appropriate, leverage may be achieved through supportive services provided by partners.

## Match Requirements

The HOME program requires a 25% match of the total HOME funds drawn down for project costs. This match is different than leverage, and this requirement will be met by match credit from prior HOME projects, Barnes Trust fund projects that meet the requirements of the HOME program, by the value of donated land or improvements, or by other eligible methods as provided in the HOME regulations. Amounts above the 25% match are considered leverage.

CoC funds must be matched 25% by funding from other eligible sources. An array of sources are expected to be leveraged to meet this match, depending on the project and the administering agency – from the value of primary care and pharmacy services to residents living in permanent supportive housing, to private donations that assist with operating costs, to federal and state funds that help further CoC planning activities.

### **If appropriate, describe publically owned land or property located within the jurisdiction that may be used to address the needs identified in the plan**

MDHA is currently reviewing its inventory of property to create a plan for development or disposition. Metro has established a Community Land Trust to acquire property and preserve it for long-term affordability.

## SP-40 Institutional Delivery Structure – 91.215(k)

Explain the institutional structure through which the jurisdiction will carry out its consolidated plan including private industry, non-profit organizations, and public institutions.

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
MDHA	PHA Redevelopment authority	Affordable housing-rental Community Development Public housing	Census Tract Jurisdiction Neighborhood
Metro Government	Government agency	Affordable housing-ownership Affordable housing-rental	Jurisdiction
Metro Homelessness Commission	Government agency	Homelessness	Jurisdiction
Nashville-Davidson County Continuum of Care	Continuum of Care	Homelessness	Jurisdiction

Table 23 - Institutional Delivery Structure

### Assess of Strengths and Gaps in the Institutional Delivery System

MDHA directly administers the CDBG Homeowner and Rental Rehab programs as well as the Weatherization Assistance Program; further, MDHA will use up to \$500,000 in HOME funds to construct new affordable housing. For the rehab/weatherization programs, the availability of quality contractors is limited to Nashville’s construction boom. For other HOME-funded activities, MDHA awards funds for new construction projects to nonprofit, including Community Housing Development Organizations (CHDOs) and for-profit developers. Because of the strength of non- and for-profit developers, smaller or inexperienced nonprofits are at a disadvantage when competing for funds and are challenged in building capacity. Therefore, MDHA is creating a new HOME-eligible activity beginning in 2018 to set-aside HOME funds for nonprofits that have not received funding in the past five years.

Because Metro Government also makes funding available to nonprofits, it is critical that MDHA and Metro align programs, especially since funding from both sources are often used in the same project. Staff collaborate on program priorities and serve on the other agency’s review committee.

For other formula grants – CDBG, ESG, HOPWA – funds are awarded to nonprofits on a competitive basis. However; MDHA may choose to implement a public improvement

project. For competitive funds, requests for funding usually outweigh the amount of funds available. Fortunately, Nashville has a cadre of qualified nonprofit partners.

Due to the uncertainty of Federal funding, which in recent years has not been known or available before the beginning of the program year, MDHA does not enter into contracts, and often does not issue requests for proposals, until grant agreements have been executed.

### Availability of services targeted to homeless persons and persons with HIV and mainstream services

Homelessness Prevention Services	Available in the Community	Targeted to Homeless	Targeted to People with HIV
<b>Homelessness Prevention Services</b>			
Counseling/Advocacy	X		X
Legal Assistance	X	X	X
Mortgage Assistance			X
Rental Assistance	X	X	X
Utilities Assistance	X	X	X
<b>Street Outreach Services</b>			
Law Enforcement	X	X (winter canvassing)	
Mobile Clinics	X	X	
Other Street Outreach Services	X	X	X
<b>Supportive Services</b>			
Alcohol & Drug Abuse	X	X	X
Child Care	X		X
Education	X	X	X
Employment and Employment Training	X	X (Park Center & Project Connect)	X
Healthcare	X	X	X
HIV/AIDS	X	X	X
Life Skills	X	X	X
Mental Health Counseling	X	X	X
Transportation	X	X	X
<b>Other</b>			
Other			

**Table 54 - Homeless Prevention Services Summary**

**Describe how the service delivery system including, but not limited to, the services listed above meet the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth)**

The street outreach providers in Nashville are a strong group for advocacy and counselling that engage and represent people experiencing literal homelessness, especially people who are chronically homeless, people with mental health issues, unaccompanied youth, and Veterans. Outreach teams hold a monthly coordination meeting to talk about issues affecting people living in encampments and on the streets.

Neighborhood Health, the main community provider for health care, runs two clinics that are mainly focused on people experiencing literal homelessness. In addition to employing outreach staff to bring people to those clinics, they regularly park their mobile health clinic at a popular meal site frequented by people experiencing homelessness.

Metropolitan Homelessness Commission (MHC) staff brings together service providers, through the implementation of the coordinated entry system. They hold three separate bi-weekly care coordination meetings for families with minor children, Veterans and individuals. Youth and young adults are included in the individual and family care coordination meetings. At those meetings, service providers coordinate the assistance to the most vulnerable households experiencing literal homelessness.

Housing navigators now participate in an annual training offered by MHC. Trained housing navigators have the ability to apply on behalf of their clients for the following resources administered by the MHC in partnership with community providers:

- Up to 18 housing choice vouchers a month (if funding is available) through a partnership with MDHA;
- Move-in assistance of up to \$1,000 per household for mainly utility and security deposits as well as first month's rent through a partnership between MDHA and Metro Social Services;
- Critical time intervention (CTI) case management provided by a contract through MHC;
- SRO units at Urban Housing Solutions; and
- Free annual bus passes for people who are experiencing or are at risk of chronic homelessness through a partnership with MTA.

Persons living with HIV/AIDS are provided services through the network of sponsor agencies in the Metropolitan Statistical Area, which includes Davidson and 14

surrounding counties. These services include short-term rent, mortgage and utility assistance (STRMU), facility based housing and supportive services to include case management, nutritional needs, legal aid, etc. Case managers from sponsor agencies help to guide their clients throughout the network of available assistance programs, such as Ryan White Part B and HOPWA to provide the most comprehensive level of assistance for housing, health and supportive needs.

**Describe the strengths and gaps of the service delivery system for special needs population and persons experiencing homelessness, including, but not limited to, the services listed above**

Strengths

Nashville service providers are implementing the coordinated entry system and continue to work on improvements.

Especially over the past year, the conversation has shifted to community-level decision making. The Nashville-Davidson County CoC and the Metropolitan Homelessness Commission are trying to move away from a dual homeless governance system to a unified system that is built on active working committees. A community vote is scheduled for May 2018 to determine whether the CoC membership supports a unified governance board. This work has created more awareness to the issues of coordination and collaboration and what it means to build a housing crisis resolution system with all types of interventions available to assist people experiencing homelessness and at risk of homelessness.

Through this conversation, our community has recognized the need to have conversations about improving our Homeless Management Information System (HMIS) to allow us to build a systems approach focused on outcomes for the people we serve.

The core HIV/AIDS sponsor agencies within Davidson County work to maintain a cohesive collaborative environment that allows each client to maintain access to the greatest number of resources available.

Gaps

Like other big cities, Nashville is experiencing an affordable housing crisis. Specific populations have a lack of options to access shelter, services, and housing. Thus, service providers are continuing to ask for improvement of relationships with landlords who accept housing choice vouchers. Landlords working with service providers are

asking for more intense case management services once people move in. Provider agencies agree that this is a need, especially for people who have experienced chronic homelessness and are living in scattered housing sites. Another gap is the lack of shelter and housing for people with physical disabilities, for sex offenders, and for arsonists. In addition, Nashville has seen an increase in homeless households with minor children that are headed by single men, as well as an increase in extremely large households (more than 4 children). Even though the overall number is not staggering, there is a lack of immediate access to shelter for male-headed households, and a lack of affordable, 4-5 bedroom units of affordable permanent housing.

With the recent move to use our local HMIS as the database for coordinated entry, service providers see the need to invest more into HMIS and improve our data collection and capability to measure outcomes. While services are available, we do not seem to have enough. Service providers hope that a focus on improving coordination across systems will help us use available resources more efficiently and provide us with a better picture of service gaps.

The community believes we need to improve our homeless prevention efforts. While legal services and advocacy are available, we have not focused on linking some of the mainstream systems to target households who are 14 days away from becoming literally homeless. Many of our services still are focused on a first come, first served basis. The CES helps, but the service provider community still needs to learn how to prioritize the populations they serve.

A fragmentation of services continues with providers needing to meet the standards of their funders. A special focus must be given to cross-sector collaboration to engage landlords and create policies across different systems that reduce the length of homelessness for all populations.

Although Nashville is the state capital, the lack of collaboration between Metro (local) and state government entities must be overcome through engagement, information sharing, and invitations to state employees to engage in local planning and coordination efforts.

While collaboration and outreach are well-maintained within the Davidson County core of HIV/AIDS sponsor agencies, more outreach, communication and collaboration needs to be explored for the extended MSA areas around Davidson County. Increased communication and outreach among all MSA agencies will better serve the overall HIV/AIDS community.

## **Provide a summary of the strategy for overcoming gaps in the institutional structure and service delivery system for carrying out a strategy to address priority needs**

Unifying the governance structure will improve how community providers and other stakeholders develop and implement community strategies to address homelessness. The hope is to design a governance board that includes strong representation from decision makers in the nonprofit/faith-based, business, and government sectors, as well as from people with lived experiences.

The current effort to strengthen community written standards for the CoC, ESG, and CES will improve service delivery expectations among provider agencies. In addition, the housing navigation process is improving and new agencies are showing interest to participate. Housing navigation is one of the core functions of the local coordinated entry system.

Once the governance conversation is completed, Nashville-Davidson County needs to develop a strategic plan to prevent and end homelessness, which includes annual action steps that will help set community priorities and guide the work of providers, government agencies, and funders.

An immediate strategy includes increasing the community's investment in HMIS with more resources to help onboard more provider agencies. This would create regular community-wide outcome reports, and enhance data quality and coverage to help identify gaps and spur talks about prioritizing funding.

Service providers want improved communications to assure better coordination between systems (e.g., hospitals, health care, mental health, and correction). The community is especially interested in improving the efforts to link people released from jails and prisons with available systems to help overcome significant barriers to housing (background issues). Continuing to improve the CES for all populations should demonstrate the need for a variety of services and housing intervention and overcome current competitive efforts among different provider services. The city needs to put forth a lot of educational effort on entry points and how the different systems can play a role in identifying people experiencing homelessness and those at risk of immediate homelessness as early as possible.

While all these coordination efforts are certainly needed, the city and community must continue to develop strategies to address the affordable, low-income housing crisis for people at or below 60% AMI. In addition, with Tennessee not being an expanded Medicaid state, there is a need for additional resource development to fund support services for highly vulnerable populations transitioning to permanent housing situations.

HIV/AIDS sponsors within Davidson County will reach out to expanded MSA support agencies to ensure updated communication and outreach is available to HIV/AIDS clients that may not live within the Davidson County core area. Local MSA agencies have also expressed interest in

expanding their programs to include more services for HIV/AIDS clients and/or to be more proactive in greater collaboration across the MSA.

**SP-45 Goals Summary – 91.215(a)(4)**

The following table summarizes Five Year goals.

**Goals Summary Information**

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	New Affordable Housing Opportunities	2018	2023	Affordable Housing  Non-Housing Community Development	Countywide  Housing Target Areas	Construct New Affordable Housing  Address Housing Barriers	CDBG: \$138,460  HOME: \$12,988,836	Public service activities other than Low/Moderate Income Housing Benefit: 750 Persons Assisted  Rental units constructed: 250 Household Housing Unit  Homeowner Housing Added: 40 Household Housing Unit

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
2	Affordable Housing Preservation	2018	2023	Affordable Housing Public Housing Non-Housing Community Development	Countywide Napier-Sudekum CNI Planning Area Housing Target Areas	Retain Affordable Housing Stock Maintain Housing Stability	CDBG: \$13,832,845	Public service activities other than Low/Moderate Income Housing Benefit: 625 Persons Assisted  Rental units rehabilitated: 65 Household Housing Unit  Homeowner Housing Rehabilitated: 785 Household Housing Unit  Other: 1 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
3	Support for Homeless & Persons with HIV/AIDS	2018	2023	Homeless Non-Homeless Special Needs	Countywide Metropolitan Statistical Area	Assist Homeless Persons & Persons with HIV/AIDS	CDBG: \$623,070 HOPWA: \$5,897,653 ESG: \$1,931,012	Public service activities other than Low/Moderate Income Housing Benefit: 625 Persons Assisted  Tenant-based rental assistance / Rapid Rehousing: 1625 Households Assisted  Homeless Person Overnight Shelter: 10000 Persons Assisted  Homelessness Prevention: 375 Persons Assisted  HIV/AIDS Housing Operations: 265 Household Housing Unit  Other: 13477 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
4	Self-sufficiency Opportunities	2018	2018	Public Housing Non-Housing Community Development	Countywide CDBG Target Areas Napier-Sudekum CNI Planning Area	Create Economic Opportunities for LMI Persons Support Youth Programs	CDBG: \$3,371,510	Public service activities other than Low/Moderate Income Housing Benefit: 6785 Persons Assisted  Businesses assisted: 70 Businesses Assisted  Other: 1 Other
5	Neighborhood Revitalization	2018	2023	Non-Housing Community Development	Napier-Sudekum CNI Planning Area CDBG Target Areas	Invest in Underserved Areas	CDBG: \$3,335,835	Other: 5 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
6	Administration and Planning	2018	2023	Affordable Housing	Countywide	Provide Oversight and Management of Grants	CDBG: \$5,325,425	N/A
				Homeless	Metropolitan Statistical Area		HOPWA: \$182,402	
				Non-Homeless Special Needs	Napier-Sudekum CNI Planning Area		HOME: \$1,443,204	
				Non-Housing Community Development	CDBG Target Areas		ESG: \$156,569	
					Housing Target Areas			

Table 55 – Goals Summary

### Goal Descriptions

1	<b>Goal Name</b>	<b>New Affordable Housing Opportunities</b>
	<b>Goal Description</b>	Increase the number of decent, safe affordable units and help LMI households access affordable housing.
2	<b>Goal Name</b>	<b>Affordable Housing Preservation</b>
	<b>Goal Description</b>	Preserve existing affordable housing units and help LMI tenants and homeowners retain housing.
3	<b>Goal Name</b>	<b>Support for Homeless &amp; Persons with HIV/AIDS</b>
	<b>Goal Description</b>	Support facilities and services for homeless persons and persons with HIV/AIDS.
4	<b>Goal Name</b>	<b>Self-sufficiency Opportunities</b>
	<b>Goal Description</b>	Create pathways to self-sufficiency for LMI persons and families.

<b>5</b>	<b>Goal Name</b>	<b>Neighborhood Revitalization</b>
	<b>Goal Description</b>	Revitalize distressed neighborhoods and underserved areas.
<b>6</b>	<b>Goal Name</b>	<b>Administration and Planning</b>
	<b>Goal Description</b>	Undertake grant management, planning, and other eligible administrative tasks authorized under CDBG, HOME, ESG, and HOPWA.

**Estimate the number of extremely low-income, low-income, and moderate-income families to whom the jurisdiction will provide affordable housing as defined by HOME 91.315(b)(2)**

HOME regulations define extremely low income as 30% AMI; very low income as 50% AMI; and low income as 80% AMI. Over the Five Year period, MDHA estimates that it will provide new rental housing for 250 low income, very low income, and extremely low income families, with the maximum income served at 60% AMI. An additional 40 new affordable for-sale homes will be created for incomes up to 80% AMI. Nearly 800 homes occupied by or rented to LMI households will receive rehab assistance.

## **SP-50 Public Housing Accessibility and Involvement – 91.215(c)**

### **Need to Increase the Number of Accessible Units (if Required by a Section 504 Voluntary Compliance Agreement)**

Not applicable. MDHA does not have a Section 504 Voluntary Compliance Agreement.

### **Activities to Increase Resident Involvements**

MDHA provides a number of opportunities for residents to become more involved in management and to participate in homeownership programs:

- Two public housing residents are appointed to the seven member MDHA Board of Commissioners.
- Each property has a resident association that actively engages the residents and coordinates activities with property management. The president of each resident association meets with MDHA leadership annually to review the PHA Annual Plan.
- At each monthly MDHA Board meeting, a property manager and a resident association president are invited to address the Board and provide updates on activities occurring at their properties and relay needs to the Board.
- MDHA's "Envision" process encourages residents to participate in the master planning process for their sites and specific meetings are held to obtain their input.
- MDHA's Affordable Housing Department and Rental Assistance Department offer self-sufficiency programs that create pathways to homeownership. On average, 10 residents/voucher-holders achieve homeownership through these programs. In April 2018, two residents who purchased homes through Habitat for Humanity of Greater Nashville were featured on HGTV's Property Brothers.

### **Is the public housing agency designated as troubled under 24 CFR part 902?**

No.

### **Plan to remove the 'troubled' designation.**

Not applicable.

## SP-55 Barriers to affordable housing – 91.215(h)

### Barriers to Affordable Housing

The following are the negative effects of public policies that have been identified as barriers to affordable housing during the consultation process and in ongoing discussions on the City's affordable housing crisis.

1. *Availability and cost of land* > Land is at a premium, especially along transportation corridors and near services and commercial activity where it is desirable to create affordable housing in these areas so that LMI households have greater access to transportation and other opportunities. However, the cost of land makes it financially challenging to create affordable housing without a subsidy or incentive.
2. *Lack of mandatory inclusionary zoning* > The State of Tennessee does not allow cities to implement inclusionary zoning.
3. *Zoning/density requirements* > Zoning or density requirements sometimes make affordable housing development infeasible. Minimum density requirements can make some affordable housing projects cost-prohibitive. Conversely, “down zoning” prevents certain types of housing from being constructed.
4. *Property taxes* > Following the 2017 reappraisal, property values across Nashville increased by an average of 37%. Some areas saw much sharper increases than others, as discussed in SP-10. For homeowners with limited income, higher property taxes created precarious financial situations that threatened housing stability. Property taxes also affect affordable housing developers, especially those with rent-restricted properties (such as LIHTCs) that cannot raise rents to offset increased property taxes.
5. *Scarcity of funding* > With the exception of 2018, Federal funds for affordable housing have been declining since 2010, and 9% LIHTCs are awarded on a competitive basis limiting the extent of use in Davidson County. Only in recent years (since 2013) has Nashville had a housing trust fund.
6. *Prohibition on local hire requirements* > The State of Tennessee prohibits localities from requiring that contractors working on city-funded construction projects hire local residents, which would allow local residents opportunities to earn wages and assist with housing costs.

In addition to these policies, other barriers to affordable housing include:

- Negative perception (NIMBYism)
- Housing discrimination
- Criminal history
- Credit challenges.

### Strategy to Remove or Ameliorate the Barriers to Affordable Housing

The following are strategies to remove or ameliorate these barriers:

Barrier	Strategy
Availability and cost of land	<ul style="list-style-type: none"> <li>• Make public land available for affordable housing development.</li> <li>• Allow acquisition to be used as an eligible expense of HOME and Barnes Funds.</li> <li>• Create a Community Land Trust to acquire and preserve property.</li> </ul>
Lack of mandatory inclusionary zoning	<ul style="list-style-type: none"> <li>• Encourage private developers to construct affordable housing in the urban core and along major corridors through incentives, such as the Housing Incentives Pilot Program (HIPP) and tax increment financing in transit oriented development districts.</li> </ul>
Zoning/density requirements	<ul style="list-style-type: none"> <li>• Provide density bonuses for affordable housing.</li> </ul>
Property taxes	<ul style="list-style-type: none"> <li>• Publicize tax relief/abatement programs such as payments in lieu of taxes (PILOT) for tax credit projects; property tax exemption benefits for affordable housing provided to low income persons with disabilities or elderly that is financed by HOME and other eligible sources (as provided in T.C.A. 67-5-207); and Metro's Tax Freeze program for low income homeowners.</li> </ul>

Scarcity of funding	<ul style="list-style-type: none"> <li>• Leverage public funds to create more units.</li> <li>• Continue to fund the Barnes Fund.</li> <li>• Explore public/private partnerships.</li> </ul>
Prohibition on local hire requirements	<ul style="list-style-type: none"> <li>• Increase Section 3 participation in HUD-funded construction projects through outreach and job training programs.</li> </ul>
Negative perception (NIMBYism)	<ul style="list-style-type: none"> <li>• Develop a public awareness campaign to combat NIMBYism.</li> </ul>
Housing discrimination	<ul style="list-style-type: none"> <li>• Educate residents as well as the industry on fair housing rights and responsibilities.</li> </ul>
Criminal history	<ul style="list-style-type: none"> <li>• Establish flexible admission policies for persons with a criminal history.</li> <li>• Consider actual conviction history rather than criminal affidavits or arrest records.</li> <li>• Support re-entry and diversion programs.</li> </ul>
Credit challenges.	<ul style="list-style-type: none"> <li>• Promote financial counseling/literacy programs.</li> </ul>

## **SP-60 Homelessness Strategy – 91.215(d)**

### **Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs**

The Metropolitan Homelessness Commission (MHC) built a 3-person homeless outreach team (HOT) that coordinates within and outside the Metro government on people who live outdoors. The outreach team has moved Metro government from an enforcement-only approach to an engagement-also focus. Government agencies are learning to reach out to the HOT and report any concerns or complaints from the public in regard to homeless encampments and other activities. This allows the HOT to coordinate with other outreach teams and focus on linking people with needed services to address and de-escalate potential situations and avoid arrests.

Outreach teams meet on a monthly basis to discuss urgent issues and coordinate efforts. They are all trained in entering people into the CES and participate in bi-weekly care coordination meetings to advocate for their most vulnerable clients.

MHC implemented an annual training program for housing navigators at different provider agencies that serve people who experience literal homelessness. The goal is to identify people experiencing literal homelessness and those at risk of immediate homelessness early and connect them with needed services that lead to permanent housing as quickly as possible. A marketing effort to reach all populations experiencing homelessness is underway that identifies main entry points for people seeking assistance.

More education is needed to ensure that all outreach groups are well-versed in, and stay up-to-date on, available resources. An investment in the coordinated entry system, which is utilizing HMIS as its database, could help identify people quicker and link them to both mainstream and homeless-specific resources. In addition, many faith-based outreach groups are mission-driven and lack the housing-focused approach necessary to end homelessness. Improving CES could help bring more non-traditional providers like faith-based groups to the table and educate them on how to better assist people to get off the streets.

In spite of these outreach efforts, the lack of affordable housing in all neighborhoods and a continuing loss of low-income housing stock remains a barrier. In addition, landlords have tightened their eligibility requirements (criminal background, deposit requirements, etc.), which increasingly prohibit people from acquiring housing, even when they have the necessary income .

## Addressing the emergency and transitional housing needs of homeless persons

MHC continually works to improve the Coordinated Entry System (CES) to ensure people experiencing literal homelessness have immediate access to emergency shelter and, when appropriate, to transitional housing programs. With that, Nashville needs to develop a solid diversion approach to reduce the flow of people into literal homelessness by helping them retain their current housing situation (as long as it is safe).

Currently there seems to be sufficient emergency bed and transitional bed capacity but there is a need to evaluate appropriate referrals to fill the beds with people who truly need them and provide a safe environment for them.

The following strategies will help address needs:

- Develop a solid prevention and diversion effort;
- Quickly link people to emergency beds;
- Coordinate exit strategies that allow us to fill newly identified low-income affordable housing units with people who experience literal homelessness;
- Create an in-reach team to assist shelter providers provide housing navigation and enter people into the coordinated entry system;
- Improve data sharing to know how long people stay in shelter beds and what their destinations are when leaving emergency shelters;
- Educate providers across the CoC on eligibility requirements for different transitional housing to promote appropriate referral processes (ideally through the CES);
- Assist transitional housing providers to coordinate with other agencies if people leave their programs, so that they do not end up back in literal homelessness;
- Develop warm hand-off protocols to support people as they exit shelter and transitional housing beds;
- Link housing navigators with transitional housing providers to assist in the housing search coordination if needed;
- Share housing destination information and eligibility criteria to provide people in emergency shelters and transitional housing with options; and
- Continue to evaluate innovative approaches and best-practice solutions as an option for Nashville. Such evaluations should include the benefits of developing bridge housing, navigation centers, safe havens, service centers, night centers, etc. to address the needs of people who identify themselves as shelter-resistant.

**Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again.**

The most urgent strategy is to develop low-income affordable housing and expand support services for the most vulnerable populations to avoid their return to homelessness. To do so, landlord incentives need to be developed including tax incentives, support services, increased value of housing choice vouchers, mitigation funds, move-in assistance, furniture assistance, etc.

Furthermore, the Nashville community identified the need for more investment in:

- Prevention
- Rapid Re-housing
- Intensive services through transitional housing programs for special needs populations (people in recovery, re-entry, domestic violence, youth)
- Permanent Supportive Housing
- Bridge Housing
- Navigation Centers, which would provide centralized and streamlined avenues for people needing assistance.

MHC provides housing navigation training to help streamline the process of assistance delivery. Housing navigation is at the core of an efficient coordinated entry system. Trained housing navigators are service providers (e.g., social workers, case managers, and outreach workers) employed by local shelters, government's Metro Social Services agency, street outreach teams, mental health providers, and any providers encountering people experiencing literal homelessness. The housing navigators' job is to walk alongside people on their path from homelessness to housing and provide warm hand-offs to transitional housing and ongoing support service providers as needed.

The community is using three community assessment tools for the different populations (VI-SPDAT, Family-VI-SPDAT, and TAY-VI-SPDAT) and holds three different care coordination meetings for individuals, families, and Veterans. Family providers currently are the only agencies that offer a hotline for families. Talks are underway with the local 2-1-1 system to coordinate after-hour calls and link them with the coordinated entry system for people in a housing crisis.

Provider agencies are working hard to improve their coordination efforts, especially across different sectors. One new effort led by the Metro Public Health Department focuses on identifying chronic consumers of the health/mental health and criminal justice systems who are experiencing a housing crisis. The effort is to focus on the most vulnerable populations with a mental health diagnosis and ensure they receive the services they need to be stably housed.

To truly measure outcomes, the community must significantly increase its investment in HMIS and in CES. Provider agencies are still too focused on a first-come, first-served basis and seem confused on how to set and implement priorities through the coordinated entry system. In addition, most are afraid to agree to take referrals through the CES. The CoC needs to increase its educational effort to fully implement strategies that improve the CES including implementing policies that include a CES participation requirement for certain funding sources.

Prevention is a big priority for the community but it has not fully entered the conversation. The CoC must identify who should be prioritized for prevention and share a solid inventory on prevention efforts available. This conversation must include the discussion of diversion and the difference between diversion and prevention. Prevention strategies should include a special focus on people exiting the criminal justice system.

Systems coordination is one of the big gaps identified by the community. Additional entry points, such as hospitals, mental and physical health care facilities, and criminal justice locations should be able to identify people experiencing homelessness and be included in CES, which would allow for improved cross-systems coordination.

**Help low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from a publicly funded institution or system of care, or who are receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs**

The community recognizes a need for neighborhood-based homelessness prevention programs including a crisis response and stabilization team, increased street outreach programs, housing search and placement specialists, and increased employment opportunities that provide temporary assistance and other services.

A specific focus should be given to the coordination efforts among different sectors such as between hospitals, primary health care providers, correctional facilities, courts,

mental health facilities, and other institutions to ensure that discharge protocols identify people at risk of homelessness and link them with crisis response and stabilization teams when available.

The following action steps should be considered over the next five years:

- Develop ongoing funding sources to invest into the Homeless Management Information System (HMIS) and coordinated entry system (CES) to ensure institutions are connected to the CES and people at risk of homelessness are identified early;
- Establish buy-in to create a shared homeless resource guide including landlord lists and inventory of services;
- Expand the housing navigation program to link discharge personnel at institutions with housing navigators for people at risk of being released to literal homelessness;
- Invest in a crisis response and stabilization team that serves people across systems;
- Implement an alignment of discharge memorandums between different institutions and systems;
- Design an intervention and eviction prevention program;
- Develop a coordinated reunification program;
- Implement a referral and outreach/inreach team. Inreach teams work directly with shelters, jails, hospitals to serve the most vulnerable populations and ensure they have the opportunity to participate in the coordinated entry process);
- Evaluate childcare options for people at risk of homelessness and those looking for jobs;
- Expand rapid re-housing programs to assist all populations;
- Create a diversion protocol and program linked to the CES;
- Invest in rental and utility assistance payments;
- Develop a designated funding source to supplement partner agencies' move-in costs;
- Support the development of a furniture fund;
- Create an education program to ensure service providers (including housing navigators) are informed about the available prevention efforts in Nashville-Davidson County; and
- Establish clear criteria with CES to prioritize at-risk households for available resources.

The Nashville-Davidson County CoC coordinates with systems that have a discharge procedure in place to prevent homelessness upon discharge: Foster Care, Mental Health Care, and Correctional Facilities.

### **Foster Youth**

Formal protocols are formalized and implemented through the Tennessee Department of Children's Services (TN DCS). Foster youth are referred to the Independent Living Program (ILP) at age 14. DCS ILP specialists work directly and collaboratively with Family Service Workers, foster parents, contracted providers and youth to prepare for the transition out of care. ILP specialists ensure all youth in DCS custody, regardless of permanency goals, placement or adjudication, have an Independent Living Plan from ages 14-16 and/or a Transition Plan at age 17 and older. DCS utilizes a "Predictors of Homelessness" assessment to help identify youth at age 17 who might be high risk for homelessness to ensure thoughtful planning and prevention.

### **Re-Entry**

The Davidson County Sherriff's Office operates the Transition from Jail to Community (TJC) Reentry Project in tandem with nearly 40 nonprofits. Reentry programming, which is offered to individuals regardless of length of stay or legal status, focuses on life skills, earning employment credentials, anger management/self-regulation, and other individual needs. The program is offered within 150 days of release. Reentry counselors work with incarcerated individuals to create a post-custody transition plan, including helping build connections to community supports. A variety of community-based organizations work in jails/prisons to begin establishing relationships with incarcerated individuals as part of the transition process. This helps ensure, as individuals re-enter the community, they are connected with a support system and needed services for completing a successful transition.

### **Juvenile Justice**

Youth brought to the Juvenile Court are assigned an Assessment Specialist who conducts evidence-based assessments and works with youth and their families to determine the appropriate intervention plans. Once the assessment process is complete, the youth's case is transferred to a Support Intervention Accountability Team member, who implements the plan of care and provides case management services through the point of discharge. Like the rest of the plan, the discharge plan is developed collaboratively and is individualized to help ensure the best outcomes for

each young person. Youth in juvenile detention fall under the care of the TN DCS. The discharge policy for these young people is described in the Child Welfare section above.

### **Mental and Physical Health Institutions**

Within 48 hours of admission to the region's psychiatric hospital (Middle Tennessee Mental Health Institute, or MTMHI), social workers formulate discharge plans with the patient and/or legal guardian. Formal protocols are implemented through the TN Department of Mental Health and Substance Abuse Services which focus on discharge planning for the individual's needs in cooperation with existing family support, personal resources, diagnoses, medications and follow-up. Partnering with Centerstone, a member of the CoC, the discharge planning promotes moving into community settings when patients are clinically ready. Indigent/targeted funds provide temporary help with rent/utility deposits, transportation, and medication copays until income and benefits can be restored. A SOAR (Supplemental Security Insurance/Social Security Disability Insurance (SSI/SSDI) Outreach, Access, and Recovery) liaison to MTMHI enhances the connection to SSI/SSDI and TennCare benefits. Upon discharge, persons return to the home of family members, an apartment, recovery houses, or an appropriate group home setting. Supplemented by the state, Projects for Assistance in Transition from Homelessness (PATH) assistance to the Mental Health Cooperative provides outreach, referral, and linkage to housing and mainstream mental health/substance abuse services. Post-Discharge Follow-up Reports to MTMHI staff increase the likelihood that community housing options succeed.

The Metro Public Health Department (MPHD) has begun a Community Mental Health Systems Improvement (CMHSI) Plan through public and private partnerships. MHC, as a member of the CoC, has taken an active role of participation to ensure the connection between the CMHSI committee and the CoC. Due to overlap of partners and work, the CMHSI committee is incorporating the work of Nashville's Hospital to Home (H2H) initiative previously started to provide coordinated pathways to permanent housing for Nashville's most medically vulnerable, homeless residents. The H2H Steering Committee, including representatives from four local hospitals, three federally qualified health centers, and MHC was drawing on best practices from other cities, academic research, and an extensive examination of Nashville's local processes to determine the best approach to the challenge presented by people experiencing homelessness who are discharged by hospitals but who have no home and cannot manage their medical issues on the streets or in emergency shelters.

## **Mental Health Crisis Services**

The Mental Health Cooperative (TMHC) is the designated crisis provider for Davidson County. TMHC provides 24/7 crisis assessment and treatment services for individuals experiencing a psychiatric crisis. TMHC has 3 levels of crisis treatment services—

1. Crisis Stabilization Unit (CSU) – A 15 bed voluntary unit for individuals experiencing an acute crisis episode. Average length of stay is 2-3 days.
2. Crisis Resolution Center (CRC) – A unit that provides short term crisis intervention services. Average length of stay is 12-24 hours.
3. Intensive Intervention Center (IIC), *also known as Crisis Respite* – An 8 bed program designed to address less acute yet serious psychiatric crisis situations. Average length of stay is 2 days.

TMHC has 2 full time dedicated discharge planners who work with individuals who are receiving services in the Crisis Treatment Services Continuum. The discharge planners' goal is to develop an individualized plan for each person who is discharging from one of the crisis programs. The discharge plans include appointments for follow-up community treatment and referrals to housing resources if this is an area of need.

In addition to discharge services in crisis division, TMHC also has a hospital liaison position. This position receives referrals from local psychiatric hospitals on patients who are ready for discharge and ensures that the patient is set up for appropriate outpatient appointments for continued treatment.

## **Mental Health Cooperative Criminal Justice (CJ)/Mental Health Liaison**

The CJ Liaison works with individuals who have Severe and Persistent Mental Illness (SPMI) and co-occurring disorders and are involved in the Criminal Justice system and are at high risk of continuing to reoffend if appropriate community resources are not established. The CJ Liaison works directly with these individuals, as well as collaborates with involved parties such as jail medical/mental health staff, court personnel and family members to ensure that needs are identified and a discharge plan is developed that is suitable and acceptable by all parties involved. In some cases, the CJ Liaison will continue to provide support to the individual following release in order to ensure that identified services/resources are established and any additional needs can be addressed until the person has connected with community supports.

In addition to the services provided through the CJ Liaison program, other resources for discharge planning are available to individuals who are incarcerated in Davidson County

or otherwise involved in the Criminal Justice system. Davidson County Sheriff's Office (DCSO) jail facilities have a Medical Discharge Planner, employed by CorrectCare Solutions, and DCSO Case Managers. DCSO also has a Re-Entry service available to individuals incarcerated in DCSO who are eligible. CoreCivic also has a Re-Entry program, and an on-site Discharge Planner available to assist any individual incarcerated in CoreCivic Metro Detention Facility. Beyond the correctional facilities, individuals represented by the Nashville Public Defender's Office may be referred to the Client Advocate program, and assigned a Client Advocate who assists with linking the client with community resources and developing a discharge plan if the client is incarcerated. Mental Health Court, Veteran's Court and Drug Court address discharge planning needs of the individuals who have been accepted into these programs. Lastly, Community Corrections Dual Diagnosis Services develop discharge plans for their clients. All of these programs will also reach out to the CJ Liaison for assistance with discharge planning if needed.

## **SP-65 Lead based paint Hazards – 91.215(i)**

### **Actions to address LBP hazards and increase access to housing without LBP hazards**

MDHA implements its housing related activities in accordance with all applicable HUD, EPA, and State of Tennessee regulations. When providing assistance under its housing rehab programs, MDHA will provide all clients and potential clients with the “Lead-Based Paint” pamphlet that describes hazards of lead-based paint. Pursuant to 24 CFR Part 35, all rental and owner dwelling units built prior to 1978 that are assisted with federal funds are tested for lead-based paint. These tests consist of visual inspections, lead screens, and full assessments. Additionally, when properties test positive for LBP hazards, interim controls are performed and LBP clearances are provided. In addition, addressing lead-based paint hazards is an eligible activity in the home rehab programs and rehab of shelters and community centers.

### **How are the actions listed above related to the extent of lead poisoning and hazards?**

Exposure to lead-based paint represents one of the most significant environmental threats from a housing perspective. Housing conditions can significantly affect public health. HUD regulations regarding lead-based paint apply to all federally assisted housing. The major source of lead exposure comes from lead-contaminated dust found in deteriorating buildings. There are 77,104 owner-occupied units and 64,290 renter-occupied units at risk of lead based paint hazard in Nashville- Davidson County. Of these units, 18,718 owner-occupied units and 10,083 renter-occupied units have children present. Lead is a highly toxic metal that may cause a range of health problems for adults and children.

### **How are the actions listed above integrated into housing policies and procedures?**

As discussed above, pursuant to 24 CFR Part 35, all rental and homeowner dwelling units built prior to 1978 that are assisted with federal funds are tested for lead-based paint. This information is listed in the policies and procedures manual.

## **SP-70 Anti-Poverty Strategy – 91.215(j)**

### **Jurisdiction Goals, Programs and Policies for reducing the number of Poverty-Level Families**

During the five year Consolidated Plan period, MDHA will work to reduce the number of poverty-level families by:

- Funding summer youth programs that promote job skills development and youth employment programs that provide paying jobs during the summer months; through these programs approximately 6,000 are expected to participate in summer youth programs and 147 in youth employment programs during the five year period.
- Assisting at least 70 microenterprises.
- Providing employment services to over 50 LMI persons to advance Section 3 opportunities.
- Constructing affordable housing that caps rents at affordable rates.

Within Metro, the Financial Empowerment Center, Metro Social Services, the Mayor's Offices of Housing and Resilience, and the Nashville Career Advancement Center offer programs and services to reduce the number of poverty-level families. Further, the primary purpose of the Nashville Promise Zone is to address poverty for the over 140,000 residents within its 46-square mile boundary. Two of its 6 goals are to create jobs and spur economic activity.

### **How are the Jurisdiction poverty reducing goals, programs, and policies coordinated with this affordable housing plan**

The CDBG Employment Services program is specifically designed to facilitate Section 3 opportunities for LMI persons and businesses in connection with housing and other construction projects planned by MDHA and/or funded with CDBG or HOME dollars.

## **SP-80 Monitoring – 91.230**

### **Describe the standards and procedures that the jurisdiction will use to monitor activities carried out in furtherance of the plan and will use to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements**

MDHA is responsible for ensuring that the federal funds it manages are in compliance with all applicable statutes, regulations, and HUD policies. MDHA's performance monitoring activities include onsite monitoring, desk reviews, and technical assistance for our subrecipient agencies.

MDHA's Community Development Department staff conducts on-site monitoring of recipient agencies on an annual basis. Subrecipient monitoring includes a review of financial management practices, procurement and contracting, Fair Housing and Equal Opportunity (FHEO) compliance, lead-based paint compliance and income eligibility determination, as applicable. MDHA staff utilizes the HUD Monitoring Desk Guides and other checklist to determine CDBG, ESG, NSP, HOPWA, and HOME compliance. During desk reviews, subrecipients are required to provide periodic reports on their achievement of contractual objectives and must submit compliance documentation as a requirement for reimbursement. On-site technical assistance is provided if requested or if issues are raised during desk reviews or on-site monitoring visits.

In an effort to ensure long-term compliance with program requirements and comprehensive planning requirements, all subrecipients enter into a contractual agreement with MDHA. These agreements include a detailed scope of services with measurable objectives. The federal general provisions, along with reference to applicable OMB regulations, are included in contractual agreements to ensure compliance.

MDHA's Community Development Department will continue to evaluate its monitoring plan to ensure grant programs are in accordance with local program policies and procedures and Federal regulations. Staff will conduct an annual risk assessment to identify high-risk agencies or programs.

In addition to staff monitoring, Community Development programs may be selected for review by the Agency's internal and external auditors.

## Expected Resources

### AP-15 Expected Resources – 91.220(c)(1,2)

#### Introduction

On May 1, 2018, HUD announced the 2018 Allocations for CDBG, HOME, ESG, and HOPWA. Therefore, Allocation Amounts listed in the table below are actual amounts. Expected amounts available for the remainder of the Consolidated Plan are based on funding at 2018 levels. CDBG Program Income (PI) is estimated and is the average amount of PI collected for the program. HOME PI reflects PI as of April 30, 2018.

#### Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	public - federal	Admin and Planning Economic Development Housing Public Improvements Public Services	5,095,429	230,000	0	5,325,429	21,301,716	Expected amounts reflect level funding based on 2018 allocations.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
HOME	public - federal	Homebuyer assistance Multifamily rental new construction New construction for ownership	2,581,408	305,000	0	2,886,408	11,545,632	Expected amounts reflect level funding based on 2018 allocations.
HOPWA	public - federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services	1,216,011	0	0	1,216,011	4,864,044	Expected amounts reflect level funding based on 2018 allocations.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
ESG	public - federal	Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	417,516	0	0	417,516	1,670,064	Expected amounts reflect level funding based on 2018 allocations.

**Table 56 - Expected Resources – Priority Table**

In addition to the Consolidated Plan formula grants, funding from other Federal programs and local funds will be used to address Consolidated Plan priorities: Continuum of Care (CoC) funds, Neighborhood Stabilization Program (NSP) I and II Program Income, and CDBG Disaster Recovery (CDBG-DR) Program Income. For 2017-2018, the Nashville-Davidson County CoC has received over \$3.2 million through the annual competition for homeless assistance programs to be undertaken by MDHA and nonprofit organizations. MDHA has approximately \$500,000 in NSP PI on hand with an estimated \$120,000 expected to be received annually during five-year period covered by this Consolidated Plan from rental income from two multifamily rental projects previously acquired and constructed under the NSP programs. MDHA

plans to use NSP PI to fund housing activities that will benefit persons with incomes of up to 120% AMI to fill the gap for housing units for persons with incomes between 80 – 120% AMI as identified in the Mayor’s Housing Report Needs and Gap Analysis as other programs are limited to providing units for persons whose income does not exceed 60 to 80% AMI. NSP1 PI funds will be targeted to provide units countywide, while NSP2 PI funds will be targeted to the 17 census tracts identified in the NSP2 application. It is possible that some projects will be able to use PI from both sources. The funds will be loaned or granted as gap financing to nonprofit and for profit developers for eligible NSP activities through a Request for Proposal process. The minimum affordability period will be consistent with the HOME program requirements, where the affordability period ranges from 5 to 20 years based on the amount of the per-unit investment. Any PI generated from loans to developers will be used to fund additional projects.

On average, \$165,000 in CDBG-DR PI is generated annually through housing activities undertaken by The Housing Fund (THF). No Program Income is currently on hand as THF continues to use funds to acquire, rehab, and sell homes in flood-impacted areas to LMI buyers. It is expected that the CDBG-DR grant will be closed out in early 2020; at that time, CDBG-DR PI will become PI to the CDBG program.

MDHA receives pass through funding from the Tennessee Housing Development Agency (THDA) for the U.S. Department of Energy Weatherization Assistance Program (WAP) and for the U.S. Department of Health and Human Services Low Income Home Energy Assistance Program (LIHEAP), which are used jointly to install weatherization measures for very low income households. At the time of draft publication, current allocation amounts are used as 2018 allocations have not been announced.

During the five year Consolidated Plan period, MDHA and Metro will consider Section 108 Loan Guarantee opportunities to further the goals of this Plan.

The Metropolitan Government also funds affordable housing and homeless assistance programs. For 2019, the Mayor’s proposed budget includes \$10,000,000 for the Barnes Fund and \$450,000 for the Housing Incentive Pilot Program (HIPP). The 2019 budget also includes \$618,000 for homeless services programs for assessment and intervention services for homeless individuals and those at risk of becoming homeless so they can obtain or maintain permanent supportive housing and a little over \$2 million to fund the Metro Homelessness Commission and its programs. The Health Care for the Homeless Program has a proposed budget of \$355,200. Further, the Mayor recently announced the use of \$25,000,000 in General Obligation Bonds to construct a new

homeless services center with 100 new units of permanent supportive housing for the homeless above.

### **Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied**

#### Leverage

MDHA attempts to use federal funds to leverage additional resources in several ways. Except for homeowner rehab assistance, applications for funding should demonstrate the ability to leverage funds. This is part of the Financial Capacity evaluation criteria for requests for proposals. MDHA's grant writer researches Federal, state, local, and private funding opportunities to apply for funds that further MDHA's mission based on the priorities established in the Consolidated Plan and Public Housing Plan.

To leverage HOME dollars, MDHA continues efforts to fund projects that leverage other resources for affordable housing development. For example, recently funded projects leveraged funds from U.S. HUD/SHOP Grant, Federal Home Loan Bank AHP funds, private funds from corporations, foundations, churches, and individuals. Additionally, the Barnes Fund, Metro's local Housing Trust Fund, makes funds available that are used to leverage HOME dollars. Another opportunity to leverage HOME funds is with Low Income Housing Tax Credits (LIHTC). MDHA actively pursues other funding opportunities to leverage HOME and CDBG funds to create affordable housing through the Community Reinvestment Act (CRA), HUD-insured loans, the Rental Assistance Demonstration (RAD) program, and the State Housing Trust Fund (HFT). Where appropriate, leverage may be achieved through supportive services provided by partners.

#### Match Requirements

The HOME program requires a 25% match of the total HOME funds drawn down for project costs. This match is different than leverage, and this requirement will be met by match credit from prior HOME projects, Barnes Trust fund projects that meet the requirements of the HOME program, by the value of donated land or improvements, or by other eligible methods as provided in the HOME regulations. Amounts above the 25% match are considered leverage.

CoC funds must be matched 25% by funding from other eligible sources. An array of sources are expected to be leveraged to meet this match, depending on the project and

the administering agency – from the value of primary care and pharmacy services to residents living in permanent supportive housing, to private donations that assist with operating costs, to federal and state funds that help further CoC planning activities.

**If appropriate, describe publically owned land or property located within the jurisdiction that may be used to address the needs identified in the plan**

MDHA is currently reviewing its inventory of property to create a plan for development or disposition. Metro has established a Community Land Trust to acquire property and preserve it for long-term affordability.

## Annual Goals and Objectives

### AP-20 Annual Goals and Objectives

#### Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	New Affordable Housing Opportunities	2018	2023	Affordable Housing  Non-Housing Community Development	Countywide  Housing Target Areas	Construct New Affordable Housing  Address Housing Barriers	CDBG: \$27,691  HOME: \$2,597,767	Public service activities other than Low/Moderate Income Housing Benefit: 150 Persons Assisted  Rental units constructed: 50 Household Housing Unit  Homeowner Housing Added: 8 Household Housing Unit
2	Affordable Housing Preservation	2018	2023	Affordable Housing  Public Housing Non-Housing Community Development	Countywide  Napier-Sudekum CNI Planning Area  Housing Target Areas	Retain Affordable Housing Stock  Maintain Housing Stability	CDBG: \$2,662,724	Public service activities other than Low/Moderate Income Housing Benefit: 125 Persons Assisted  Rental units rehabilitated: 13 Household Housing Unit

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
								Homeowner Housing Rehabilitated: 157 Household Housing Unit  Other: 1 Other
3	Support for Homeless & Persons with HIV/AIDS	2018	2023	Homeless  Non-Homeless Special Needs	Countywide  Metropolitan Statistical Area	Assist Homeless Persons & Persons with HIV/AIDS	CDBG: \$124,614  HOPWA: \$1,179,531  ESG: \$386,202	Tenant-based rental assistance / Rapid Rehousing: 325 Households Assisted  Homeless Person Overnight Shelter: 2000 Persons Assisted  Homelessness Prevention: 75 Persons Assisted  HIV/AIDS Housing Operations: 53 Household Housing Unit  Other: 2820 Other

4	Self-sufficiency Opportunities	2018	2018	Public Housing Non-Housing Community Development	Countywide CDBG Target Areas Napier-Sudekum CNI Planning Area	Create Economic Opportunities for LMI Persons Support Youth Programs	CDBG: \$560,763.90	Public service activities other than Low/Moderate Income Housing Benefit: 1357 Persons Assisted  Businesses assisted: 14 Businesses Assisted  Other: 1 Other
5	Neighborhood Revitalization	2018	2023	Non-Housing Community Development	Napier-Sudekum CNI Planning Area  CDBG Target Areas	Invest in Underserved Areas	CDBG: \$213,015	Other: 1 Other
6	Administration and Planning	2018	2023	Affordable Housing  Homeless Non-Homeless Special Needs  Non-Housing Community Development	Countywide Metropolitan Statistical Area Napier-Sudekum CNI Planning Area CDBG Target Areas  Housing Target Areas	Provide Oversight and Management of Grants	CDBG: \$1,065,085  HOPWA: \$36,480  HOME: \$288,641  ESG: \$31,314	Other: 4 Other

Table 57 – Goals Summary

## Goal Descriptions

<b>1</b>	<b>Goal Name</b>	<b>New Affordable Housing Opportunities</b>
	<b>Goal Description</b>	Increase the number of decent, safe affordable units and help LMI households access affordable housing.
<b>2</b>	<b>Goal Name</b>	<b>Affordable Housing Preservation</b>
	<b>Goal Description</b>	Preserve existing affordable housing units and help LMI tenants and homeowners retain housing.
<b>3</b>	<b>Goal Name</b>	<b>Support for Homeless &amp; Persons with HIV/AIDS</b>
	<b>Goal Description</b>	Support facilities and services for homeless persons and persons with HIV/AIDS.
<b>4</b>	<b>Goal Name</b>	<b>Self-sufficiency Opportunities</b>
	<b>Goal Description</b>	Create pathways to self-sufficiency for LMI persons and families.
<b>5</b>	<b>Goal Name</b>	<b>Neighborhood Revitalization</b>
	<b>Goal Description</b>	Revitalize distressed neighborhoods and underserved areas.
<b>6</b>	<b>Goal Name</b>	<b>Administration and Planning</b>
	<b>Goal Description</b>	Undertake grant management, planning, and other eligible administrative tasks authorized under CDBG, HOME, ESG, and HOPWA.

## Projects

### AP-35 Projects – 91.220(d)

#### Introduction

The following are proposed projects to be undertaken during the 2018 program year or utilizing 2018 allocations.

Projects	
#	Project Name
1	CDBG Administration & Planning
2	CDBG Targeted Rehab (Napier-Sudekum Choice Planning Area)
3	CDBG Homeowner Rehab (CDBG Target Area)
4	CDBG Weatherization Assistance
5	CDBG HVAC Replacement
6	CDBG Rental Rehab
7	CDBG Housing Services/Delivery Costs
8	CDBG Summer Youth Programs
9	CDBG Youth Employment Programs
10	CDBG Housing Assistance for the Homeless
11	CDBG Renter Counseling Services
12	CDBG Fair Housing Services
13	CDBG Employment Services
14	CDBG Section 108 Loan Repayment
15	CDBG Microenterprise Assistance
16	CDBG Public Facilities and Improvements
17	HOME Administration
18	HOME New Construction - Rental
19	HOME New Construction - Ownership
20	HOME New Nonprofit Partner Set-Aside
21	HOPWA Housing and Supportive Services
22	ESG Programs and Services

**Table 58 - Project Information**

**Describe the reasons for allocation priorities and any obstacles to addressing underserved needs**

Funding priorities for the 2018 Action Plan are the same as those in the Strategic Plan. Not only are funding priorities intended to address underserved needs as identified in the needs assessment and through public input, they are designed for implementation to be feasible and to be effective.

## AP-38 Project Summary

### Project Summary Information

<b>1</b>	<b>Project Name</b>	<b>CDBG Administration &amp; Planning</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Administration and Planning
	<b>Needs Addressed</b>	Provide Oversight and Management of Grants
	<b>Funding</b>	CDBG: \$1,065,085.00 (\$1,019,085 Grant + \$46,000 PI)
	<b>Description</b>	Funding to be used for oversight and administration of CDBG programs, including monitoring, reporting, program evaluation, fair housing activities, and the development of the Consolidated Plan and annual updates and amendments. Planning includes studies, analysis, data gathering, and preparation of plans.
	<b>Target Date</b>	5/31/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A
	<b>Location Description</b>	Countywide
	<b>Planned Activities</b>	Funds to be used by MDHA as the lead agency for the development and administration of the Consolidated Plan. Administrative activities include grant management, monitoring, budgeting, and planning and executing CDBG-eligible activities. MDHA may choose to partner with another entity to undertake eligible planning activities. Funding for this activity is capped at 20% of the annual CDBG allocation plus 20% of program income.
<b>2</b>	<b>Project Name</b>	<b>CDBG Targeted Rehab (Napier-Sudekum CNI Planning Area)</b>
	<b>Target Area</b>	Napier-Sudekum CNI Planning Area
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Retain Affordable Housing Stock
	<b>Funding</b>	CDBG: \$213,017.92 (203,817.92 Grant + \$9,200.00 PI)
	<b>Description</b>	Rehabilitation of owner-occupied homes in the Napier-Sudekum CNI Planning Area.
	<b>Target Date</b>	9/30/2019

	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	11 owner/occupied units in the designated area.
	<b>Location Description</b>	Napier-Sudekum CNI Planning Area
	<b>Planned Activities</b>	<p>Assistance will be provided in the form of forgivable loans for elderly (age 62+) homeowners. Assistance to other homeowners will be provided in the form of deferred (due on sale) loans. Repairs or improvements will be limited to items that address health and safety needs, such as heat/air, roof repair, plumbing, electrical, and accessibility.</p> <p>Priority will be given to homeowners whose incomes are at or below 50% AMI, persons with disabilities, and the elderly (age 62+). This program will be administered directly by MDHA and/or contracted out via a contracted partner.</p> <p>Homeowners may apply during the open application period, and funds will be allocated on a first-come, first-serve basis to eligible households until funding is exhausted.</p>
<b>3</b>	<b>Project Name</b>	<b>CDBG Homeowner Rehab</b>
	<b>Target Area</b>	Housing Target Areas (Preference will be given to projects located in Housing Target Areas, but assistance may be provided Countywide if there is not sufficient interest in Housing Target Areas.)
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Retain Affordable Housing Stock
	<b>Funding</b>	CDBG: \$1,065,089.60 (\$1,019,089.60 Grant + \$46,000.00 PI)
	<b>Description</b>	Rehab of homes occupied by LMI families, targeted to homes within Housing Target Areas.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	53 units owned and occupied by persons with incomes at or below 80% AMI

	<b>Location Description</b>	Metro Council Districts experiencing high housing costs due to increases in property values and loss of (or are at risk of losing) affordable housing due to economic pressure.
	<b>Planned Activities</b>	<p>Assistance will be provided in the form of forgivable loans for elderly (age 62+) homeowners. Assistance to other homeowners will be provided in the form of deferred (due on sale) loans. Repairs or improvements will be limited to items that address health and safety needs, such as heat/air, roof repair, plumbing, electrical, and accessibility.</p> <p>Priority will be given to homeowners whose incomes are at or below 50% AMI, persons with disabilities, and the elderly (age 62+). This program will be administered directly by MDHA and/or via a contracted partner.</p> <p>Homeowners may apply during the open application period, and funds will be allocated on a first-come, first-serve basis to eligible households until funding is exhausted.</p>
<b>4</b>	<b>Project Name</b>	<b>CDBG Weatherization Assistance</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Retain Affordable Housing Stock
	<b>Funding</b>	CDBG: \$79,881.72 (\$76,431.72 Grant + \$3,450.00 PI)
	<b>Description</b>	Installation of weatherization measures in owner-occupied units in conjunction with assistance received through the U.S. Department of Energy's Weatherization Assistance Program (WAP).
	<b>Target Date</b>	6/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	53 units owned and occupied by households with incomes 200% of the State of Tennessee poverty level or less. Funding is used in conjunction with the DOE WAP, and households must be approved to receive WAP.
	<b>Location Description</b>	Countywide

	<b>Planned Activities</b>	<p>CDBG funds will be used to supplement health and safety needs identified in an energy audit of each home receiving WAP assistance. CDBG funds allow improvements to increase the efficient use of energy in structures through such means as installation of storm windows and doors, siding, wall and attic insulation, and conservations modifications, or replacement of heating and cooling equipment, including the use of solar energy equipment. Homes built prior to 1978 will have a lead based paint evaluation.</p> <p>Priority will be given to households with elderly (age 62+) persons, persons with disabilities, and families with children under 6. Priority is also given based on poverty level, energy burden, and annual household energy costs.</p> <p>Homeowners must apply through the DOE Weatherization Assistance Program.</p>
5	<b>Project Name</b>	<b>CDBG HVAC Replacement</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Retain Affordable Housing Stock
	<b>Funding</b>	CDBG: \$133,136.20 (\$127,386.20 Grant + \$5,750.00 PI)
	<b>Description</b>	Installation of new HVAC systems or replacement of nonfunctioning HVAC units in homes owned and occupied by LMI households who are not receiving assistance through the CDBG Weatherization Program.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	40 units owned and occupied by LMI households ( $\leq$ 80% AMI) who are not receiving assistance through the CDBG Weatherization Program.
	<b>Location Description</b>	Countywide

	<b>Planned Activities</b>	Installation of new HVAC systems or replacement of nonfunctioning HVAC units. Assistance will be treated as a grant to eligible homeowners. Homeowners may apply during the open application period or be referred to the program through the Homeowner Rehab or Weatherization Programs. Funds will be allocated on a first-come, first-serve basis to eligible households until funding is exhausted.
<b>6</b>	<b>Project Name</b>	<b>CDBG Rental Rehab</b>
	<b>Target Area</b>	Housing Target Areas (Preference will be given to projects located in Housing Target Areas, but assistance may be provided Countywide if there is not sufficient interest in Housing Target Areas.)
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Retain Affordable Housing Stock
	<b>Funding</b>	CDBG: \$639,053.76 (\$611,453.76 Grant + \$27,600.00 PI)
	<b>Description</b>	Rehab of existing units to be occupied by LMI ( $\leq$ 80% AMI) families.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	13 LMI households ( $\leq$ 80% AMI)
	<b>Location Description</b>	Metro Council Districts experiencing loss or are at-risk of losing affordable housing.

	<b>Planned Activities</b>	<p>Assistance will be provided to qualified landlords or developers on a first-come, first-approved basis until funding is exhausted to rehabilitate vacant, substandard rental property to lease to tenants with incomes at or below 80% AMI.</p> <p>Rehabilitation of occupied units may be considered on a case-by-case basis if the extent of the rehabilitation does not require permanent relocation of existing tenants. Projects that would require the permanent displacement of existing residents will not be eligible for funding.</p> <p>Assistance will be provided in the form of a forgivable loan if a landlord agrees to makes units available exclusively for Voucher holders (Section 8, VASH, etc.); otherwise, assistance will be as a low-interest loan. All units must remain affordable and be leased to income-eligible tenants for a minimum of 10 years.</p>
7	<b>Project Name</b>	<b>CDBG Housing Services/Delivery Costs</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Retain Affordable Housing Stock
	<b>Funding</b>	CDBG: \$532,544.80 (\$509,544.80 Grant + \$23,000.00 PI)
	<b>Description</b>	Activity delivery costs associated with carrying out CDBG-eligible housing activities or in support of the HOME Program.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A. Accomplishments are tied to specific CDBG and HOME housing activities.
	<b>Location Description</b>	Countywide Napier-Sudekum CNI Planning Area Housing Target Areas

	<b>Planned Activities</b>	Activity delivery costs incurred by MDHA for its contractors that are associated with the execution of the CDBG Rehab (Homeowner and Rental) and Weatherization programs, such as reviewing and approving applications, making home inspections, preparing work-write ups, and inspecting projects through completion. Costs are also associated with housing activities that are linked to providing services to owners, tenants, contractors, and other eligible entities participating in or seeking to participate in the HOME program.
<b>8</b>	<b>Project Name</b>	<b>CDBG Summer Youth Programs</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Self-sufficiency Opportunities
	<b>Needs Addressed</b>	Support Youth Programs
	<b>Funding</b>	CDBG: \$297,689.00 (\$284,832.00 Grant + \$12,857.00 PI)
	<b>Description</b>	New or enhanced programs undertaken by nonprofit or public agencies that serve youth ages 6-18 from LMI families during the Summer of 2018.
	<b>Target Date</b>	7/31/2018
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	1200 youth ages 6-18 from families with incomes ≤ 80% AMI.
	<b>Location Description</b>	Countywide, with encouragement to recruit children living in MDHA-owned public/affordable housing.
<b>Planned Activities</b>	<p>Programs must provide new or enhanced activities that will further participants' academic, artistic, and athletic interests, as well as promote job skills development and/or healthy lifestyles, to help prepare youth to become successful adults. Programs must operate between June 1 and July 31, 2018.</p> <p>Funding is awarded through a competitive process. A portion of funds may be used by MDHA for activity delivery costs.</p>	

<b>9</b>	<b>Project Name</b>	<b>CDBG Youth Employment Programs</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Self-sufficiency Opportunities
	<b>Needs Addressed</b>	Support Youth Programs
	<b>Funding</b>	CDBG: \$89,999.00 (\$86,112.00 Grant + \$3,887.00 PI)
	<b>Description</b>	Summer employment opportunities for youth ages 14-16 from LMI families offered by nonprofit and public agencies participating in Metro's Opportunity NOW program during the Summer of 2018.
	<b>Target Date</b>	7/31/2018
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	147 youth ages 14-16 from households with incomes $\leq$ 80% AMI.
	<b>Location Description</b>	Countywide
<b>Planned Activities</b>	<p>Grants awarded to nonprofit and public agencies providing employment opportunities as part of Metro Government's "Opportunity NOW" work program that focuses on the need for employment and job training opportunities for youth ages 14 – 16. Programs include one week of training and six weeks of paid, project-based community improvement work. Examples of project-based work programs include community gardens, community art projects, and neighborhood cleanup projects, etc. Programs may begin on or before June 1 and must conclude by July 31, 2018.</p> <p>Funding is awarded through a competitive process. A portion of the funds may be used by MDHA for activity delivery costs.</p>	
<b>10</b>	<b>Project Name</b>	<b>CDBG Housing Assistance for the Homeless</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Support for Homeless Persons and Persons with HIV/AIDS
	<b>Needs Addressed</b>	Assist Homeless Persons & Persons with HIV/AIDS
	<b>Funding</b>	CDBG: \$124,614.00 (\$119,232.00 Grant + \$5,382.00 PI)

	<b>Description</b>	Limited assistance of one-time emergency payments for rent and utility needs for homeless persons obtaining housing through the Metro Homelessness Commission or utilizing MDHA Voucher programs (i.e., Shelter Plus Care, VASH).
	<b>Target Date</b>	6/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	125 persons
	<b>Location Description</b>	Countywide for homeless persons who need emergency assistance for housing placement in Davidson County.
	<b>Planned Activities</b>	One-time emergency payments up to \$1000 per client to pay first month's rent and security and utility deposits for homeless persons obtaining housing through the Metro Homelessness Commission or utilizing MDHA Voucher programs (i.e., Shelter Plus Care, VASH). Payments are made directly to landlords and utility companies.  A portion of the funds may be used by MDHA for activity delivery costs.
<b>11</b>	<b>Project Name</b>	<b>CDBG Renter Counseling Services</b>
	<b>Target Area</b>	Housing Target Areas
	<b>Goals Supported</b>	Affordable Housing Preservation
	<b>Needs Addressed</b>	Maintain Housing Stability
	<b>Funding</b>	CDBG: \$103,845.00 (\$99,360.00 Grant + \$,485.00 PI)
	<b>Description</b>	Counseling services provided to tenants of MDHA-owned public/affordable housing on tenant responsibilities to help them maintain housing stability.
	<b>Target Date</b>	9/30/2018
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	125 residents of MDHA-owned public/affordable housing.
	<b>Location Description</b>	MDHA-owned properties in Housing Target Areas

	<b>Planned Activities</b>	<p>Counseling program designed to equip residents with tools to become responsible tenants and good neighbors and to help mitigate potential or actual problems that could result in housing loss. Program should have a specific plan, strategy, and intervention t that has been shown to positively address housing loss prevention.</p> <p>Funding is awarded through a competitive process. A portion of the funds may be used by MDHA for activity delivery costs.</p>
<b>12</b>	<b>Project Name</b>	<b>CDBG Fair Housing Services</b>
	<b>Target Area</b>	Countywide, with emphasis on Housing Target Areas
	<b>Goals Supported</b>	New Affordable Housing Opportunities Affordable Housing Preservation
	<b>Needs Addressed</b>	Address Housing Barriers Maintain Housing Stability
	<b>Funding</b>	CDBG: \$27,691 (\$26,496.00 Grant + \$1,195 PI)
	<b>Description</b>	Fair housing counseling, outreach, and education; conduct complaint-based testing.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	150 persons
	<b>Location Description</b>	Countywide, with an emphasis on assisting LMI residents in Housing Target Areas

	<b>Planned Activities</b>	<p>Speaking with aggrieved individuals to inform them of their rights pertaining to Fair Housing and interacting with a potentially aggrieved individual's housing provider to determine the housing provider's version of the facts (i.e., investigation.); interacting with a housing provider to inform the housing provider of his or her obligations under applicable law, in order to bring relief to the aggrieved individual; providing legal representation to an aggrieved individual, either as a defendant or plaintiff in housing-related litigation; providing general education information to individuals to inform them of their rights in conjunction with the Fair Housing Laws; providing general educational information to individuals to inform them of their rights in conjunction with the Fair Housing Laws.</p> <p>Funding will be awarded to a qualified nonprofit through a competitive process.</p> <p>A portion of the funds may be used to pay by MDHA for activity delivery costs.</p>
<b>13</b>	<b>Project Name</b>	<b>CDBG Employment Services</b>
	<b>Target Area</b>	Housing Target Areas
	<b>Goals Supported</b>	Self-sufficiency Opportunities
	<b>Needs Addressed</b>	Create Economic Opportunities for LMI Persons
	<b>Funding</b>	CDBG: \$48,461.00 (\$46,368.00 Grant + \$2,093.00 PI)
	<b>Description</b>	Employment services to connect LMI persons to employment opportunities associated with housing construction and redevelopment projects undertaken by MDHA in Housing Target Areas, with the goal to provide Section 3 opportunities.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	10 persons
	<b>Location Description</b>	Housing construction/redevelopment projects undertaken by MDHA in Housing Target Area.

	<b>Planned Activities</b>	Employment navigation services and/or soft skills job training to assist with increasing opportunities for potential Section 3 businesses or individuals to work on MDHA projects.  The program may be administered by MDHA or through a contracted partner.
<b>14</b>	<b>Project Name</b>	<b>CDBG Section 108 Loan Repayment</b>
	<b>Target Area</b>	N/A
	<b>Goals Supported</b>	N/A
	<b>Needs Addressed</b>	N/A
	<b>Funding</b>	CDBG: \$567,690.10 (\$543,172.10 Grant + \$24,518.00)
	<b>Description</b>	Principal and interest payment on a Section 108 Loan
	<b>Target Date</b>	8/31/2018 (Final Payment)
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A
	<b>Location Description</b>	\$6,000,000 loan was used in 1998 to acquire land on the East Bank of the Cumberland River to eliminate slums and blight and is currently used as a park.
	<b>Planned Activities</b>	Final loan payment.
<b>15</b>	<b>Project Name</b>	<b>CDBG Microenterprise Assistance</b>
	<b>Target Area</b>	CDBG Target Areas
	<b>Goals Supported</b>	Self-sufficiency Opportunities
	<b>Needs Addressed</b>	Create Economic Opportunities for LMI Persons
	<b>Funding</b>	CDBG: \$124,614.90 (\$119,232.90 Grant + \$5,382.00 PI)
	<b>Description</b>	Microenterprise assistance to a commercial enterprise that has five or fewer employees, one or more of whom owns the enterprise and is LMI.
	<b>Target Date</b>	9/30/2019
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	14 businesses
	<b>Location Description</b>	Preference for businesses located in or will be located in CDBG Target Areas, with opportunities for businesses Countywide

	<b>Planned Activities</b>	<p>Microenterprise assistance for businesses that have five or fewer employees, one or more of whom owns the business and is LMI. An emphasis will be placed on women-owned businesses and business opportunities for public housing residents. Activities will include recruiting program participants; providing business and personal development training programs to qualified businesses/persons; providing individual consulting to participants for the development of business plans, loan applications and business problem-solving during and after start-up; facilitating access to business mentors or volunteers such as accountants or lawyers for the duration of the contract; advising and assisting participants concerning participation with existing trade associations, business networks, and lenders.</p> <p>Program will be administered through a contracted partner.</p> <p>A portion of the funds may be used by MDHA for activity delivery costs.</p>
16	<b>Project Name</b>	<b>CDBG Public Facilities and Improvements</b>
	<b>Target Area</b>	CDBG Target Areas
	<b>Goals Supported</b>	Neighborhood Revitalization
	<b>Needs Addressed</b>	Invest in Underserved Areas
	<b>Funding</b>	CDBG: \$213,015.00 (\$203,815.00 CDBG + \$9,200 PI)
	<b>Description</b>	Construction or expansion of a neighborhood facility owned by a nonprofit or public agency or installation of infrastructure improvements (such as sidewalks or bus stops) in CDBG Target Areas
	<b>Target Date</b>	9/30/2020
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	1 project
	<b>Location Description</b>	Projects must be located in and serve residents in a CDBG Target Area

	<b>Planned Activities</b>	Costs include hard and soft costs, A&E costs. Maintenance/operations costs are not eligible. Projects will be identified through collaboration with Metro. Funds for public facilities may be used for Metro or MDHA-owned projects or awarded to qualified nonprofits.  A portion of funds may be used by MDHA for activity delivery costs.
<b>17</b>	<b>Project Name</b>	<b>HOME Administration</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	New Affordable Housing Opportunities
	<b>Needs Addressed</b>	Construct New Affordable Housing
	<b>Funding</b>	HOME: \$288,640.80 (\$258,140.80 Grant + \$30,500 PI)
	<b>Description</b>	Provide grant management, compliance, and oversight of Home-funded activities.
	<b>Target Date</b>	5/31/2018
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A
	<b>Location Description</b>	Countywide
<b>Planned Activities</b>	Administrative costs include staff and related costs for overall program management, coordination, monitoring, reporting, and evaluation. Administrative activities will be undertaken by MDHA.	
<b>18</b>	<b>Project Name</b>	<b>HOME New Construction – Rental</b>
	<b>Target Area</b>	Countywide, with a preference for Housing Target Areas
	<b>Goals Supported</b>	New Affordable Housing Opportunities
	<b>Needs Addressed</b>	Construct New Affordable Housing
	<b>Funding</b>	HOME: \$2,020,485.60 (\$1,806,985.60 Grant + \$213,500.00 PI)
	<b>Description</b>	Funding for construction of new units for rent to households with incomes $\leq$ 60% AMI.
	<b>Target Date</b>	5/31/2022
	<b>Estimate the number and type of families that will benefit from the</b>	50 units ( $\leq$ 60% AMI), with priority for projects that benefit large families, persons with disabilities, and/or extremely low income tenants (0-30% AMI)

<b>proposed activities</b>	
<b>Location Description</b>	Preference will be given to projects located in Housing Target Areas, but projects may be built Countywide if there are no eligible projects proposed in Housing Target Areas.
<b>Planned Activities</b>	<p>A minimum of 15% of the 2018 HOME allocation, estimated to be \$387,211, will be set-aside for eligible CHDO projects. The tenure of the CHDO projects will be based on developer demand and can come from the homeowner or rental project budgets.</p> <p>Additionally, MDHA may aside a minimum of \$500,000 for the redevelopment of MDHA-owned properties converted under RAD.</p> <p>For remaining funds, MDHA may award funds on a first-come, first –served basis through an open application cycle or on a competitive basis via a Request for Proposals development.</p> <p>Financial assistance to developers may be in the form predevelopment loans, construction loans, and permanent financing.</p> <p>Eligible uses of funds include acquisition, site preparation, construction, and soft costs. All new construction projects will be subject to underwriting by MDHA and must meet HOME Site and Neighborhood Standards.</p> <p>Units must be occupied by tenants with incomes at or below 60% AMI. In projects with 5 or more HOME-assisted units, at least 20% of the units must serve households at or below 50% AMI.</p> <p>Projects that would require the permanent displacement of existing residents will not be eligible for funding.</p>

<b>19</b>	<b>Project Name</b>	<b>HOME New Construction – Ownership</b>
	<b>Target Area</b>	Countywide, with a preference for Housing Target Areas
	<b>Goals Supported</b>	New Affordable Housing Opportunities
	<b>Needs Addressed</b>	Construct New Affordable Housing
	<b>Funding</b>	HOME: \$288,640.80 (\$258,140.80 Grant + \$30,500.00 PI)
	<b>Description</b>	New construction for ownership and downpayment assistance in conjunction with the purchase of these homes by LMI households ( $\leq 80\%$ AMI).
	<b>Target Date</b>	5/31/2022
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	5 homes ( $\leq 80\%$ AMI), with priority given to projects that benefit large families.
	<b>Location Description</b>	Preference will be given to projects located in Housing Target Areas, but projects may be built Countywide if there are no eligible projects proposed in Housing Target Areas.
	<b>Planned Activities</b>	<p>A minimum of 15% of the 2018 HOME allocation, estimated to be \$387,211, will be set-aside for eligible CHDO projects. The tenure of the CHDO projects will be based on developer demand and can come from the homeowner or rental project budgets.</p> <p>Funding for the construction of new homes (including property acquisition costs), and downpayment assistance for eligible homebuyers to purchase these homes. All purchasers must receive/complete homebuyer education through a HUD or THDA approved education provider.</p> <p>MDHA may award funds on a competitive basis via a Request for Proposals or on a first come, first served basis through an open application cycle/RFP or undertake development.</p> <p>Projects that would require the permanent displacement of existing residents will not be eligible for funding.</p>

<b>20</b>	<b>Project Name</b>	<b>HOME New Nonprofit Partner Set-Aside</b>
	<b>Target Area</b>	Countywide, with a preference for Housing Target Areas
	<b>Goals Supported</b>	New Affordable Housing Opportunities
	<b>Needs Addressed</b>	Construct New Affordable Housing
	<b>Funding</b>	HOME: \$288,640.80 (\$258,140.80 Grant + \$30,500 PI)
	<b>Description</b>	Funding awarded to new nonprofit partners for construction of new properties, for rent to households with incomes ≤ 60% AMI or new home construction and downpayment assistance for the purchase of these homes by LMI households (≤ 80% AMI).
	<b>Target Date</b>	5/31/2022
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	3 units - Homeownership @ ≤80% AMI or Rental @ ≤60% AMI, with priority given to projects that benefit large families, persons with disabilities, and/or extremely low income families (0-30%)
	<b>Location Description</b>	Preference will be given to projects located in Housing Target Areas, but projects may be built Countywide if there are no eligible projects proposed in Housing Target Areas.
	<b>Planned Activities</b>	<p>For 2018, a set-aside of HOME funds to nonprofit developers who have not been awarded HOME funds in the last five years AND have completed the Barnes Fund Capacity Building program.</p> <p>Eligible applicants must have a shovel ready project and demonstrate their ability to develop successful affordable housing projects. <b>Eligible activities for consideration include:</b></p> <ul style="list-style-type: none"> <li>• New construction of rental housing</li> <li>• New construction of single-family homebuyer property and direct financial assistance for LMI buyer to purchase the home.</li> <li>• Allowable activities include acquisition, site preparation, construction, and soft costs.</li> </ul> <p>An organization that is awarded funds through this Set-Aside will not be eligible to apply for the next two (2) years following completion of the funding year in which funds were awarded.</p>

		<p>MDHA may award funds on a first come, first served basis through an open application cycle or on a competitive basis via a Request for Proposals.</p> <p>Funds not obligated under this activity within 1 ½ years of the applicable program year start date may be reallocated to Rental and Homeownership project budgets not subject to the set-aside requirement.</p> <p>Projects that would require the permanent displacement of existing residents will not be eligible for funding.</p>
21	<b>Project Name</b>	<b>HOPWA Housing and Supportive Services</b>
	<b>Target Area</b>	Metropolitan Statistical Area
	<b>Goals Supported</b>	Support for Homeless & Persons with HIV/AIDS
	<b>Needs Addressed</b>	Assist Homeless Persons & Persons with HIV/AIDS
	<b>Funding</b>	HOPWA: \$1,216,011.00
	<b>Description</b>	Housing; short-term rent, mortgage, and utility assistance (STRMU); supportive services for persons with HIV/AIDS and their families; program administrative costs incurred by MDHA and Sponsor agencies
	<b>Target Date</b>	5/31/2021
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	<ul style="list-style-type: none"> <li>-Facility Operations/Permanent Housing: 53 persons</li> <li>-STRMU: 275 persons</li> <li>-Supportive Services: 2,320 persons</li> </ul>
	<b>Location Description</b>	Persons with HIV/AIDS in the Nashville-Davidson—Murfreesboro-Franklin-MSA
<b>Planned Activities</b>	<ul style="list-style-type: none"> <li>• \$121,601.01 for <u>Administration</u> – \$36,480.33 retained by MDHA and \$85,120.77 to be awarded to Sponsor agencies</li> <li>• \$1,094,409.90 for the following eligible activities: <ul style="list-style-type: none"> <li>○ <u>Facility Operations/Permanent Housing</u> – costs associated with the operation of housing such as maintenance, security, operation, insurance, utilities, furnishings, equipment, supplies, and other incidental costs</li> <li>○ <u>STRMU</u> – reasonable rent and mortgage assistance payments that represent actual housing costs; assistance varies per client depending on funds</li> </ul> </li> </ul>	

		<p>available, tenant need, and program guidelines</p> <ul style="list-style-type: none"> <li>○ <u>Supportive Services</u> - services including, but are not limited to, health, mental health assessments, permanent housing placement, drug and alcohol abuse treatment and counseling, day care, personal assistance, nutritional services, intensive care when required, and assistance in gaining access to local, State, and Federal government benefits and services, except that health services may only be provided to individuals with acquired immunodeficiency syndrome or related diseases and not to family members of these individuals</li> </ul> <p>All funds will be awarded to Sponsors selected for funding through an RFA to be issued in Spring 2018. Proposals will be evaluated by a Review Committee comprised of MDHA staff, representatives of programs that serve persons living with HIV/AIDS, or individuals that are knowledgeable about various aspects of housing services in accordance with the evaluation criteria contained in the RFA and ranked from highest to lowest. Funding will be awarded for projects according to their overall rank until funding is exhausted.</p>
<b>22</b>	<b>Project Name</b>	<b>ESG Programs and Services</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Support for Homeless Persons & Persons with HIV/AIDS
	<b>Needs Addressed</b>	Assist Homeless Persons & Persons with HIV/AIDS
	<b>Funding</b>	ESG: \$417,516
	<b>Description</b>	Activities to support homeless persons - rapid re-housing and homeless prevention assistance, shelter operations/essential services, and outreach; program and HMIS administration
	<b>Target Date</b>	5/31/2020
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	-Rapid Re-housing: 325 persons -Homeless Prevention: 75 persons -Shelter Operations/Essential Services: 2,000 -Outreach: 100 persons
	<b>Location Description</b>	Countywide
	<b>Planned Activities</b>	• \$31,313.70 for <u>Administration</u> – retained by MDHA for

general management, oversight, and coordination of ESG programs

- \$20,875.80 for HMIS – retained by MDHA for costs associated with providing technical assistance and training, data review, input, and quality control for ESG subrecipients
- \$365,326.50 for the following eligible activities:
  - Rapid Re-housing Assistance – includes, but is not limited to, utilities, rental application fees, security deposits, etc. and other eligible activities as defined in the ESG regulations at 24 CFR, §576.104; §576.105 (Housing relocation and stabilization services) and §576.106 (Short term and medium-term rental assistance)
  - Homeless Prevention includes, but is not limited to, rental assistance (such as arrears) and housing relocation and stabilization services, etc., and other eligible activities as defined in the ESG regulation at 24CFR, §576.103
  - Shelter Operations\* - include, but are not limited to, maintenance, rent, repair, etc., and other eligible activities as defined in ESG regulations at 24 CFR §576.102(3)
  - Essential Services\* – include, but are not limited to, case management, childcare, education services, etc., and other eligible activities as defined in ESG regulations at 24 CFR, §576.102(1)
  - Street Outreach\* – includes, but is not limited to, the cost of engagement, case management, emergency health and mental health, etc. and other eligible activities as defined in the ESG regulation at 24 CFR, §576-101

\*The total amount awarded for Shelter Operations, Essential Services, and Street Outreach cannot exceed \$250,509.60 (60% of the 2018 ESG Allocation).

Funding for all activities, except Administration and HMIS, will be awarded to qualified nonprofits through a competitive process to be announced Spring 2018.

		<p>Proposals will be evaluated by a Review Committee comprised of MDHA staff, representatives of programs that serve homeless persons, homeless or formerly homeless individuals or individuals that are knowledgeable about various aspects of the ESG program. Proposals will be evaluated in accordance with the evaluation criteria contained in the RFA and ranked from highest to lowest. Funding will be awarded for projects according to their overall rank until funding is exhausted.</p>
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## AP-50 Geographic Distribution – 91.220(f)

### Description of the geographic areas of the entitlement (including areas of low-income and minority concentration) where assistance will be directed

MDHA has established 3 geographic target areas as allocation priorities. These areas are fully described in the Strategic Plan (SP-10). For 2018, funding will be prioritized as follows. Remaining CDBG, ESG, and HOPWA funds will be deployed countywide, while HOPWA funds are used to assist persons with HIV/AIDS throughout the MSA.

#### Geographic Distribution

Target Area	Percentage of Funds
CDBG Target Areas	3.4%
Napier-Sudekum CNI Planning Area	2.2%
Housing Target Areas	45.5%

Table 59 - Geographic Distribution

### Rationale for the priorities for allocating investments geographically

The basis for allocating investment geographically is twofold: (1) to bring investments to underserved or distressed neighborhoods; and (2) to create/preserve affordable housing in areas of opportunity with greater access to transportation, schools, services, and lower exposure to poverty. These are goals of the fair housing analysis as well as priority needs of this Plan.

In addition to targeting funds to certain geographical areas as described above, funds for housing programs are also prioritized for the following populations:

- Large families
- Persons with disabilities
- Elderly (age 62+)
- Very low-income households ( $\leq 50\%$  AMI).

### Housing for Persons with AIDS

The only program that is administered by MDHA that would lend itself to providing services to those who may not be located within the Metro Nashville-Davidson County boundary is through the disbursement of HOPWA funding. This funding stream is distributed through the broader Nashville-Davidson—Murfreesboro—Franklin Metropolitan Statistical Area (MSA), comprised of Cannon, Cheatham, Davidson,

Dickson, Hickman, Macon, Robertson, Rutherford, Smith, Sumner, Trousdale, Williamson, and Wilson Counties. HOPWA funds are not intended to be targeted towards a specific geographic area, but rather towards a specific population, which is people living with AIDS/HIV and their families.

## Affordable Housing

### AP-55 Affordable Housing – 91.220(g)

#### Introduction

One year goals established below reflect the utilization of CDBG, HOME, ESG, and HOPWA for affordable housing. Goals for emergency shelter, transitional shelter, or social/supportive services are not included.

<b>One Year Goals for the Number of Households to be Supported</b>	
Homeless (ESG)	525
Non-Homeless (CDBG & HOME)	228
Special-Needs (HOPWA)	328
Total	1,081

**Table 60 - One Year Goals for Affordable Housing by Support Requirement**

<b>One Year Goals for the Number of Households Supported Through</b>	
Rental Assistance (ESG & HOPWA)	853
The Production of New Units (HOME)	58
Rehab of Existing Units (CDBG)	170
Acquisition of Existing Units	0
Total	1,081

**Table 61 - One Year Goals for Affordable Housing by Support Type**

## AP-60 Public Housing – 91.220(h)

### Introduction

#### Actions planned during the next year to address the needs of public housing

As discussed in the Strategic Plan, MDHA proposes to establish a Neighborhood Revitalization Strategy Area (NRSA) at Napier-Sudekum. The boundary of the NRSA overlaps with the Choice Neighborhoods Planning area. The first proposed project for the NRSA is homeowner rehab for homeowners in the NRSA. The full NRSA application is available in Appendix G.

To support MDHA's redevelopment efforts, approximately \$500,000 of HOME funds will be used for new construction of mixed-income housing as part of an "Envision" initiative. The HOME-assisted units will be restricted to households with incomes  $\leq 60\%$  AMI. To connect residents to jobs associated with MDHA redevelopment efforts or Community Development projects and further Section 3 opportunities, CDBG will be used to provide employment services.

To help public housing residents maintain housing stability, CDBG funds will be used to provide renter counseling services.

#### Actions to encourage public housing residents to become more involved in management and participate in homeownership

MDHA provides a number of opportunities for residents to become more involved in management and to participate in homeownership programs:

- Two public housing residents are appointed to the 7 member MDHA Board of Commissioners.
- Each property has a resident association that actively engages the residents and coordinates activities with property management. The president of each resident association meets with MDHA leadership annually to review the PHA Annual Plan.
- At each monthly MDHA Board meeting, a property manager and a resident association president are invited to address the Board and provide updates on activities occurring at their properties and relay needs to the Board.
- MDHA's "Envision" process encourages residents to participate in the master planning process for their sites and specific meetings are held to obtain their input.

- MDHA's Affordable Housing Department and Rental Assistance Department offer self-sufficiency programs that create pathways to homeownership. On average, 10 residents/voucher-holders achieve homeownership through these programs. In April 2018, two residents who purchased homes through Habitat for Humanity of Greater Nashville were featured on HGTV's Property Brothers.

**If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance**

Not applicable.

## AP-65 Homeless and Other Special Needs Activities – 91.220(i)

### Introduction

This section describes the one-year goals and activities for the Nashville-Davidson County area to build a housing crisis resolution system. The main goal over the next year is to improve coordination efforts among service providers through increased investment in the Homeless Management Information System (HMIS) including the coordinated entry system (CES), which now uses HMIS as its database.

The goal is to invest in activities that lead people experiencing homelessness to permanent housing as quickly as possible while offering a variety of intervention options that provide options to address the different needs. Such interventions include rapid re-housing, permanent supportive housing, immediate access to low-barrier emergency shelter; intensive service-focused recovery housing programs; transitional housing options for special needs populations (especially households fleeing domestic violence, youth and youth adults, and people with substance use issues); diversion programs; and the exploration of bridge housing and navigation centers as new options for Nashville-Davidson County.

Nashville-Davidson County, through the Continuum of Care, and the Metropolitan Homelessness Commission (MHC) is in the process of strengthening its homeless governance structure. Once that process is finished (goal by July 2018), the CoC will be the entity to support the development of a new strategic plan to end homelessness in Nashville with specific action plans that outline who should be responsible to ensure implementation of each action step. Such a plan should be updated on an annual basis.

### Describe the jurisdictions one-year goals and actions for reducing and ending homelessness including

With 2018 ESG funds, approximately 325 people will be provided with rapid re-housing assistance, and 75 will receive homeless prevention assistance. It is estimated that at least 2,000 will be assisted through shelters and receive essential services and 100 touched by street outreach.

Over the next year, MDHA will work with its partners to support the following goals and actions for reducing and ending homelessness:

- Continue to utilize HUD-provided technical assistance to collaborate with the community on assessing and improving the community's system for addressing homelessness and building a housing crisis resolution system.

- Work with MHC to broaden implementation of coordinated entry for the homeless and those at risk of homelessness. A Coordinated Entry System (CES) Manager is now in place at the Metro Homelessness Commission; the CES Manager has produced a working draft of a CES Policies & Procedures Manual and formed a CoC CES Subcommittee.
- Provide homelessness prevention and diversion services to those who are still housed. To be maximally effective, shelter prevention and diversion will target households who are imminently going to experience homelessness within a few days. Ideally, this assistance will be tied to coordinated entry systems. For 2018, MDHA will consider prioritizing ESG prevention funds to assist persons with histories of homelessness, thereby increasing housing retention among the community of formerly homeless people in Nashville. Concurrent with these efforts, increased coordination will be needed to avoid homelessness at discharge from institutions such as hospitals, jails/prisons and mental health facilities.
- Invest in high-performing rapid rehousing. In spite of the tight local rental market, rapid rehousing programs are achieving positive results in exiting people to permanent housing. This suggests that the local system could house more people with an expansion of rapid rehousing and a shift of resources from emergency shelter. To better determine the long-term effectiveness of this intervention, MDHA will select a method of tracking in light of the various models being used in the city.
- Increase system capacity in outreach and housing navigation services. The high cost of housing in Nashville has made it increasingly difficult to locate appropriate units for rapid rehousing and other subsidy programs. MDHA will consider prioritizing outreach funds over emergency shelter funds (subject to the applicable cap), so that more system resources are dedicated to helping unsheltered people with searching for and securing housing through landlord cultivation and creation of housing/service plans. Local system capacity could be improved by utilizing ESG Rapid Re-housing funds to pay for housing search and placement services, and MDHA will encourage such proposals in its 2018 RFA process.
- Invest more in HMIS. A key obstacle to local system planning and improvement in Nashville is a low rate of emergency shelter and transitional bed coverage in HMIS. With large key programs not contributing data, it is very difficult to have a complete system-level understanding of where people are entering the homelessness system, what programs are accessed, and the results of the interventions. MDHA will support the expansion of the database to cover more local shelter beds and persons served, and increase its focus on using this data to measure system performance.

- Provide (subject to applicable cap) to support shelter operations.
- Support local efforts to increase permanent housing opportunities, linked to appropriate supports, for homeless veterans, chronic/vulnerable homeless persons, families and youth.
- Address barriers to housing entry, such as, but not limited to, up-front housing costs like rent/utility deposits and first-month's rent, using available resources.

### **Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs**

- The community will expand and improve its education and information efforts to further implement the coordinated entry system, which is up and running for all populations:
- A marketing effort is underway to ensure different populations know where the main entry points to services are (families with minors: Metro Social Services; adult-only households: Room In The Inn or Metro Social Services; Veterans: Operation Stand Down or Tennessee Valley Healthcare System; young adults: Oasis Center; and people fleeing domestic violence: 1-800-334-4628). Expanding that marketing effort to educate all stakeholders and let people experiencing or at risk of homelessness know where to enter services is a high priority for this coming year.
- Encourage the coordination between different street outreach groups. The city leads monthly outreach meetings to improve inter-agency coordination on outreach and ensure that the entire geographic area of Nashville-Davidson County is covered by street outreach.
- Educate faith-based groups so they know how to link and partner with a trained housing navigator. Many faith-based groups have outreach teams. An increased effort to help link these outreach groups with established outreach teams could potentially help the community identify people living outdoors more quickly.
- Explore the in-reach need to connect people who experienced homelessness when they entered in institutions (hospitals, jail, mental health facilities, etc.) with housing navigators as part of their discharge planning to avoid people being released to the streets or shelters.
- Share an inventory of services with CoC partners to ensure that people are linked with available mainstream services and have access to homeless-specific services.
- Develop an ongoing educational effort for all service providers to share information and know how to enter people in a housing crisis in the CES.
- Allow for the utilization of ESG funds and other funding sources (city funds) to pay for motel/hotel vouchers in for people unable to access available shelter

beds. Ensure that providers utilizing city and federal funds for voucher programs enter voucher recipients into CES.

- Create policies that move partners to utilize CES for all government funding sources (city/county, state, and federal).
- Ensure that the community utilizes a youth/young adult (YYA) specific assessment tool (which currently is the TAY-VI-SPDAT) and enters YYA into the CES.
- Evaluate permanent supportive housing and rapid re-housing programs and ensure prioritization is given to clients in accordance with the CES policies and procedures manual.
- Explore all funding options to support a pilot project that focuses on employment outreach to people living on the streets or encampments in partnership with street outreach efforts. Immediate access to day jobs can open the door to educational and workforce development programs.

### **Addressing the emergency shelter and transitional housing needs of homeless persons**

The Metropolitan Homelessness Commission is dedicated to continual improvement of the Coordinated Entry System (CES) to ensure people experiencing literal homelessness have immediate access to emergency shelter and, when appropriate, to transitional housing programs. With that, Nashville needs to develop a solid diversion approach to reduce the flow of people into literal homelessness to assist them in retaining their current housing situation (as long as it is safe).

There seems to be sufficient emergency bed and transitional bed capacity but the community needs to evaluate appropriate referrals to fill the beds with people who truly need them and provide a safe environment for them.

The following strategies will help address needs:

- Develop a solid prevention and diversion effort;
- Quickly link people to emergency beds;
- Coordinate exit strategies that allow us to fill newly identified low-income affordable housing units with people who experience literal homelessness;
- Create an in-reach team to assist shelter providers provide housing navigation and enter people into the coordinated entry system;
- Improve data sharing to know how long people stay in shelter beds and what their destinations are when leaving emergency shelters;

- Educate providers across the CoC on eligibility requirements for different transitional housing to promote appropriate referral processes (ideally through the CES);
- Assist transitional housing providers to coordinate with other agencies if people leave their programs, so that they do not end up back in literal homelessness;
- Develop warm hand-off protocols to support people as they exit shelter and transitional housing beds;
- Link housing navigators with transitional housing providers to assist in the housing search coordination if needed;
- Share housing destination information and eligibility criteria to provide people in emergency shelters and transitional housing with options;
- Continue to evaluate innovative approaches and best-practice solutions as an option for Nashville. Such evaluations should include the benefits of developing bridge housing, navigation centers, safe havens, service centers, night centers, etc. to address the needs of people who identify themselves as shelter-resistant.

**Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again**

The main need is to link people with available housing opportunities as quickly as possible and support them in accessing subsidies and increasing their income to help them sustain their housing long-term.

Nashville service providers are still working somewhat in silos, but are willing to come to the table to explore how they fit into a coordinated housing crisis resolution system. With that in mind, the community needs to:

- Improve education to ensure that all partner organizations know how they fit into a housing crisis resolution system including domestic violence providers, hospitals, mental health institutions, criminal justice centers, and other providers in institutional settings.
- Ensure that emergency shelter beds are quickly accessible for people who have no other place to go and explore the partnership between shelter providers and other housing navigator providers to support shelter staff in entering people into the CES and assist them with housing searches and support connections;

- Build a diversion program. At this time, our community needs to create a curriculum and training for diversion to help ensure we fill the available shelter beds in our community with individuals and families experiencing literal homelessness;
- Continue to use CDBG funds to cover one-time move-in costs (security and utility deposits and first month's rent) for households experiencing literal homelessness. Ensure the continuation of this fund and identify flex funding that covers other move-in costs, including arrears that keep people out of housing, pet deposits, application fees, pro-rated rent, and some furniture costs;
- Establish an inventory of rental assistance and other services that prevent homelessness and assist people with retaining their housing. Such an inventory will help identify gaps of resources and allow the CoC to develop a plan to address these gaps.
- Improve systems coordination by engaging more stakeholders in the CoC with a special focus on bringing health care providers, criminal justice system providers, and local and state agencies to the table.
- Explore funding opportunities to continue to increase services for people transitioning from literal homelessness to permanent housing and deploy a progressive engagement approach to start with the least intervention level and increase it as needed.
- Work public agencies and private developers to explore opportunities to build permanent supportive housing units.
- Develop a plan and advocate for landlord incentive programs such as a mitigation fund, move-in cost assistance similar to the Veterans incentive program implemented by a partnership between the Mayor's Office and MDHA.
- Support the continuation of the partnership between MDHA and the Metropolitan Homelessness Commission that allows for up to 18 housing choice vouchers per month to be dedicated to the coordinated entry system and serve households experiencing literal homelessness.
- Strengthen the ongoing landlord outreach process by improved coordination between the city and service providers who search for housing opportunities for their clients.
- Develop solid By Name Lists for families, Veterans, YYA, and individuals experiencing literal homelessness with a preference given to people experiencing long-term (chronic) homelessness. Currently, Nashville has 126 Veterans and 224 families (who experience literal homelessness) on its By Name lists. Ensure that HMIS is the optimal tool to update lists on a bi-weekly basis to prioritize people with highest needs and long-term homelessness.
- Continue the Community Mental Health Systems Improvement (CMHSI) efforts that brings together partners from the health, mental health, criminal justice and

homeless systems to improve coordination for the most vulnerable populations with a mental health crisis and link them with stable housing. Ensure the group is aware of available of local, state and government homeless funding sources to support the housing needs of the population to be served.

**Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs**

Nashville providers are asking for increased systems coordination and education of discharge personnel at different institutions. In addition, hospital and health care providers and our local criminal justice providers are seeking improved cross-sector approaches starting with a focus on people with mental health diagnoses.

The city also has an action plan specifically for youth and young adults (under 25) that focuses on prevention efforts with a focus on youth exiting the foster care system.

Local action steps for the coming year should include:

- Improved coordination between mental health, physical health, and criminal justice systems to identify people at risk of homelessness and link them with supports to prevent them from becoming literally homeless after discharge;
- Work with the state Department of Children Services and support them in their effort to expand services for youth existing foster care;
- Identification of available prevention programs and development of a gaps analysis that allows us to create a homeless prevention plan in the coming years.
- The Nashville-Davidson County CoC coordinates with systems that have a discharge procedure in place to prevent homelessness upon discharge: Foster Care, Mental Health Care, & Correctional Facilities.

## Discussion

Most of the action steps are focused on improved coordination across service providers and across different systems. The common linkage may be through the enhancement of the coordinated entry system and improvement of HMIS. These action steps depend on solid committees and the implementation of a decision-making process for our

community. Nashville-Davidson County will rely on the leadership of the Metropolitan Homelessness Commission (MSS division) staff, the Collaborative Applicant, and the HMIS Lead to ensure processes and protocols allow people to be heard and provide solid input.

Yet, action is based on implementation steps, which outline who is responsible for which action and by when. While this Consolidated Plan's action steps outline a framework, the CoC needs to take up the conversation and assign which committees and organizations are responsible to ensure we actually have measurable outcomes for each goal outlined in this action steps. Our overarching goal must be to develop a process that keeps our community accountable and allows us to implement innovative and proven strategies to prevent homelessness when possible, and have a system in place that makes homeless episodes rare, brief, and one-time for all populations.

**AP-70 HOPWA Goals - 91.220 (I)(3)**

<b>One year goals for the number of households to be provided housing through the use of HOPWA for:</b>	
Short-term rent, mortgage, and utility assistance payments	275
Tenant -Based Rental Assistance	0
Units provided in permanent housing facilities developed, leased, or operated with HOPWA	53
Units provided in transitional short-term housing facilities developed, leased, or operated with HOPWA funds	0
<b>Total</b>	<b>328</b>

## AP-75 Barriers to affordable housing – 91.220(j)

### Introduction:

Overcoming the City’s affordable housing crisis requires attacking the problem on multiple fronts and addressing a number of challenges that negatively impact the creation and/or preservation of affordable housing.

**Actions it planned to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment**

Barrier	Proposed Action
Availability and cost of land	<ul style="list-style-type: none"> <li>• Utilize public land for affordable housing development.</li> <li>• Allow acquisition to be used as an eligible expense of HOME and Barnes Funds.</li> <li>• Create a Community Land Trust to acquire and preserve property.</li> </ul>
Lack of mandatory inclusionary zoning	<ul style="list-style-type: none"> <li>• Encourage private developers to construct affordable housing in the urban core and along major corridors through incentives, such as the Housing Incentives Pilot Program (HIPP) and tax increment financing in transit oriented development districts.</li> </ul>
Zoning/density requirements	<ul style="list-style-type: none"> <li>• Provide density bonuses for affordable housing.</li> </ul>
Property taxes	<ul style="list-style-type: none"> <li>• Publicize tax relief/abatement programs such as payments in lieu of taxes (PILOT) for tax credit projects; property tax exemption benefits for affordable housing provided to low income persons with disabilities or elderly that is financed by HOME and other eligible sources (as provided in T.C.A. 67-5-207); and Metro’s Tax Freeze program for low income homeowners.</li> </ul>

Scarcity of funding	<ul style="list-style-type: none"> <li>• Leverage public funds to create more units.</li> <li>• Continue to fund the Barnes Fund.</li> <li>• Explore public/private partnerships.</li> </ul>
Prohibition on local hire requirements	<ul style="list-style-type: none"> <li>• Increase Section 3 participation in HUD-funded construction projects through outreach and job training programs.</li> </ul>
Negative perception (NIMBYism)	<ul style="list-style-type: none"> <li>• Develop a public awareness campaign to combat NIMBYism.</li> </ul>
Housing discrimination	<ul style="list-style-type: none"> <li>• Educate residents as well as the industry on fair housing rights and responsibilities.</li> </ul>
Criminal history	<ul style="list-style-type: none"> <li>• Establish flexible admission policies for persons with a criminal history.</li> <li>• Consider actual conviction history rather than criminal affidavits or arrest records.</li> <li>• Support re-entry and diversion programs.</li> </ul>
Credit challenges.	<ul style="list-style-type: none"> <li>• Promote financial counseling/literacy programs.</li> </ul>

## AP-85 Other Actions – 91.220(k)

### Actions planned to address obstacles to meeting underserved needs

- Establish geographical priorities for community development, targeting CDBG funds for public facilities and improvements and economic development to areas with high concentrations of poverty – where investment is needed most.
- Develop a training and educational calendar for the community to learn about best practice approaches on addressing homelessness with an emphasis on how to continue to engage with and serve with people with high barriers including people who are considering themselves as service resistant.
- Offer CDBG assistance for rental rehab as a grant to landlords who rent to voucher-holders to facilitate more absorption.
- Generate interest and involvement in the Promise Zone.

### Actions planned to foster and maintain affordable housing

- Help the very low income and formerly homeless maintain housing stability by
  - developing a roster of landlords who have accepted subsidies and have worked with service providers who assist people with behavioral issues;
  - creating a training plan for housing navigators and other service providers on how to engage positively with landlords and speak the same language (business-oriented approaches);
  - offering counseling services to MDHA residents.
- Partner with District Council members and neighborhood groups to reach out to homeowners in need of rehabilitation assistance.
- Actively pursue other funding mechanism and partnerships for the development of affordable housing to leverage limited public dollars.
- Participate in PolicyLink’s All-in Cities Anti-Displacement Policy Network so that Nashville will be equipped with data, policy ideas and best practices that will lead to the strategic development and tracking of solutions to displacement to ensure that Nashville’s neighborhoods continue to thrive.

### Actions planned to reduce lead-based paint hazards

- Implement housing related activities in accordance with all applicable HUD, EPA, and State of Tennessee regulations.
- Provide all rehab clients and potential clients with the “Lead- Based Paint” pamphlet that describes hazards of lead-based paint. Pursuant to 24 CFR Part 35, all rental and homeowner dwelling units that wish to receive federal

assistance and were built prior to 1978 are tested for lead-based paint. (These tests consist of visual inspections, lead screens, and full assessments. Additionally, when properties test positive for LPB hazards, interim controls are performed and LBP clearances are provided.)

- Address lead- based paint hazards as part of the home rehab programs and rehab of shelters and community centers.

#### **Actions planned to reduce the number of poverty-level families**

- Provide assistance to microenterprises in targeted areas to foster small business development in underserved communities.
- Provide employment and enrichment opportunities to youth during the summer months that provide constructive outlets and illuminate paths out of generational poverty.
- Connect low income persons to job opportunities associated with MDHA development projects.

#### **Actions planned to develop institutional structure**

- Provide training and technical assistance to subrecipients.
- Streamline the procurement process.
- Set aside a portion of HOME funds for new nonprofit affordable housing developers.

#### **Actions planned to enhance coordination between public and private housing and social service agencies**

- Develop a list of housing providers that serve low-income/homeless and their requirements and include them in forums and stakeholder meetings.
- Implement more effective communication among providers- using Information & Referral and/or the Coordinated Entry System.
- Develop a Housing Crisis Resolution System.

## Program Specific Requirements

### AP-90 Program Specific Requirements – 91.220(I)(1,2,4)

#### Introduction:

In accordance with federal regulations, this Action Plan describes the CDBG, HOME, and ESG activities proposed to be undertaken with 2018 allocations. To the extent allowed by federal regulations, MDHA may claim costs incurred prior to the effective date of respective grant agreement.

CDBG funds will be used to assist low and moderate income households and low and moderate income areas.

#### Community Development Block Grant Program (CDBG) Reference 24 CFR 91.220(I)(1)

Projects planned with all CDBG funds expected to be available during the year are identified in the Projects Table. The following identifies program income that is available for use that is included in projects to be carried out.

1. The total amount of program income that will have been received before the start of the next program year and that has not yet been reprogrammed	0
2. The amount of proceeds from section 108 loan guarantees that will be used during the year to address the priority needs and specific objectives identified in the grantee's strategic plan	0
3. The amount of surplus funds from urban renewal settlements	0
4. The amount of any grant funds returned to the line of credit for which the planned use has not been included in a prior statement or plan.	0
5. The amount of income from float-funded activities	0
Total Program Income	0

#### Other CDBG Requirements

1. The amount of urgent need activities	0
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**HOME Investment Partnership Program (HOME)  
Reference 24 CFR 91.220(I)(2)**

1. A description of other forms of investment being used beyond those identified in Section 92.205 is as follows:

N/A

2. A description of the guidelines that will be used for resale or recapture of HOME funds when used for homebuyer activities as required in 92.254, is as follows:

HOME Resale/Recapture Guidelines are provided in Appendix H.

On April 1, 2018, HUD issued 2018 homeownership value limits for the HOME program. Upon reviewing the new limits, MDHA became concerned that the HUD-provided limits were much lower than the current Nashville market. Review of local housing data substantiated these suspicions. As a result, MDHA is submitting documentation in Appendix I of this Action Plan seeking HUD approval for MDHA to use local value limits established in accordance with the requirements and methodology outlined at 24 CFR 92.254(a)(2)(iii). Based on the data provided using the prescribed methodology, 95% of the median purchase price limit will be \$266,000 for single family existing construction and \$356,218 for single family new construction. These are the value limits MDHA will utilize to ensure homes acquired with HOME funds comply with modest housing requirement of 24 CFR 92.254. All Homes must be sold to households with incomes at or below 80% AMI.

3. A description of the guidelines for resale or recapture that ensures the affordability of units acquired with HOME funds? See 24 CFR 92.254(a)(4) are as follows:

The HOME Resale/Recapture Guidelines in Appendix H include a description of affordability requirements.

4. Plans for using HOME funds to refinance existing debt secured by multifamily housing that is rehabilitated with HOME funds along with a description of the refinancing guidelines required that will be used under 24 CFR 92.206(b), are as follows:

N/A

**Emergency Solutions Grant (ESG)**  
**Reference 91.220(l)(4)**

1. Include written standards for providing ESG assistance (may include as attachment)

Nashville's ad hoc CoC Written Standards Committee (member agencies listed below) met in July and November 2017 to create a draft document to guide the provision of housing and services funded via both HUD CoC and ESG funding. An initial draft was completed in early January 2018. Technical assistance on the draft standards was offered by HUD to MDHA, and written remarks were received in mid-January 2018; related edits are being made and will be incorporated into a final draft, to be sent to agencies awarded CoC and ESG funding, for their review and input.

CoC Written Standards Ad Hoc Committee Members include staff from the following agencies, most of which receive either CoC and/or ESG funding.

- The Mary Parrish Center
- Neighborhood Health
- The Salvation Army
- YWCA Nashville
- Operation Stand Down TN

This committee's work is reflected in the draft document, and will be sent to the following stakeholders for their input & feedback, as well as publicly posted on the internet for comment at

<http://www.nashville-mdha.org/community-development/about-the-continuum-of-care>

Once these stakeholders have had sufficient time to offer feedback, a final draft will be completed and submitted to the CoC Governance Board for formal approval.

2. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

The Nashville-Davidson County Coordinated Entry System (CES) has a de-centralized access approach with designated entry points for different populations (individuals, families, youth, and Veterans). The Metropolitan Homelessness Commission has designated one of its staff members as helping the community to coordinate and build CES by serving as the planning lead, staffing specific committees, and being the main contact point of the approximately 20 agencies that participate actively in CES.

The CES was created to identify and engage any person or family who is experiencing a housing crisis in order to enhance our diversion and prevention efforts in the larger Housing Crisis Resolution System. To accomplish this objective, anyone who is experiencing a housing crisis, and has given consent, is entered into CES via HMIS and completes a preliminary assessment.

Nashville-Davidson County is utilizing the VI-SPDAT tool as the community's housing triage assessment tool. Once a person has identified housing as a goal and is literally homeless, a VI-SPDAT is completed with that person. If the person falls into the Youth and Youth Adult (YYA) population, a TAY-VI-SPDAT is completed; and the community uses the Family-VI-SPDAT for families with minor children.

The CoC is in the process of strengthening its prioritization methods in Nashville/Davidson County. Generally, priority will be given to households who have high scores on the VI-SPDAT, we also factor in the length of people's homelessness and any extenuating circumstances brought forward during care coordination meetings.

Our community holds 3 different care coordination meetings where provider agencies discuss the households with the highest barriers to housing and consult with each other to assist those households move to permanent housing and link them with the right supports as quickly as possible. Each care coordination group meets every two weeks. Those groups focus on Veterans, families with minor children, and individuals. At this point, youth are included in the individual or family discussion depending on whether they have minor children in the household.

The Continuum of Care has received grant funding for three CES coordinators in the community. The coordinators work together as a mobile team to help support the entry points for the different populations (with a special focus on families, veterans, and youth) and help as a flex team to educate and build the systems approach. In addition, the Metropolitan Homelessness Commission utilizes its three-member outreach team to help coordinate outreach groups in the community and ensure that we have full coverage of our geographic area in Davidson County to identify people experiencing homelessness as quickly as possible and link them to services and housing. The CES committee is also implementing a plan to offer after-hour services.

Nashville is in the position to offer immediate access to shelters for most individuals. Further investment into our data collection through CES will help us quantify the gaps we need to focus on for serving single male-headed households, and couples who refuse to separate.

In addition, the CoC is working on establishing a Consumer Advisory Board, which we will utilize to receive ongoing feedback to improve our housing navigation process. The Metropolitan Homelessness Commission trains and coordinates with housing navigators who are the frontline staff at the 20+ partner organizations that enter people into the CES.

Further funding is sought to expand the HMIS capacity of CES, for training, full staffing, and landlord incentives to include more housing opportunities through our CES access.

3. [Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations \(including community and faith-based organizations\).](#)

A Request for Applications is emailed to over 40 community- and faith-based entities and/or governmental agencies, advertised in several local papers and published on the MDHA website. Application responses are reviewed and rated by a five to six-member review committee based on the following evaluation criteria: Project Quality; Need for Project; Operational Feasibility; Applicant Capacity, including HMIS data quality; and proven ability to stabilize homeless people with housing and income supports. The review committee typically includes staff from various funding agencies and program coordinators and a formerly homeless person. In 2017, a member of the CoC Performance Evaluation Committee was also on the ESG evaluation committee. Discussions are underway to potentially merge the PEC and

ESG review committees to review both programs. This would create greater coordination between the two funding streams. Awards are made based on the ranked scores of the applications and recommendations of the review committee.

4. If the jurisdiction is unable to meet the homeless participation requirement in 24 CFR 576.405(a), the jurisdiction must specify its plan for reaching out to and consulting with homeless or formerly homeless individuals in considering policies and funding decisions regarding facilities and services funded under ESG.

MDHA ensures the voice of homeless or formerly homeless people in ESG policies and funding decisions in two ways. Each year, it recruits someone who has been, or who is currently, homeless to serve as a member of the ESG Review Committee. A clause requiring this type of input is also written by MDHA into all ESG Memoranda of Agreement with subrecipient agencies.

5. Describe performance standards for evaluating ESG.

At the December 2016 start-up conference, where draft statistics on performance for the prior year were distributed, MDHA and ESG funded agencies began a conversation on 2017-18 performance standards to evaluate the effective use of ESG funding. The targets below are based on this draft data as well as feedback during March 2017, and reach for improvements during program year 2017-18 on several measures. This is a work in progress, as the Continuum increases its focus on data collected via MDHA's Homeless Management Information System (& comparable databases, in the case of domestic violence shelters).

Agencies using ESG funds will continue to strive to assure that housing stability & incomes are increasing via ESG funds, as well as how stays in shelter are becoming shorter, and recidivism is declining. These measures, and how well agencies are meeting them, will have increasing weight in scoring in the local ESG RFP process.

<b>ESG PERFORMANCE TARGETS for PROGRAM YEAR 2018</b>	
<b>NASHVILLE, TENNESSEE</b>	
<b>Operating Costs</b>	<b>Target</b>
Exits to Permanent Housing	25%
Increased Income	15%
Employment	20%
Increased Access to Mainstream Benefits	80%
Length of Stay – 30 days Emergency - 180 days – Transitional*	
Recidivism	10%

	Data Accuracy	95%
<b>Rapid Re-housing</b>		
	Maintained or Increased Income	85%
	Increased Access to Mainstream Benefits	92%
	Length of Stay	70 days
	Recidivism	5%
	Data Accuracy	95%
	Retention in Housing	85%
<b>Street Outreach</b>		
	% who exit streets to perm hsg	10%
	% who exit streets to temp destination	20%
	# actually served vs. projected	100%
<b>Prevention</b>		
	Maintained or Increased Income	90%
	Increased Access to Mainstream Benefits	75%
	Housing stability at exit	95%
	Recidivism	10%

\*Transitional housing programs that received ESG funding in 2010 are grandfathered into eligibility for current funding.