



DuPage County

2015-2019 Proposed Consolidated Plan and 2015 Action Plan

The Consolidated Plan sets forth priorities for the County's housing and non-housing community development needs for each calendar year and serves as the County's annual funding application to HUD for the following formula grant programs: the Community Development Block Grant (CDBG); the HOME Investment Partnerships Program (HOME); and the Emergency Solutions Grant (ESG) Program

Public Comment Period: January 2, 2015 – February 2, 2015

DuPage County Chairman Dan Cronin

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EXECUTIVE SUMMARY

The Executive Summary serves as an introduction and summarizes the key points of the plan.

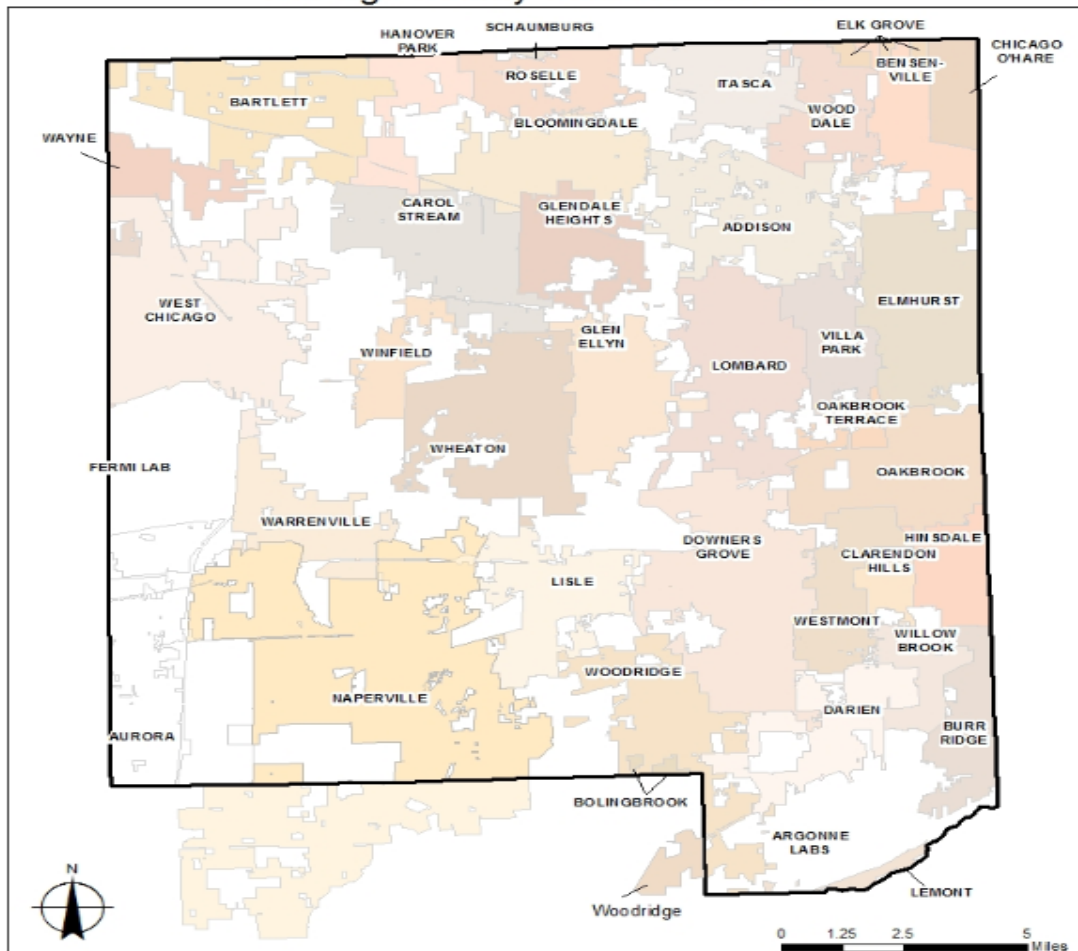
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I. Executive Summary

1. Introduction

The DuPage County Consortium includes DuPage County and the Municipalities of Downers Grove, Naperville, and Wheaton. These three municipalities are identified separately as individual members due to their status as entitlement grantees under the Community Development Block Grant program. Wheaton and Downers Grove are joint recipients with DuPage County and Naperville as a Metropolitan Entitlement Area with its own CDBG allocation. All or part of 36 other municipalities are included within DuPage County's borders. Twenty-eight (28) of these municipalities work closely with the County as part of the DuPage Community Development Commission (CDC). Figure ES-1 depicts the boundaries of the DuPage County Consortium, reflecting the portions of Naperville and Woodridge that are outside of DuPage County.

Figure ES-1
DuPage County Consortium Area



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In the second half of 2014 the DuPage County Consortium developed a five-year Consolidated Plan (ConPlan) to integrate the planning efforts for three County-managed federal programs that focus on the housing and community development needs of low and moderate income persons. These programs are the Community Development Block Grant (CDBG) program, the HOME Investment Partnerships (HOME) program, and the Emergency Solutions Grant (ESG) program. Additionally, the County expects to receive approximately \$31,000,000 of Community Development Block Grant Disaster Recovery (CDBG-DR) funds over the next four years, which are included as an additional resource. The ConPlan can be viewed at www.dupageco.org/cdc.

The Consolidated Plan does not consolidate these programs into one program. They are separate programs with separate regulations, but they all have the same starting date. The ConPlan views them as interrelated resources dealing with interrelated problems. This document summarizes housing needs, homeless needs, and non-housing community development needs, such as public services and infrastructure. It also prioritizes those needs, and identifies strategies that the DuPage County Community Development Commission (CDC) will utilize to meet those needs over a 5 year period. Any questions or comments regarding this plan should be directed to:

DuPage County Community Development Commission
421 North County Farm Road, Wheaton, Illinois 60187
(630) 407-6600 / communitydev@dupageco.org

The Community Development Commission was established in 1975, and has had primary responsibilities for establishing policies for the CDBG, HOME, and ESG programs. The CDC is made up of 18 County government representatives (essentially the County Board) and representatives of 28 municipalities. These municipalities are those that have signed an intergovernmental agreement with DuPage County for the purpose of sharing responsibility for the CDBG program. This Commission has had primary responsibility for establishing the policies for the CDBG program since it began in 1975.

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The CDC Executive Committee is the lead agency for the ConPlan. The Committee includes 12 representatives that are elected by the full CDC membership. The majority membership alternates each year between municipal and County representatives.

Figure ES-2 shows the organization of the policy groups involved with the three grant programs. The most active of the policy groups is the CDC Executive Committee, and the full CDC generally meets once a year to elect the Executive Committee and officers. The HOME Advisory Group advises the County directly on the use of HOME dollars for affordable housing financing. The choice of the Executive Committee as lead agency for the ConPlan is based on its central role as; (a) the working committee for the CDC; and (b) the core group for the HOME Advisory Group, which adds representatives from the other consortium members when taking action.

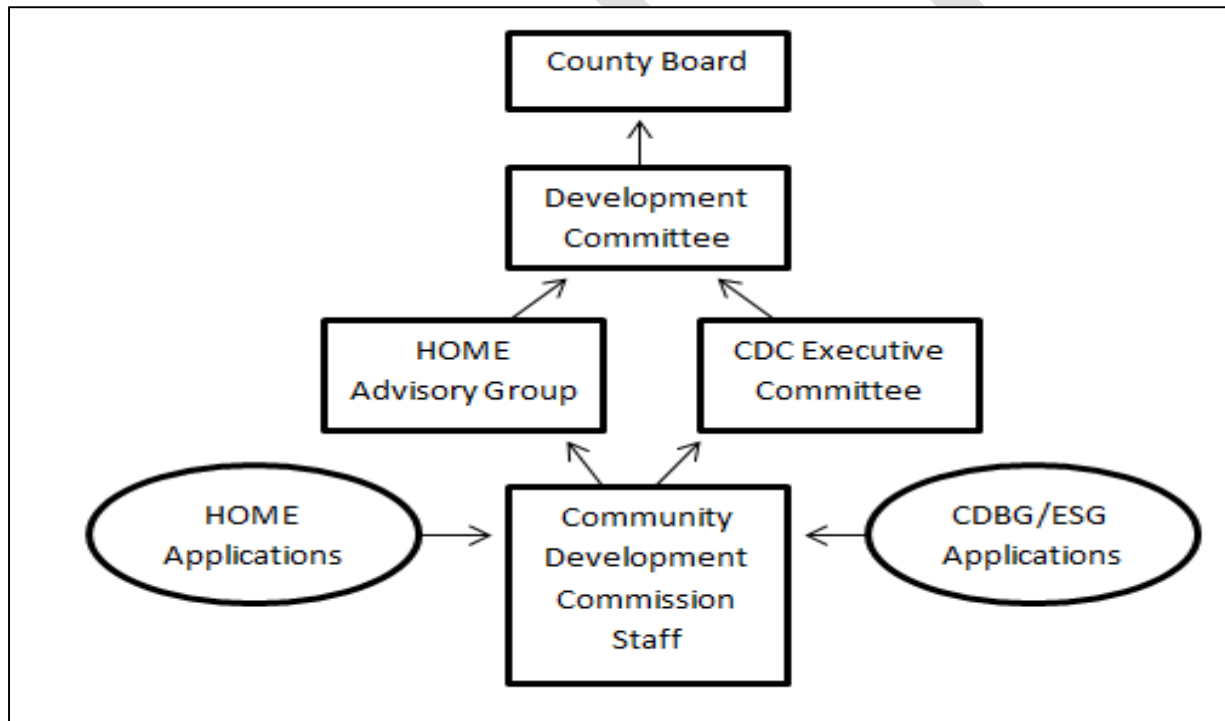


Figure ES-2

2. Summary of Topics and Funding in the Plan

The ConPlan summarizes housing needs, homeless needs, and non-housing community development needs, such as public services and infrastructure. The Plan also prioritizes those needs, and identifies strategies that the DuPage County Community Development Commission proposes to utilize to meet those needs over a 5-year period.

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Chapters within the ConPlan include: Process, Market Analysis, Needs Assessment, Strategic Plan, and the 2015 Action Plan.

The 2015 Action Plan is an important part of the ConPlan. Action Plans will be prepared for each of the subsequent four years covered by the ConPlan. Funding for several infrastructure and capital projects are proposed to be split between 2015 and 2016, and the County Convalescent Center windows project is proposed for 2016 funding only. This will eliminate the need for infrastructure and capital applications for 2016, during which staff can implement the \$25.9 million in CDBG-DR funding that has already been allocated, and the additional funds anticipated. Figure ES-3 shows the estimated funds expected to be available in 2015:

Figure ES-3 2015 Estimated Funds		
Program	General Description	Amount
CDBG	CDBG Provides assistance to low and moderate income persons and persons with special needs by supporting housing activities, public improvements, and public services	\$3,493,505
HOME	HOME Provides financial assistance to government agencies, non-profit groups, for-profit organizations to maintain and increase the supply of affordable housing	\$1,312,014
ESG	ESG Supports providers of shelter and service to homeless persons by funding homeless prevention activities, delivery of essential services to the homeless, and maintenance and operation of facilities for the homeless	\$255,126
CDBG-DR	CDBG-DR provides assistance to low and moderate income persons and persons with special needs by supporting housing activities, public improvements, and public services related to damage caused by the April 2013 flooding events	\$31,000,000
Other Resources	Other Resources Income that is generated from prior years' investments of CDBG and HOME funds and other funds that are reprogrammed to new activities	\$1,314,028
Total Estimated Funding		\$37,374,673

SUMMARY OF DISTRIBUTION OF FUNDING BY NEED

The ConPlan outlines several types of housing and community development needs.

1. Housing (approximately \$2 million). These needs include owner housing (buyer programs and home rehab), renter housing, and special needs housing for seniors and people with disabilities.
2. Neighborhood Investment and Public Facilities (approximately \$2.1 million) Funds will be used for water, sewer, and street improvements in low-moderate income neighborhoods; ADA improvements; acquisition of space for fair housing counseling, and rehabilitation of a facility that provides respite care for medically fragile children

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3. Homeless (approximately \$535,000) Funds are used for all points on the continuum of care for persons who are homeless including prevention of homelessness, emergency shelters, and transitional housing. Most funds are for operating programs, but some direct emergency assistance is provided (rent, utility payments, etc.).
4. Other Public Services (approximately \$80,000) In addition to public services for the homeless, funds are also provided to six (6) neighborhood resource centers.
5. Remaining funds are programmed to administration, planning, and fair housing activities.

3. Evaluation of Past Performance

The DuPage Consortium consistently performs well in the administration of the grant programs covered in this plan. HUD reports outlining DuPage's compliance and performance relative to peer groups identify DuPage as a well-managed program. HUD's most recent Year End Review states: "DuPage County's CDBG, HOME, and ESG activities are consistent with its Consolidated Plan and in compliance with the Statutes and operating regulations. DuPage County has the continuing capacity to administer Consolidated Plan-covered programs." In the CDBG program HUD measures DuPage County's timeliness ratio, a formula that measures the amount of an entitlement community's unexpended funds sixty days prior to the start of the next program year. For DuPage County, January 1 is that date. As of December 10, 2014 the County's timeliness ratio is 1.3, well below the 1.5 HUD maximum. One hundred percent of DuPage's CDBG funds since the beginning of DuPage's participation have been used to benefit low and moderate-income individuals.

In the HOME program, since 1994 the County has received approximately \$52,000,000. The County's priority has been to create and preserve affordable rental housing. Over the past twenty years the County has invested 61% of its HOME funds for affordable rental housing, 33% for low income homebuyer assistance and 6% toward homeowner rehab.

Details of past performance are found in the Consolidated Annual Performance Evaluation Report (CAPER).

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4. Summary of Citizen Participation and Consultation Process

The laws that created the CDBG, HOME, and ESG programs state that the primary purpose of the programs covered by the Consolidated Plan is to improve communities by providing: decent housing, a suitable living environment, and growing economic opportunities for low and moderate income households in DuPage County. Since low to moderate income households are the target of these funds it is important to involve these households.

Public Hearings and Public Comment Periods

The CDC conducted four stages of public hearings:

Stage one includes a separate required public hearing for each municipal applicant to gain citizens input.

Stage two includes a required public hearing for each non-municipal capital-applicant seeking CDBG funding to gain citizens input

Stage three includes a required public hearing for each applicant for public services to gain citizens input. This hearing typically is held at one location and combines all public service applicants.

Stage four includes a County public hearing, completed on January 15, 2015 at the DuPage County Center, on the draft Consolidated Plan before final action by the County Board. Copies of the draft plan are made available in municipal buildings and public libraries throughout the consortium area. Notification was published in the Daily Herald on December 26, 2014, general circulation newspaper in the DuPage Consortium area.

The public comment periods are as follows:

For the draft Consolidated Plan, the CDC requires a 30-day comment period, completed February 2, 2015 prior to the County Board's final action on the Plan. Notice of this comment period is done simultaneously with the notice of the public hearing on the draft ConPlan, and uses the same methods. Any substantial amendments to the ConPlan are subject to a public hearing.

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For the Consolidated Annual Performance and Evaluation Report (CAPER) on the Consolidated Plan, the CDC requires a 15-day comment period prior to submitting it to HUD. Notification is published in a newspaper of general circulation in the DuPage Consortium area.

Additional comments are solicited on the activities undertaken with CDBG, HOME, and ESG funds through the Environmental Review Record process. Notification and comment periods are in accordance with CFR Part 58.

Portions of the ConPlan may undergo changes before a complete revision is officially adopted. These Changes may take the form of policy changes of the DuPage Community Development Commission or changes in the specific activities to be implemented with CDBG, HOME, or ESG funds. In accordance with the DuPage County Citizen Participation Plan, changes to the ConPlan that will require public hearing and comment are: (a) local policy changes affecting eligibility for at least 10% of the federal funds subject to the ConPlan; or (b) modifications to the list of proposed activities affecting at least 10% of the federal funds subject to the ConPlan.

RESPONSES TO COMMENTS

It is the policy of the CDC that all comments directed to the Consolidated Plan or the annual performance report that are received during public hearings and designated comment periods shall be responded to in writing within the document. Comments will be summarized in the document followed by responses.

RESPONSES TO COMPLAINTS

Any written complaints regarding the Consolidated Plan, performance report, or individual activities undertaken by DuPage County's CDBG, HOME, or ESG programs shall be responded to in writing. It is the policy of the CDC to respond within 15 working days of receipt of the complaint whenever possible. If the complaint involves a policy issue requiring deliberation of one or more policy groups, the individual submitting the complaint shall be notified of this fact within 15 days. The issue will be brought to the attention of the appropriate policy group at the next available meeting, and a response will be developed after their consideration.

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5. Summary of Public Comments (TO BE UPDATED AFTER COMPLETION OF PROCESS)

The public comment period ran from January 2, 2015 through February 2, 2015. Presentations were made to the Community Development Commission Executive Committee on December 2, 2014, to the County Development Committee on _____ and to the DuPage County Board on _____. A public hearing was held on _____. Notice of the comment period and the public hearing were published in the Daily Herald, and e-mails were sent to organizations and individuals that may be interested in the Consolidated Plan on December 26, 2014.

Copies of the Consolidated Plan on CD-ROM were sent to each municipality and public library in DuPage County for access by the public at municipal buildings and public libraries. The Plan was also available via the Internet at the County's web site. The following public comments were received during the public comment period (and DuPage responses noted):

UPDATE AFTER PUBLIC COMMENT PERIOD

6. Summary of Comments or Views not Accepted and the Reasons for not Accepting Them

UPDATE AFTER PUBLIC COMMENT PERIOD

7. Summary

DuPage County, through its Community Development Commission, continues to strive to address the issues facing County residents in an ever changing environment. The goal of the Commission is to allocate limited funding to projects that meet the highest priority based on surveys from villages, cities, agencies, and residents throughout the County of DuPage. Each request for funding will be scored equally through a rigorous application period to determine the best applications for awarding grants and / or loans. The County will also work to meet the requirements set forth by HUD to administer the grant funding in the most efficient and transparent methods. DuPage County consulted with appropriate stakeholders in preparation of this Consolidated Plan and followed its Citizen Participation Plan in presenting this Consolidated Plan.

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The County also continues to encourage Minority Business Enterprise (MBE) and Women Business Enterprise (WBE) participation in all programs covered by this Consolidated Plan. The County maintains a list of certified MBE / WBE contractors which is updated throughout the year and all participants are re-certified annually. See Appendix C for the current list. Bid specifications and advertisements utilized by subgrantees, subrecipients, and developers include language encouraging MBE / WBE participation. Likewise, the MBE / WBE list is provided to subgrantees, subrecipients, and developers prior to soliciting bids so that any companies on the list that provide the work being solicited are alerted to the opportunity to bid on the work.

Historically, the CDC has responded to changing conditions and needs of its community development partners. Changes to its application and selection process occur in order to emphasize a direct connection between activities funded and achievement of Consolidated Plan goals. This emphasis promotes measurement of outcomes of activities, and priorities are placed on activities that best achieve measurable movement toward ConPlan goals. To support this effort, the consortium will continue to: analyze and present changes in trends in housing and community development needs to policy makers; evaluate the effectiveness of local organizations in implementing recommended strategies; improve methods of measuring the outcomes of activities funded by the consortium's housing and community development programs, and recommend modifications that should be made in implementation strategies.



DEVELOPMENT OF THE PLAN

This section identifies the lead agencies responsible for the development of the plan, the administration of the grants, and describes the consultation and citizen participation processes.

II. Development of the Consolidated Plan

1. Lead Agencies

The following are the agencies/entities responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source.

Agency Role	Name	Department/Agency
Lead Agency	DuPage County	Community Development Commission
CDBG Administrator	DuPage County	Department of Community Services
CDBG-DR Administrator	DuPage County	Department of Community Services
HOME Administrator	DuPage County	Department of Community Services
ESG Administrator	DuPage County	Department of Community Services
HOPWA Administrator	City of Chicago	Department of Public Health

Table 1 – Responsible Agencies

a. Introduction

The DuPage County Consortium includes DuPage County and the Municipalities of Downers Grove, Naperville, and Wheaton. Although these three municipalities are identified separately as individual members (due to their status as entitlement grantees under the Community Development Block Grant program – Wheaton and Downers Grove as joint recipients with DuPage County and Naperville as a Metropolitan Entitlement Area with its own CDBG allocation), all or part of 36 other municipalities are included within DuPage County's borders. 28 of these municipalities work closely with the County as part of the DuPage Community Development Commission (CDC).

The lead agency, and most active of the policy groups, for the development of the Consolidated Plan is the Executive Committee of the DuPage Community Development Commission (CDC). The CDC is made up of 18 County government representatives (essentially the County Board) and representatives of 28 municipalities. These municipalities are those that have signed an intergovernmental agreement with DuPage County for the purpose of sharing responsibility for the CDBG program. This Commission has had primary responsibility for establishing the policies for the CDBG program since it began in 1975. The HOME Advisory Group advises the County directly on the use of HOME and HDF dollars for affordable housing financing.

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b. Consolidated Plan Public Contact Information

The Community Development Commission encourages public comment and offers transparency to the greatest extent possible for each grant. The Commission provides numerous ways listed below to access information and all questions or comments regarding each grant or this plan should be sent to:

DuPage County Community Development Commission
421 North County Farm Road, Wheaton, Illinois 60187
(630) 407-6600 / communitydev@dupageco.org

Access to Records

In accordance with the Freedom of Information Act, all records are open to the public. Any person wishing to view the records associated with the CDBG, HOME, CDBG-DR or ESG program may arrange to do so, and copies will be made available in accordance with applicable Freedom of Information requirements.

Access to Meetings

All meetings of the CDC, the CDC Executive Committee, the HOME Advisory Group, and any special committees created by these groups are subject to the Open Meetings Act. Therefore, notification and reporting requirements apply any time a majority of a quorum of any of these groups assembles to discuss the business of the CDC. It is also the policy of the CDC to notify organizations who would be directly affected by a policy issue scheduled for consideration by one of the CDC's policy groups.

Technical Assistance

To encourage participation in its programs by organizations who may wish to apply for funds, the CDC provides the following technical assistance.

Mandatory CDBG / ESG Pre-application Meetings: Any organization intending to apply for CDBG or ESG funds is required to attend a pre-application meeting to review the application

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process. Applicants are supplied with the application forms, as well as a copy of the selection criteria by which their application will be judged.

One-on-One Pre-Application Consultations: In addition to the mandatory CDBG / ESG meetings, staff is available to meet as many times as necessary with any public or private organization interested in the CDBG, CDBG-DR, HOME or ESG programs. The purpose of these consultations is to give specific advice that will enhance the applicant's probability of success in obtaining funds and to achieve their housing or community development goals.

Data: DuPage County maintains census and other data useful for grant preparation and it is routinely made available to applicants to the CDC's programs. Low and moderate income data and maps provided by HUD are posted on the CDC's website.

2. Consultation

a. Introduction

The County provides the opportunity for each municipality, township, non-profit agency and all participants in the Continuum of Care to provide input to identify needs and priorities of the Consolidated Plan. Likewise, citizens are given the opportunity to advise the County concerning their needs and priorities. The County employs two mechanisms to solicit this information – public hearings and survey instruments with specific, consistent questions.

b. 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 DuPage County consortium recognizes coordination and collaboration as key elements in developing strategic initiatives to meet housing, health, mental health, education, social services, and community development needs. DuPage County strives to coordinate the efforts of essential county-wide networks and coalitions by participating in each: a) with leadership and oversight roles, b) gathering the specific identified priority needs, strategies, and funding opportunities, c) putting forth an objective view of performance, and finally, d) sharing the knowledge to inform the planning of diverse providers within DuPage County. This allows DuPage County to

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coordinate efforts to achieve a collective impact on priority needs and policy using focused funding strategies. An example of the benefit gained from this positioning occurred when Community Development Block Grant (CDBG) funding was reduced for senior services and people with disabilities. DuPage County Community Services was able to direct subrecipients to funding through a County funded grant, the Human Services Grant Fund, thereby meeting a priority need that would have otherwise been underserved.

The primary entities DuPage County currently engages in this way include, among others, the Community Development Commission, the DuPage Continuum of Care, the DuPage Housing Action Coalition, the DuPage Funders' Collaborative, the DuPage Health Coalition, the Interagency Paratransit Coordinating Council, Positive Parenting, and Impact DuPage. These represent membership of well over one hundred government and service providers within the County. Participating in committee work, providing a platform for shared dialogue in public hearings, opening access to data collection and analysis, surveying providers and residents, are the means for achieving coordinated and focused action.

DuPage County's latest effort to enhance coordination is through active participation in developing Impact DuPage. Impact DuPage is a newly formed group of community leaders and organizations working to determine community needs and priorities that will improve the well-being of the DuPage County community. Impact DuPage partners are engaging DuPage County residents and service providers in several assessment activities to determine community needs. Two of the key goals established are to anticipate and manage change through centralized data collection and analysis, and to leverage local funding to strategically and collaboratively address priorities. Impact DuPage goals were created with the intention of building on previous collaborative successes and lessons learned. DuPage County has an active role in leadership with the Director of Community Services as a member of the steering committee, directing additional staff in providing access to County program data and tracking data from Impact DuPage sources, reporting on the activities and findings of Impact DuPage among other networks, and using the information gained to impact policy and decision making within the County planning and funding committees.

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c. 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.

DuPage County Community Services is the lead agency for the DuPage Homeless Continuum of Care (CoC). The Director of DuPage County Community Services chairs the Leadership Committee charged with oversight and leadership for the array of public and private agencies comprising the CoC that meet housing, health, and social service needs for the chronically homeless, families with children, veterans and other homeless populations. The leadership role allows a direct interface between priority homeless needs determined by the Needs Assessment Committee and the application procedures, and ranking procedures for grant opportunities to meet those needs, as formed by the Grants/Funding Committee and approved by the Leadership Committee.

The CoC provides information and access points for emergency housing assistance to health care programs including mental health, hospitals, substance abuse treatment and health clinics. Discharge protocols have been created for foster care, health care, mental health, and corrections, as care providers that may discharge persons into homelessness. DuPage County homelessness prevention and rapid rehousing agencies, emergency shelters, domestic violence shelters and transitional housing programs case managers and counselors explore and assess clientele's disabling conditions; referring and linking to resources for further assistance when warranted. The CoC is exploring options to make significant improvements to a standardized intake, assessment and follow up protocol. Using the HMIS system, this uniform assessment will gather data required as we respond to emergency needs.

d. 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.

The HEARTH Act requires the Continuum of Care (CoC) planning process to assist homeless persons by providing greater coordination in responding to their needs. DuPage County Community Services provides coordination between ESG and CDBG funding, as well as, coordination with the DuPage Homeless CoC as to priority needs and policy. As lead agency for

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the CoC, DuPage County Community Services has had policies regarding coordination among emergency shelter providers, essential services providers, and providers of other services to the homeless for many years. This requirement for coordination begins with applications for funding for CDBG, ESG, and CoC funds. Applications for these programs require information and documentation about how each agency collaborates, cooperates and/or coordinates with other agencies to assure non-duplication of services. Agencies in DuPage County also participate in the SOAR program to enroll eligible persons in mainstream benefits. As a HOME Participating Jurisdiction, DuPage County also uses HOME funds to address the housing needs of the most at risk populations when such projects are viable. The DuPage County Health Department has several CoC projects in DuPage County and is represented on the CoC Leadership Committee. The DuPage Housing Authority is represented on the CoC Needs Assessment Committee, the CoC Grants Funding Committee, and the CoC Leadership Committee. These are all ongoing past and current efforts to ensure proper funding allocation.

The ESG regulations require that DuPage County have written standards for providing ESG assistance and must consistently apply those standards for all program participants. The Homelessness Prevention Providers (HPP) committee of the CoC maintains a written Program Plan that is to be followed by agencies utilizing ESG funds and details: how ESG eligibility is determined; how eligible families and individuals are prioritized and which are appropriate for homelessness prevention and which are appropriate for rapid re-housing; contains standards for determining the amount of rent and utilities costs each program participant must pay while receiving either homelessness prevention or rapid re-housing assistance; contains standards for determining how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time; and standards for determining the type, amount, and duration of housing stabilization and/or relocation services and maximum levels of assistance.

The CoC has existing established performance standards for activities funded under the Emergency Solutions Grant program and the grants funded through the CoC Super-NOFA process. The application process and selection criteria for ESG funding has been developed in conjunction with and approved by the Leadership Committee and Grants Funding Committee of

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the CoC. Outcome measures (performance standards) are then developed for each subrecipient, based on their application, and reported quarterly progress. Targeting those who need assistance most is accomplished at the application review, as needs with higher priority in the Consolidated Plan are assigned a higher multiplier so that applications addressing those needs receive a higher score. Current case management practices are aimed at reducing each program participant's housing barriers or housing stability risks and are quantified and captured as needs identified and needs met in HMIS.

DuPage County Community Services is also the HMIS lead for the CoC. DuPage County has coordinated funding for the HMIS through CoC funding and ESG funding. ESG subrecipients (other than domestic victim service providers) are required to participate in the County's HMIS system. The HMIS Committee of the CoC and HMIS staff ensure that required data elements, assessments and workflows in the system meet HUD requirements and that required reports can be pulled from the system. DuPage HMIS offers a robust training schedule for participants, a Help Desk, newsletters, training materials and webinars, and a "certification" program for participants. DuPage HMIS is helping facilitate the discussions around and implementation of the coordinated assessment system, as well as the data being gathered from the vulnerability index pilot project.

The CoC also has existing established policies and procedures for the operation and administration of the HMIS. These standards are contained in the DuPage HMIS Standard Operating Procedures Manual and oversight is provided by the HMIS Committee of the CoC. We will be able to better identify best practices for reducing the number of people living on the streets or in emergency shelters and for shortening the time people spend homeless by improvement to the HMIS so that better data can be obtained and appropriate reports produced.

e. Describe Agencies, groups, organizations and others who participated in the process and describe the jurisdictions consultations with housing, social service agencies and other entities.

The County takes a comprehensive approach to soliciting input to determine needs and priorities for the 5-Year Consolidated Plan. Surveys were conducted on several levels as follows:

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1. A Citizens Survey in both English and Spanish produced 402 responses;
2. The six Neighborhood Resource Centers were surveyed in both English and Spanish producing 45 responses;
3. A survey of 31 municipalities primarily located in Du Page County and all 9 townships produced 16 responses;
4. 107 public service providers were given the opportunity to identify service needs, with 35 responding;
5. Likewise, 21 service providers completed the 5-year capital needs survey.

Table 2 is a list of the various agencies, groups, and organizations who participated in the consultation process and the service areas they represent. The County did not exclude any agency types from participating in the ConPlan planning process.

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Sort Order	Select Organization	Agency/Group/ Organization Type	What section of the plan was addressed by consultation?	Briefly describe how the Agency / Group / Organization was consulted
1	Village of Willowbrook	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
2	Village of Hanover Park	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
3	City of Warrenville	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
4	Village of Glendale Heights	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
5	City of Elmhurst	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
6	Village of Westmont	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
7	Bloomingdale Township	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
8	Village of Lombard	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
9	Village of Wayne	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
10	Village of Addison	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey

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11	Village of Glen Ellyn	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
12	City of Naperville	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
13	City of West Chicago	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
14	Village of Carol Stream	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
15	City of Darien	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
16	Village of Woodridge	Other Government - Local	Needs Assessment / Current Market Conditions Consultation	Participation in Municipal Needs Survey
17	Lutheran Child and Family Services	Services – Children	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
18	Almost Home Kids	Services – Children Services - Health	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
19	DuPage Pads	Services – Homeless	Needs Assessment / Current Market Conditions Consultation	Participation in a 5 Year Capital Needs Assessment and Non Profit Needs Assessment
20	Family Shelter Service	Services – Homeless	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment

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21	St. Patricks Residence	Housing	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
22	Metropolitan Family Services	Services – Education – Employment Other - Legal	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
23	People’s Resource Center	Education Employment Other – Food Pantry	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
24	Loaves & Fishes	Education Other – Food Pantry	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
25	Chilserv	Housing Services - Children	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
26	Senior Home Sharing	Housing Services – Elderly Persons	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
27	Marklund Children’s Home	Housing Services – Persons with Disabilities	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
28	Prairie State	Service – Fair Housing Other – Legal Description	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
31	DuPage Housing Authority	Housing	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment

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30	Literacy DuPage	Services - Education	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
31	Catholic Charities of Joliet	Services – Children Housing Elderly Education	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
32	Mayslake Village	Housing Services - Elderly	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
33	DuPage Habitat for Humanity	Housing	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
34	Willowbrook Corner Community House NRC	Services – Children Services – Education Regional Organization	Needs Assessment / Current Market Conditions Consultation	Participation in Community Needs and Availability Services Survey
35	Addison Student Participation Center NRC	Services – Children Services – Education Regional Organization	Needs Assessment / Current Market Conditions Consultation	Participation in Community Needs and Availability Services Survey
36	Addison Henry Hyde Center NRC	Services – Children Services – Education Regional Organization	Needs Assessment / Current Market Conditions Consultation	Participation in Community Needs and Availability Services Survey
37	Outreach Community Ministries – Carol Stream NRC	Services – Children Services – Education Regional Organization	Needs Assessment / Current Market Conditions Consultation	Participation in Community Needs and Availability Services Survey

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38	Outreach Community Ministries – Main Park NRC	Services – Children Services – Education Regional Organization	Needs Assessment / Current Market Conditions Consultation	Participation in Community Needs and Availability Services Survey
39	Outreach Community Ministries – Timberlake Apartments NRC	Services – Children Services – Education Regional Organization	Needs Assessment / Current Market Conditions Consultation	Participation in Community Needs and Availability Services Survey
40	Midwest Shelter for Homeless Veterans	Services – Homeless	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
41	Bridge Communities	Housing Services - Homeless	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
42	United Cerebral Palsy Seguin of Greater Chicago	Services – Persons with Disabilities Housing	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
43	Serenity House Counseling Centers	Services – Other – Substance Abuse	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
44	Northeastern Illinois Area Agency on Aging	Services – Elderly Persons	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
45	Franciscan Ministries	Housing Services-Health	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
46	Asissi Homes of Illinois	Housing	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
47	NAMI DuPage	Services-Persons with Disabilities	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey

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48	The Community House	Services- Children Elderly Persons w/ Disabilities	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
49	HCS Family Services	Services- Homeless Other- Food Pantry	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
50	Evangelical Child and Family Agency	Services - Children	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
51	YWCA of Metropolitan Chicago Patterson & McDaniel Family Center	Services – Children Services – Education	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
52	West Suburban Community Pantry, Inc.	Services – Education Other – Food Pantry	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
53	CASA of DuPage County	Services – Children Other – Legal	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
54	SVDP Housing Corp	Housing Services – Elderly Persons	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
55	Wood Glen Senior Residences	Housing Services – Elderly Persons	Needs Assessment / Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment and Non Profit Needs Assessment
56	Northern Illinois Food Bank	Other – Food Bank	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
57	Little Friends, Inc.	Services – Persons with Disabilities Employment	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey

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58	Cadence Health – Central DuPage Hospital	Services – Health	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
59	Wayside Cross	Services-homeless, substance abuse	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
60	Outreach Community Ministries Wheaton Youth Outreach	Services – Housing Children Homeless Education	Needs Assessment/ Current Market Conditions Consultation	Participation in a Nonprofit 5 Year Capital Needs Assessment
61	Community Career Center	Services - Employment	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
62	Phillip Rock Center & School	Services-Children, Education	Needs Assessment / Current Market Conditions Consultation	Participation in Non Profit Needs Assessment Survey
63	HOPE Fair Housing Center	Services – Fair Housing	Needs Assessment / Current Market Conditions Consultation	Participation in a request for detailed information on Fair Housing complaints received and outcomes

Table 2 – Consultation Participation from Agencies, Groups & Organizations

f. Identify any Agency Types not consulted and provide rationale for not consulting

The County consulted with a wide variety of government entities, nonprofit agencies, and neighborhood resource centers to complete the consolidated plan. The County reached out with many organizations and given the time constraints and completion due dates some agencies were unable to contribute. Each agency type was consulted, no agency types were intentionally excluded from consultation.

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g. Other local/regional/state/federal planning efforts considered when preparing the Plan

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
State of Illinois 2010-2014 Consolidated Plan	State of Illinois – Illinois Housing Development Authority	The County referred to the most recent State plan in the development of the goals related to suitable living environments, economic opportunities, and decent and affordable housing
City of Naperville Consolidated Plan	City of Naperville	The City supports affordable housing and the County’s single-family rehab efforts
DuPage County Health Department Annual Report 2013	DuPage County Health Department	The County referred to the annual report to discuss and identify gaps in health coverage and programs to help uninsured residents
Go To 2040 IPlan	Chicago Metropolitan Agency for Planning (CMAP)	The goals for affordable housing and community development in the consolidated plan overlap with CMAP’s goal of achieving greater livability through landuse and housing
DuPage Housing Authority 2014 Annual Report	DuPage Housing Authority	The County referred to DHA’s Annual Report to review housing needs and programs to support affordable housing

Table 3 – Other local/ regional/ federal planning efforts

h. 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))

The County will continue its efforts to collaborate further with local, regional, state, and federal partners to create opportunities for future projects and to reduce the duplication of efforts.

3. Citizen Engagement in Determining Needs

a. Summarize the citizen participation process and efforts made to broaden citizen participation. Also include how citizen participation impacted goal-setting:

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The laws that created the CDBG, HOME, and ESG programs state that the primary purpose of the programs covered by the Consolidated Plan is to improve communities by providing: decent housing, a suitable living environment, and growing economic opportunities for low and moderate income households in DuPage County. Since low to moderate income households are the target of these funds it is important to involve these households.

Over the past 5 years the CDC has funded Neighborhood Resource Centers (NRCs), neighborhood specific and citywide sites that directly served their communities, usually located in areas where community resources are not affordable or accessible. The CDC developed a survey instrument found in Appendix C to gauge residents' general assessment of their neighborhoods, their needs of their community, the issues of the neighborhood, and police and safety concerns. The survey was distributed to all 6 currently funded NRCs as both an electronic and paper survey and available in English and Spanish for a period of 4 months. The results of the survey are shown in Figure PR-1, and it appears residents thought parenting classes, public transportation, and computer classes were the main needs, while the biggest concern appears to be tension between racial and ethnic groups, often times creating subsequent issues also in the table.

Staff conducted a County wide neighborhood needs survey available to all residents in both English and Spanish. Over 400 responses were collected and analyzed to determine the major needs and problems residents will be facing in the next 5 years.

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Figure PR-1 Resident Surveys Located in NRC Service Locations		
Needs Assessment		
Type of Activity	Survey Percentage	Priority
Parenting Classes	83.3%	High
Public Transportation	82.6%	High
Computer Classes	80.7%	High
Organized Sports - Youth	78.5%	High
Educational Tutoring	77.5%	High
Affordable Daycare	76.7%	High
Scouting for Boys and Girls	75.4%	High
Exercise or Movement Class	75.0%	Low
Medical Clinics	74.1%	Low
Organized Sports - Adult	74.1%	Low
Housing Assistance Programs	72.1%	Low
Senior Citizen Services	71.8%	Low
Counseling Services	69.7%	Low
Access to Fresh Food and Produce	53.2%	Low
Problems Facing Community		
Tension Between Racial or Ethnic Groups	85.9%	High
Cultural Activities	78.4%	High
Crime, Drugs, or Violence	75.8%	High
Lack of Community Input on Issues Facing Neighborhood	75.0%	High
Homelessness	72.4%	High
Affordable, Quality Child Care	69.7%	Low
Unsupervised Children or Teenagers	65.7%	Low
Affordable Housing	63.6%	Low
Abandoned or Run Down Buildings	63.3%	Low
Unemployment	60.2%	Low
Public Schools Education Curriculum	47.9%	Low

The CDC also conducted a County wide survey for all residents to complete. The survey instrument asked residents about a range of topics consisting of affordable housing, employment opportunities, discrimination, basic needs availability, and other topics. The survey was launched on the DuPage County website with a press release from a DuPage County Board member. It was available as both an electronic and paper copy and offered in English and Spanish, found in Appendix A. In order to increase the amount of low to moderate income families participating, the survey was offered at the front counter of the Community Services Department of the County, a high traffic area for people seeking benefits to assist their respective families. The results of the survey impacted goal setting when used in each section to conduct a Market Analysis and to determine priority needs for projects covering the next 5 years.

In addition to surveys, the CDC conducted four stages of public hearings:

- Stage one includes a separate required public hearing for each municipal applicant to gain citizens input.

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- Stage two includes a required public hearing for each non-municipal capital applicant seeking CDBG funding to gain citizens input
- Stage three includes a required public hearing for each applicant for public services to gain citizens input. This hearing typically is held at one location and combines all public service applicants.
- Stage four includes a County public hearing, scheduled for January 15, 2015 at the DuPage County Center, on the draft Consolidated Plan before final action by the County Board. Copies of the draft plan will be made available in municipal buildings throughout the consortium area. Notification will be published in the Daily Herald on December 26, 2014, general circulation newspaper in the DuPage Consortium area.

Reasonable efforts were made to accommodate language needs. The Community Services Department was made available at (630) 407-6500 for a list of organizations that could supply language services. Reasonable accommodations were also considered for people with disabilities to participate in the public comment period.

The public comment periods are as follows:

- For the draft Consolidated Plan, the CDC requires a 30-day comment period, scheduled to be completed on February 2, 2015 prior to the County Board's final action on the Plan. Notice of this comment period is done simultaneously with the notice of the public hearing on the draft ConPlan, and uses the same methods. Any substantial amendments to the Con Plan are subject to a public hearing.
- For the Consolidated Annual Performance and Evaluation Report (CAPER) on the Consolidated Plan, the CDC requires a 15-day comment period prior to submitting it to HUD. Notification is published in a newspaper of general circulation in the DuPage Consortium area.
- Additional comments are solicited on the activities undertaken with CDBG, HOME, and ESG funds through the Environmental Review Record process. Notification and comment periods are in accordance with CFR Part 58.

It is the policy of the CDC that all comments directed to the Consolidated Plan or the CAPER that are received during public hearings, designated comment periods, and during special events

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such as workshops and consultations shall be responded to in writing within the document. Comments will be summarized in the document followed by responses.

The Community Development Commission encourages public comment and offers transparency to the greatest extent possible for each grant:

DuPage County Community Development Commission
421 North County Farm Road, Room 3-100 Wheaton, Illinois 60187
(630) 407-6600 / communitydev@dupageco.org

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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	NRC Survey	Emphasis on Low-Mod / Minority Residents / Non English Speaking	A community survey was issued in both paper and electronic copies	A total of 45 completed surveys were received. A Summary of results included in Appendix A	All comments were accepted	https://www.surveymonkey.com/s/2LJPBDQ
2	Citizens Survey	Non Targeted / Broad Community / Non English Speaking	A community survey was issued in both paper and electronic copies	A total of 407 completed surveys were received. A copy of the survey can be found in Appendix A	Comments that were deemed offensive to particular populations were not accepted.	https://www.surveymonkey.com/s/X3DMX2M or https://www.surveymonkey.com/s/X3TDVXB
3	Public Meeting Scheduled for January 6, 2015	Non Targeted / Broad Community	A Public Meeting is scheduled for January 6, 2015 to solicit public input on the DuPage County 2015-2019 ConPlan and 2015 Action Plan	To be determined after conclusion of January 6 th meeting	To be determined after conclusion of January 6 th meeting	N/A
4	Public Hearing Scheduled for January 15, 2015	Non Targeted / Broad Community	A Public Hearing is scheduled for January 15, 2015 to solicit public input on the DuPage County 2015-2019 ConPlan and 2015 Action Plan	To be determined after conclusion of January 15 th meeting	To be determined after conclusion of January 15 th meeting	N/A

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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
5	Other: Municipality Outreach	Non Targeted / Broad Community	An electronic copy of the draft 2015-2019 ConPlan will be supplied to each municipality within DuPage County between 1/2/14 and 2/2/14 for public viewing and commenting	To be determined after conclusion of 30 day public viewing on February 2, 2015	To be determined after conclusion of 30 day public viewing on February 2, 2015	N/A
6	30 Public Comment Period scheduled between January 2, 2015 and February 2, 2015	Non Targeted / Broad Community	To be determined after conclusion of 30 day public viewing on February 2, 2015	To be determined after conclusion of 30 day public viewing on February 2, 2015	To be determined after conclusion of 30 day public viewing on February 2, 2015	N/A

Table 4 – Citizen Participation Outreach



NEEDS ASSESSMENT

The Needs Assessment of the ConPlan, in conjunction with information gathered through consultations and the citizen participation process, will provide a clear picture of DuPage County residents' needs related to affordable housing, special needs housing, community development, and homelessness.

III. Needs Assessment

1. Overview

DuPage County strives to allocate funds from the Community Development Block Grant Program (CDBG), HOME Investment Partnerships Program (HOME), and the Emergency Solutions Grants Program (ESG) to address a wide variety of issues facing the residents of the County. The 2015-2019 ConPlan addresses many opportunities to fund activities such as affordable housing, capital projects for nonprofit agencies, projects for special needs populations, public service, neighborhood investment construction, acquisition of real property, administration, and other activities.

In order to determine the needs of the community, DuPage County established collaborative networks with local government, non-government organizations, and residents of DuPage County. Each group was offered the opportunity to participate in a needs assessment survey to determine priority needs to be inserted into the application process discussed in section NA-50.

Role of Collaborative Networks

The examples of collaborative networks mentioned above work to identify and prioritize needs related to housing, health care, homelessness and other issues facing low and moderate income residents of DuPage County. Collaborative networks are an important part of the effort to meet local needs. The role of these networks includes: (a) sharing information on their activities including descriptions of programs, housing opportunities, development projects, and other initiatives; (b) sharing information on grant programs and other financing options; (c) encouraging cooperation among participants on specific programs and projects, including the development of joint projects and applications for funding; (d) working together on advocacy efforts; (e) providing countywide and broad-based leadership opportunities to local agencies that would not be available outside of these collaborations; and (f) providing broad based and regular input into the Consolidated Planning process.

Role of Local Governments

The Community Development Commission (CDC) is the focus of local government participation in the Consolidated Planning process and in the implementation of the Plan. There are 28

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municipal members and 18 DuPage County Board members of the CDC. The municipal members of the CDC are appointed by their respective municipalities, and the County Board Chairman appoints the County Board members to the CDC. This structure has fostered a strong working relationship between municipalities and County government through the CDC.

Based on this structure, local governments have continuing opportunities to play a role in meeting housing and community development needs. These opportunities include: (a) taking affirmative actions to preserve and enhance existing affordable neighborhoods; (b) playing a leadership role in countywide collaborations (current examples being the County's leadership in the Continuum of Care and mental health access planning, and the County Health Department's leadership in the Partnership for Behavioral Health); (c) working through the CDC to continue a strong commitment to affordable housing funding; and (d) continuing to provide incentives for coordination and cooperation among providers.

Role of Non-Government Organizations

Non-government organizations, primarily non-profit groups and housing developers, provide a large portion of the housing and services that address needs of the low-income population of DuPage County. Therefore, this ConPlan recommends continuation of technical assistance efforts to increase the capacity of local organizations to provide housing and other services. These efforts will focus on: (a) working with local non-profit groups to increase capacity to develop and manage affordable housing (including fostering new Community Housing Development Organizations); and (b) continuing to maintain data on community needs that will help local organizations set priorities and apply for various grant funding.

Role of Residents of DuPage County

The final and most important collaborative network DuPage County works with is the residential population. The County works to provide opportunities for residents to provide input concerning the needs of the community by hosting public hearing, meetings, and a community survey available in both English and Spanish. Staff reviews and responds to all comments received during the public comment period.

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DuPage County encourages residents to participate in public hearings and meetings so that residents are aware of the programs available within the County and aware of the projects that are going on within each community. The community survey provided to residents is an important tool for the County to utilize. Residents are able to bring attention to important issues that are of concern within each community so that the County can work with each network to address areas of concerns to DuPage County residents.

Over the next 5 years staff will continue to work with these networks to address changes in the needs of the community and adjust funding accordingly to continually meet the needs of the community.

2. Housing Needs Assessment

a. Summary

Affordable housing is a critical need in DuPage County and the County strives to maintain existing affordable housing as well as stimulate new affordable housing options. DuPage County remains a high-cost location within an expensive metropolitan region. As indicated by the 2011-2013 American Community Survey (ACS), DuPage County contains more than 88,163 rental units. This figure equals 26.2% of the total available housing in the County.¹ The same survey shows that approximately 30,271 (36.2%) renting households in DuPage County pay 35% or more of their incomes for rent. However, 46.4% of renters are burdened renters, which include those spending over 30% of the household income on rent. The ACS provides the total number of households that have occupied units paying rent where gross rent as a percentage of household income can be calculated.

The Census Data estimates the DuPage County rental vacancy rate to be 5.4%. Due to the extreme real estate market conditions beginning in 2008, which included a wave of foreclosures throughout the nation, it is difficult to compare the current vacancy rates in both rental and homeowner housing to past years or to forecast trends from current data. It appears that the DuPage County rental vacancy rate has fluctuated between 5% and 10.4% since 2000. Census

¹ United States Census Bureau. "Selected Housing Characteristics, 2011-2013 American Community Survey 3-Year Estimates." American FactFinder. N.p., 23 Oct. 2014. Web. 15 Dec. 2014.

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data estimates show the DuPage County total vacancy rate for all housing at approximately 5.5%. Total vacancy rate for all housing has fluctuated between 3% and 6% since 2000.

While foreclosure filings have slowed, the number is still concerning. A new foreclosure filing typically occurs when a homeowner is 90 days or more delinquent in his or her mortgage payment and represents the beginning of the foreclosure process. New foreclosure filings in the Chicago 6 County Region dropped more than 40% in 2013, reaching the lowest level since 2007, as shown by new 2013 data from the Woodstock Institute² DuPage County has seen foreclosure filings as follows:

- 2013 3,490 foreclosure filings.
- 2012 5,701 foreclosure filings
- 2011 5,362 foreclosure filings
- 2010 6,651 foreclosure filings
- 2009 5,552 foreclosure filings

A foreclosure auction represents completion of the foreclosure process and the point at which a homeowner is typically evicted from a property. In 2013, there were 2,513 completed foreclosure auctions in DuPage, a decrease from prior year of nearly 25.2%. Completed foreclosure auctions decreased regionally from 2012 by 9.7%.

Very low-income renters experience significantly higher incidences of housing problems. Final figures of 2014 from the National Low Income Housing Coalition illustrated that workers needed an hourly wage (at 40 hours per week) of \$18.83 and an annual income of \$39,160 to afford the rent of a two-bedroom apartment in DuPage at fair market rent.³ Someone earning 30% AMI (\$21,720) would be able to afford rent of \$543 per month. A two-bedroom apartment would require 2.3 people working full-time jobs at minimum wage in order to be affordable.

² Woodstock Institute. "Chicago City and Regional Foreclosure Activity, Second Half 2013." (n.d.): n. pag. 19 Feb. 2014. Web. 4 Dec. 2014.

³ "Out of Reach 2014: National Low Income Housing Coalition." National Low Income Housing Coalition. N.p., 24 Mar. 2014. Web. 15 Dec. 2014.

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Additionally, according to the 2011-2013 American Community Survey, seniors who collected social security in DuPage County, on average, received around \$1,646 per month (or a wage of \$9.50 per hour, based on a 40-hour week).⁴ The fair market rent for a 1-bedroom apartment is \$815 per month, thus the average senior whose only source of income is social security will pay 50.6% of income towards rent.

Low-income people with disabilities face severe gaps between disability payment amounts, averaging \$883 a month in DuPage, and Fair Market Rate rents for a 1-bedroom at \$815. \$883 in Supplemental Security Income would have an affordable rent of \$265.

The Illinois Department of Employment Security (IDES) reported February 2014 that the Chicago-Joliet-Naperville region had an unemployment rate of 8.7%. The annual average for 2013 was 9.2%, compared to 8.9% for 2012 and 9.9% unemployment for 2011. Due to budget cuts, the Illinois Department of Employment Security no longer provides Mass Layoff Data Reports.⁵

DuPage County seeks to increase the supply of affordable housing to both renters and owners, and it is the policy of the DuPage Community Development Commission and the DuPage HOME Advisory group to promote greater locational choice in the development of affordable housing in the DuPage County area. This policy is promoted in the implementation of the Community Development Block Grant Program and the HOME Investment Partnerships Act program. The criteria used to select projects for funding have been designed to promote greater locational choice for low and moderate income persons by encouraging affordable housing outside of areas of affordable housing concentration and outside of neighborhoods of low-income concentration.

Demographics

⁴ United States Census Bureau. "Selected Economic Characteristics, 2011-2013 American Community Survey 3-Year Estimates." American FactFinder. N.p., 23 Oct. 2014. Web. 15 Dec. 2014.

⁵ Source: Illinois Department of Employment Security, Economic Information and Analysis. Chicago-Joliet-Naperville, IL Metropolitan Division Seasonally Adjusted (n.d.): n. pag. Illinois Department of Employment Security. Pat Quinn, Governor, Feb. 2014. Web. 16 Dec. 2014.

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Table 5 shows the population, number of households and median income for a base year of 2000 and a recent year of 2010 and calculates the percentage of change.

DuPage County gained 8,894 residents between 2000 and 2010. In 2013, the U.S. Census Bureau estimated DuPage County's resident population to be 927,775 which reflects an increase of 14,547 residents since 2010.

Demographics	Base Year: 2000	Most Recent Year: 2010	% Change
Population	904,334	913,228	1%
Households	323,651	333,077	3%
Median Income	\$67,887	\$78,538	13.6%

Table 5- Housing Needs Assessment Demographics
Data Source: 2000 Census (Base Year), 2006-2010 ACS (Most Recent Year)

b. Number of Households

Table 6 reflects the number and type of households by HUD-Adjusted Median Family Income (HAMFI). Note: > means greater than. For example >30-50% indicates 30.0001% - 50%

	0-30% HAMFI	>30- 50% HAMFI	>50- 80% HAMFI	>80- 100% HAMFI	>100% HAMFI
Total Households	20,838	24,985	42,745	30,695	213,870
Small Family Households	6,133	8,140	15,924	13,069	121,325
Large Family Households	1,189	2,043	4,190	3,314	25,580
Household contains at least one person 62-74 years of age	2,927	4,855	7,947	5,183	32,528
Household contains at least one person age 75 or older	4,365	6,483	6,775	3,239	11,677
Households with one or more children 6 years old or younger	3,464	4,443	7,682	5,916	23,122
the highest income category for these family types is >80% HAMFI					

Table 6 - Total Households Table
Data Source: 2006-2010 CHAS - HUD

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c. Housing Needs Summary

Table 7 provides the number of households with housing problems by tenancy and HAMFI.

	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
NUMBER OF HOUSEHOLDS										
Substandard Housing - Lacking complete plumbing or kitchen facilities	320	120	155	135	730	25	75	115	74	289
Severely Overcrowded - With >1.51 people per room (and complete kitchen and plumbing)	95	289	190	24	598	10	70	35	19	134
Overcrowded - With 1.01-1.5 people per room (and none of the above problems)	490	722	575	363	2,150	89	290	650	270	1,299
Housing cost burden greater than 50% of income (and none of the above problems)	7,875	4,239	1,145	160	13,419	6,418	6,140	9,275	3,410	25,243
Housing cost burden greater than 30% of income (and none of the above problems)	855	5,050	7,675	1,927	15,507	884	4,214	8,053	8,765	21,916
Zero/negative Income (and none of the above problems)	1,064	0	0	0	1,064	1,133	0	0	0	1,133
Housing cost burden greater than 30% of income (and none of the above problems)	855	5,050	7,675	1,927	15,507	884	4,214	8,053	8,765	21,916
Zero/negative Income (and none of the above problems)	1,064	0	0	0	1,064	1,133	0	0	0	1,133

Table 7 – Housing Problems Table

Data Source: 2006-2010 CHAS – HUD

Table 8 provides the number of households with no housing problems, one or more housing problems, and negative income by tenancy and HAMFI.

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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
NUMBER OF HOUSEHOLDS										
Having 1 or more of four housing problems	8,790	5,373	2,050	690	16,903	6,543	6,570	10,080	3,785	26,978
Having none of four housing problems	2,199	6,160	13,375	8,465	30,199	1,114	6,839	17,259	17,694	42,906
Household has negative income, but none of the other housing problems	1,064	0	0	0	1,064	1,133	0	0	0	1,133

Table 8 – Housing Problems 2 Table
Data Source: 2006-2010 CHAS - HUD

Table 9 provides the number of households with a housing cost burden of more than 30% by household type, tenancy, and household income which is expressed as a percentage of AMI. Data in table 9 indicates that 28,908 renter households (8.7% of total households), and 36,008 owner households (10.8% of total households) pay over 30% of their income for housing costs. These percentages were obtained by comparing the data in table 9 to the total household number provided by HUD in table 5 above.

Small related households are defined by HUD as a household with two to four related members. Large related households are defined by HUD as a household with five or more related members. An elderly household is defined by HUD as a household whose head, spouse, or sole member is a person who is at least 62 years of age.

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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
NUMBER OF HOUSEHOLDS								
Small Related	3,469	4,728	3,614	11,811	1,839	2,899	7,752	12,490
Large Related	700	846	365	1,911	464	912	2,672	4,048
Elderly	2,054	2,006	1,420	5,480	3,408	5,590	4,390	13,388
Other	3,354	2,653	3,699	9,706	1,708	1,325	3,049	6,082
Total need by income	9,577	10,233	9,098	28,908	7,419	10,726	17,863	36,008

Table 9 – Cost Burden >30%
Data Source: 2006-2010 CHAS – HUD

Table 10 provides the number of households with a housing cost burden of more than 50% by household type, tenancy and household income expressed as a percentage of AMI. Data in table 6 indicates that 14,160 renter households (4.3% of total households), and 22,380 owner households (6.7% of total households) in DuPage County pay 50% or more of their income towards housing costs. These percentages were obtained by comparing the data in table 9 to the total household number provided by HUD in table 5 above.

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
NUMBER OF HOUSEHOLDS								
Small Related	3,154	1,869	429	5,452	1,754	2,219	4,565	8,538
Large Related	585	203	35	823	400	798	1,553	2,751
Elderly	1,659	1,121	483	3,263	2,749	2,393	1,673	6,815
Other	3,210	1,158	254	4,622	1,593	1,003	1,680	4,276
Total need by income	8,608	4,351	1,201	14,160	6,496	6,413	9,471	22,380

Table 10 – Cost Burden >50%
Data Source: 2006-2010 CHAS - HUD

Table 11 provides the number of households that are overcrowded which is defined as households with more than one person per room, excluding bathrooms, porches, foyers, halls or half-rooms. The data is displayed by household type, tenancy and household income expressed as AMI.

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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
NUMBER OF HOUSEHOLDS								
Single family households	545	872	690	283	2,390	99	320	584
Multiple, unrelated family households	34	54	85	104	277	0	80	105
Other, non-family households	0	95	0	0	95	0	0	0
Total need by income	579	1,021	775	387	2,762	99	400	689

Table 11 – Crowding Information – 1/2
Data Source: 2006-2010 CHAS – HUD

Households with Children Present

Table 12 displays the number of households that included children under the age of 18 by tenancy and household income, expressed as a percentage of Area Median Income (AMI).

	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	2,855.25	3,399.11	5,801.14	12,055.50	11,638.40	13,855.24	23,646.28	49,139.92

Table 12 – Crowding Information – 2/2

Data Source: 2006-2010 American Community Survey (ACS) 5-Year Estimate. The information gathered to create the above table was from a combination of Table 2 in this section which provided the total household number and the 2006-2010 ACS Children Characteristics which provided the number of households with children under 18 years of age and also provided the housing tenure of households with children under 18 years of age.⁶

Methodology:

The total households sampled from Table 6 are 333,133 and the total number of households with children under 18 years of age was 230,058. 80.3% (184,736.57) of households with children under 18 years of age were owner occupied and 19.7% (45,321.43) of households with children under 18 years of age were renter occupied. Based on the household numbers per HAMFI group noted in table 6, we determined that 6.3% of total households fall in the 0-30% AMI category, 7.5% of total households fall in the >30-50% AMI category and 12.8% of households fall in the >50-80% AMI category. We were then able to calculate the households with children present in

⁶ United States Census Bureau. "Children Characteristics, 2006-2010 American Community Survey 5-Year Estimates." *American FactFinder*. N.p., 8 Dec. 2011. Web. 15 Dec. 2014.

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each AMI category by using the percentages of total households calculated in each AMI category.

Note; 73.4% of households fall under the 81 to <100% AMI category and the 0-30%, >30-50% & >50-80% AMI categories account for 26.6% of the total households sampled.

Example:

- Total Households with children under 18 years of age in owner occupied housing = 184,736.57
- 6.3% of owner occupied housing with children under 18 years of age fall into the 0-30% AMI category
- $184,736.57 \times 6.3\% = 11,638.40$

The above noted table was created by combining the Number of Households Table 6 information and Children Characteristics from the 2006-2010 ACS to determine the estimated number of households with children present as represented by tenure and AMI.

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

According to the 2011-2013 American Community Survey 3-year estimates, the number of nonfamily households within DuPage County was 97,262.⁷ The at-risk single person population in need of housing assistance would consist of seniors, disabled, homeless, persons living in poverty, those living with HIV/AIDS, survivors of domestic violence, disabled, the mentally ill, individuals facing foreclosure and persons who have recently lost employment.

e. 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.

The DuPage Continuum of Care 2014 Point in Time Survey indicated an unmet need of 77 beds/units of permanent supportive housing to serve persons with disabilities (9 for households with children and 68 beds for households without children). There are two agencies that specifically provide services for victims of domestic violence; neither reported an unmet unit

⁷ United States Census Bureau. "Households and Families, 2011-2013 American Community Survey 3-Year Estimates." *American FactFinder*. N.p., 23 Oct. 2014. Web. 15 Dec. 2014.

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need during the Point in Time Survey. Victims of domestic violence receive preference and priority to receive a housing choice voucher.

f. What are the most common housing problems?

The most common housing problem faced in DuPage County is the cost burden of owning a home. By HUD standards, families that pay more than 30% of their gross income on housing are cost burdened. As shown in Table 5 above, in DuPage County, 36,008 owner households pay more than 30% of the household income towards housing expenses and 22,380 owner households pay more than 50% of the household income towards housing expenses, which is 18% of total households within the county. Homeowners with incomes of 51-80% AMI are affected the greatest in both the >30% and >50% cost burden categories.

A similar problem is seen with families who rent in DuPage County. 28,908 renter households pay more than 30% of the family income on housing and 14,160 renter households pay more than 50% on housing, which is 13% of the total households within the County. Those renters who earn 0-30% AMI are affected the greatest.

The second most common housing problem in DuPage County is overcrowding within renter households. 2,762 renter households experience overcrowded conditions, defined as more than one person per room. The most significant overcrowding affects renters with an income of 31-50% AMI, making up 40% of the overcrowded rental households. Supporting data is referenced in Table 7.

g. Are any populations/household types more affected than others by these problems?

Small family renter households are greatly affected in both the >30% & >50% cost burden categories, making up 40.9% of the >30% cost burden households and 38.5% of the >50% cost burden households. Elderly renter households are also significantly affected by >30% cost burden, making up 33.6% of the >30% households.

Small family owner households are also significantly affected by a cost burden of >50%, making up 38.2% of the households. Elderly owner households account for 34.7% of the >30% cost

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burden households and 30.5% of the >50% cost burden households. Supporting data can be found in tables 5 and 6.

h. Describe the characteristics and needs of Low-income individuals and families with children who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered. 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.

Those at imminent risk most often present: lack of skills required to obtain employment; deficiencies in personal skills to sustain employment; or health issues that prevent employment. Because the cost of housing in DuPage County is prohibitive, these personal and employment obstacles make obtaining and sustaining housing that much more difficult. DuPage County has a robust system of case management, employment skills resources, and family self-sufficiency programs to assist persons in overcoming these obstacles. The most current data available on outcomes at this time is information from the Continuum of Care for the period July 1, 2012- June 30, 2013. During that time period 1,739 households were reported as receiving financial assistance through some type of Federal, state, or private resource. 830 of these households were selected for a 90 day follow up: 86% of 830 reported as remaining housed; 1.3% reported homelessness; the remaining 12.7% either did not respond or reported unknown housing situation. The Continuum of Care places great emphasis on appropriateness of housing so that households are not placed in an unsustainable situation where they will be faced with homelessness when assistance is terminated.

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

The lack of affordable housing for lower-income households has been linked with instability and an increased risk of homelessness. With cost burdens of >30% and >50% affecting owner households and renter households alike, instability and the risk of homelessness affect many households.

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Other areas that could impact stability and an increased risk of homelessness are prolonged unemployment, foreclosure, mental illness, domestic violence, drug or alcohol addiction, unanticipated medical expenses, disabilities, exiting an institution such as jail or a mental health facility, exiting a skilled nursing care center and other emergency expenses.

The DuPage Homeownership Center (DHOC) assists first-time home buyers and low-income, single-parent and minority households through various programs, such as education for first-time home buyers, credit counseling, financial literacy training, and foreclosure prevention counseling. DHOC also links home buyers to financing packages that help reduce interest charges, and thereby increase the purchasing power of low-income households. DHOC has developed a program called “Counselor in the Court.” This program is the result of collaboration between DHOC, lenders, and Chancery Court judges and is intended to educate homeowners on how to take charge of their situations, make use of available resources and remedies within existing systems and make informed decisions throughout the foreclosure process.

DuPage County also offers a Single Family Rehabilitation (SFR) program to assist low to moderate income DuPage County homeowners, whose income is 80% or less MFI, with home repairs that address health and safety issues. The goal of the program is to help homeowners maintain the value of their homes and ensure safe living conditions for residents in DuPage County. By providing a Grant to homeowners for needed repairs, homeowners are relieved of some cost burden and can use their income towards other necessities rather than housing costs.

j. Discussion

Housing problems continue to affect residents of DuPage County. Using 2006-2010 CHAS data identified in Table 4, the County identified 13% of households as having one or more of the four housing problems listed in this section. Approximately 5% of households in DuPage County were living with 0-30% AMI. Households operating at a deficit see higher rates of homelessness, frequent changes of residence, and a multitude of other issues.

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Even though homeownership is more attainable today than it has been in recent years, there is still an affordability gap even for moderate income households. Strategies to address barriers to affordable housing include:

-Federal and State Funding - These sources of funding to meet affordable housing needs are not sufficient to meet all needs. To address this shortfall it is important to apply for all the resources that are available to the County. Therefore, the County will not only apply for all resources it is eligible for, but will also assist other agencies in applying for funds.

-Innovative Private and Public Sector Financing and Partnerships - The County will continue to work with private lenders and with the DuPage Housing Authority to develop new ways of financing affordable housing. The DuPage Homeownership Center continues to develop innovative strategies for homeownership. The County has partnered with DuPage Habitat for Humanity to build a 13 home subdivision and to rehabilitate houses under the Neighborhood Stabilization Program. Habitat's vast network of corporate partners and volunteers provides needed leveraging.

-Containing Costs - The ability of government to contain the high cost of housing to the consumer is limited. The DuPage Homeownership Center will continue to work with local lenders and seek government subsidies to lower the cost of financing for low-income buyers. The County and the DHA will continue to work to lower financing costs for developers of new housing and investors seeking to maintain existing affordable housing.

-Strategic Plan for DuPage County Government – In May of 2007, the County Board approved a strategic plan which set goals for affordable housing. The goals include expanding the County's leadership role in affordable housing solutions through education, coordination, and collaboration and to actively participate in local efforts to create practical models for affordable housing development.

-Individual Jurisdiction Actions – Each jurisdiction can take actions to help minimize any negative impacts of restrictive building codes by encouraging fast-track or one-stop permit

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processing, promoting the use of time-saving and cost-saving techniques within reasonable health and safety parameters, provide technical assistance, information and other support to local communities, and encourage affordable housing by using development controls to pursue goals.

-Cooperation Between Units of Government – The development of strategies for encouraging new affordable housing opportunities requires a cooperative approach. The countywide planning process is a framework for such an approach, but it is clear that the implementation of strategies will need to encourage all units of government to participate in the solution.

-GO TO 2040 Plan – The Chicago Metropolitan Agency for Planning is working on a regional plan entitled “GO TO 2040”. This plan encourages building a regional vision to “create more compact, mixed-use, livable communities” and places an emphasis on transit oriented development. The Center for Neighborhood Technology has also completed a “housing plus transportation” study of the Chicago region.

-Educating the Community – The public’s misperception of affordable housing can lead to resistance to the development of affordable housing within their community. The DuPage County Community Development Commission stays informed of legislative efforts through the DuPage Housing Action Coalition (DHAC), an organization that advocates for affordable housing at the local, state, and national level, and the National Association for County Community and Economic Development (NACCED).

DuPage County along with agencies operating throughout DuPage County, seek to address the housing problems residents experience by increasing the supply of affordable housing, reducing housing cost burden, reducing overcrowding and facilitating investment to improve substandard housing in neighborhoods across the County.

3. Disproportionately Greater Need: Housing Problems

This section assesses 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.

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a. Introduction

HUD defines a disproportionately greater need as when a racial or ethnic group at a given income level experience housing problems at a rate greater than 10% of the income level as a whole. The four housing problems are lack of complete kitchen facilities, lack of plumbing facilities, overcrowding defined as more than one person per room, and cost burden of more than 30% of the household income is spent on housing.

The income levels are defined as follows:

- Extremely Low-Income 0-30% AMI
- Low-Income 30-50% AMI
- Moderate-Income 50-80% AMI
- Middle-Income 80-100% AMI

Tables 13 through 16 demonstrate of housing problems by income, race and ethnicity. Each table provides data for one of the four above noted income levels.

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	18,727	1,843	1,899
White	12,488	1,253	1,292
Black / African American	1,948	184	195
Asian	1,318	124	293
American Indian, Alaska Native	10	0	0
Pacific Islander	0	0	0
Hispanic	2,820	210	105

Table 13 – Disproportionally Greater Need 0-30% AMI
Data Source: 2006-2010 CHAS – HUD

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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	83.30%	8.20%	8.50%
White	83.10%	8.30%	8.60%
Black / African American	83.70%	7.90%	8.40%
Asian	75.90%	7.10%	17%
American Indian, Alaska Native	100%	0%	0%
Pacific Islander	0%	0%	0%
Hispanic	90%	6.70%	3.30%

Table 13 Supplement

*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%

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	21,858	5,095	0
White	14,757	4,515	0
Black / African American	1,415	104	0
Asian	1,625	209	0
American Indian, Alaska Native	32	25	0
Pacific Islander	0	0	0
Hispanic	3,770	220	0

Table 14 – Disproportionally Greater Need 30-50% AMI

Data Source: 2006-2010 CHAS – HUD

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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	81%	19%	0%
White	76.60%	23.40%	0%
Black / African American	93.20%	6.80%	0%
Asian	88.60%	11.40%	0%
American Indian, Alaska Native	56.10%	43.90%	0%
Pacific Islander	0%	0%	0%
Hispanic	94.50%	5.50%	0%

Table 14 Supplement

*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%

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	27,045	17,654	0
White	19,340	13,569	0
Black / African American	1,492	973	0
Asian	1,798	893	0
American Indian, Alaska Native	19	34	0
Pacific Islander	0	0	0
Hispanic	4,025	2,050	0

Table 15 – Disproportionally Greater Need 50-80% AMI
Data Source: 2006-2010 CHAS – HUD

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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	60.50%	39.50%	0%
White	58.80%	41.20%	0%
Black / African American	60.50%	39.50%	0%
Asian	66.80%	33.20%	0%
American Indian, Alaska Native	35.80%	64.20%	0%
Pacific Islander	0%	0%	0%
Hispanic	66.30%	33.70%	0%

Table 15 Supplement

*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%

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	14,759	19,598	0
White	11,303	15,382	0
Black / African American	454	1,274	0
Asian	1,111	900	0
American Indian, Alaska Native	23	40	0
Pacific Islander	0	35	0
Hispanic	1,665	1,839	0

Table 16 – Disproportionally Greater Need 80-100% AMI

Data Source: 2006-2010 CHAS – HUD

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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	43%	57%	0%
White	42.40%	57.60%	0%
Black / African American	26.30%	73.70%	0%
Asian	55.20%	44.80%	0%
American Indian, Alaska Native	36.50%	63.50%	0%
Pacific Islander	0%	0%	0%
Hispanic	47.50%	52.50%	0%

Table 16 Supplement

*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%

b. Discussion

Table 13-16 Summary provides the housing problem totals for the jurisdiction as a whole by income.

% 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 housing problems	Grand Totals
0%-30%	Jurisdiction as a whole	18,727	1,843	1,899	22,469
30%-50%	Jurisdiction as a whole	21,858	5,095	0	26,953
50%-80%	Jurisdiction as a whole	27,045	17,654	0	44,699
80%-100%	Jurisdiction as a whole	14,759	19,598	0	34,357
Grand Total		82,389	44,190	1,899	128,478

Table 13-16 Summary

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Based on 2006-2010 CHAS data as shown in tables 13-16, a total of 128,478 households across all income levels served as the sample size to determine disproportionate need of households experiencing housing problems.

0-30% AMI

The total number of households within the extremely low income level group is 22,469 and make up 17.5% of the total households sampled. Of these households that have one or more housing problems, American Indian/Alaska Native households are 16.7% points above the jurisdiction as a whole with 100% of their households having one or more of the four housing problems. It must also be stated, however, that this represents less than 25 households. Although no other racial or ethnic group is represented more than 10% greater than the percentage of all households in the extremely low income group, Hispanic households represented 5.7% greater than the jurisdiction as a whole.

31-50% AMI

The total number of households within the low income level group is 26,953 which represents 21% of the total households sampled. Of the households having one or more of the four housing problems within this income level group, Hispanic households have a disproportionately greater need and are impacted 13.5% greater than the jurisdiction as a whole. Black/African American households also disproportionately represent this category with a need 12.2% greater than the jurisdiction as a whole. Asian households do not appear to have a disproportionately greater need, but they represent the third highest percentage in this category with a 7.6% greater need.

51-80% AMI

The total number of households within the moderate income level group is 44,699 which makes up 35% of the total households sampled. Of the households having one or more of the four housing problems within this income level group, no racial or ethnic group is represented more than 10% greater than the jurisdiction as a whole. The percentage of white households in this category is 43.3%, making it the most represented in this category but 1.7% points below the jurisdiction as a whole. Asian households come in at 6.3% above the percentage of households of the category as a whole. Hispanic households make up 9% and though they do not represent a

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disproportionately greater need, the households do come in at 5.8% above the jurisdiction as a whole.

81-100% AMI

The total number of households within the middle income level group is 34,357 which makes up 26.7% of the total households sampled. Of the households having one or more of the four housing problems within this income level group, Asian households are 12.2% points above the jurisdiction as a whole and account for 3.2% of the total households in the category. The percentage of white households in this category was 33%, making it the most represented in this category.

4. Disproportionately Greater Need: Severe Housing Problems

This section assesses 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.

a. Introduction

Per HUD Consolidated Plan guidelines, severe housing problems exist when a particular racial or ethnic group at a given income level experiences housing problems at a rate at least greater than 10% of the income level as a whole. The severe housing problems include lack of complete kitchen facilities, lack of plumbing facilities, overcrowding of more than 1.5 persons per room and housing cost burden of more than 50% of gross income.

Tables 17-20 capture the number of severe housing problems by income, race and ethnicity for different income levels.

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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	16,271	4,282	1,899
White	10,708	3,011	1,292
Black / African American	1,613	524	195
Asian	1,258	184	293
American Indian, Alaska Native	10	0	0
Pacific Islander	0	0	0
Hispanic	2,555	480	105

Table 17 – Severe Housing Problems 0-30% AMI
Data Source: 2006-2010 CHAS – HUD

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	72.50%	19.10%	8.40%
White	71.30%	20.10%	8.60%
Black / African American	69.20%	22.50%	8.30%
Asian	72.50%	10.60%	16.90%
American Indian, Alaska Native	100%	0%	0%
Pacific Islander	0%	0%	0%
Hispanic	81.40%	15.30%	3.30%

Table 17 Supplement

*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%

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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	11,868	15,119	0
White	7,667	11,569	0
Black / African American	630	883	0
Asian	1,170	664	0
American Indian, Alaska Native	28	29	0
Pacific Islander	0	0	0
Hispanic	2,194	1,790	0

Table 18 – Severe Housing Problems 30-50% AMI
Data Source: 2006-2010 CHAS – HUD

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	44%	56%	0%
White	39.90%	60.10%	0%
Black / African American	41.60%	58.40%	0%
Asian	63.80%	36.20%	0%
American Indian, Alaska Native	49.10%	50.90%	0%
Pacific Islander	0%	0%	0%
Hispanic	55.10%	44.90%	0%

Table 18 Supplement

*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%

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50%-80% 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	11,223	33,470	0
White	7,644	25,270	0
Black / African American	363	2,092	0
Asian	1,061	1,638	0
American Indian, Alaska Native	8	44	0
Pacific Islander	0	0	0
Hispanic	2,055	4,025	0

Table 19 – Severe Housing Problems 50-80%
Data Source: 2006-2010 CHAS - HUD

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	25.10%	74.90%	0%
White	23.20%	76.80%	0%
Black / African American	14.80%	85.20%	0%
Asian	39.30%	60.70%	0%
American Indian, Alaska Native	15.40%	84.60%	0%
Pacific Islander	0%	0%	0%
Hispanic	33.80%	66.20%	0%

Table 19 Supplement

*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%

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80%-100% 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	3,788	30,538	0
White	2,699	23,978	0
Black / African American	150	1,578	0
Asian	462	1,551	0
American Indian, Alaska Native	4	59	0
Pacific Islander	0	35	0
Hispanic	480	3,033	0

Table 20 – Severe Housing Problems 80-100% AMI
Data Source: 2006-2010 CHAS - HUD

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%	89%	0%
White	10.10%	89.90%	0%
Black / African American	8.60%	91.30%	0%
Asian	23%	77%	0%
American Indian, Alaska Native	6.30%	93.70%	0%
Pacific Islander	0%	100%	0%
Hispanic	13.70%	86.30%	0%

Table 20 Supplement

*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%

b. Discussion

Table 17-20 Summary provides the severe housing problem totals for the jurisdiction as a whole by income.

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% 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 housing problems	Grand Totals
0%-30%	Jurisdiction as a whole	16,271	4,282	1,899	22,452
30%-50%	Jurisdiction as a whole	11,868	15,119	0	26,987
50%-80%	Jurisdiction as a whole	11,223	33,470	0	44,693
80%-100%	Jurisdiction as a whole	3,788	30,538	0	34,326
Grand Total		43,150	83,409	1,899	128,458

Table 17-20 Summary

Based on 2006-2010 CHAS data as shown in tables 17-20, a total of 128,458 households across all income groups served as the sample size to determine disproportionate need of households experiencing severe housing problems.

0-30% AMI

The total number of households within the extremely low income group is 22,452 and make up 17.3% of the total households sampled. Of these households having one or more severe housing problem, American Indian/Alaska Native households represented a 27.5% disproportionately greater need than the jurisdiction as a whole with 100% of households having one or more severe housing problem. Although Hispanic households did not represent a disproportionately greater need than the jurisdiction as a whole, the households were at an 8.9% greater need than the total households within the extremely low income group. White households made up 47.7% of the households in this category with Hispanic households representing 11.4% of the households in this category.

31-50% AMI

The total number of households within the low income group is 26,987 and make up 21% of the total households sampled. Of these households having one or more severe housing problem, Asian households represented a 19.8% disproportionately greater need than the jurisdiction as a

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whole with 63.8% of Asian households having one or more severe housing problem. Hispanic households also represent a disproportionately greater need with 10.8% points above the jurisdiction as a whole meaning 55.1% of Hispanic households within this income group have one or more severe housing problem. White households make up 28.4% of this category followed by Hispanic households which make up 8.1% of this category.

51-80% AMI

The total number of households within the moderate income group is 44,693 and make up 34.8% of the total households sampled. Of these households having one or more severe housing problem, Asian households have a 14.2% disproportionately greater need than the jurisdiction as a whole with 39.3% of Asian households having one or more severe housing problem. Although not representing a disproportionately greater need, Hispanic households reflected an 8.7% greater need than the jurisdiction as a whole. White households made up 17.1% of the households within the category and Hispanic households made up 4.6% of the households in the category.

81-100% AMI

The total number of households within the middle income level group is 34,326 and make up 26.7% of the total households sampled. Of these households having one or more severe housing problem, Asian households have a disproportionately greater need at 23% which is 12% above the needs of the jurisdiction as a whole. White households make up 7.9% of the total households in the category and Hispanic households are the second most represented households at 1.4% followed closely by Asian households at 1.3% of the total households within the category.

5. Disproportionately Greater Need: Housing Cost Burdens

This section assesses 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.

a. Introduction

HUD states a disproportionately greater housing cost burden exists when members of a racial or ethnic group at a given income level experience a housing cost burden at a rate of 10% or greater than for the income level as a whole.

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Table 21 displays cost burden information for DuPage County as a whole and for each racial and ethnic group including no cost burden (<=30%), cost burden (30-50%), severe cost burden (>50%) and no/negative income.

Housing Cost Burden

Housing Cost Burden	<=30%	30-50%	>50%	No / negative income (not computed)
Jurisdiction as a whole	218,943	69,260	43,350	1,914
White	178,289	52,110	30,478	1,307
Black / African American	7,043	3,338	2,651	195
Asian	17,190	5,288	4,057	293
American Indian, Alaska Native	303	43	30	0
Pacific Islander	110	0	0	0
Hispanic	14,594	7,730	5,740	105

Table 21 – Greater Need: Housing Cost Burdens AMI
Date Source: 2006 – 2010 CHAS - HUD

Housing Cost Burden	<=30%	30-50%	>50%	No / negative income (not computed)
Jurisdiction as a whole	65.60%	20.80%	13%	0.60%
White	68%	19.90%	11.60%	0.50%
Black / African American	53.20%	25.20%	20.10%	1.50%
Asian	64.10%	19.70%	15.10%	1.10%
American Indian, Alaska Native	80.60%	11.40%	8%	0%
Pacific Islander	100%	0%	0%	0%
Hispanic	51.80%	27.40%	20.40%	0.40%

Table 21 – Supplement

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b. Discussion

Table 21 Summary provides the totals across each AMI level for the jurisdiction as a whole.

Housing Cost Burden	<= 30%	30-50%	>50%	No/negative income (not computed)	Grand Totals
Jurisdiction as a whole	218,943	69,260	43,350	1,914	333,467

Table 21 Summary

Based on 2006-2010 CHAS dated as reflected in Table 21, a total of 333,467 households across all income groups were sampled to determine the extent to which low to moderate income households experienced no cost burden of paying less than 30% of income on housing costs, cost burdens of paying more than 30% of income on housing costs and severe cost burdens of paying more than 50% of income on housing costs.

Cost Burden 30-50%

The total number of households experiencing cost burden is 69,260 or 20.8% of all households sampled. Of these households, no racial or ethnic group represents a disproportionately greater need than the Jurisdiction as a whole. Although there is not a disproportionately greater need, Hispanic households do have a higher percentage of cost burden at 27.4% which is 6.6% greater than the Jurisdiction as a whole. Black/African American households represent the second highest percentage experiencing greater than 30% cost burden at 25.2% which is 4.4% greater than the Jurisdiction as a whole.

Cost Burden >50%

The total number of households experiencing severe cost burden is 43,350 or 13% of all households sampled. Of these households, no racial or ethnic group represents a disproportionately greater need than the Jurisdiction as a whole. Although there is not a disproportionately greater need, Hispanic households do have an elevated percentage of severe cost burden at 20.4% which is 7.4% greater than the Jurisdiction as a whole. Black/African American households represent the second highest percentage experiencing greater than 50% cost burden at 20% which is 7% greater than the Jurisdiction as a whole.

6. Disproportionately Greater Need: Discussion

a. 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?

Based on the information provided in table 17, there are not any income categories in which a racial or ethnic group has disproportionately greater need than the needs of the income category as a whole. Although there is not a disproportionately greater need in any of the income levels, Hispanic households and Black/African American households both had a cost burden and severe cost burden percentage rate greater than the Jurisdiction as a whole.

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

DuPage County is made up of 9 Townships. While DuPage County has a diverse population, there do not appear to be Townships with a majority of minorities. However, based on information obtained from the 2011 DuPage County Statistical Profile created by the Department of Economic Development and Planning, there appears to be a greater presence of Hispanic individuals located in Winfield Township representing 36% of the township population and Addison Township representing 31.9% of the township population. Black/African American individuals appear to have the greatest presence in Naperville Township representing 8.3% of the township population.⁸

7. Public Housing

a. Introduction

The DuPage Housing Authority (DHA) does not manage any public housing. Previous Consolidated Plans included information about the Aurora Housing Authority. The City of Aurora has withdrawn from the DuPage Consortium; therefore, information regarding the Aurora Housing Authority and its units of public housing will no longer appear in the DuPage County Consolidated Plan. The DHA has been serving the County for 72 years and continues to primarily provide safe, decent, sanitary, and affordable housing. Their primary service is to operate the Housing Choice Voucher (HCV), which allows eligible families to lease a housing

⁸ Department of Economic Development and Planning. "2011 DuPage County Statistical Profile." *DuPage County IL Official Website*. N.p., 2011. Web. 16 Dec. 2014.

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unit, suited their family size by any landlord. The landlord agrees to participate in the program and to maintain the housing in compliance with the Housing Quality Standards required by the U.S. Department of Housing and Urban Development (HUD).

During FY 2014, the DuPage Housing Authority served 3,066 families composed of 8,208 individuals. There are times when a family will move out of a unit under the HCV program, and the unit will immediately be leased to another HCV family. As a result, two families may have lived in the same unit during the course of the fiscal year. In all, 2,948 units scattered among 35 different communities were leased to HCV program participants.

Of the 3,066 households served in the last year, 89% were households with a female as the head. The remaining 11% had a male head of household. Of the 8,208 individuals served, 44% (3,616) were children under the age of 18. Although there are several factors that must be evaluated to determine a household's eligibility to participate in the HCV program, financial status is a primary driver for this program. Figure NA-1 below lists the number of households by income level. It is notable that 75% of the households served have incomes of less than \$20,000 per year. Another 15 % of the households have incomes that fall between \$20,000 and \$30,000 per year. Those with incomes between \$30,000 and \$40,000 represent 8% of all HCV program participants and the remaining 2% have household incomes that are above \$40,000.

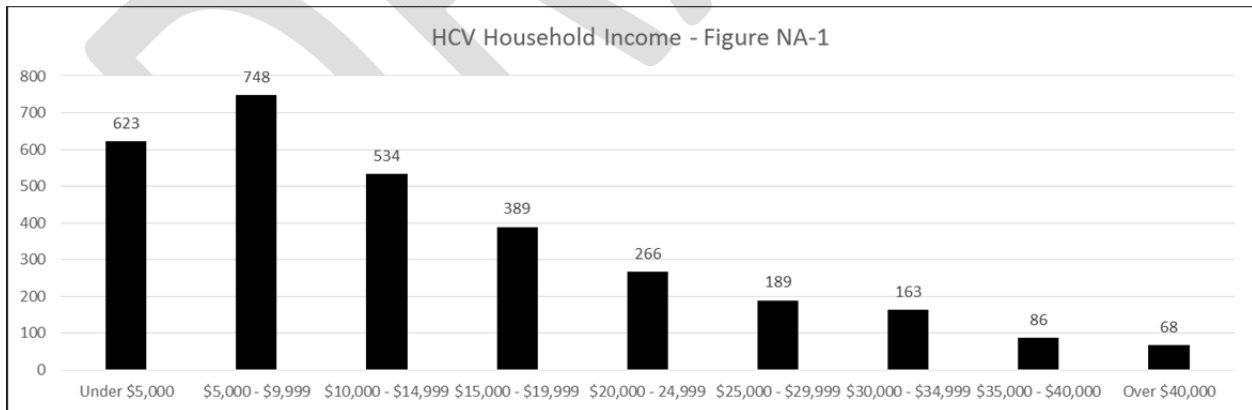


Figure NA-1

Data Source: 2014 DHA Annual Report

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Table 22 displays the total number of vouchers in use for each program.

Totals in Use

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers in use	0	0	0	3,140	145	2,953	0	0	0

Table 22 – 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)

Table 24 displays the characteristics of public housing residents by public housing program type.

Characteristics of Residents

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	
Average Annual Income	0	0	0	13,526	15,834	13,315	0	0	
Average length of stay	0	0	0	6	3	7	0	0	
Average Household size	0	0	0	2	1	2	0	0	
# Homeless at admission	0	0	0	25	0	25	0	0	
# of Elderly Program Participants (>62)	0	0	0	555	133	415	0	0	
# of Disabled Families	0	0	0	703	7	685	0	0	
# of Families requesting accessibility features	0	0	0	3,140	145	2,953	0	0	
# of HIV/AIDS program participants	0	0	0	0	0	0	0	0	
# of DV victims	0	0	0	0	0	0	0	0	

Table 24 – Characteristics of Public Housing Residents by Program Type

Data Source: PIC (PIH Information Center)

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Table 25 displays the racial composition of residents for each public housing program.

Race of Residents

Race	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White	0	0	0	1,075	130	925	0	0	0
Black/African American	0	0	0	1,958	12	1,934	0	0	0
Asian	0	0	0	98	3	85	0	0	0
American Indian/Alaska Native	0	0	0	8	0	8	0	0	0
Pacific Islander	0	0	0	1	0	1	0	0	0
Other	0	0	0	0	0	0	0	0	0

Table 25 – Race of Public Housing Residents by Program Type
Data Source: PIC (PIH Information Center)

Table 26 displays the ethnic composition of residents for each public housing program.

Ethnicity of Residents

Ethnicity	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Hispanic	0	0	0	88	0	85	0	0	0
Not Hispanic	0	0	0	3,052	145	2,868	0	0	0

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

Table 26 – Ethnicity of Public Housing Residents by Program Type
Data Source: PIC (PIH Information Center)

b. Describe the needs of public housing tenants and applicants on the waiting list for accessible units:

Applicants on the wait list for one of the voucher programs administered by the DHA are often in need of basic goods and services. Each applicant comes from a different situation, location, and family size. Affordable housing, healthcare, and basic goods and services can sometimes be unattainable and recipients must rely on additional programs to receive the necessary items. A

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combination of stagnant pay and increase in property values will continue to create a need for affordable housing and the voucher program.

Seniors, persons with disabilities and mental illness, and homeless veterans also experience a greater need for basic goods and services. Often times, residents that qualify under these categories cannot work or face additional hardships that prevent them from being able to afford to live in the County.

c. What are the number and type of families on the waiting lists for public housing and section 8 tenant-based rental assistance?

Although DuPage County currently does not have any public housing units, The DuPage Housing Authority currently has over 1,000 persons on the waiting list to receive housing choice vouchers. Exact data was not available to describe the characteristics of each resident on the waiting list, but an estimate of current recipients shows that a large majority receiving vouchers are households making less than \$19,999 per year. The DHA will continue to provide vouchers by reviewing applicants to determine eligibility based on their income and needs and offer additional services and referrals for those who qualify.

d. What are the most immediate needs of residents of public housing and Housing Choice voucher holders?

While the needs of recipients receiving vouchers are more extensive, the need for decent and affordable housing reflects the needs of the population at large. Affordable housing, healthcare, and basic goods and services can sometimes be unattainable and recipients must rely on additional programs to receive the necessary items. A combination of stagnant pay and increase in property values will continue to create a need for affordable housing and the voucher program.

Seniors, persons with disabilities and mental illness, and homeless veterans also experience a greater need for affordable housing. Often times, residents that qualify under these categories cannot work or face additional hardships that prevent them from being able to afford to live in the County. Additional programs or vouchers will be needed to accommodate additional

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residents as long as the cost of housing remains the same and the minimum wage remains the same.

e. How do these needs compare to the housing needs of the population at large?

Countywide, there are at-risk populations in need of greater assistance than the population at large which includes homeless individuals and families, low-income seniors, and people with disabilities. Affordable housing, healthcare, and basic goods and services can sometimes be unattainable and recipients must rely on additional programs to receive the necessary items. A combination of stagnant pay and increase in property values will continue to create a need for affordable housing and the voucher program.

Seniors, persons with disabilities and mental illness, and homeless veterans also experience a greater need for affordable housing. Often times, residents that qualify under these categories cannot work or face additional hardships that prevent them from being able to afford to live in the County. Additional programs or vouchers will be needed to accommodate additional residents as long as the cost of housing remains the same and the minimum wage remains the same.

f. Discussion

The DuPage Housing Authority does not expect growth in the HCV program during the coming year, and anticipates few changes in the core demographics for the program. The Authority will continue to reach out to potential landlords to maintain an adequate supply of affordable housing for the HCV program participants.

DHA is participating as the administering agency for two Rental Assistance Demonstration (RAD) conversions. This is a special program of HUD that allows public housing projects to convert their assistance into Project Based Vouchers. DHA began to administer 66 RAD PBVs in 2014, a number that will remain the same in 2015.

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8. Homeless Needs Assessment

a. Introduction

Homeless persons can be male or female, individuals or members of family groups. They can be unaccompanied youth, the elderly, people with physical, mental, or developmental disabilities, veterans, and/or persons with addiction disorders. There is no one specific person or type who is homeless.

A total of 625 individuals in DuPage County were counted as homeless in the 2014 point-in-time Homeless Count, a decrease of 1.8% percent from the 2013 count of 636 and a 19% decrease from the 2007 amount of 766. This count represents the number of people homeless on a cold winter night and does not represent the number of people homeless during the course of a full year.⁹

Although the number of chronically homeless individuals in DuPage is relatively low, over 1,200 persons experienced one or more episodes of homelessness from July 2013 to July 2014.

Utility assistance was provided to 9,539 households with heating and/or cooling financial assistance in order to prevent them from becoming homelessness.

Strategy for Developing a System to Address Homelessness:

DuPage County has developed a structure for the homeless continuum of care that emphasizes participation and information sharing. The DuPage Continuum planning process has been in existence since 1998 and includes mechanisms for ongoing needs assessment, gap analyses, strategic planning, and coordination with mainstream services. Likewise, the County has implemented a continuum-wide computerized client information system, and coordinated service delivery. The continuum is used as an advisory body for several funding sources including CDBG homeless funds, ESG funds, HUD Continuum of Care NOFA funds, and State homeless funds. The continuum has developed a vision statement as follows:

⁹ "Point In Time Summary for IL-514 - DuPage County Continuum of Care. *"DuPage County Continuum*. N.p., 29 Jan. 2014. Web. 26 Nov. 2014.

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The mission of the DuPage Homeless Continuum of Care is to develop and support effective strategies to end homelessness in DuPage County.

The DuPage County Homeless Continuum of Care (CoC) was an early leader nationally and locally in the development and implementation of a plan to end homelessness. The Continuum adopted a “Housing First” approach based on the following principles:

-The best way to end homelessness is to help people move into permanent housing as quickly as possible.

-Once in housing, formerly homeless people may require some level of services to help them stabilize, link them to long-term supports, and prevent a recurrence.

Lastly, in addition to utilizing a Housing First approach, DuPage County’s Plan to End Homelessness also emphasizes emergency and systems prevention, outreach to unsheltered, needs assessment, creation of permanent housing, supportive services, increasing affordable and different types of housing, and moving people experiencing homelessness into permanent housing as quickly as possible. The cause of homelessness is different in every case, and a plan addressing these many causes is the key to reduction in homelessness.

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

A number of families with children and families of veterans are in need of resources to assist with a variety of housing expenses to keep families on the verge of homelessness to stay in their homes. According to 2012 American Community Survey, 66,852, or 7.3% of the total DuPage County population lives in extreme poverty, which equates to a household of 4 living off an annual income of \$21,700. The Continuum of Care provides rental, mortgage, utility, and security deposit assistance to qualified residents throughout the year. In the second half of 2012 and first half of 2013, a total of over \$1.1 million dollars (\$184,469.64 in CDBG and ESG Funds) in assistance from a variety of funding sources was provided to 6,890 unduplicated persons from every community in the County boundaries in an effort to prevent homelessness.

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A complete breakdown of individuals assisted and the costs associated with each service can be found in Figure NA-2.¹⁰ The County will continue to support the missions of qualified agencies that are members of the Continuum to continue assisting residents that are homeless or on the verge of becoming homeless in the next 5 years.

Data	Catholic Charities	DuPage County Community Services	HCS Family Services	Love Christian Clearinghouse	Naperville Cares	Outreach Community Services	People's Resource Center	Veteran's Assistance Commission	DuPage Continuum of Care
Households Served	125	134	72	230	497	289	168	122	1748
Persons Served	481	398	152	553	1421	844	491	237	4577
Funds Expended	\$ 186,489.16	\$ 195,690.37	\$ 25,207.00	\$ 54,439.00	\$237,581.56	\$ 121,529.49	\$ 166,244.88	\$98,632.31	\$ 1,085,813.77

Funding Sources	Catholic Charities	DuPage County Community Services	HCS Family Services	Love Christian Clearinghouse	Naperville Cares	Outreach Community Ministries	People's Resource Center	Veteran's Assistance Commission	DuPage Continuum TOTALS
EFSP (FEMA)	\$ 52,500.00	\$ 25,135.80	\$ 8,000.00			\$ 22,270.59	\$ 46,338.72		\$ 154,245.11
IDHS (total HP grant)	\$ 59,964.00	\$ 67,455.00				\$ 27,852.00	\$ 74,782.00		\$ 230,053.00
CDBG-Pool	\$ 22,300.00								\$ 22,300.00
CSBG		\$ 34,283.08							
ESG (State & County, 2011 & 2012)	\$ 25,061.56	\$ 61,266.49	\$ 10,207.00			\$ 29,764.10	\$ 35,870.49		\$ 162,169.64
Krueger									
Discretionary Funds	\$ 8,663.60			\$ 54,439.00	\$179,420.42	\$ 61,757.41	\$ 16,731.07		\$ 321,011.50
Other-Salvation Army	\$ 18,000.00		\$ 7,000.00						\$ 25,000.00
Other-FSS		\$ 7,550.00							
CDBG-Naperville					\$ 58,161.14				
Other-DuPage County General Fund								\$98,632.31	\$ 98,632.31
TOTAL FUNDS	\$ 186,489.16	\$ 195,690.37	\$ 25,207.00	\$ 54,439.00	\$237,581.56	\$ 141,644.10	\$ 173,722.28	\$98,632.31	\$ 1,113,405.78

Figure NA-2

Veteran assistance is also a component of the Continuum of Care mission. The Continuum of Care estimated 9 veterans were housed in an emergency shelter and 7 in transitional housing on the annual Point in Time count that took place on 1/29/14. The County feels this number is possibly under counted because it can sometimes be difficult to determine if an individual is a veteran or documentation is missed on the intake sheet because the individual does not want to report their status. The Continuum recognizes the issues facing veterans on the verge of homelessness and their 8 components of the "Housing First" strategy are also used to try and reduce the number of homeless and on the verge of being homeless veterans. A complete summary of homeless veterans can be found in Figure NA-3.¹¹

¹⁰ "DuPage CoC Homeless Prevention Reporting Template; July 1, 2012 - June 30, 2013." DuPage County Continuum. N.p., n.d. Web. 21 Nov. 2014.

¹¹"Point In Time Summary (Veterans) for IL-514 - DuPage County Continuum of Care. "DuPage County Continuum. N.p., 29 Jan. 2014. Web. 26 Nov. 2014.

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Perons in Households with at least one Adult and one Child						
	Sheltered			Unsheltered	Total	
	Emergency	Transitional				
Total Number of Households	0	0			0	
Total Number of Persons	0	0			0	
Total Number of Veterans	0	0			0	
				Average Household Size	N/A	
Persons in Households without Children						
	Sheltered			Unsheltered	Total	
	Emergency	Transitional	Safe Haven			
Total Number of Households	9	7	0		16	
Total Number of Persons	9	7	0		16	
Total Number of Veterans	9	7	0		16	
				Average Household Size	1	
Total Households and Persons						
	Sheltered			Unsheltered	Total	
	Emergency	Transitional	Safe Haven			
Total Number of Households	9	7	0	0	16	
Total Number of Persons	9	7	0	0	16	
Total Number of Veterans	9	7	0	0	16	
				Average Houshold Size	1	

Figure NA-3

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

A comparison of the racial/ethnic make-up of DuPage County compared to the percentage of homelessness among the various racial/ethnic groups reveals that African Americans are overrepresented in the population of the homeless when compared to the total population. White, Latino and Asian racial/ethnic groups have significantly less percentage of homelessness than their representation when compare to the total population.

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Populations vulnerable to homelessness include veterans, single parent families, survivors of domestic violence, and persons with disabilities.

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

The nature and extent of unsheltered and sheltered homelessness in DuPage County can be similar. The number of persons who are sheltered at any given time can also include persons who are unsheltered due to homeless persons need to travel to different locations each night to receive shelter. An individual may obtain shelter one night and would be considered “sheltered”. That same individual may have difficulties obtaining transportation needed to reach the next shelter site, and would then be considered “unsheltered”. According to the last DuPage Homeless Continuum unsheltered count comparison summary, conducted on January 30, 2013, there were 29 unsheltered persons.¹² DuPage County’s Plan to End Homelessness emphasizes emergency and systems prevention, outreach to unsheltered, needs assessment, creation of permanent housing, supportive services, increasing affordable and different types of housing, and moving people experiencing homelessness into permanent housing as quickly as possible, following a Housing First approach.

9. Non-Homeless Special Needs Assessment

a. Introduction

These non-homeless special needs populations are not inherently at-risk of becoming home-less. However, without supportive housing and services, they are at risk of remaining in poverty, and may ultimately face homelessness or institutionalization. Below is a general description of the characteristics of special needs populations in DuPage County. In each instance, each special needs population is defined, and a brief outline, statistical data, and issues facing each population are discussed.

¹² "DuPage Homeless Continuum, Unsheltered Count Comparison Summary - DuPage County Continuum of Care. "DuPage County Continuum. N.p., 30 Jan. 2014. Web. 26 Nov. 2014.

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b. Describe the characteristics of special needs populations in your community:

DuPage County breaks residents of special needs into 5 categories: Elderly Persons, Persons with Severe Mental Illness, Persons with Disabilities, Persons with Alcohol and Other Drug Addictions, and Persons with AIDS and Related Illnesses.

Elderly and Frail Elderly Persons are defined as residents of the community that are greater than the age of 60. DuPage County is continuing to become older on average and according to the most recent census in 2010, the average age has increased from 35.2 years old in 2000 to 38.2 years old. The total percentage of residents under 18 has decreased 3.9% while the number of seniors has increased 3%. As the population continues to grow older, the need for more senior services becomes larger from health care, housing, and basic needs.¹³

Mental Illness is a term that refers collectively to all diagnosable mental disorders and includes major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder, panic disorder, post-traumatic stress disorder, and borderline personality disorder. According to the DuPage Health Department, 1 in 4 Americans suffer some type of mental illness and diagnosis and treatment is the key to limiting the effects of each disorder. These illnesses can affect the lives of residents and prevent them from keeping housing, a steady job, and relationships with family and friends.

Persons with Disabilities encompass a large population, some of which fall into more than one special needs categories. According to the most recent American Community Survey, the number of persons living with disabilities in DuPage County is 7.7%, and an estimated 30.7% of seniors are classified as having a disability. These disabilities can hinder residents from finding adequate housing, work, and become costly to afford proper treatment.¹⁴

Persons with alcohol and other drug addictions remain an ever changing population that is in high demand for need across the County. Often times an individual with alcohol and/or other

¹³ United States. U.S. Department of Commerce. United States Census Bureau. 2009-2013 American Community Survey 5-Year Estimates. N.p., Feb. 2013. Web. 29 Oct. 2014

¹⁴ United States. U.S. Department of Commerce. United States Census Bureau. 2009-2013 American Community Survey 5-Year Estimates. N.p., Feb. 2013. Web. 29 Oct. 2014

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drug addictions does not even know or think they have a problem. Alcohol abuse and the illegal use of drugs, such as heroin, marijuana, cocaine, methamphetamine, and prescription medications is associated with other serious consequences including injury, illness, disability and death as well as crime, domestic violence, and lost workplace productivity. Without treatment, these residents can become a danger to themselves and their family resulting in possible arrests and other dangerous consequences.

c. What are the housing and supportive service needs of these populations and how are these needs determined?

These populations are not inherently at-risk of becoming homeless. However, without supportive housing and services, they are at risk of remaining in poverty, and may ultimately face homelessness or institutionalization. Below is a general evaluation of the needs of various groups.

For the reporting period of January 1, 2013 through December 31, 2013, DuPage County Senior Citizen Services provided services to 19,077 unduplicated persons who were 60 years of age or older. Of this number, 11,484 were considered to be frail elderly. Within this same reporting period, staff completed 12,693 comprehensive in-home assessments in an effort to assist older persons in remaining in their homes and living independently as long as possible. Currently, there are 3,151 seniors active in the Community Care program, which provides homemakers, adult day service and emergency home response systems to help seniors avoid premature nursing home placement. Active seniors in the Community Care Program have almost doubled since 2009 and as the average age of a DuPage resident continues to rise more seniors will need assistance programs.¹⁵

Mental illness touches an estimated 44 million, or 1 in 5, people in the US every year. A mental illness is defined as a condition that disrupts a person's thinking, feeling, mood, and overall daily functioning. These disorders vary in intensity and can be treated or limited by proper use of medication and therapy. The DuPage County Health Department offers levels of care that show symptoms of symptoms of mental or emotional disorders, in some cases with concurrent

¹⁵ "2013-14 DuPage County Senior Citizen Services Statistics." Message to Mary Lee Tomsa. 5 Dec. 2014. E-mail

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substance that are serious obstacles to community functioning. Health Department staff work in collaboration with clients to develop treatment objectives and interventions that best match the client's strengths and resources to assist them in attaining their life goals. The County has also identified assistance with helping uninsured residents find affordable health care as a medium priority and will fund projects such as treatment center, housing, and other services related to mental health if funds are available.¹⁶

According to the data provided by the 2013 American Community Survey 1-Year Estimate, there are approximately 73,908 persons in the Consortium area with a disability. They represent 8% of the population in that age group. Figure NA-4 depicts disability figures by type of disability. The instance of disabilities among seniors is significantly higher, with approximately 34,325 seniors, roughly 29.3% of the population aged 65 and over, having some type of disability.¹⁷

Figure NA-4	
Percent Imputed	
Disability Status	8.5%
Hearing Difficulty	6.1%
Vision Difficulty	6.4%
Cognitive Difficulty	6.8%
Ambulatory Difficulty	7.0%
Self-Care Difficulty	7.0%
Independent Living Difficulty	6.5%

Over the past ten years the population of persons with disabilities has continued to slowly rise when reviewing US Census data. The need for affordable housing, transportation, and facilities to accommodate these residents is also needed. Organizations such as Ray Graham, Little City Foundation, Little Friends, We Grow Dreams, Inc. and other organizations continue to apply for funding each application period.

Alcohol abuse and the illegal use of drugs, such as heroin, marijuana, cocaine, methamphetamine, and prescription medications is associated with other serious consequences including injury, illness, disability and death as well as crime, domestic violence, and lost

¹⁶ "The NSDUH." State Estimates of Adult Mental Illness from the 2011 and 2012 National Surveys on Drug Use and Health. SAMHSA, 28 Feb. 2014. Web. 12 Sept. 2014

¹⁷ United States. U.S. Department of Commerce. United States Census Bureau. 2009-2013 American Community Survey 1-Year Estimate. N.p., Feb. 2013. Web. 25 Oct. 2014

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workplace productivity. It is also a factor in motor vehicle accidents, homicide, suicide, other relational violence, child abuse and high-risk sexual behavior. Research has confirmed that treatment can help end dependence on alcohol and addictive drugs and reduce the consequences of substance abuse on society. Results from a County Needs Assessment survey given to nonprofit agencies showed that the need versus availability of services to assist residents with substance abuse increased greatly when compared to the 2005-2009 ConPlan agency survey conducted. The availability of services either decreased or the need increased, either way producing a need for services.

While no single approach for substance abuse and addiction treatment exists, comprehensive and carefully tailored treatment works. The need for treatment services in DuPage County greatly exceeds the increasing demand and current capacity.

Serenity House remains the only licensed facility of its kind in DuPage County providing low-income adult men and women with comprehensive substance use disorder treatment services. Since 1985, Serenity House has provided extended residential care, recovery home, and outpatient services to thousands of individuals, many with coexisting mental health disorders and complex legal issues. Serenity House provides residential care in over 100 beds throughout DuPage County and offers outpatient services to over 150 individuals each month. With over 52% of the individuals served currently between the ages of 18 - 29, ongoing family education and support is of particular emphasis.¹⁸

Local drug courts and programs such as Treatment Alternatives for Safe Communities (TASC) that promote mandated substance abuse treatment as an alternative to incarceration have contributed to cost savings to tax payers and lower the likelihood of individuals in the program to be repeat offenders

“Healthy People 2020” is a publication found on a government website operated by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services. The

¹⁸ "5 Year ConPlan Material Assistance." Message to Lisa Snipes, V.P./Development Director, Serenity House. 12 Dec. 2014. E-mail

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publication provides information that is applicable to the DuPage County population as well. Substance abuse and its related problems are among society's most pervasive health and social concerns. An increase in the number of admissions to substance abuse treatment for injection drug use has increased 17% when looking at data between 2007 and 2011 and data trends continue to rise each year. The proportion of adolescents perceiving great risk associated with smoking marijuana has dropped by 20% when comparing data from 2008 to 2012. Although drinking statistics remain fairly constant, a need still exists to reduce the consumption of alcohol across all age groups and races.¹⁹

d. Discuss the size and characteristics of the population with HIV/AIDS and their families within the Eligible Metropolitan Statistical Area:

Acquired immunodeficiency syndrome, or AIDS, is the final stage of human immunodeficiency virus (HIV) infection. When a person contracts HIV, the virus attacks the immune system and disables the body's ability to fight infection. Although the number of AIDS and HIV cases in DuPage County is low, roughly 319 residents living with HIV and 412 residents with AIDS according to figures dated on December 2013 from the DuPage Health Department, it is a dangerous virus that can be spread by individuals that do not know they even have it. An estimated 1 in 7 (<http://www.aids.gov/hiv-aids-basics/hiv-aids-101/statistics/>) individuals carrying the virus are unaware they have it, and proper testing facilities are needed to make sure detection at the earliest moment is imperative to stop the spread of HIV and AIDS. DuPage County Health Department works to educate the public about HIV and AIDS and persons who are living with HIV or AIDS have access to medical case management services from the Health Department. One of the reasons the number of individuals in the County with the disease is increasing could also be the medical treatments available to lengthen the life span of individuals affected.²⁰

Funding for housing for persons with AIDS is provided by HUD through a program called Housing Options for Persons with AIDS (HOPWA). This funding is issued as a formula grant to

¹⁹ "HP2020 Objective Data Search." HealthyPeople.Gov. U.S. Department of Health and Human Services, 2013. Web. 1 Nov. 2014

²⁰ "HIV in the United States: At A Glance." HIV/AIDS 101: U.S. Statistics. United States Federal Government, 2 Dec. 2014. Web. 11 Dec. 2014.

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metropolitan areas with a population of more than 500,000 and at least 1,500 AIDS cases. The largest city serves as the Formula Grant Administrator, therefore, HOPWA funds that are available to DuPage County are received by the Chicago Department of Public Health.

In addition to programs supplied by the Chicago Department of Public Health, the Canticle Ministries Transitional Housing Program uses HOPWA funds to serve people living with HIV/AIDS in DuPage County who are homeless or at risk for homelessness. Canticle Ministries are currently able to serve 20 individuals and families, this transitional program is designed to decrease client dependence on rapidly dwindling HIV-specific services and help clients achieve the greatest level of health and independence as possible through support, empowerment, accountability, and a commitment to living a healthy lifestyle. Although currently no cure exists, proper education about contracting the virus and early detection remain to be the best defense of limiting the effects of HIV and AIDS.²¹

e. Discussion

In the past 20 years the number of residents qualifying under a special needs category has increased significantly in DuPage County. The population of seniors continues to grow each year and more seniors will need a wide variety services each year across the County. Substance abuse continues to be a major problem affecting residents of all ages, and continued introduction of dangerous new drugs and risky behaviors will continue to keep these numbers growing. Although treatment is essential to this issue, proper education to residents can stop the problem before it starts. The County also needs to continue improving conditions for people with disabilities by providing proper housing regulations to prevent discrimination, job opportunities, and continued support to provide reasonable accommodations to people with disabilities. Lastly, similar to residents with substance abuse problems, the County needs to continue providing services to people with HIV and AIDS by providing treatment to those who already have the diseases and to educate residents on how to prevent further contraction. The County will continue to use HOPWA funds administered by the Chicago Department of Public Health and hope for a cure in the next 10-20 years to eliminate this virus permanently.

²¹ Transitional Housing Program. Canticle Ministries, 2007. Web. 18 Nov. 2014

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The reason for these increases is debatable depending on the category, and the strategy for assisting residents and allocating funds in the best way possible are essential to make sure residents get the best assistance possible in the County. A wide variety of programs provided by a number of agencies are currently available in DuPage County, and each agency provides a different service to provide education, treatment, and other resources to the residents of DuPage County.

10. Non-Housing Community Development Needs

a. Describe the jurisdiction's need for Public Facilities:

Public Facilities consist of parks, neighborhood facilities, recreational facilities, and any other types of use that all residents in the area are eligible to use. In order for a public facility to be eligible for funding: a) it must serve a population of at least 51% of low mod residents; orb) serve a "presumed benefit" clientele. Facilities that serve abused children, battered spouses, elderly, severely disabled persons, homeless, illiterate adults, persons living with AIDS, and migrant farm workers are "presumed benefit" clientele; or c) serve eligible census block groups. The CDC received surveys totaling over 5 million dollars in needs for eligible facilities including improvement projects, additions to existing structures, new construction, and other requests. The CDC believes every resident should have access to clean parks, modern recreational facilities, and updated neighborhood facilities. The application process will determine which projects will be funded, and points will be administered based on the type of activity with the highest need according to surveys received.

b. How were these needs determined?

The County utilized an on-line tool to conduct a survey of municipal and township needs of Public Facilities and Improvements. The survey was launched March 31, 2014 to 9 townships and 31 municipalities.² split place municipalities (Batavia and Lemont) that are partially in DuPage County were not included because such a small portion of their respective populations are located in DuPage County. The CDC also did not include the communities of Aurora and Bolingbrook because they are both considered entitlement communities and receive their own CDBG funding.

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The survey consisted of both narrative style and ranking questions to determine the most need in each community. The ranking questions were sorted and high and low priorities were established. In order to achieve an acceptable response rate, emails were sent out on March 31, 2014 to the Mayors, Administrators, or Directors of Community Development of each community depending on the set up of each respective government. Reminders were sent June 11, 2014 and several technical assistance calls were taken to assure the correct data was collected. This effort resulted in 16 completed surveys out of 40 possible responses.

The data collected was based off of eligible block groups in each community with a low mod income level of at least 40% and census figures from the year 2000. As we neared the end of the data collection period of this survey in June 2014, HUD provided DuPage County with an updated minimum exception criteria based upon data from the 2010 census to determine eligible locations for all future projects. After review of the new data we found the location of block groups changed when compared to the 2000 census locations, changing the boundaries of the previous block groups and eligible areas based on the HUD Exception Criteria.

Using numbers and block groups from the 2000 census, DuPage County was made up of 1021 block groups containing 230 qualifying groups using the minimum HUD exception criteria of 33.2%, which HUD established as of July 1, 2014. A figure of 22.5% of block groups contained in DuPage County met or exceeded the minimum Low-Mod data percentage to qualify using this method. The new numbers suggest the block groups are much larger than the previous survey. 2010 Census figures total 617 total block groups in DuPage County and 152 of these block groups (24.6%) qualify using the new HUD Exception criteria of 35.83%. In the course of 14 years since the last data was provided we saw major changes to eligible areas in some communities while others saw minor changes to their respective eligible areas. The new numbers suggest although populations have moved, the needs shown by the results of the survey still exist in DuPage County.

c. Describe the jurisdiction's need for Public Improvements:

Public Improvements are among the highest need according to surveys completed by municipalities and townships. Historically, public improvements costs are high and in recent

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years communities have dealt with dwindling budgets and crumbling infrastructure. The CDC believes every resident should have safe streets and sidewalks, functional streetlights, and adequate water and sewer lines in each of their respective communities. The survey indicated needs for public improvements total over \$80 million dollars over the next 5 years in eligible areas. Tree replacement and removal needs are also much higher than in previous years due to new diseases threatening the population of certain species. The estimated budget for tree replacement and removal is roughly \$3.2 million dollars over the next 5 years. The application process will determine which projects will be funded, and points will be administered based on the type of activity with the highest need according to surveys received.

Figure NA-5 identifies the costs of high and low priorities for neighborhood investment needs according to municipalities located within DuPage County.

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Figure NA-5 New Multipliers for Non-Profit Agency Community Needs						
Category	Service	Rank Multiplier	Max Points Available	#1 Activity's Rank Multiplier in 30 pts	New Multiplier	Priority
Health & Safety	Substance Abuse Services Need	19.58	30.0	1.53	30.0	High
	Culturally and Linguistically Appropriate Mental Health Services Need	14.5	30.0	1.53	22.2	High
	Child Abuse Counseling / Advocacy Need	12.97	30.0	1.53	19.8	High
	Basic Needs (Food, Clothing, Medical) Need	11.19	30.0	1.53	17.1	High
	Medical Care for Uninsured Need	9.83	30.0	1.53	15.0	Low
	Domestic Abuse Services Need	6.82	30.0	1.53	10.4	Low
	Sexual Assault Services Need	6.76	30.0	1.53	10.3	Low
Life Skills	Employment Services - Job Readiness Need	16.7	30.0	1.79	30.0	High
	Budget / Financial Counseling Need	10.64	30.0	1.79	19.1	Low
Housing	Affordable Rental Units Need	27.56	30.0	1.08	30.0	High
	Emergency Rent, Mortgage, and Utility Assistance Need	25.19	30.0	1.08	27.4	High
	Supportive Housing Need	25.02	30.0	1.08	27.2	High
	Rehab of Owner Occupied Units Need	18.7	30.0	1.08	20.3	High
	Legal Counsel (Homelessness Prevention) Need	16.25	30.0	1.08	17.7	Low
	Shared Housing Need	14.67	30.0	1.08	15.9	Low
	Emergency Shelter Need	13.5	30.0	1.08	14.7	Low
	First Time Homebuyer Assistance Need	2.91	30.0	1.08	3.2	Low
	Lead Hazard Screening Services Need	-4.84	30.0	1.08	0.0	Low
Seniors and Persons with Disabilities	Transportation Need	23.43	30.0	1.28	30.0	High
	Caregiver Counseling and Respite Services Need	19.61	30.0	1.28	25.1	High
	Child Care Services Need	18.62	30.0	1.28	23.9	High
	Youth Services Availability	17.78	30.0	1.28	22.8	High
	Legal Counsel (Benefits, Legal Documents, etc.) Need	16.4	30.0	1.28	21.0	Low
	Senior Services Need	16.24	30.0	1.28	20.8	Low
	Home Health Care Need	14.6	30.0	1.28	18.7	Low
	Handicapped Services Need	13.16	30.0	1.28	16.9	Low
Home Delivered Meals Need	9.21	30.0	1.28	11.8	Low	

d. How were these needs determined?

The County utilized an on-line tool to conduct a survey of municipal and township needs of Public Facilities and Improvements. The survey was launched March 31, 2014 to 9 townships and 31 municipalities. 2 split place municipalities (Batavia and Lemont) that are partially in DuPage County were not included because such a small portion of their respective populations are located in DuPage County. The CDC did not include the communities of Aurora and

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Bolingbrook because they are both entitlement communities and receive their own CDBG funding.

The survey consisted of both narrative style and ranking questions to determine the most need in each community. The ranking questions were sorted and high and low priorities were established. In order to achieve an acceptable response rate, emails were sent out on March 31, 2014 to the Mayors, Administrators, or Directors of Community Development of each community depending on the set up of each respective government. Reminders were sent June 11, 2014 and several technical assistance calls were taken to assure the consistent data was collected. This effort resulted in 16 completed surveys out of 40 possible responses.

The data collected was based off of eligible block groups in each community with a low mod income level of at least 40% and census figures from the year 2000. As we neared the end of the data collection period of this survey in June 2014, HUD provided DuPage County with an updated minimum exception criteria based off of data from the 2010 census to determine eligible locations for all future projects. After review of the new data we found the location of block groups changed when compared to the 2000 census locations, changing the boundaries of the previous block groups and eligible areas based on the HUD Exception Criteria.

Using numbers and block groups from the 2000 census, DuPage County was made up of 1021 block groups containing 230 qualifying groups using the minimum HUD exception criteria of 33.2%. A figure of 22.5% of block groups contained in DuPage County met or exceeded the minimum Low-Mod data percentage to qualify using this method. The new numbers suggest the block groups are much larger than the previous survey. 2010 Census figures total 617 total block groups in DuPage County and 152 of these block groups (24.6%) qualify using the new HUD Exception criteria of 35.83%. In the course of 14 years since the last data was provided we saw major changes to eligible areas in some communities while others saw minor changes to their respective eligible areas. The new numbers suggest although populations have moved, the needs shown by the results of the survey still exist in DuPage County.

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e. Describe the jurisdiction's need for Public Services:

Public Services are greatly needed in DuPage County and residents rely on them from a number of resources. The CDC felt the existing non-profits and neighborhood resource centers would have the best idea on the services needed since they work with clients on a regular basis, hear their stories, and determine the needs of the community. The CDC surveyed numerous agencies within DuPage County on over 30 issues and found only 1 category had more availability than need. The numbers suggest that more services are needed to help residents in a wide range of categories from basic needs to legal support. If usage of services were to drop significantly, that would be a sign non-profit agencies and services would be needed less and residents are better off or have additional resources. The CDC's plan is to continue funding a HUD required maximum of 15% of CDBG funds to direct public services and also to continue offering funds to capital projects for non-profits to make improvements on their existing properties to improve or increase the services to their respective clients.

f. How were these needs determined?

The county utilized a survey to non-profit agencies across DuPage County. An on-line tool was used to determine the needs and availability of 27 different activities performed by agencies on a regular basis. The survey was launched April 10, 2014, and two subsequent reminders were also sent to 107 potential participants. The CDC conducted several technical assistance calls to assure the consistent and most up to date data was collected. This outreach produced a return of 35 completed or mostly completed surveys.

Safeguards were put in place to ensure only one response was received per agency. The information was then used to create rank multipliers for the County's CDBG/ESG applications so that activities identified as having the highest priority and largest gap in availability would receive a higher number of points, and potentially, increased funding.

Survey Results and Calculation of New Rank Multiplier

The survey asked agencies to establish priority and availabilities in four general categories: Health and Safety, Housing, Life Skills, and Seniors & People with Disabilities. 0 points were

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given to zero need, 2 points to low need, 4 to medium need, and 6 to an activity with a high need. The same points were given for the availability of the survey. Rank Multipliers were calculated based on the average between the need and the availability (the gap figure was multiplied by 6 to provide some separation.) A sample calculation is shown below:

Please note that the numbers shown in the average need and gap columns are rounded.

$$\text{Average Need (Priority)} = 147/54 = 2.72$$

$$\text{Average Availability} = 104/53 = 1.96$$

$$\text{Gap} = 2.72 - 1.96 = .75$$

The Rank Multiplier was calculated by multiplying the gap by 6 to determine the largest need when compared to the availability of the activity. In some instances the need is high for an activity, the availability is also high, creating a lower score. The purpose of this survey was to determine the activity with the most need when compared to the availability.

$$.75 \times 6 = 4.55 = 3.41 \text{ rounded to } 3.41$$

The maximum points available in the application category were divided by the category's highest rank multiplier in order to gain a constant. The highest ranking service received 30 points; all other services received points based on the rank multiplier times the constant. The points awarded for some activities changed greatly when compared to the 2010-2014 ConPlan figures while other activities saw slight to no change. The reasons for the change in numbers for each activity vary greatly, but some general explanations could be a change in need, a change in availability, or a combination of both factors.

The second part of the survey was for agencies to complete a 5-year capital needs assessment on each of their facilities located in DuPage County. An email blast was sent out to 107 participating agencies on March 18, 2014 and May 1, 2014. We also conducted several technical assistance emails to assure the most up to date data was collected.

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The goal of the two pronged approach was first to determine the activity with the highest need and least availability, and then to determine what facilities will be in need of infrastructure improvements that provide those types of activities.

Unlike the Municipal Needs Survey, the crossover from 2000 to 2010 data provided by HUD had a minimal effect on the outcome of the surveys. In each instance, an agency provides income certifications for a majority of their respective clients and uses a limited clientele strategy rather than an area wide benefit, the strategy used mostly for municipal projects.

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Figure NA-6 identifies the high and low priorities for capital and public services needs according to non-profit agencies located within DuPage County.

Figure NA- 6 Community Development Needs		
Priority Community Development Needs	Priority Level Need	Dollar to Address Unmet Need
Community Development Needs		
Water/Sewer Improvements	High	\$21,748,218
Street Improvements	High	\$36,547,154
Sidewalks	High	\$2,264,567
Parks / Recreational Facilities	High	\$3,590,000
Flood Drain Improvements	High	\$3,137,875
Other Infrastructure	High	\$14,149,000
Tree Replacement	High	\$3,295,000
Solid Waste Disposal Improvements	Low	\$65,000
ADA Compliance Needs	Low	\$2,255,000
Streetlights	Low	\$2,308,000
Neighborhood Facilities	Low	\$580,000
Other Public Facilities	Low	\$5,000,000
Economic Development		
C / I Land Acquisition	Low	\$5,255,000
C / I Infrastructure Development	Low	\$1,200,000
C / I Building Acq / Const / Rehab	Low	\$2,060,000
ED Assistance to For-Profits	Low	\$4,000,000
ED Technical Assistance	Low	\$400,000
Micro Enterprise Assisitance	Low	\$0
Other C / I Improvements	Low	\$530,000
Planning		
Planning	Low	\$220,000
Total Estimated Dollar Needed:		\$108,604,814

*Other Infrastructure needs consist of sanitary / flood mitigation projects

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Figure NA-7 shows the high and low priorities identified by currently funded Neighborhood Resource Center

Figure NA- 7 Neighborhood Resource Center Needs					
Children and Teenagers	Points	Priority	Adults	Points	Priority
General Counseling	25.0	High	General Counseling	20.6	High
Substance Abuse	23.8	High	Employment Readiness	19.8	High
Employment Readiness	20.6	High	Domestic Abuse Services	13.5	High
Character Education	19.0	High	Financial Counseling	13.5	High
Mentoring	14.7	High	ESL Instruction	12.3	High
Domestic Abuse Services	13.1	High	Tutoring and Literacy	11.9	High
Inter-Agency Advocacy	11.9	High	Substance Abuse	10.3	High
ESL Instruction	10.3	High	Senior Services	7.9	Low
Legal Assistance	8.3	Low	Legal Assistance	7.9	Low
Tutoring and Literacy	6.0	Low	Arts Programs	7.1	Low
Financial Counseling	5.2	Low	Inter-Agency Advocacy	6.0	Low
Basic Needs: Food and Clothing	4.8	Low	Character Education	4.8	Low
Pre-School / Early Intervention	4.4	Low	Mentoring	4.4	Low
Sports and Recreation	1.2	Low	Sports and Recreation	1.6	Low
Arts Programs	0.0	Low	Basic Needs: Food and Clothing	1.2	Low

Figure NA-8 shows the project types and estimated cost for capital projects over the next 5 years.

Figure NA-8 - 5 Year Non-Profit Needs Assessment							
Cost Category	Total Projects	Year 1	Year 2	Year 3	Year 4	Year 5	Totals
Parking Areas	25	\$276,140	\$221,000	\$203,867	\$275,000	\$168,917	\$1,144,924
Roofing	13	\$38,220	\$122,000	\$75,000	\$53,000	\$439,800	\$728,020
Eavestrough/Downspouts/Flashing	5	\$1,300	\$0	\$0	\$8,000	\$1,500	\$10,800
Balconies/Patios/Steps	8	\$58,500	\$4,000	\$0	\$20,000	\$11,000	\$93,500
Exterior Siding	6	\$39,200	\$5,700	\$1,200	\$40,000	\$14,700	\$100,800
Doors/Windows	6	\$5,600	\$15,000	\$72,000	\$60,000	\$0	\$152,600
HVAC	20	\$183,000	\$16,500	\$30,500	\$85,500	\$145,800	\$461,300
Plumbing/Domestic Hot Water	17	\$18,200	\$8,100	\$27,600	\$7,900	\$7,900	\$69,700
Fire Safety	7	\$7,555	\$700	\$700	\$700	\$700	\$10,355
Electrical	7	\$58,000	\$7,400	\$0	\$0	\$0	\$65,400
Boilers/Pumps	6	\$105,800	\$50,000	\$1,500	\$0	\$0	\$157,300
Elevator	1	\$0	\$0	\$0	\$0	\$0	\$0
Unit Flooring/Carpeting	21	\$87,600	\$97,100	\$125,000	\$3,500	\$73,500	\$386,700
Unit Appliances	19	\$9,900	\$43,900	\$18,800	\$32,900	\$21,900	\$127,400
Unit Kitchen Cabinet/Countertop	9	\$4,500	\$26,100	\$1,100	\$5,100	\$26,100	\$62,900
Demolition and Site Costs	3	\$6,075,000	\$1,980,000	\$720,000	\$600,000	\$660,000	\$10,035,000
Building Costs	3	\$1,100,000	\$23,605,000	\$1,740,000	\$1,740,000	\$2,020,000	\$30,205,000
Furniture Fixtures Equipment	1	\$0	\$4,568,000	\$0	\$0	\$0	\$4,568,000
Professional: Architectural	2	\$600,000	\$4,653,000	\$0	\$0	\$0	\$5,253,000
Other/Additions	24	\$470,500	\$19,000	\$417,000	\$43,500	\$104,500	\$1,054,500
Generator	1	\$0	\$0	\$0	\$0	\$0	\$0
Remodeling	2	\$95,914	\$0	\$70,000	\$0	\$0	\$165,914
Subtotal	206	\$8,068,515	\$26,202,500	\$3,017,267	\$2,931,600	\$3,591,817	
Annual Inflation Factor	Inflation Factor	100%	103%	106.09%	109.27%	112.55%	
Estimated Total Annual RR Needs:		\$8,068,515	\$26,988,575	\$3,201,019	\$3,203,438	\$4,042,622	\$45,504,169

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Figure NA-9 shows the project types and estimated cost for capital projects over the next 5 years excluding demolition and new business costs.

Figure NA-9 - 5 Year Non-Profit Needs Assessment							
Cost Category	Total Projects	Year	Year	Year	Year	Year	Totals
		1	2	3	4	5	
Parking Areas	25	\$276,140	\$221,000	\$203,867	\$275,000	\$168,917	\$1,144,924
Roofing	13	\$38,220	\$122,000	\$75,000	\$53,000	\$439,800	\$728,020
Eavestrough/Downspouts/Flashing	5	\$1,300	\$0	\$0	\$8,000	\$1,500	\$10,800
Balconies/Patios/Steps	8	\$58,500	\$4,000	\$0	\$20,000	\$11,000	\$93,500
Exterior Siding	6	\$39,200	\$5,700	\$1,200	\$40,000	\$14,700	\$100,800
Doors/Windows	6	\$5,600	\$15,000	\$72,000	\$60,000	\$0	\$152,600
HVAC	20	\$183,000	\$16,500	\$30,500	\$85,500	\$145,800	\$461,300
Plumbing/Domestic Hot Water	17	\$18,200	\$8,100	\$27,600	\$7,900	\$7,900	\$69,700
Fire Safety	7	\$7,555	\$700	\$700	\$700	\$700	\$10,355
Electrical	7	\$58,000	\$7,400	\$0	\$0	\$0	\$65,400
Boilers/Pumps	6	\$105,800	\$50,000	\$1,500	\$0	\$0	\$157,300
Elevator	1	\$0	\$0	\$0	\$0	\$0	\$0
Unit Flooring/Carpeting	21	\$87,600	\$97,100	\$125,000	\$3,500	\$73,500	\$386,700
Unit Appliances	19	\$9,900	\$43,900	\$18,800	\$32,900	\$21,900	\$127,400
Unit Kitchen Cabinet/Countertop	9	\$4,500	\$26,100	\$1,100	\$5,100	\$26,100	\$62,900
Furniture Fixtures Equipment	1	\$0	\$4,568,000	\$0	\$0	\$0	\$4,568,000
Professional: Architectural	2	\$600,000	\$4,653,000	\$0	\$0	\$0	\$5,253,000
Other/Additions	24	\$470,500	\$19,000	\$417,000	\$43,500	\$104,500	\$1,054,500
Generator	1	\$0	\$0	\$0	\$0	\$0	\$0
Remodeling	2	\$95,914	\$0	\$70,000	\$0	\$0	\$165,914
Subtotal	200	\$893,515	\$617,500	\$557,267	\$591,600	\$911,817	
Annual Inflation Factor	Inflation Factor	100%	103%	106.09%	109.27%	112.55%	
Estimated Total Annual RR Needs:		\$893,515	\$636,025	\$591,205	\$646,457	\$1,026,258	\$3,793,460

*Demolition and Site Costs and Building Costs were removed to show capital needs without demolition and the construction of new sites



HOUSING MARKET ANALYSIS

The purpose of the Housing Market Analysis is to provide a clear picture of the environment in which the County must administer its programs over the ConPlan.

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IV. Housing Market Analysis

1. Overview

According to the 2006-2010 American Community Survey (ACS) data, DuPage County is made up of approximately 353,360 units, with almost 61% consisting of 1 unit- detached structures, also known as single family homes. Additionally, this data shows that 72% of housing units are owner-occupied and 22% are renter-occupied.

In its analysis of 2005-2013 data, Chicago Metropolitan Agency for Planning (CMAP) found that homeownership rates declined in all CMAP counties (Cook, DuPage, Kane, Kendall, Lake, McHenry, and Will). DuPage County experienced the largest decrease at -5 % points. These percentage changes could have been the result of the slowly recovering market, increase in low-mod population, vacancy rates in owner-occupied housing increasing faster than vacancy rates in rental housing or a combination of many factors.²²

Foreclosures continue to be an issue in DuPage County since the economic downturn in the mid to late 2000's. According to the DuPage Homeownership Center (DHOC) report on October 1, 2014, DuPage County Circuit Court statistics show that over 1,000 new foreclosure cases have been filed (an average of 168 per month) in the first half of 2014. As of 06/30/14, there are 2,664 active foreclosure cases, 586% higher than the number of foreclosures in 2004. Illinois continues to have the 4th highest foreclosure rate in the U.S. Despite hopeful signs of recovery, a significant number of DuPage County families are still in crisis due to foreclosure and potential homelessness.²³

For more information on foreclosures, including from a historical perspective in DuPage County, see the Needs Assessment Chapter within this planning document.

²² Tenure and Vacancy Trends in Metropolitan Chicago's Housing Stock. Publication. Chicago: Chicago Metropolitan Planning Agency, 2014. Print.

²³ U.S. DuPage Homeownership Center. 2015 CDBG/ESG Application Form: Housing & Homeless 2015 Funding Update – Public Service Funds. By Debra Olson. Wheaton, IL: DuPage County Community Development Commission, 2014. Print.

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2. Number of Housing Units

a. Introduction

According to 2006-2010 ACS data table, there were 353,360 housing units in DuPage County. Of these, 72% were owner occupied while 22% were renter-occupied. Approximately 24% of all rental units were in 5 or more unit buildings while 72% of owner-occupied units consisted of single-unit structures.

All Residential Properties by Number of Units

Property Type	Number	%
1-unit detached structure	214,223	61%
1-unit, attached structure	40,828	12%
2-4 units	13,619	4%
5-19 units	44,120	12%
20 or more units	40,004	11%
Mobile Home, boat, RV, van, etc.	566	0%
Total	353,360	100%

Table 31 – Residential Properties by Unit Number
Data Source: 2006-2010 ACS

Unit Size by Tenure

	Owners		Renters	
	Number	%	Number	%
No bedroom	368	0%	1,972	3%
1 bedroom	6,570	3%	28,579	37%
2 bedrooms	45,623	18%	33,530	44%
3 or more bedrooms	203,442	79%	12,993	17%
Total	256,003	100%	77,074	101%

Table 32 – Unit Size by Tenure
Data Source: 2006-2010 ACS

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

The 2013 DuPage County Community Development Commission Consolidated Annual Performance and Evaluation Report (CAPER), dated 06/27/14), counts housing based on the number of units put into service. Projects that began in 2010 or earlier, but have not yet been

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completed, are shown in the column headed 'Pipeline' on the following tables, "Affordable Housing Goals for the 2013 Program Year"

2013 Affordable Housing Goals - RENTALS						
Population and Income Level Benefited	2013 Goal	Project	Expenditure	Fund Source	Pipeline	Into Service 2013
Elderly Extremely Low Income						
<i>Increase in rental</i>						
<i>Rehab of rental</i>	60	Mayslake Manor	\$0	CDBG	60	0
Elderly Very Low Income						
<i>Increase in rental</i>			\$0			
<i>Rehab of rental</i>	86	Mayslake Manor	\$0	CDBG	86	0
Elderly Other Low Income						
<i>Increase in rental</i>			\$0			
<i>Rehab of rental</i>	3	Mayslake Manor	\$0	CDBG	3	0
Non-Elderly Ext. Low Income						
<i>Increase in rental</i>	12	TBRA	\$0	HOME	12	0
<i>Rehab of rental</i>	25	CHAD	\$441,317	HOME	12	13
Non-Elderly Very Low Income						
<i>Increase in rental</i>						
<i>Rehab of rental</i>	7	CHAD	\$0	HOME	7	
Non-Elderly Other Low Income						
<i>Increase in rental</i>						
<i>Rehab of rental</i>	19	CHAD	\$0	HOME	19	0
Subtotals	212		\$441,317		199	13

Figure MA-1

Data Source: U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. 2013 Consolidated Annual Performance & Evaluation Report. Wheaton, IL: n.p., 2013. Print.

2013 Affordable Housing Goals - Homeownership						
Population and Income Level Benefited	2013 Goal	Project	Expenditure	Fund Source	Pipeline	Into Service 2013 & 2014
Extremely/Very Low Income						
<i>Home buyer's asst.</i>						
<i>Rehab existing homes</i>	11	Single Family Rehab	\$50,837	CDBG/HOME	6	5
<i>Production of new units</i>						
Other Low Income						
<i>Home buyer's asst.</i>	18	DHOC HBA	\$395,880	HOME/CDBG	2	20
<i>Rehab/existing homes</i>	4	Equity Sharing	\$92,508	HOME	1	3
	2	IHDA NSP Rehab	\$39,228	CDBG	2	0
<i>Production of new units</i>	12	Habitat Prairie Green	\$224,842	HOME	7	5
	4	Habitat Scattered Site	\$208,941	HOME	4	0
Extremely/Very Low Income						
<i>Increase supportive hsg.</i>						
<i>Rehab supportive hsg.</i>						
Subtotals	48		\$1,012,236		22	33

Figure MA-2

Data Source: U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. 2013 Consolidated Annual Performance & Evaluation Report. Wheaton, IL: n.p., 2013. Print.

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2013 Affordable Housing Goals - SUPPORTIVE HOUSING/Special Needs						
Population and Income Level Benefited	2013 Goal	Project	Expenditure	Fund Source	Pipeline	Into Service 2013
Extremely/Very Low Income						
<i>Increase supportive housing</i>	16	Trinity Services Inc.	\$467,980	HOME	16	0
	8	Little City	\$0	CDBG	8	0
<i>Rehab supportive housing</i>	3	Senior Home Sharing	\$27,143	CDBG	3	0
	6	Seguin	\$0	CDBG	6	0
Subtotals	33		\$495,123		33	0

Figure MA-3

Data Source: U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. 2013 Consolidated Annual Performance & Evaluation Report. Wheaton, IL: n.p., 2013. Print.

Affordable Housing Goals - Affordable Housing Totals (Figures 5-9)						
	2013 Goal	Project	Expenditure	Fund Source	Pipeline	Into Service 2013
Total	293		\$1,948,676		254	46

Figure MA-4

Data Source: U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. 2013 Consolidated Annual Performance & Evaluation Report. Wheaton, IL: n.p., 2013. Print.

The Landings on Villa, a 16-unit permanent supportive housing development was completed and put in service in 2014, thus moving from the pipeline column in the Supportive Housing/Special Needs column to the “put into service” column in the third Table above. This development increased supportive housing units by 16, Trinity Services Inc., is also the owner. A total of \$467,980 in HOME funds helped to finance the development as did IHDA funds. The DHA is providing vouchers to the extremely low/very low income persons who will live there.

Another 2014 permanent supportive housing development is Finley Apartments, a 16-unit development nearing construction completion that will be for income-eligible persons with disabilities and similar to the Landings on Villa. Finley Apartments is owned by Bluestem Housing Partners and the supportive service provider is Trinity Supportive Services.

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HOME

HOME-assisted homebuyer projects will target households making less than 80% of the median family income. HOME-assisted rental projects will target households earning less than 60% of the median family income.

CDBG

CDBG funds will target developments in which at least 51% of the total units within the project will be occupied by low- and moderate-income households. Capital improvement projects must supply income data to the clients they are serving unless they are categorized as a presumed benefit. Projects qualified as neighborhood investment must meet the minimum percentage of low income residents per block group of a HUD provided 35.8% or approved income survey.

DuPage Housing Authority

HUD's published Income Limits are used to guide eligibility decisions at the DuPage Housing Authority. The following categories of income are the focus of the work of the Housing Choice Voucher (HCV) program:

- Low-income family: A family whose annual income does not exceed 80 percent of the median income for the area, adjusted for family size.
- Very low-income family: A family whose annual income does not exceed 50 percent of the median income for the area, adjusted for family size.
- Extremely low-income family: A family whose annual income does not exceed 30 percent of the median income for the area, adjusted for family size.

At least 75 percent of the families admitted to the DHA's program during a DHA fiscal year must be extremely low-income families. HUD may approve exceptions to this requirement if the DHA demonstrates that it has made all required efforts, but has been unable to attract an adequate number of qualified extremely low-income families.

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

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Units leased by those on the HCV program continually change. Landlords may choose not to participate if the maximum rent that can be paid under this program is too low to meet their costs. If they try to rent to a household with very little income, the maximum rent will exceed the percentage of their income which can be assessed to rent. The unit may still be considered “affordable” but just not the correct unit for the specific individual’s household.²⁴

New in 2014, the DHA became the administering agency for two Rental Assistance Demonstration (RAD) project conversions – i.e., Marian Park and Colony Park. According to HUD, the Rental Assistance Demonstration (RAD) allows public housing agencies (PHAs) and owners of HUD-assisted properties to convert units to project-based Section 8 programs, providing an opportunity to invest billions nationally into properties at risk of being lost from the nation’s affordable housing inventory. The 1st component of the program allows properties funded under the Public Housing and Section 8 Mod Rehab programs to convert their assistance to long-term, project-based Section 8 contracts. The 2nd component of RAD allows owners of projects funded under HUD’s legacy programs (Rental Supplement, Rental Assistance Payment, and Moderate Rehabilitation) to convert units to Section 8 project-based vouchers.²⁵ The total DHA number of vouchers related to RAD conversion is 66, and will remain the same for 2015.²⁶

Rental Housing Support Program (RHSP)

Another non-HCV rental assistance program is the RHSP program. IHDA administers the program overall, and the source of the funding is from a portion of the real estate sales transfer tax. IHDA contracts with local administering agencies (LAAs) around the state who manage the program in their communities, including finding and screening tenants. The DHA is the LAA for DuPage County for the RSHP program. DHA was awarded funding to assist families throughout DuPage County by providing unit based rental assistance to extremely low income households. Households in the program, which began in 2005, will pay approximately 30% of their income in rent. To be eligible for the RHS Program, applicants and tenants must fall within

²⁴ Darzinskis, Debora, Executive Director, DuPage Housing Authority. "2015-2019 ConPlan - Market Analysis Draft Chapter Questions." Message to the author. 04 Dec. 2014. E-mail.

²⁵ Team, RAD. "What Is RAD?" Rental Assistance Demonstration Newsletter 2 (2014): 1. U.S. Department of Housing and Urban Development. Web. 11 Dec. 2014.

²⁶ Darzinskis, Deborah, Executive Director, DuPage Housing Authority. "2015-2019 ConPlan - Market Analysis Draft Chapter Questions." Message to the author. 04 Dec. 2014. E-mail.

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the 15% -30% below the annual area median income (AMI) income limits for program participation (by household size). Tenants looking for help with paying their rent must already be living in a RHSP property or be prepared to move into a RHSP property. The waiting list for this program is currently closed.²⁷

d. Does the availability of housing units meet the needs of the population?

The need for and availability of affordable housing continues to be a high priority. Data from the 2013 CAPER, the Woodstock Institute, and the DHA form the basis of the narrative for this section. DuPage County is home to a diverse population and a diverse housing stock is needed to house families with different levels of income and special needs. DuPage County remains a high-cost location within an expensive metropolitan region. As indicated by the 2012 American Community Survey, DuPage County contained more than 83,947 rental units. This figure equaled 25% of the total available housing in the County. The same survey showed that approximately 30,359 (38%) renting households in the County pay 35% or more of their incomes for rent. Significantly, 48% of renters are burdened renters, which include those spending over 30% of their household income on rent.

Very low-income renters experience significantly higher incidences of housing problems. Final figures of 2013 from the National Low Income Housing Coalition (NLIHC) illustrated that workers needed an hourly wage (at 40 hours per week) of \$18.83 and an annual income of \$39,160 to afford the rent of a two-bedroom apartment in DuPage at fair market rent. Someone earning 30% AMI (\$21,720) would be able to afford rent of \$543 per month. A two-bedroom apartment would require 2.3 people working full-time jobs at minimum wage in order to be affordable. Final figures of 2014 remain the same.²⁸

Additionally, according to the 2010-2012 ACS, seniors on social security in DuPage County, on average, received around \$1,646 per month (or a wage of \$9.50 per hour, based on a 40-hour week). The fair market rent for a 1-bedroom apartment is \$815 per month, thus the average senior whose only source of income is social security will pay 50.6% of income towards rent.

²⁷ Rental Assistance." Rental Assistance. Illinois Housing Development Authority, n.d. Web. 18 Dec. 2014.

²⁸ Out of Reach 2014: National Low Income Housing Coalition." National Low Income Housing Coalition. N.p., 24 Mar. 2014.

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Low-income people with disabilities face severe gaps between disability payment amounts, averaging \$883 a month in DuPage, and Fair Market Rate rents for a 1-bedroom at \$815. \$883 in Supplemental Security Income would have an affordable rent of \$265.

The Illinois Department of Employment Security (IDES) reported in February 2014 that the Chicago-Joliet-Naperville region had an 8.7% unemployment rate. The annual average for 2013 was 9.2%, compared to 8.9% for 2012 and 9.9% unemployment for 2011. Due to budget cuts, the Illinois Department of Employment Security no longer provides Mass Layoff Data Reports.²⁹

According to the DHA, families in DuPage County have had difficulty locating affordable housing when they need larger units (three or more bedrooms – especially if they have little or no income); and when they have a physical disability that requires fully accessible housing. If these two issues are combined, the available housing stock gets less and less.³⁰

The DHA announced the opening of the general waiting list, Section 8 Housing Program, for the general public will open for pre-applications in January 2015 for 2- and 3-bedroom townhomes located at Ogden Manor. The purpose of the pre-application is to obtain names of persons who may be eligible to reside in a rent-assisted townhome and who will be placed on the Wait List for this housing opportunity. There are eligibility requirements including income restrictions for residency.³¹

The DHA does not expect growth in the Housing Choice Voucher (HCV) program in the near future and anticipates few changes in the core demographics for the program. The DHA will continue to reach out to potential landlords to maintain an adequate supply of affordable housing for HCV program participants.

²⁹ U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. *2013 Consolidated Annual Performance & Evaluation Report*. Wheaton, IL: n.p., 2013. Print.

³⁰ Darzinskis, Deborah, Executive Director, DuPage Housing Authority. "2015-2019 ConPlan - Market Analysis Draft Chapter Questions." Message to the author. 04 Dec. 2014. E-mail.

³¹ "DuPage Housing Authority | Affordable Housing in DuPage County, IL." DuPage Housing Authority, n.d. Web. 23 Dec. 2014.

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Among non-HCV programs that the DHA administers is the Bridge Program which developed as a result of the State of Illinois court mandated Consent Decrees to provide more appropriate residential options to adults with mental illness. The Bridge Program attempts to “bridge the gap” between the current Medicaid funded residential setting and the HCV program. These adults do not need the medical care and interventions provided by nursing homes are often much younger than the age range for nursing home residents.

Developers seek the Bridge assistance as part of their financial proposals to secure tax credits. In 2014 the DHA administered 18 Bridge Subsidy vouchers. The number was increased by 10 to accommodate persons who will be moving into a new Supportive Housing project, the Landings on Villa, which is being operated by Trinity Services. Sixteen persons with disabilities will live in the units. 10 of these persons will receive Bridge Vouchers and the remaining 6 will receive Project Based Vouchers from the DHA as part of the regional Housing initiative.

e. Describe the need for specific types of housing

Specific types of housing needed within DuPage County include those: accessible for persons with disabilities, housing available with supportive services and affordable housing for the elderly.

DuPage County residents who have disabilities continue to be hindered by lack of accessibility to affordable and convenient transportation, lack of affordable housing and structures that are not physically accessible. Many people with disabilities live on fixed incomes. According to the 2008-2012 five-year US Census American Community Survey, 7.7% or slightly more than 65,700 of DuPage County’s non-institutionalized population report a disability. Of this number, only 28.7%, or just more than 19,000 are in the workforce. The data showed that the median annual earnings at that time for a disabled person was approximately \$25,500 compared to \$39,300 for a non-disabled person, a substantial 35% difference annually.³²

³² U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. *2013 Consolidated Annual Performance & Evaluation Report*. Wheaton, IL: n.p., 2013. Print.

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The DHA is among those who have found that there is a need for more housing with supportive services (homeless, at-risk families, households for persons with mental illnesses, persons with other disabilities) and even the elderly. Developers are continually looking to develop senior housing due to the ever increasing number of seniors. For the senior populations, location seems to matter a great deal as they want to stay close to their relatives and connected to their existing communities.³³

The DHA announced that it was opening the waiting list for persons interested in living in a senior housing development that receives project based vouchers (PBV). Persons must be 62 years or older and meet eligibility requirements for this assistance. Applications for the Senior Housing Projects Waiting List will be accepted beginning on January 2, 2015. Once this waiting list is open, it will remain open until further notice.³⁴

For the reporting period of January 1, 2013 through December 31, 2013, DuPage County Senior Citizen Services provided services to 19,077 unduplicated persons who were 60 years of age or older. Of this number, 11,484 were considered to be frail elderly. Within this same reporting period, staff completed 12,693 comprehensive in-home assessments in an effort to assist older persons in remaining in their homes and living independently as long as possible. Currently, there are 3,151 seniors active in the Community Care program, which provides homemakers, adult day service and emergency home response systems to help seniors avoid premature nursing home placement. Active seniors in the Community Care Program have almost doubled since 2009 and as the average age of a DuPage resident continues to rise more seniors will need assistance programs.³⁵

According to the data provided by the 2013 ACS 1-Year Estimate, there are approximately 73,908 persons in the Consortium area with a disability. They represent 8% of the population in

³³ Darzinskis, Deborah, Executive Director, DuPage Housing Authority. "2015-2019 ConPlan - Market Analysis Draft Chapter Questions." Message to the author. 04 Dec. 2014. E-mail.

³⁴ "DuPage Housing Authority | Affordable Housing in DuPage County, IL." DuPage Housing Authority, n.d. Web. 23 Dec. 2014.

³⁵ Tomsa, Mary Lee. "2013-14 DuPage County Senior Citizen Services Statistics." Message to the author. 05 Dec. 2014. E-mail.

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that age group. Figure MA-5 below depicts disability figures by type of disability. The instance of disabilities among seniors is significantly higher, with approximately 34,325 seniors, roughly 29.3% of the population aged 65 and over, having some type of disability.

Percent Imputed in the Consortium Area	
Disability Status	8.50%
Hearing Difficulty	6.10%
Vision Difficulty	6.40%
Cognitive Difficulty	6.80%
Ambulatory Difficulty	7.00%
Self-Care Difficulty	7.00%
Independent Living Difficulty	6.50%

Figure MA-5

Data Source: United States. U.S. Department of Commerce. United States Census Bureau. 2009-2013 American Community Survey 1-Year Estimate. N.p., Feb. 2013. Web. 25 Oct. 2014.

f. Discussion

The US Census data over the past ten years shows that the number of persons with disabilities has continued to slowly rise. The need for affordable housing, transportation, and facilities to accommodate these residents is also needed. Organizations such as Ray Graham Association, Little City Foundation, and Little Friends continue to apply for funding each application period.

3. Cost of Housing

a. Introduction

Affordable housing is an important regional priority for DuPage County's high cost housing markets. Additional resources are needed to help reduce the cost of owning or renting a home. Even though there has been a considerable softening of housing prices throughout the nation, costs are still out of reach for the average resident of DuPage County, and the instability of employment prospects makes the purchase of a home difficult for many residents. Affordable housing is a priority that has been the focus of substantial collaborative efforts. Nonetheless, additional resources are needed to help reduce the cost of owning or renting a home. A

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significant portion of homeowners and renters in the County are cost-burdened, paying increasing percentages of their incomes on rent and mortgages.³⁶

In 2010, Census data show that forty percent of owners, and 46% of renters in DuPage County spent 30% or more of household income on housing. This puts them at high risk for homelessness and other economic crises. According to 2012 ACS estimates, the median rent for rental households is \$1,079 and 48% of rental households spent more than 30% of their monthly income on housing.

According to the 2012 ACS, the median monthly cost of owning a home in DuPage County was \$2,162 (for housing units with a mortgage) and 39.4% of households that own their own home pay more than 30% of their monthly income on housing. Home sales and prices were higher in February 2013 in the seven-county metropolitan Chicago real estate market, according to an analysis by RE/MAX. The median sales price of all attached and detached homes sold in the Chicago area in February of this year rose 13 percent to \$157,900 when compared to the results for February 2012, while the number of homes changing hands dipped 8 percent to 5,507 units. Homes sold in February spent an average of 110 days on the market before going under contract or 33 days less than a year earlier. Among the seven metro counties of Cook, DuPage, Kane, Kendall, Lake, McHenry and Will, six saw the median sales price of a home rise in February. The median price rose 16 percent in Cook, including a 12% increase in Chicago. Other gains were 14% in Kendall, 10% in DuPage, 8% in Kane, 6% in McHenry and 5% in Will. Lake County's average price fell 9%. Home sales activity fell in six of the metro counties and in Chicago. Will County was the exception, with 475 completed sales yielding an increase of 3% when compared to February of last year. Results for the other counties in February were as follows: Cook 3,135 units, down 7 %; DuPage 681 units, down less than 1%; Kane 397 units, down 8%; Kendall 117 units, down 20%; Lake 465 units, down 21%; McHenry 237 units, down

³⁶ U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. 2013 Consolidated Annual Performance & Evaluation Report. Wheaton, IL: n.p., 2013. Print.

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22%, and Chicago 1,362 units, down 3%. There were 395 closed sales of detached homes (an 8% decline), with the median sales price of \$265,000, an increase of 10%.³⁷

The average tax rate for the county's 384 taxing bodies increased 9.36 % in 2013, while the total assessed value of real estate property decreased in DuPage County Property by 5.4 %. Therefore, the average property tax bill in DuPage County increased 3.96% this year over last year. The Consumer Price Index dropped from 3% in 2012 to 1.7 in 2013. This is the fourth year in a row that the total assessed value of real estate property has declined in DuPage County: 8 % in 2012, 6.6 % in 2011 and 5.9% in 2010. Local governmental entities make requests for tax dollars through their annual levies. Since the taxing bodies increased their requests, this drop in assessed value does not mean that tax bills will drop.³⁸

Many homeowners and renters in the County are cost-burdened (defined as paying more than 30% of its income for housing.) The 2012 ACS reports that the total number of 'burdened' owner and renter households in DuPage County has decreased since 2010, but the percent burdened still remains above 2009 levels.

In September 2014, the DuPage Homeownership Center (DHOC) issued its annual Labor Day Housing Affordability Index. For the first time in five years the gap between median household incomes and median home prices in DuPage County widened according to the report. The Center's semi-annual Housing Affordability Index is at 100, indicating that a family earning the median income had 100% of the monthly income needed to afford the median-priced single-family home in the county. While 100% affordability is, in itself, a positive number, this represents a 13% decrease in affordability for low- and moderate-income families in DuPage County since last year. The trend toward decreasing affordability will be important to watch

³⁷ "Metro-Chicago Sales Down, Prices up in February." [Http://vochicago.com/metro-chicago-sales-down-prices-up-in-february/34487/](http://vochicago.com/metro-chicago-sales-down-prices-up-in-february/34487/). RE/MAX Northern Illinois -Chicago Real Estate/Northern Illinois Real Estate, 14 Mar. 2014. Web. 22 Dec. 2014.

³⁸ U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission. 2013 Consolidated Annual Performance & Evaluation Report. Wheaton, IL: n.p., 2013. Print.

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going in to 2015. In 2007, at the bottom of the housing market bubble, the index stood at 55, or 45 points lower than this year's index.

National Homebuyer Activity

The National Association of Realtors reported on 12/22/14 that sales of existing homes fell 6.1 % nationally to a seasonally adjusted annual rate of 4.93 million. That was down from a revised annual pace of 5.26 million in October. Over the past 12 months, sales have risen 2.1 %. According to the author, the decrease in sales represents the slowest pace of sales nationwide in six months.

The combination of higher home prices and relatively stagnant incomes has reduced affordability and restrained buying. A recent decline in mortgage rates has yet to lure more buyers into the market. At the same time, fewer distressed properties and bargains, which tend to attract investors, are coming onto the market. The Realtors estimate that 2014 sales will end up below 2013 levels.

Sales nationwide have slumped during much of 2013 after a 3-year rally that followed the recession and the implosion of the housing market. Harsh winter weather hurt home buying at the beginning of 2014. Lower affordability, resulting from tight credit, rising home prices and essentially flat incomes, held back sales for the rest of the year.

November sales fell in all four major geographic regions: Northeast, Midwest, South and West. Buying activity fell over the past 12 months for homes worth less than \$250,000.

Some of the weakness in sales nationwide has resulted from a healthier market. Just 9 % of November 2014 was due to foreclosures and short sales, compared with 14 % in 2013. Purchases by investors were 15 % in November, compared with 19 % 12 months ago. This indicates that the market continues to recover from the housing bust, despite the absence of sales growth. There are signs that sales may improve in 2015. Mortgage rates have fallen sharply in the past few weeks, which should make homes more affordable. The nationwide average rate for a 30-year fixed mortgage dropped the third week of December to 3.8 %, from 3.93 % the previous

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week. That was the lowest level since May 2013. At the same time, consistent job growth has lowered the unemployment rate to 5.8 % from 7 % 12 months ago.³⁹

Illinois Homebuyer Activity

The Illinois housing market saw November 2014 median prices rise 6.9% over previous-year levels while statewide home sales decreased 9.5% for the same period, according to the Illinois Association of REALTORS® in a report released December 22, 2014. In the 9-county Chicago Primary Metropolitan Statistical Area (PMSA), which includes DuPage County, home sales (single-family and condominiums) in November 2014 totaled 7,090 homes sold, down 8.8 % from November 2013 sales of 7,777 homes. The median price in November 2014 was \$182,000 in the Chicago PMSA, up 7.1 % from \$169,900 in November 2013. The median price in November 2014 was \$182,000 in the Chicago PMSA, up 7.1 % from \$169,900 in November 2013.⁴⁰

“Illinois’ fourth coldest November on record had a negative effect on housing sales,” noted Geoffrey J.D. Hewings, Director of the Regional Economics Applications Laboratory of the University of Illinois. “While prices continue to improve, the sales forecast for the next three months indicates declines on a monthly and annual basis. Foreclosure sales continue to decline as a share of total sales; good news on the one hand but extending the time for return to pre-bubble levels.”⁴¹

2014 Housing Market Conditions and 2015 Illinois Housing Market Conditions Forecast
According to Dr. Geoffrey J.D. Hewings, Director of the Regional Economics Applications Laboratory of the University of Illinois, the strong momentum for home sales in 2013 disappeared in 2014. In 2013, both Illinois and the Chicago PMSA experienced solid two-digit annual gains varying between 15.3 % and 39.1 % in each month. Not surprisingly, the sales growth achieved in 2013 — the highest since 2008 — would be hard to match. In 2014, sales growth was far more modest, between -9.2 % and 9.9 % for Illinois and between -12.0 % and 10.1 % for the Chicago PMSA.

³⁹ Boak, John, AP. "U.S. Home Sales Hit Slowest pace in 6 Months in November." *Daily Herald Business*. Daily Herald Digital, 22 Dec. 2014. Web. 23 Dec. 2014.

⁴⁰ Sievers, Stephanie. "Illinois Median Home Prices Increase 6.9 % in November; Sales Decline 9.5%." *IAR News Room*. Illinois Association of Realtors, 22 Dec. 2014. Web. 23 Dec. 2014.

⁴¹ Sievers, Stephanie. "Illinois Median Home Prices Increase 6.9 % in November; Sales Decline 9.5%." *IAR News Room*. Illinois Association of Realtors, 22 Dec. 2014. Web. 23 Dec. 2014.

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A significant drop in foreclosed property sales was a primary factor in the decline in overall home sales in 2014. In the Chicago PMSA, monthly regular sales changed by -7.7 % to 5.6 % from a year ago, while foreclosed sales decreased by 14.3 % to 30.3 %. As for median sales prices, both foreclosures and regular property sales contributed to robust gains in overall median prices. Foreclosed properties and regular properties respectively experienced year-over-year gains by 5.0 % to -14.2 % and 2.8 % to -18.8 % respectively since the beginning of 2014.

Dr. Geoffrey J.D. Hewings' forecast for 2015 Market Conditions includes the following: Median prices are forecast to continuously grow in 2015 but at a slower pace than 2014. On a year-over-year basis, these gains will range from 5.5 % to 10.1 % for Illinois and 3.7 % to 8.7 % for the Chicago PMSA. By December 2015, the median price is forecast to be \$169,878 in Illinois and \$199,021 in Chicago PMSA, an annual gain of 8.4 % and 8.6 % respectively. As a complement to the median housing price index (HPI), the REAL HPI forecast indicates more mixed growth trends in the months ahead. In Illinois, the REAL HPI (Jan 2008=1) is forecast to experience a growth rate between -3.5 % and 6.9 % for Illinois and -4.5 % to 9.5 % for the Chicago PMSA. REAL HPI takes housing characteristics into account and constructs comparable "baskets" of homes for each month.

Finally, Dr. Hewing's forecast predicts that sales will see more positive gains in 2015 compared to the sluggish growth in 2014. Annual growth in monthly sales is forecast to be between 1.94 % to 15.81 % for Illinois and -0.27 % to 13.22 % for the Chicago PMSA. If foreclosed sales are excluded, regular property sales in the Chicago PMSA will grow in a lower range between 1.09 % and 6.65 %.⁴²

A wide variety of factors contributed to the decrease in affordability including higher home prices, lower wages, higher FHA mortgage insurance premiums and increased mortgage rates. The Illinois Association of Realtors Sales Figures reported that second quarter Median Home Sales Price rose 6.4% to \$233,000 and Median Income decreased 4.5% to \$72,400. Fortunately, the Average 30-Year Fixed Rate stayed relatively steady, rising only slightly to 4.12%. The Federal Reserve's decision to keep rates low because of weaker than expected economic

⁴² Hewings, Geoffrey, Dr. JJ. "2014 Housing Market Conditions -a Look Ahead to 2015." The Voice for Real Estate in Illinois. Illinois Association of REALTORS®, Dec. 2014. Web. 23 Dec

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conditions has kept mortgage rates in the low 4% range. Had rates increased to the forecasted 5% range, housing affordability would have been much lower.

The Federal Reserve's monetary policy will likely tighten in 2015, driving rates higher. The combination of higher interest rates, higher home prices and stagnant or slow rising wages will continue to drive affordability lower in the future.⁴³

Cost of Housing

	Base Year: 2000	Most Recent Year: 2010	% Change
Median Home Value	195,000	297,700	52.7%
Median Contract Rent	775	1,025	32.3%

Table 33 – Cost of Housing
Data Source: 2000 Census (Base Year), 2006-2010 ACS (Most Recent Year)

Rent Paid	Number	%
Less than \$500	7,224	9.4%
\$500-999	41,747	54.2%
\$1,000-1,499	21,742	28.2%
\$1,500-1,999	4,208	5.5%
\$2,000 or more	2,153	2.8%
Total	77,074	100.0%

Table 34 – Rent Paid
Data Source: 2006-2010 ACS

Housing Affordability

% Units affordable to Households earning	Renter	Owner
30% HAMFI	2,409	No Data
50% HAMFI	6,064	1,825
80% HAMFI	37,456	14,158
100% HAMFI	No Data	32,115
Total	45,929	48,098

Table 35 – Housing Affordability
Data Source: 2006-2010 CHAS

⁴³ Olson, Debra. "Labor Day Housing Affordability Index." News You Can Use. DuPage Homeownership Center, 1 Sept. 2014. Web. 24 Nov. 2014.

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Monthly Rent

Monthly Rent (\$)	Efficiency (no bedroom)	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom	5 Bedroom	6 Bedroom
Fair Market Rent ¹	727	826	979	1,248	1,455	1673	1892
High HOME Rent ²	741	842	982	1,247	1,371	1495	1618
Low HOME Rent ²	663	711	853	985	1,100	1213	1326

Table 36 – Monthly Rent

Data Source: "FY FMR and IL Summary System." *FY \$fmr_year\$ FMR and FY \$il_year\$ IL Summary Documentation System*. N.p., n.d. Web. 16 Dec. 2014.

b. Is there sufficient housing for households at all income levels?

Affordable housing for all income levels has not yet been achieved. Households paying such a high percentage of rent often times have trouble paying for other basic needs such as food, clothing, utilities, medical, and additional expenses.

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

As the housing market improves owners may be less willing to rent single family homes at an affordable rate. HCV tenants are challenged to find an affordable unit due to various factors: personal credit history, income level, number of persons in the family unit, personal rental history (past evictions, etc.). When combined with a tight rental market, these additional risk factors may make it very difficult for person to find affordable units. DuPage County has areas that are designated as Opportunity Areas which are defined by the Illinois Housing Development Authority (IHDA) as places that have low poverty, high access to jobs and low concentrations of existing affordable rental housing. Because of this, the DHA has many individuals who use vouchers from other locations to move into the County’s service area. Currently more than 800 persons have “ported – in” to DuPage County from other housing authorities.⁴⁴

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

⁴⁴ Sources: U.S. Department of Housing & Urban Development, Region V. DuPage Housing Authority. 2014 DHA Annual Report. Wheaton, IL: n.p., 2014. Print.

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For two decades, DuPage County has been experiencing significant and ongoing demographic change, marked by substantial increases in the number of residents with incomes that place them at or near the Federal Poverty Level. These changes are due to the characteristics of new county residents, as well as changes in the types of jobs available. This shift in the population characteristics in DuPage County is coupled with its status as the county with highest cost of living in Illinois. Together, these factors create an economically volatile situation that results in high stress levels, high levels of housing instability and other negative effects. Of course, these factors are all interrelated, and efforts to address them cannot operate in a vacuum. Further, as the population ages the increases in the number of seniors on fixed incomes also creates greater need for affordable and senior housing.

DuPage County sought and was granted a HUD waiver to allow rents to exceed FMR for ESG recipients due to the rising cost of rental units and low stock of housing meeting the established FMR standards and the housing needs of the target population. Households were being encouraged to rent at a few specific areas of the County with housing that would meet the FMR standards, rather than being able to make housing choices based on locations that met household needs and preferences. The waiver from the HUD Deputy Assistant Secretary for Special Needs in April 2014 for ESG recipients permits the County to fund housing units with rents up to, but not to exceed, 117% of the FMR. Thus households are able to select from a wider range of choices and the County has another opportunity to affirmatively further fair housing.

DuPage County compared HOME rents, Fair Market rents and the Area Median rent values finding that the Area Median Rent is higher than rent amounts eligible under the grant programs. See Figure MA-6. The waiver by HUD to extend the FMR for ESG recipients moved the households much closer to the actual rent costs faced in the DuPage County market.

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	Low HOME¹	High HOME²	Fair Market Rent³	Area Median Rent⁴
Efficiency no bedroom	663	741	727	775
1 Bedroom	711	842	826	881
2 Bedrooms	853	982	979	1044
3 Bedrooms	985	1247	1248	1331
4 Bedrooms	1100	1371	1455	1552
5 Bedrooms	1213	1495	1673	
6 Bedrooms	1326	1618	1892	

Figure MA-6

Data Sources: "HUD USER." *50th Percentile Rent Estimates*. N.p., n.d. Web. 16 Dec. 2014.
 "FY FMR and IL Summary System." *FY \$fmr_year\$ FMR and FY \$il_year\$ IL Summary Documentation System*. N.p., n.d. Web. 16 Dec. 2014.
 "Hud Exchange." https://www.hudexchange.info/reports/HOME_RentLimits_State_IL_2014.pdf

The average home size in DuPage County is 3.3 according to the most recent Census, meaning the average and most frequent home size is between 2 and 3 bedrooms. The range of program eligibility costs and the Area Median Rent demonstrates the reach that households are making to find suitable housing.

DuPage County will continue to further fair housing by investing dollars from the HOME Investment Partnerships Program (HOME) fund of approximately 1 million dollars per year in affordable housing projects, though this yearly amount may be subject to reduction. The County will also continue to partner with agencies that provide services to residents to further fair housing.

HOPE Fair Housing Center, a 501 c 3 established in 1968, is one of the country's leading fair housing organizations. HOPE serves 30 northern and north central counties in Illinois. HOPE works to create greater housing opportunities for all, ensuring that everyone has the chance to live in the community of their choice free from discrimination based on race, color, national origin, sex, disability, familial status, and any other characteristics protected under state and local laws. HOPE accomplishes this through education, outreach, enforcement, training and advocacy

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HOPE's goal is to ensure compliance with fair housing laws and achieve the Fair Housing Act's goal of truly balanced and integrated living patterns. HOPE furthers its goal through numerous services including individual complaint investigation and advocacy, systemic investigation and advocacy, education and outreach, and public policy initiatives. In 2013, HOPE added community development.⁴⁵

As reported in the Program Year 2013 CAPER, the below table MA-7 summarizes the issues and numbers of complaints dealt with by HOPE in 2013.

HOPE FAIR HOUSING CENTER SERVICE STATISTICS									
	Calls *	No. of Complaints**	Further Testing Req.***	Filed with HUD	HUD Referral	Filed in Fed. Court	Ref. to Attorney	Settled/ Conciliated	Mediated/ Resolved
Rental	375	61	30	2	15	2	3	2	3
Sales	5	0	0	0	0	0	0	0	0
Insurance	0	0	0	0	0	0	0	0	0
Mortgage/ Lending	2	5	0	0	0	0	3	0	0
Accessibility/ Disability	120	35	10	1	0	2	3	2	3
Other	80	19	0	0	0	0	0	0	0
Totals FY13	582	115	40	3	15	4	9	4	6

MA-7

In accordance with HUD regulations, a detailed analysis of impediments to fair housing was completed in 1996. An update to the analysis of impediments was included in the Consortium's 2004 Action Plan. That Analysis was updated in 2009 in conjunction with preparation of the 2010-2014 Consolidated Plan for Housing and Community Development. Following the 1996 analysis, the County entered into an ongoing contractual relationship with HOPE Fair Housing Center, Inc., a non-profit agency organized to promote fair housing and eliminate discriminatory practices in housing. In collaboration with HOPE, the County is addressing the impediments and implementing programs as summarized in pages 27-31, DuPage County Community Development Commission 2014 Action Plan.⁴⁶ The Analysis of Impediments is being updated in conjunction with this new Consolidated Plan.

⁴⁵ Houghtaling, Anne V. "Mission & Services." *HOPE Fair Housing Center, West Chicago, Illinois, Anne V. Houghtaling, Executive Director*. N.p., n.d. Web. 18 Dec. 2014.

⁴⁶ . U.S. DuPage County Consortium. 2014 Annual Element of the 2010-2014 DuPage County Consolidated Plan for Housing and Community Development. By CDC. Wheaton, IL: n.p., 2014. Print. 2014 Action Plan

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During the reporting period of October through December, 2013 – HOPE expanded education and outreach to ESL populations in DuPage County. The google translate button on HOPE's website allows HOPE to provide additional fair housing information to ESL students, and staff provided fair housing classes to ESL students representing 12 different native languages. HOPE gave technical assistance and collaboration with other DuPage County service organizations such as CHAD, DHAC, Bridge Communities, AIM-CIL, the Illinois Hunger Coalition and DuPage Habitat for Humanity.

DuPage Housing Action Coalition (DHAC) is a broad-based grassroots network advocating for affordable and fair housing in DuPage County. Each year at the DHAC Annual Meeting in January, DHAC identifies priority issues at the local, state, and national level, creating strategies for pushing forward these issues. For 2012, the issues identified included initiatives to unfreeze and protect dedicated funds for affordable housing, capital budget funding implementation, vacant property maintenance, restore funding for emergency and transitional housing program, and restore funding for homeless prevention program. The Coalition with its statewide partners has organized a number of successful legislative advocacy efforts over the years, including the Affordable Housing Planning and Appeal Act of 2003, and the Residential Tenants' Right to Repair Act of 2004 and the Federally Assisted Housing Preservation Act of 2004, the Illinois Rental Housing Support Program of 2005, and the Comprehensive Housing Planning Act of 2006. The Coalition also plans to seek increased funding levels in the Transitional Housing and Homeless Prevention program back to the level from the previous year barring any additional major funding cuts.

Concerted efforts to increase the availability of affordable housing in general and permanent supportive housing in particular have been surprisingly successful, given the generally high cost of housing in the County. Among these efforts are the following:

The DuPage Housing Authority (DHA) received \$36 million in 2011 as well as in 2012 to fund administrative operations and provide housing assistance to low-income individuals and families. As of December 2012, DHA subsidizes approximately 3, 500 housing units to individuals and

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families. The 2014 DHA Annual Report states that the in FY 2014, 2,948 units scattered throughout 35 different communities were leased to HCV program participants.

Community Housing Advocacy and Development (CHAD) works to create and fund affordable housing in the County. CHAD currently has over 400 units, the majority in DuPage County, of affordable apartments, condominiums, townhomes, duplexes, and single-family homes, including some barrier-free handicapped-accessible units, available for rent to low- and moderate-income families, primarily the working poor. Individuals are screened to meet income, credit, and background requirements. CHAD is another developer partner of the County under the Neighborhood Stabilization Program (NSP) to develop additional rental housing for households below 50% of median family income. Overall, CHAD annually provides over \$700,000 in savings to its residents with lower-than-market rents. In addition, in 2013 CHAD provided an additional \$15,000 in homeless prevention funds to 20 families to assist them through their difficult financial times by forgiving a month or two of rent.

DuPage Homeownership Center (DHOC) assists first-time home buyers and low-income, single-parent and minority households through various programs, such as education for first-time home buyers, credit counseling, financial literacy training, and foreclosure prevention counseling. DHOC also links homebuyers to financing packages that help reduce interest charges, and thereby increase the purchasing power of low-income households. DHOC has developed a program called “Counselor in the Court.” This program is the result of collaboration between DHOC, lenders, and Chancery Court judges and is intended to educate homeowners on how to take charge of their situations, make use of available resources and remedies within existing systems and make informed decisions throughout the foreclosure process.

DuPage County and its partners also offer a range of direct services to help households at risk:

Housing and Emergency Rental Assistance

The programs provide assistance within the County to avoid eviction and homelessness of those experiencing a short-term economic crisis or to quickly rehouse those who have become homeless. Assistance is not intended to be long-term; eligible households must document the

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ability to pay future rent and expenses through current income or through the development of a Personal Development Plan. The Homelessness Prevention Partnership arm of the Continuum coordinates funding and services across providing agencies. Homelessness prevention from any provider may make a household temporarily ineligible for assistance from another provider.

Illinois Home Weatherization Assistance Program (IHWAP)

This program offers eligible households based on income levels the ability to save fuel and money by improving the energy conservation of the individual's home. A whole house energy audit is conducted to help determine which specific services are appropriate. Assistance may be provided to seal cracks with weather-strip and caulk, insulate walls and attics, or repair or replace windows and doors. Furnace cleaning, safety checking, repair, or replacement is also provided along with help to install smoke detectors, carbon monoxide detectors and fire extinguishers in homes without them.

Low Income Housing and Energy Assistance Program (LIHEAP)

The County administers the funding for this program and accepts and screens applications. LIHEAP is designed to assist low-income households by offsetting the rising cost of home energy through direct financial assistance, energy counseling, outreach and education. Emergency assistance is also available to eligible households whose utility service has been disconnected and for homeowners whose furnace is non-operational or determined unsafe to operate. Additionally, this program assists eligible senior citizens and families with children that are younger than five years old.

DuPage County Senior Services

Provides information to County seniors (age 60 and older), their families and other community agencies on how to access programs, services and other benefits that are available to older individuals and their caregivers. Programs included in this service range from financial planning, legal services, transportation assistance, to a program that delivers home cooked meals. As the designated Case Coordination Unit for the County, this Unit also offers information on persons to remain living independently in the community, provides Adult Protective services and has advocates who seek to resolve complaints on behalf of persons who reside in long-term care or

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licensed assisted living facilities. In addition, it publishes the Senior Citizens Resource Directory (“Age Well DuPage”), the Long-Term Care Facilities Directory and the Senior Housing Directory. Senior Services is funded through DuPage County, the Illinois Department on Aging and the Northeastern Illinois Agency on Aging.

Shared Housing Program

This program matches individuals who are seeking an affordable housing arrangement with residents wanting to share their homes. DuPage Community Services conducts background checks and reviews references. Homes that are shared must pass health, safety, and ADA checks. The program provides guidance, advocacy, case management and support to both participants before, during, and after the match is made.

Single Family Rehabilitation Program (SFR): This grant program is available to eligible homeowners to address code violations, health and safety issues, accessibility needs, and lead based paint remediation.

Neighborhood Stabilization Program

DuPage County has received an allocation of \$5,176,438 to be used for the purpose of acquiring and redeveloping foreclosed properties that might otherwise become sources of abandonment and blight within their communities. As of 12/16/13, the program had purchased 29 distressed properties, had completed rehabilitation on 27, and had sold 20 with seven more being held by CHAD as long term rental properties. The final two properties are in the process of rehabilitation; one will be sold, and the other will be held for rental.⁴⁷

e. Discussion

The need for affordable housing continues to grow, and the County reflects an emphasis on certain priorities that further affordable housing: On July 24, 2013, HUD published a Final Rule in the *Federal Register* on July 24, 2013 to amend the HOME Program regulations. These amendments to the HOME regulations represent the most significant changes to the HOME

⁴⁷ DuPage County Community Development Commission. "2014 Action Plan." DuPage County IL Official Website. N.p., 20 Mar. 2014. Web. 25 Nov. 2014.

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Program in 17 years. In order to share knowledge and expertise among peers in implementing the new Rules by the time of their staggered effective dates, as well as to receive technical assistance to meet more rigorous underwriting requirements, the CDC invited neighboring jurisdictions and others to become part of a Regional HOME Summit which includes members from the City of Chicago, Cook County, City of Evanston, Kane County, Lake County, and Will County; and representatives from the local CPD office and the Illinois Housing Development Authority (IHDA). The HOME Summit has met at least quarterly over the last two years.

An emphasis on new construction of rental housing

Projects that produce a net increase in the supply of rental housing, rather than simply changing the affordability level, or preserving existing rental stock, are given the highest multiplier during the application process for new projects.

An emphasis on homeownership opportunities

Projects that provide homeownership opportunities for low-income families, thereby permanently impacting the families' opportunities for self-sufficiency, are also given the highest multiplier.

An emphasis on projects serving vulnerable populations

Additional multipliers are also given for projects serving:

- Individuals at the lowest income levels
- Persons with disabilities
- Persons with mental illness
- Persons with addiction issues

All projects seeking new funds to support affordable housing are subject to this evaluation process. In addition to the above priorities, the County also recognizes the importance of preserving the affordable housing stock. This additional emphasis on preservation is accomplished by the Consortium's cost benefit approach to project selection, which recognizes the cost effectiveness of preserving the existing stock.

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The DuPage Community Development Commission also encourages geographic distribution of affordable housing opportunities to promote locational choice in the development of affordable housing in the DuPage County area. This policy is promoted in the implementation of the Community Development Block Grant (CDBG) Program and the HOME programs.

The criteria used to select projects for funding have been designed to promote locational choice for low and moderate income persons by encouraging affordable housing outside of areas of affordable housing concentration and outside of neighborhoods of low-income concentration. Project applications that propose new construction of affordable housing or otherwise add to the affordable housing stock will be evaluated for the suitability of the proposed site. Although a variety of issues will be examined, of particular note will be the impact of the proposed project on increasing concentrations of affordable units and low-income persons.

The extent of this evaluation will depend on the activity being proposed and general demographic information about the proposed location. The County has updated its maps and demographic information on which this policy is based. Qualifying proposed projects that will be located in areas that currently have a concentration of low income persons and/or affordable units or will otherwise add to or create such a concentration, will receive fewer points in the selection process for HOME and CDBG applications. If the concentration effect is severe, such projects may be determined as inconsistent with the geographic distribution policy and, therefore, ineligible for funding. For more detailed information about affordable housing in DuPage County the DuPage County Division of Community Services should be contacted.

4. Condition of Housing

a. Introduction

The condition of housing stock in DuPage County is slowly aging with almost 60% of all owner and renter occupied homes over 30 years old. As the housing stock continues to age, without proper maintenance and rehabilitation, the percentage of units facing unsuitable conditions will continue to rise. This often occurs in areas of lower income where the funds needed to repair units are not available. Suitable and affordable living conditions are basic needs every resident of the County deserves, and home repairs can become costly to fix.

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According to the 2006-2010 American Community Survey, 32% of owner-occupied, and 42% of rental units reported at least one condition in need of repair. Data was not available to break down the number of households that would be considered low-income, but with an estimated 226,585 residents qualifying as low income in the County, a reasonable assumption can be made that at least a third of these residents would live in a home in need of repair.

b. Definitions

Substandard Condition: A blighted structure was defined under the Neighborhood Stabilization Program to mean a structure that (a) is abandoned; (b) meets the definition of “Unsafe Structure” under the DuPage County Building Code, effective January 1, 2007, which is: Any building or structure which constitutes a fire hazard, or is in danger of collapse, explosion, or otherwise threatens the public health, safety or welfare, or which has become deficient in adequate exit facilities, or which involves an illegal or improper use, occupancy or maintenance, or any vacant building or structure unguarded, unsecured or open and accessible to the public at door or window; and (c) is not able to be restored to a safe condition. DuPage County would consider such structures to also be substandard.

Substandard Condition but suitable for rehabilitation: There are few blighted structures in DuPage County that could not be rehabilitated if sufficient resources were available. DuPage County and the municipalities within DuPage County have active building inspection and code enforcement programs to prevent structures from becoming impossible to rehabilitate. For the purposes of programs funded by this Consolidated Plan, however, rehabilitation must take place within the regulatory caps set by the funding source, as well as within the policy guidelines of the CDC.

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c. Conditions of Units

Conditions of Units

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
With one selected Condition	82,576	32%	32,400	42%
With two selected Conditions	1,597	1%	2,212	3%
With three selected Conditions	184	0%	86	0%
With four selected Conditions	0	0%	0	0%
No selected Conditions	171,646	67%	42,376	55%
Total	256,003	100%	77,074	100%

Table 37 – Condition of Units
Data Source: 2006-2010 ACS

Year Unit Built

Year Unit Built	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
2000 or later	20,002	8%	6,200	8%
1980-1999	85,542	33%	25,321	33%
1950-1979	125,262	49%	39,502	51%
Before 1950	25,197	10%	6,051	8%
Total	256,003	100%	77,074	100%

Table 38 – Year Unit Built
Data Source: 2006-2010 CHAS

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	150,459	59%	45,553	59%
Housing Units build before 1980 with children present	5,350	2%	157,967	205%

Table 39 – Risk of Lead-Based Pain
Data Source: 2006-2010 ACS (Total Units), 2006-2010 CHAS (Units with Children)

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Vacant Units

	Suitable for Rehab	Not suitable for Rehab	Total
Vacant Units	20,838		20,838
Abandoned Vacant Units	N/A		
REO Properties	1,560		1,560
Abandoned REO Properties	N/A		

Table 40 – Vacant Units

**Data Source: 2012 American Community Survey 5 year estimate vacant units
Realty Trac December 23, 2014 lists 1,560 REO properties in DuPage County**

d. Need for Owner and Rental Rehabilitation?

Single Family Rehabilitation Program (SFR):

The County addresses the need for owner rehabilitation by providing a grant of up to \$15,000 to address code violations, health & safety issues, and accessibility issues. This rehab program was recently approved for revisions by the HOME Advisory Group (HAG) in an effort to better accommodate rehab needs in a timelier manner. These changes will also allow for better coordination with the County’s Weatherization program, as many of the common rehab needs are items that have already been bid under the Weatherization program. Preferences in processing will be given to households with seniors (age 62+) or a household member with disabilities as defined in the revised Community Development Commission Underwriting Standards – Rehabilitation Program. A complete list of eligible and ineligible activities is found in the CDC Underwriting Standards – Rehabilitation Program. If lead based paint must be abated or encapsulated, additional funds up to \$10,000 may be utilized for the lead paint work, in accordance with the CDC Lead Based Paint Policy.⁴⁸ This program is funded with CDBG in the urban County and with HOME funds in the City of Naperville. Because the HOME program regulations require that the entire property be brought up to code, in Naperville only housing units that can be brought up to code may participate in the owner-occupied rehabilitation program and may not receive “spot” rehabilitation.

⁴⁸ U.S. HOME Advisory Group. Community Development Commission. Memo Adoption of Revision to Underwriting Standards for Rehabilitation Programs. By Mary A. Keating. Wheaton, IL: December 2, 2014. Print. November 17, 2014.

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

The Center for Disease Control (CDC) states the exposure to lead paint by children is the greatest risk in homes constructed before 1978. No safe blood lead level in children has been identified. Even low levels of lead in blood have been shown to affect IQ, ability to pay attention, and academic achievement. And effects of lead exposure cannot be corrected. Lead based paint hazards continue to be an issue the County faces as the housing stock slowly is rebuilt and homes containing lead are demolished. It is difficult to estimate the number of homes containing lead based hazards because data provided from the most recent US Census does not specifically ask if a dwelling was built before or after 1978, the year lead paint was banned.

An analysis of the total population, low-mod population, average home size, housing and rental stock built before 1980 produces a rough estimate of 45,317 low-mod homes, or 135,951 individuals facing potential lead paint based problems. This number did not assume a larger population of low-mod individuals would be living in older units, which could potentially increase the number substantially. However, data provided is broken up into decades, while lead paint was banned in 1978, possibly lowering the total number of lead paint households in the calculation. In most cases, the paint has been covered or remediated, but points of friction and cracking paint can still create a dangerous home to live in and is expensive to remediate.⁴⁹ However, despite these high potential numbers, the actual incidence of lead poisoning, as reported by the DuPage County Health Department, is relatively low. Lead testing of owner occupied homes coming into the DuPage County owner occupied rehab program shows actual incidence of lead based paint to be low, as well. Lead based paint is occasionally discovered on doors, window trim, and exterior trim work, and seldom throughout the entire house. Nonetheless, because the estimate of potentially affected homes is high, the County will continue to be prepared to deal with these hazards. In order to address this issue, the County has developed a two-part strategy that is described below.

⁴⁹ Methodology: $(\text{Estimated individuals living in a home with lead hazards} / \text{total population}) = (\text{Estimated \% of individuals living in households with lead hazards} * \text{population of low-income residents}) = (\text{Estimated number of low-income residents living in homes with lead hazards} / \text{average home size}) = \text{Estimated low-income households living in homes with lead paint hazards}$ $538,036/897,805 = .60 * 8226,858 = 135,951/3 = 45,317$

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PUBLIC EDUCATION AND SCREENING

DuPage County experiences relatively few incidents of lead poisoning due to the large volume of newer housing in the county and effective regulations that address this issue. The Illinois Department of Public Health – Childhood Lead Poisoning Prevention Program has primary responsibility for the education and screening activities relating to lead hazards. They provide four types of services, as described below, and will continue to provide these services throughout the period of this plan.

Public Information: The Illinois Department of Public Health provides information to the general public about the dangers of lead poisoning and how residents can address the issue. Flyers are provided on request, and distributed through its Childhood Lead Prevention program.

Testing for Lead Hazards in the Home: Testing is done in cases where a lead hazard is suspected, or when a child's blood lead level meets the threshold to require the environmental testing.

Screening for Elevated Blood Levels: Where tests produce evidence of children being exposed to lead hazards, the Illinois Department of Public Health will screen children for lead poisoning.

Counseling: When lead hazards are present or when there are positive tests for lead poisoning, counseling for the family is made available.

As part of the process in determining the needs and related goals of the 2015-2019 Consolidated Plan, DuPage County, through its Community Development Commission, conducted a survey with local nonprofit agencies and residents in the County that included determining the need for lead paint remediation. The survey results indicated the availability outweighs the current need, making this a low priority for funding dollars. However, the County recognizes that this issue is often times overlooked and residents are unaware a problem even exists.

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Lead Hazard Evaluation and Reduction in Existing Housing Programs

HUD's Lead Safe Housing Rule, 24 CFR 35, took effect on September 15, 2000. These regulations form the basis of standards for addressing lead hazards in existing housing programs. Additionally, the U.S. Environmental Protection Agency's 2008 Lead-Based Paint Renovation, Repair and Painting Program Rule became fully effective April 22, 2010. The new rule requires contractors, property managers and others paid to replace windows or renovate residential houses, apartments and child-occupied facilities built before 1978 to be certified by the U.S. Environmental Protection Agency (EPA). The following outlines the County's procedures for the implementation of these standards.

Assessment and Hazard reduction in Owner Occupied Rehab - Homeowners are provided informational brochures on lead safe renovation. For homes built prior to 1978, an XRF Lead Risk Assessment is conducted by a certified assessor. If lead is present, a grant of up to \$10,000 is offered to provide appropriate lead remediation, which is performed by properly licensed workers. Lead clearance testing is conducted.

Assessment and Hazard Reduction in Multi-Family Rehab - The application for HOME and CDBG rehabilitation funding documents the age of the structure to be rehabbed. For structures built prior to 1978, the applicant is required to include the results of lead testing with the application for funding. Proper lead remediation must be part of the project and clearance testing conducted. Lead clearance testing must be completed.

Homebuyer Programs, Rapid Re-Housing and Homelessness Prevention – each of these programs requires some level of visual inspection for units constructed prior to 1978 with properly performed remediation of any identified deteriorating paint.

5. Public and Assisted Housing

a. Introduction

The DuPage Housing Authority (DHA) is responsible for administration of public programs and funds to improve housing assistance options in DuPage County. It provides rental assistance vouchers through a program funded by the U.S. Department of Housing and Urban Development. The Housing Choice Vouchers allow income eligible families, individuals, elderly

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persons, and persons with disabilities to live in decent, affordable rental units. The DHA operates only a rental assistance program and owns no public housing.

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	0		2,693	161	2,532	0	60	0
# of accessible units									
*includes Non-Elderly Disabled, Mainstream Five-year, and Nursing Home Transition									

Table 41 – Total Number of Units by Program Type
Data Source: PIC (PIH Information Center)

b. Describe the supply of public housing developments:

The DuPage Housing Authority operates only a rental assistance program and owns no public housing. The primary service of the DHA is to provide safe, decent, sanitary and affordable housing to eligible households through the operation of the Housing Choice Voucher (HCV) program. The HCV program allows eligible individuals or families to lease a housing unit suited to their household size with any landlord. The landlord agrees to participate in the program and to maintain the housing in compliance with the Housing Quality Standards required by HUD.

c. 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:

DuPage Housing Authority operates only a rental assistance program and owns no public housing.

Public Housing Condition

Public Housing Development	Average Inspection Score
N/A	N/A

Table 42 – Public Housing Condition

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

The DHA operates only a rental assistance program and owns no public housing.

e. Describe the public housing agency’s strategy for improving the living environment of low and moderate income families residing in public housing:

The DHA operates only a rental assistance program and owns no public housing

6. Homeless Facilities and Services

a. Introduction

The following Section discusses the facilities, housing, and supportive services available that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, and veterans and their families. The services include both targeted services to vulnerable populations and mainstream services such as health, mental health, and employment services.

Facilities Targeted to Homeless Persons

	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)	*54	**3	*350	*190	
Households with Only Adults	*111	**16	*140	*146	
Chronically Homeless Households				*165	
Veterans			*5		
Unaccompanied Youth	8				

Table 43 – Facilities Targeted to Homeless Persons

Data Source: Source: DuPage County HMIS data. Domestic Violence shelter beds are included. * Housing Inventory Count (HIC); ** Point In Time (PIT) DuPage County Continuum of Care." *DuPage County Continuum, 1/29/14.*

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

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DuPage County offers many mainstream services with its community partners to complement and support services targeted to homeless persons. Figure MA-7 below offers examples of such services.

CATEGORY	COMMUNITY PARTNER	RESOURCES
Ethnic/Multicultural	World Relief	Resources and training for cultural sensitivity
Physical health	<u>Access Addison Family Health Center</u>	Federally Qualified Health Center (FQHC)
Physical health	<u>Hamdard Center for Health and Human Services - Federally Qualified Health Center FQHC</u>	Primary medical care
Physical health	VNA Health Center - DuPage, Bensenville FQHC	Primary medical care
Physical health	<u>VNA Health Center - DuPage, Carol Stream</u> FQHC	Primary medical care
Physical health	<u>VNA Health Center - Aurora</u> FQHC Not in DuPage County but serves DuPage County residents	Primary medical care
Physical health	VNA Health Center - Will/DuPage, Bolingbrook FQHC Not in DuPage County but serves DuPage County residents	Primary medical care
Physical health	<u>Community Nurse Health Association</u> FQHC Not in DuPage County but serves DuPage County residents	Primary medical care
Physical health	Access DuPage	Coordinate medical and dental care
Mental Health	Metropolitan Family Services	Psychiatric / behavioral health/medication services
Substance Abuse	Gateway, Abraxas, SHARE	Outpatient substance abuse treatment
Substance Abuse	Serenity House	Residential substance abuse treatment
Social Services	IL Dept. of Human Services	Food Stamps, Medicaid, and All Kids insurance
Social Services	Youth Outlook	Provide drop in centers for LGBTQ youth,

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		provide training to professionals working with these youth.
Social Services	Sharing Connections	Donations of toiletries and clothing at entry and bedding and furniture at exit to participants.
Youth Services	Wheaton Youth Outreach 360 Youth Services	Mainstream services for pregnant and parenting youth. Mainstream services, shelter and transitional living for homeless youth ages 13-24.
Justice System	DuPage County Probation and Court Services	Referrals of released offenders to divert them from homelessness.
School System	DuPage County Regional Office of Education	Facilitate school placement, mediate disputes and ensure education rights of homeless youth are met.
Legal Services	Prairie State Legal Services	Free legal representation and assistance
Education	College of DuPage	GED, core college classes, post-secondary and vocational education
Employment	IL Dept of Employment Security	Career preparation and job counseling.
Employment	WorkNet DuPage - Workforce Development Division	Vocational training programs such as computer technician, HVAC and culinary arts.

Figure MA-8

Data Source: Lijewski, Peg. "Question Please!" Message to the author. 04 Dec. 2014. E-mail.
Lijewski, Peg. "FW: More Info." Message to the author. 02 Dec. 2014. E-mail.

c. 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.

DuPage County incorporates the Opening Doors goals and strategies in its local Consolidated Plan and Continuum of Care (CoC) Plan to End Homelessness. The CoC has emphasized homeless prevention assistance and developed housing options for the chronically homeless, veterans, families and unaccompanied youth.

CHRONIC – There are 335 Permanent Supportive Housing beds which have been developed in the last ten years. Of these, 176 are chronic beds. Facilities for chronic individuals are operated by DuPage PADS and the DuPage County Health Dept. Facilities for chronic families are operated by Catholic Charities and DuPage PADS. All facilities include case management and support services.

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CHRONIC FAMILIES– DuPage PADS and Hope House shelters coordinate their efforts with the homeless prevention/rapid rehousing providers to divert shelter stays for families whenever possible. Homeless Prevention restored housing to 1340 households in 2013. There is an emphasis on immediate alternative accommodations when possible. DuPage PADS has a case manager providing outreach visits to unsheltered locations and to families in motels. Families who call directly for housing assistance are connected to a 24 hour housing hotline to access housing stability. Intake process facilitates direct entry of unsheltered families with children. The DuPage CoC has developed 53 permanent supportive housing units for families.

VETERANS - The DuPage CoC partners with several veterans' organizations and a veteran is a representative on the CoC Leadership committee. The Midwest Shelter for Homeless Veterans is a primary provider of veterans housing and services. They operate the only VA grant and per diem housing program in DuPage County and were awarded an SSVF grant in June 2013. There are no HUD VASH vouchers allocated to DuPage County. Veterans also receive services from Hines Veterans Hospital for both medical care and case management. The Dept. of Veterans Affairs at Hines hospital is a critical linkage providing primary medical, psychiatric, and substance abuse treatment. They visit the shelters to meet homeless veterans and explain programs and benefits. The DuPage County Veterans Assistance Commission provides onsite shelter visits, gas and food vouchers, vehicle repairs, and housing referrals. The IL Dept of Veterans Affairs helps apply for veterans benefits/entitlements such as pension, disability, etc.

UNACCOMPANIED YOUTH - DuPage CoC has Cornerstone emergency shelter for unaccompanied male children ages 13-17 with support services and housing placement. 360 Youth Services operates a transitional living program for homeless males ages 18-24 and homeless female youth 18-21 who are not pregnant or parenting. Childserv provides three group homes for homeless children under 18 (2 for girls and 1 for boys) and Wheaton Youth Outreach provides transitional housing for homeless pregnant girls or girls with children. Only one program is HUD funded. The DuPage CoC is supporting the applications of agencies for the federal homeless and runaway youth grant competitions and other funding sources to increase capacity for youth. 360 Youth Services was a successful applicant in 2007 and 2013 for transitional living for homeless youth. These programs work with the DuPage homeless shelter

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providers to meet a specialized need in homeless services which is not duplicated by any of these other service providers.

Community Services Block Grant funding is provided for homeless services totaling \$175,427 in program support and \$75,000 in client assistance that aids the operation of the daytime client services site, emergency shelter operations, homeless prevention assistance, and food pantries. The CoC Grants Funding Committee works closely with DuPage County Community Development to develop criteria for awarding of CDBG and ESG funding. Proposed funding is then approved by the CoC Leadership Committee. As a result of this participation and coordination, DuPage County has committed \$329,000 in 2014 CDBG funds to provide public services to homeless persons and capital improvements for service providers to homeless persons. The County continues to devote nearly all its public service cap under CDBG to homeless services such as shelter and transitional housing. 5 CoC members entered into agreements with the County to administer 2013 ESG funds for homeless prevention and rapid re-housing; a program to continue in 2014. 3 CoC shelter providers are also funded under ESG, as well as a street outreach program. HOME funds have been committed to a Tenant Based Rental Assistance Program with a preference for homeless and disabled persons.⁵⁰

7. Special Needs Facilities and Services

a. Introduction

The 2014 Continuum of Care Point in Time Survey indicated an unmet need for nearly 300 units/beds to meet the actual supportive housing needs of those sheltered the night of the count. Housing the chronically homeless continues to be difficult, as such a large percentage of the DuPage County chronically homeless population presents a combination of mental illness, other disability, substance abuse, and/or criminal background. For these reasons, DuPage County continues to utilize nearly all of its CDBG public service dollars for agencies providing facilities and services to the special needs populations.

⁵⁰ Lijewski, Peg, Consultant to DuPage Continuum of Care. "Question Please!" Message to the author. 04 Dec. 2014. E-mail.

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b. 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.

Persons with special needs are the elderly and frail elderly, persons with severe mental illness, persons with disabilities, persons with addiction disorders, persons with AIDS and related diseases, families, single custodial parents, and youth. These groups are not necessarily at risk of becoming homeless, but may require supportive housing and services. An estimated 15 persons were reported with HIV/AIDS in DuPage County in 2013. Over a five-year period from 2009-2013, the median number reported per year was 18.⁵¹

2009-2013 American Community Survey 5-Year Estimates for persons with disabilities shows overall disability status at 4.8% of the populations with hearing difficulty at 3.3%; vision difficulty at 3.5%; cognitive difficulty at 3.7%; ambulatory difficulty at 3.8%; self-care difficulty at 3.7%; and independent living difficulty at 3.6%. For further detail on meeting the needs of persons with special needs please refer to the Needs Assessment Section in this planning document.⁵²

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

The CoC coordinates with DuPage County Health Department staff using the discharge policy guidelines contained in the Continuity of Care agreement with the Illinois Dept. of Mental Health. These policies ensure persons are not discharged into homelessness. The DuPage County Health Department provides discharge planning services to any resident being released from state hospitals, or state funded community hospital beds with their Linkage and Aftercare program funded by county tax revenues. These persons are typically uninsured and at risk of homelessness upon discharge. Aftercare staff visits the unit within 24 hours of admission and begin work on a discharge plan which includes housing, medications, psychiatric services, etc.

⁵¹ "Under the Microscope HIV/AIDS." CD Review 9 (Dec. 2013): Issue 2. DuPage County Health Department. DuPage County Health Department, Dec. 2013. Web. 12 Dec. 2014

⁵² LePage, Christina, Assistant Director, Community Health Resources, DuPage County Health Department. "RE: FY2015-2019 HUD Consolidated Plan - Question Please." Message to the author. 12. Dec. 2014. E-mail.

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Persons routinely enter residential programs for the mentally ill that are state funded and operated by the DuPage County Health Dept., Ray Graham Association, Association for Individual Development, and the National Association for the Mentally Ill DuPage (NAMI DuPage) chapter.

The Continuity of Care agreements are administered by Regional Mental Health offices to ensure that every geographic area has an organized plan for assuring that 100% of persons triaged or discharged from the state hospital have an identified location and access to follow-up services. The agreements were revised in December 2005 with new language noting it is best practice not to discharge into homelessness. In DuPage County, the DuPage County Health Department is the Continuity of Care provider and operates housing programs that are state funded, not McKinney Vento funded. The DuPage Aftercare program typically has staff on the unit in every local state institution and the four major community hospitals every day. They provide discharge planning to housing.⁵³

d. For entitlement/consortia grantee: 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.

DuPage County identifies persons who are not homeless but as having other special needs to include the elderly and frail elderly, persons with severe mental illness, persons with disabilities, persons with addiction disorders, persons with AIDS and related diseases, families, single custodial parents, and youth. These groups are not necessarily at risk of becoming homeless, but may require supportive housing and services.

The CDC plans to undertake activities through its funding programs and services during the next year to attempt to achieve the following one-year goals to address the housing and supportive services needs with respect to persons who are not homeless but have other special needs which is formulated in the following Figure MA-8.

⁵³ Lijewski, Peg, Consultant to DuPage Continuum of Care. "Question Please!" Message to the author. 04 Dec. 2014. E-mail.

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Goals for Servicing Special Needs Persons who are not Homeless

Elderly Goal 1: Increase the supply of affordable housing for the elderly

- Goal 2: Increase availability of support services for the frail elderly and ensure these services are easily accessible
- Goal 3: Support a continuum of services to maintain independent living in order to prevent premature institutionalization
- Goal 4: Increase availability to affordable housing and improve access to services to combat homelessness
- Goal 5: Fill gaps in elderly service provision to maintain independent living and geographic distribution of these services

Persons with Disabilities Goal 1: Ensure transportation is accessible, affordable and available

- Goal 2: Integrate supportive housing into the community (i.e. not separated into special buildings or developments)
- Goal 3: Improve accessibility of public buildings
- Goal 4: Provide job training and case management, and increase recreational services

Persons with Alcoholism and Other Addictions

- Goal 1: Reduce the health and social costs to County by improving access to addiction treatment
- Goal 2: Expand residential and out-patient treatment capacity
- Goal 3: Educate and promote awareness of prevalence of substance abuse and its effects throughout County, efficacy of treatment and prevention programs
- Goal 4: Increase access to HIV/AIDS screening and treatment
- Goal 5: Expand employment and homeless services for recovering addicts

Families at Risk Goal 1: Expand affordable housing

- Goal 2: Provide rent and mortgage assistance to families at risk of homelessness
- Goal 3: Establish substance abuse prevention programs and services
- Goal 4: Establish programs for youth, particularly latchkey children
- Goal 5: Expand non-traditional day care for sick children, infants, people with disabilities and provide respite care for parents of children with emotional and behavioral disorders

Victims of Domestic Violence Goal 1: Expand shelter capacity

- Goal 2: Expand support services such as group counseling, legal advocacy, community education, children's programs, 24-hour hot line and prevention services

Youth

- Goal 1: Expand facilities to house homeless youth
- Goal 2: Establish programs to avoid homelessness

Persons with AIDS and Related Diseases

- Goal 1: Improve access to counseling, medical help, nutritional and other health services

Persons with Severe Mental Illness

- Goal 1: Increase services and supportive housing

Figure MA-9

Data Source: U.S. Department of Housing & Urban Development, Region V. DuPage County Community Development Commission.

2013 Consolidated Annual Performance & Evaluation Report, Figure 28, p.41. Wheaton, IL: n.p., 2013. Print.

8. Barriers to Affordable Housing

a. Describe any negative effects of public policies on affordable housing and residential investment.

In developing a strategy for the creation of affordable housing, multiple barriers have been identified:

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Local Planning and Zoning

Zoning regulations are divided up between each municipality across the Consortium boundaries. Each municipality has different regulations, and depending on the community, the opportunities to construct affordable housing are sometimes limited. The County encourages all municipalities to incorporate zoning regulations and long term planning efforts to further affordable housing in all areas of the community. These types of planning and zoning changes can often receive negative backlash from the community and form “NIMBY, not in my back yard” thoughts that make it difficult for changes to take place.

Building Codes

Building regulations are essential to protect the health and safety of citizens and the welfare of the community. Municipalities administer building regulations within their borders, and the County administers building regulations in the unincorporated areas.

While building codes have positive contributions, these codes can contribute to higher construction costs. An analysis of building codes has not been completed for this Comprehensive Housing Affordability Strategy (CHAS), nor has there been an analysis of the potential effectiveness of building codes modifications on making housing more affordable. However, actions that can be taken by individual jurisdictions to further affordable housing and help minimize any negative impacts of restrictive building codes may include the following:

- Encouraging fast-track or one-stop permit processing. Such a process has become more difficult during the past few recessionary years as many municipalities have outsourced permitting and inspections, causing additional delays in processing.

- Promoting the use of time-saving and cost-saving techniques within reasonable health and safety parameters

- Providing technical assistance, information and other support to local communities

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-Encouraging affordable housing by using development controls (i.e., the zoning ordinance and subdivision regulations) to pursue this goal

Fragmented Local Government Structure

The land area of DuPage County is governed by 39 independent municipalities, and County government for the unincorporated areas. A five-year strategy for addressing affordable housing issues would not be complete without some discussion of the complexity that results from the cumulative impact of land use and development decisions that are made by multiple units of government. This complexity, seen here as a possible obstacle that will need special attention in the formulation of strategies, can contribute to housing affordability problems in multiple ways.

First, independent units of local government, each governing a relatively small portion of the Consortium area, make it difficult to plan for housing diversity and balance with job growth. Communities that have concentrations of affordable housing will plan for increasing diversity by encouraging less affordable housing. Communities with shortages of affordable housing often find it difficult (due to market forces and community attitudes) to plan for lower cost housing.

Additionally, implementing strategies to address affordable housing needs is difficult in an environment with multiple independent units of government. For example, incentives for affordable housing production, if implemented in only one or two municipalities and not comprehensively, may not have the effect they intend. A positive incentive (attractive to developers) may result in such housing being concentrated in a few areas rather than countywide. A negative incentive (such as extra requirements to encourage more affordable housing) may simply not be effective since builders can just go to other jurisdictions. Therefore, the development of strategies for encouraging new affordable housing opportunities requires a cooperative approach.

The countywide planning process, mentioned above, is a framework for such an approach, but it is clear that the implementation of strategies will need to encourage all units of government to participate in the solution.

9. Non-Housing Community Development Assets

a. Introduction

DuPage County actively maintains non-housing community development assets from County general funds or through public-private partnerships. This enables DuPage County to leverage the outcomes obtained through use of the funds governed by this Consolidated Plan. Specific examples are two non-profit organizations started by and supported through County general funds: *Giving DuPage* – which builds capacity in the non-profit community and promotes giving and volunteerism and *Choose DuPage* – the economic development engine of DuPage County.

b. Economic Development Market Analysis

DuPage County does not utilize the resources governed by this Consolidated Plan for economic development. *Choose DuPage* is the driving force for DuPage County economic development and has been created to leverage economic growth for the benefit of County businesses and residents. The goals of *Choose DuPage* are to:

- Support local municipal economic development initiatives
- Grow, retain, and attract businesses
- Address policy issues critical to the needs of business

Choose DuPage is dedicated to establishing DuPage County as a premier global business location by working to expand and diversify the DuPage County economy through actions that stimulate business investment in its communities and generate desirable employment opportunities for its residents.

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c. Business Activity

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	523	519	0	0	0
Arts, Entertainment, Accommodations	31,081	34,009	9	8	-2
Construction	12,689	17,692	4	4	0
Education and Health Care Services	52,502	60,922	16	14	-2
Finance, Insurance, and Real Estate	28,020	31,375	8	7	-1
Information	8,015	10,634	2	2	0
Manufacturing	35,758	45,436	11	11	0
Other Services	13,266	16,051	4	4	0
Professional, Scientific, Management Services	40,736	56,503	12	13	1
Public Administration	359	366	0	0	0
Retail Trade	40,566	50,933	12	12	0
Transportation and Warehousing	15,257	18,902	5	4	0
Wholesale Trade	25,602	44,966	8	10	3
Total	304,374	388,308	--	--	--

Table 45 – Business Activity

Data Source: 2006-2010 ACS (Workers), 2010 Longitudinal Employer-Household Dynamics (Jobs)

Labor Force

Total Population in the Civilian Labor Force	428,533
Civilian Employed Population 16 years and over	398,008
Unemployment Rate	7.12
Unemployment Rate for Ages 16-24	20.82
Unemployment Rate for Ages 25-65	4.86

Table 46 – Labor Force

Data Source: 2006-2010 ACS

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Occupations by Sector

Occupations by Sector	Number of People
Management, business and financial	117,170
Farming, fisheries and forestry occupations	17,221
Service	28,825
Sales and office	69,602
Construction, extraction, maintenance and repair	27,216
Production, transportation and material moving	20,716

Table 47 – Occupations by Sector
Data Source: 2006-2010 ACS

Travel Time

Travel Time	Number	Percentage
< 30 Minutes	211,498	57%
30-59 Minutes	117,578	32%
60 or More Minutes	41,493	11%
Total	370,569	100%

Table 48 – Travel Time
Data Source: 2006-2010 ACS

d. 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	19,696	2,176	8,359
High school graduate (includes equivalency)	60,389	5,127	16,152
Some college or Associate's degree	92,413	6,418	18,208
Bachelor's degree or higher	160,061	6,910	28,180

Table 49 – Educational Attainment by Employment Status
Data Source: 2006-2010 ACS

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Educational Attainment by Age

	Age				
	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
Less than 9th grade	1,423	3,035	4,004	6,005	6,553
9th to 12th grade, no diploma	6,590	4,894	4,547	7,746	7,611
High school graduate, GED, or alternative	18,725	18,032	20,120	43,534	29,170
Some college, no degree	26,337	19,682	20,600	45,202	18,434
Associate's degree	2,836	6,619	8,434	16,602	3,661
Bachelor's degree	10,311	31,320	34,043	58,584	14,650
Graduate or professional degree	449	13,653	18,884	38,777	9,928

Table 50 – Educational Attainment by Age
Data Source: 2006-2010 ACS

Educational Attainment – Median Earnings in the Past 12 Months

Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	\$22,177
High school graduate (includes equivalency)	\$31,388
Some college or Associate's degree	\$39,658
Bachelor's degree	\$56,070
Graduate or professional degree	\$78,565

Table 51 – Median Earnings in the Past 12 Months
Data Source: 2008-2012 ACS

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

The business activity varies across DuPage County but the primary two job sectors are management in business of financial and sales positions. Additional job opportunities are in service, construction, and production and result in roughly 66% of all jobs, based on Table 45 above. The location of most municipalities, surrounding counties, and access to public transportation creates a unique environment of residents that live in the County but work in the various business sectors of Chicago and surrounding counties or vice versa.

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The economy is slowly recovering and based off the most recent data shown in Table 46 the unemployment rate is 7.12%, but when the rate is recalculated using only workers with an age of 24-65, the rate drops to only 4.86%. The unemployment rate for workers between the ages of 16-24 is 20.82%, possibly suggesting that retail and service jobs, the primary jobs for this age bracket, is still in a process of recovering and difficult to find. The latter part of the age bracket, workers recently graduated from college between the ages of 21-24, may have difficulty finding entry level jobs because companies are still cutting back on hiring as the economy slowly recovers.⁵⁴

f. Describe the workforce and infrastructure needs of the business community:

DuPage County is still in the process of recovering from the economic downturn that affected the nation in the late 2000s. When comparing the unemployment rate of DuPage County, 5% to the State of Illinois, 6.7% and also the Country, 5.9%, DuPage County has the lowest of the three. Despite this low rate, the County still needs a strong supply of workforce and infrastructure supports. The need to increase the rate of pay is almost as important as reducing the unemployment rate.⁵⁵

The cost of living in DuPage County is the highest in the state of Illinois and ranks highly when compared to the rest of the country.⁵⁶ Workforce training creates opportunities for lower earning workers to develop the skills necessary to earn higher wages. Higher education also provides opportunities to earn a higher wage, but the need for continued affordable higher education becomes more difficult as the cost of education rises, an increase of roughly 1200% since records were kept.⁵⁷

⁵⁴ United States. U.S. Department of Commerce. United States Census Bureau. *2009-2013 American Community Survey 5-Year Estimates*. N.p., Feb. 2013. Web. 29 Oct. 2014.

⁵⁵ United States. U.S. Department of Commerce. United States Census Bureau. *2009-2013 American Community Survey 5-Year Estimates*. N.p., Feb. 2013. Web. 29 Oct. 2014.

⁵⁶ *A County Level Regional Cost of Living Index for Illinois* (May, 2004): 1-22. Web. 12 Dec. 2014

⁵⁷ Jamrisko, Michelle, and Ilan Kolet. "Cost of College Degree in U.S. Soars 12 Fold: Chart of the Day." *Bloomberg News*. N.p., 08 Aug. 2012. Web. 25 Nov. 2014.

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Lastly, a strong infrastructure of viable and modern buildings suitable for a wide variety of businesses will continue to promote growth in local downtown areas and business parks across the County creating a circle of constant reinvestment.

g. 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.

DuPage County is a mostly developed region with only 5% of land currently undeveloped according to a 2009 Land Use Analysis Report.⁵⁸ Of the 5% of land undeveloped, only 50% is planned for areas zoned for business. The remaining portion will be mostly residential construction and open space. This small percentage of available undeveloped land is important, but the majority of new development will result from teardowns and rehabs of aging buildings in developed areas.

In addition to major investments and new developments, for two decades, DuPage County has been experiencing significant and ongoing demographic changes, marked by substantial increases in the number of residents with incomes that place them at or near the Federal Poverty Level. These changes are due to the characteristics of new county residents, as well as changes in the types of jobs available. Further, the aging of the baby boom generation is causing increases in the number of seniors.

As this trend continues, the impact may force companies to change their business models. Future developments in both commercial and residential construction may need to accommodate a larger aging population. Public sector investments may also need to shift resources to adjust for the changes taking place.

Choose DuPage has completed an analysis of industry clusters and identified emerging, leading, and maturing industry clusters in DuPage County. Highlights from that analysis found that the Business & Financial cluster and Transportation & Logistics are leading industry clusters in the

⁵⁸ DuPage County. Department of Economic Development. *DuPage County 2009 Land Use Analysis and Trends*. Wheaton IL, 60187: DuPage County, 2009. Print.

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county. The county has several emerging clusters including Education, Arts and Entertainment, and Apparel and Textiles. Information Technology & Telcom is the second largest cluster in the county and is heavily concentrated in the county. Similarly, Advanced Materials, Manufacturing, and Printing & Publishing are considered mature clusters because although they are heavily concentrated in the county they did experience job loss over the study period. The Cluster Report is available at www.choosedupage.com. Projected highlights are:

- Twenty-two manufacturing and related industries are projected to grow in DuPage County over the next three years including several of the largest employing industries including Machine Shops (4%), and Printed Circuit Assembly Manufacturing, (11%).
- Testing Laboratories and Surgical & Medical Equipment Manufacturing are among the potentially emerging industries with average employment growth projected to be 3% and 7% respectively.
- Twenty-seven professional and financial firms are projected to grow in DuPage County over the next three years including several large employment industries including computer systems design services (9%), consulting services (9%), and engineering services (3%).
- Consulting service industries are among the potentially emerging industries with average employment growth to be around 5%.

h. Describe any needs for workforce development, business support or infrastructure these changes may create.

The *Choose DuPage* report goes on to state that “Each cluster contains a skilled workforce from life sciences, financial management, computer technology, to production and manufacturing. DuPage County population is well educated. Over 45% have a bachelor’s degree or higher, while 91% of residents have a high school degree or higher. Many of the clusters require highly skilled workers especially in Professional Services like engineering and life sciences, information technology and advanced manufacturing. Over twenty percent of the county’s workforce is employed in occupations considered to be vital in high-technology clusters. There are approximately twenty institutions of higher learning in DuPage County; including some satellite campuses.”

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Increases in the need for employees in these high growth industries will require continued higher education and development of a highly skilled workforce.

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

Employment opportunities in DuPage County are diverse and require a wide range of skills. The majority of jobs in a developed area with a high median income require higher education and the County jurisdiction fits this characteristic. As stated above, the jurisdiction's population is well educated, with more than 45% of the workforce holding a bachelor's degree or higher and more than 91% holding a high school diploma. Choose DuPage works to bring high-paying jobs in manufacturing to DuPage County to employ residents with lower levels of education. Modern manufacturing, however, often requires technology skills.

Analysis of the US Census numbers shows that as workers achieve higher education their likeliness of being unemployed is reduced and their average yearly income rises. A review of job percentage shares by looking at the number of workers and jobs available by sector shows Education and Healthcare sectors with the largest growth over the next five years. As the population average rises the increased need and growth of healthcare services will continue to rise creating opportunities for career advancement and higher wages to qualified workers. The County works with agencies that provide information and resources on the importance of job training and education and encourages workers to strive to higher levels of education.

Through WIA grants, workNet DuPage offers training in information technology, manufacturing, office and administrative work, CDL driving, and accounting.

j. 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 following entities and initiatives support the jurisdiction's Consolidated Plan by providing workforce and employment resources. Because of these resources, DuPage County is able to utilize the grant funds governed by this Consolidated Plan for housing, infrastructure, and public services, rather than economic development/workforce training activities.

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The DuPage Workforce Board is a business-led policy and decision-making body created under the Workforce Investment Act (WIA) with a mandate to: create a workforce development system that meets the needs of employers for qualified workers; and expand employment opportunities for residents. The Workforce Board functions as a convener, an innovator, and a facilitator of strategic partnerships between the private sector, non-profit agencies, educational institutions, local elected officials, local government agencies, labor, and job training and education programs. Workforce Board members are appointed by the Chief Elected Official of DuPage County, in accordance with criteria established by the Governor of Illinois. Its strategic plan includes youth development, innovative regional workforce system, and sector strategies. Collaborative partners include: Choose DuPage, DuPage County Community Services, College of DuPage, IL Department of Employment Security, DuPage Community Foundation, I.U.O.E. Local 399, DuPage Housing Authority, Parents Alliance Employment Project, IL Department of Human Services, Regional Office of Education and the IL Division of Rehabilitation Services. The Workforce Board additionally acts as a guide and advisor to the workNet DuPage Career Center.

The **workNet DuPage Career Center** has a mission of “training, developing, and connecting the local workforce.” They serve both job seekers and employers. For job seekers, there are resources to make the connections to employers, as well as training and workshops. Youth employment is also an initiative of workNet DuPage. Additionally, workNet DuPage administers the Workforce Investment Act (WIA) education grants available in DuPage County.

k. Does your jurisdiction participate in a Comprehensive Economic Development Strategy (CEDS)?

DuPage County, through its Community Development Commission, has not participated in a Comprehensive Economic Development Strategy (CED) in the past. The County reviewed its allocation of resources and although job creation, training, and retainage are a major component to expand the economy and reduce the unemployment rate, there are no plans to create a CED in the 2015-2019 ConPlan. This decision was made based off results from municipal and community needs resident surveys that showed economic initiative planning as a low priority. Staff reviewed projected funding for the next five years, the costs to administer these activities,

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the possible outcomes, and determined a CED would not be the best use of limited funding over the next five years.

l. 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 incentives that impact economic growth.

DuPage County Community Development will not undertake economic development initiatives.

The local and regional plans that impact economic growth are:

- *Choose DuPage Industry Cluster Report, 2014* – previously discussed.
- *GO TO 2040*, the comprehensive regional plan developed by the Chicago Metropolitan Agency for Planning (CMAP). Created in 2005, CMAP is the official regional planning organization for the northeastern Illinois counties of Cook, DuPage, Kane, Kendall, Lake, McHenry, and Will. *GO TO 2040* establishes coordinated strategies that help the region's 284 communities address transportation, housing, economic development, open space, the environment, and other quality of life issues.

m. Discussion

At the following link, **workNet DuPage** has listed the top certifications and skills seen in job advertisements in DuPage County during the fourth quarter of 2014. This covers the fields of Information Technology, Logistics, Manufacturing, Accounting/Finance, Office/Admin, Management and Healthcare. Obtaining many of these certifications and skills can be accomplished through the WIA training grant program or through referrals to training providers for specific skills such as College of DuPage, College of Lake County, Symbol Training Institute, Daley College, Elgin Community College, Harper College, Jane Addams Resource Center and the Joliet Junior College.

<http://www.worknetdupage.org/job-seekers/top-certifications-skills-dupage-county.html>

In summary, as previously discussed, the collaborative effort of Choose DuPage, the Workforce Development Board, and workNet DuPage seeks to bring economic and job growth to DuPage County, match the skills of job seekers with the requirements of employers, and provide training and education for residents to become employed or to advance in their employment and careers.

10. Needs and Market Analysis Discussion

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

HUD defines a “racially concentrated area of poverty” (RCAP) as a census tract that meets the following criteria: a family poverty rate that is either $\geq 40\%$ OR $\geq 300\%$ of the metro tract average (whichever is lower) AND a majority non-white population ($>50\%$). The *Fair Housing and Equity Assessment for Metropolitan Chicago* released by CMAP in November, 2013, states that data was available for 216 census tracts in DuPage County, 24 of those tracts had populations that were majority minority, and 2 tracts were identified as RCAPS. The RCAPS are located near Bensenville, Addison, Lombard, Glen Ellyn, West Chicago, and Oak Brook (some in unincorporated areas), with the non-white population composed of mostly Hispanic and Asian populations.

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

The availability of more affordable, multi-family housing units have attracted lower-income households to these areas. The market in these areas/neighborhoods would not vary from the overall DuPage market.

c. Are there any community assets in these areas/neighborhoods?

These areas are all located along major transportation routes (either highway or train line). All these areas are served by retail, transportation, recreational opportunities, and adequate food resources. All are served by neighborhood schools. One major difference in community assets between these areas and other areas in DuPage would be the school achievement levels. For example, Bensenville SD2 states 62% low-income students, 35% English learners, and a 56% ISAT score. West Chicago ESD 33 states 61% low income students, 51% English learners, and a 41% ISAT score. Addison school district states 65% low-income students, 30% English learners, and a 48% ISAT score. Contrast this with non-RCAP areas such as Wheaton/Warrenville District 200 (75% ISAT score) and Naperville Indian Prairie District (80% ISAT score).

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d. Are there other strategic opportunities in any of these areas?

The data suggests that the strategic opportunity would be development of English skills for non-English speaking households in these areas. These efforts are already underway through Neighborhood Resource Centers located in these areas. There are two resource centers in Addison, and West Chicago has several through partnerships between Outreach Community Services and Wheaton Bible Church. DuPage County has been running the York Community Resource Center (unincorporated Lombard) for several years and has recently begun a partnership with Outreach Community Services to bring more resources and more opportunities into this geographic area. Increased language services is part of that vision.

DRAFT



STRATEGIC PLAN

This section identifies the priority needs and describes the strategies that the County will undertake to address these needs.

DRAFT

V. Strategic Plan

1. Overview

The County, through its Community Development Commission, and through partnerships with local municipalities, townships, and nonprofit agencies identified general priorities for allocating funds to meet a large variety of needs facing almost 1 million residents. The strategic plan describes how the County will distribute funding over the next 5 years by assigning weighted values to different activities to ensure residents of the most need and lowest income are served in an efficient and unbiased matter. The plan will also address obstacles to meeting goals and the accomplishments the County desires to complete.

Appendix B is the memorandum approved by the Community Development Commission Executive Committee on December 2, 2014 that explains the County's funding rationale and specific projects.

Via HUD NOTICE CPD-14-015 HUD has provided Grantees "Guidance on Submitting Consolidated Plans and Annual Action Plans for Fiscal Year (FY) 2015". This guidance instructs the County not to submit its consolidated plan / action plan until after HUD announces the FY 2015 formula allocation amounts. Since the exact grant amounts are unknown at the time of posting this draft plan (January 2, 2015) the anticipated HUD resources are estimates, and as such, the County may add, subtract or transfer amounts among identified projects without publishing a substantial amendment. In the event that actual grant amounts are more or less than anticipated, contingency provisions include:

- Reduce or increase public service amounts to remain within the 15% HUD cap;
- Reduce or increase the \$232,396 single-family rehabilitation amount;
- Reduce or increase the \$80,000 set-aside for closing costs;
- Three Capital projects and four Neighborhood Investment projects are fully funded with amounts split between 2015 and 2016 program year funds. Amounts for the 2015 program year may be increased or decreased when the actual grant amounts are provided by HUD.

HUD has issued a "Waiver of 24 CFR 570.200(h) regarding FY 2015 Action Plans Community Development Block Grant (CDBG) Program". This waiver allows the County to incur eligible

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costs prior to the award of FY 2015 funding. In the event that award of FY 2015 funding is delayed, the County intends to utilize this waiver to the extent necessary to treat the effective date of the grant agreement as the program year start date (April 1, 2015) or the date that the consolidated plan / action plan (with actual allocation amounts) is received by HUD, *whichever is earlier*.

2. Geographic Priorities

a. Describe the basis for all allocating investments geographically within the jurisdiction

A project must be located in a HUD defined low-moderate income block group of at least 35.83% if it is serving a defined service area. The most recent figures provided by HUD will be used until newer data is released. The most recent HUD figures were provided June 10, 2014 with an effective date of July 1, 2014. The size of block groups has increased when compared to the size of the block groups used in 2000. Staff will determine if the project location reasonably coincides with the block group area. If the service area does not reasonably coincide with the block group area then a HUD- approved income certification process must be completed. Service areas with a higher percentage concentration of low income residents will generally be a higher priority. Figure SP-1A & SP-1B below provides a map of the DuPage County Low/Moderate Income Data.

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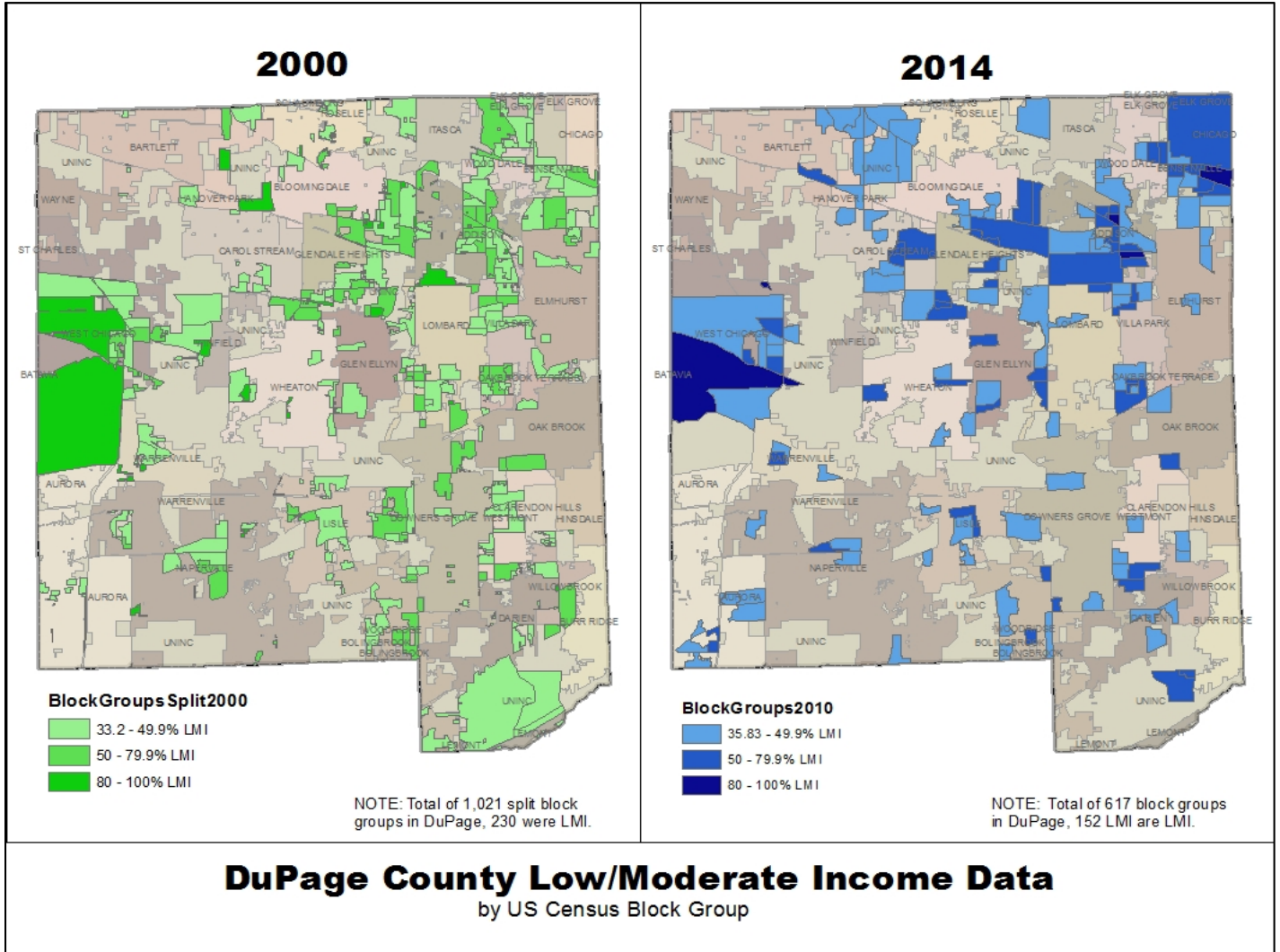
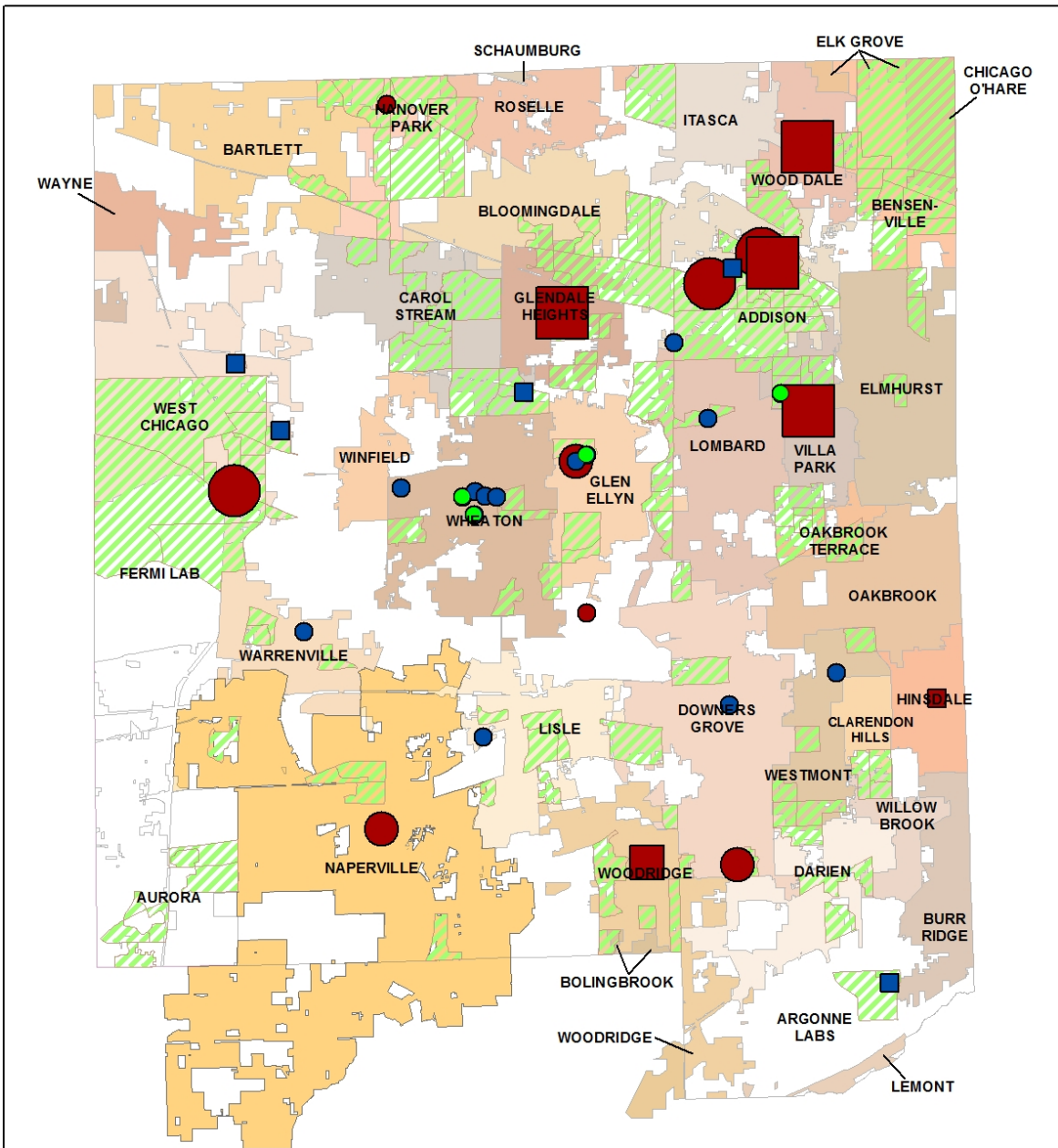


Figure SP-1

2015 PROJECT LOCATIONS WITHIN DUPAGE COUNTY CONSORTIUM



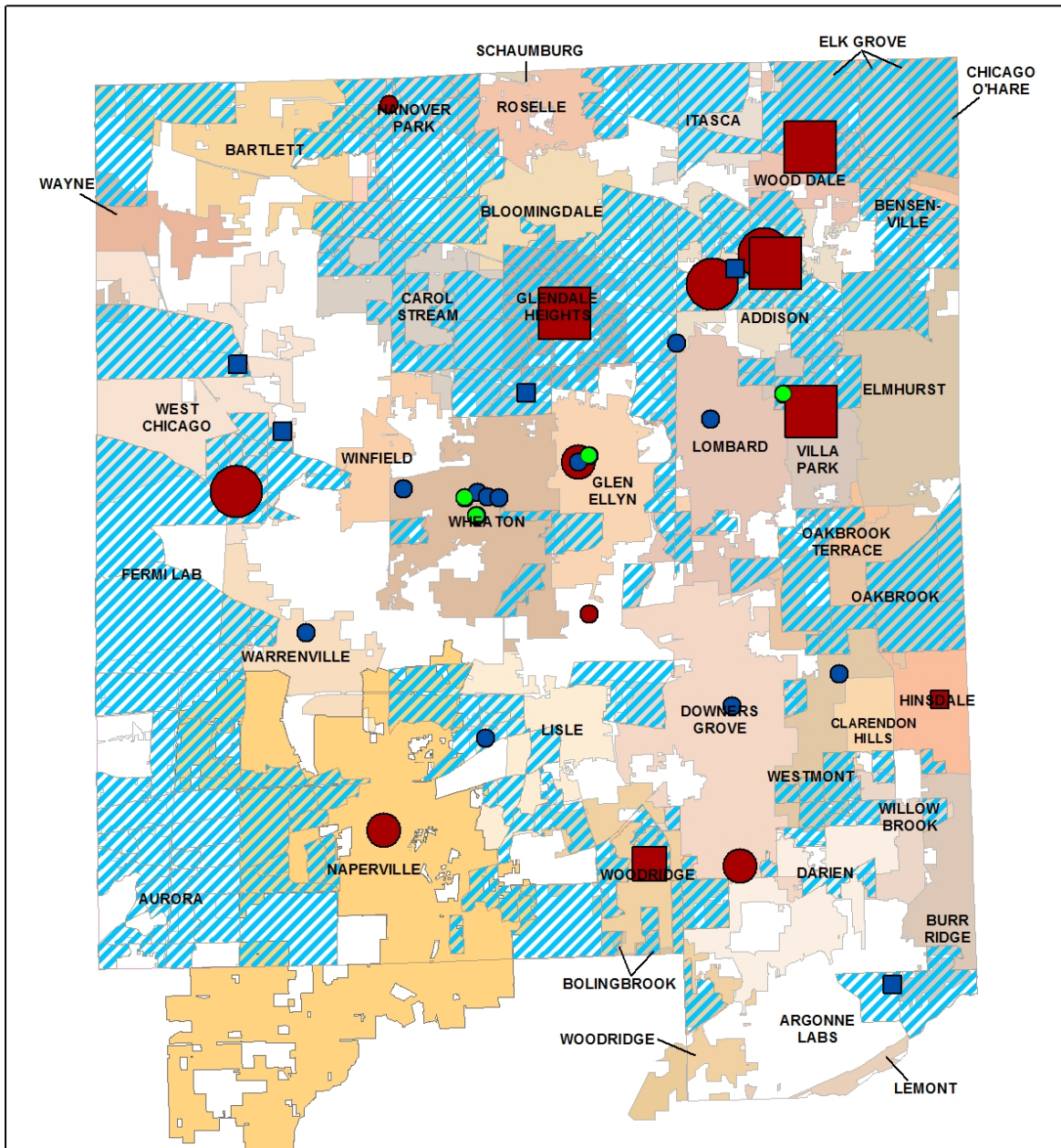
<ul style="list-style-type: none"> CDBG - Capital Projects CDBG - Public Service Projects ESG Projects County Wide Projects Local Projects 	<ul style="list-style-type: none"> \$50,000 or Less \$50,001 to \$200,000 More Than \$200,000 	<ul style="list-style-type: none"> Low-Moderate Income Block Groups Within DuPage County (Greater than 35.83% LMI) <p style="font-size: small;">The accuracy of this map is limited to quality of data contained in other public records. This is not a substitute for an actual field survey or field investigation. Census 2010 data.</p>
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DuPage County Community Development Commission. December 2014

Figure SP-1B

2015 PROJECT LOCATIONS WITHIN DUPAGE COUNTY CONSORTIUM



<ul style="list-style-type: none"> CDBG - Capital Projects CDBG - Public Service Projects ESG Projects County Wide Projects Local Projects 	<ul style="list-style-type: none"> \$50,000 or Less \$50,001 to \$200,000 More Than \$200,000 	<ul style="list-style-type: none"> Block Groups with Higher Than County Average (28.9%) Minority Populations (2013 ACS 5YR)
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The accuracy of this map is limited to quality of data contained in other public records. This is not a substitute for an actual field survey or field investigation. Census 2010 data.



DuPage County Community Development Commission. December 2014

Figure SP-1C

3. Priority Needs

Priority Needs Summary

Figure SP-2A Community Development Needs		
Priority Community Development Needs	Priority Level Need	Dollar to Address Unmet Need
Community Development Needs		
Water/Sewer Improvements	High	\$21,748,218
Street Improvements	High	\$36,547,154
Sidewalks	High	\$2,264,567
Parks / Recreational Facilities	High	\$3,590,000
Flood Drain Improvements	High	\$3,137,875
Other Infrastructure	High	\$14,149,000
Tree Replacement	High	\$3,295,000
Solid Waste Disposal Improvements	Low	\$65,000
ADA Compliance Needs	Low	\$2,255,000
Streetlights	Low	\$2,308,000
Neighborhood Facilities	Low	\$580,000
Other Public Facilities	Low	\$5,000,000
Economic Development		
C / I Land Acquisition	Low	\$5,255,000
C / I Infrastructure Development	Low	\$1,200,000
C / I Building Acq / Const / Rehab	Low	\$2,060,000
ED Assistance to For-Profits	Low	\$4,000,000
ED Technical Assistance	Low	\$400,000
Micro Enterprise Assisitance	Low	\$0
Other C / I Improvements	Low	\$530,000
Planning		
Planning	Low	\$220,000
Total Estimated Dollar Needed:		\$108,604,814

*Other Infrastructure needs consist of sanitary / flood mitigation projects

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Public Service Perception of Needs

Figure SP-2B New Multipliers for Non-Profit Agency Community Needs						
Category	Service	Rank Multiplier	Max Points Available	#1 Activity's Rank Multiplier in 30 pts	New Multiplier	Priority
Health & Safety	Substance Abuse Services Need	19.58	30.0	153	30.0	High
	Culturally and Linguistically Appropriate Mental Health Services Need	14.5	30.0	153	22.2	High
	Child Abuse Counseling / Advocacy Need	12.97	30.0	153	19.8	High
	Basic Needs (Food, Clothing, Medical) Need	11.19	30.0	153	17.1	High
	Medical Care for Uninsured Need	9.83	30.0	153	15.0	Low
	Domestic Abuse Services Need	6.82	30.0	153	10.4	Low
	Sexual Assault Services Need	6.76	30.0	153	10.3	Low
Life Skills	Employment Services - Job Readiness Need	16.7	30.0	179	30.0	High
	Budget / Financial Counseling Need	10.64	30.0	179	19.1	Low
Housing	Affordable Rental Units Need	27.56	30.0	108	30.0	High
	Emergency Rent, Mortgage, and Utility Assistance Need	25.19	30.0	108	27.4	High
	Supportive Housing Need	25.02	30.0	108	27.2	High
	Rehab of Owner Occupied Units Need	18.7	30.0	108	20.3	High
	Legal Counsel (Homelessness Prevention) Need	16.25	30.0	108	17.7	Low
	Shared Housing Need	14.67	30.0	108	15.9	Low
	Emergency Shelter Need	13.5	30.0	108	14.7	Low
	First Time Homebuyer Assistance Need	2.91	30.0	108	3.2	Low
	Lead Hazard Screening Services Need	-4.84	30.0	108	0.0	Low
Seniors and Persons with Disabilities	Transportation Need	23.43	30.0	128	30.0	High
	Caregiver Counseling and Respite Services Need	19.61	30.0	128	25.1	High
	Child Care Services Need	18.62	30.0	128	23.9	High
	Youth Services Availability	17.78	30.0	128	22.8	High
	Legal Counsel (Benefits, Legal Documents, etc.) Need	16.4	30.0	128	21.0	Low
	Senior Services Need	16.24	30.0	128	20.8	Low
	Home Health Care Need	14.6	30.0	128	18.7	Low
	Handicapped Services Need	13.16	30.0	128	16.9	Low
	Home Delivered Meals Need	9.21	30.0	128	11.8	Low

Figure SP-2B

The County utilized an on-line tool to conduct a survey of municipal and township needs of Public Facilities and Improvements. The survey was launched March 31, 2014 to 9 townships and 31 municipalities. Two split place municipalities (Batavia and Lemont) that are partially located in Du Page County were not included because such a small portion of their respective populations are located in DuPage County. The communities of Aurora and Bolingbrook were

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not included because they are both considered entitlement communities and receive their own CDBG funding.

The survey consisted of both narrative style and ranking questions to determine the most need in each community. The ranking questions were sorted and high and low priorities were established. In order to achieve an acceptable response rate, emails were sent out on March 31, 2014 to the Mayors, Administrators, or Directors of Community Development of each community depending on the set up of each respective government. Reminders were sent June 11, 2014 and several technical assistance calls were taken to assure the correct data was collected. This effort resulted in 16 completed surveys out of 40 possible responses. More details on the methodology can be found in the Needs Assessment Section NA-50.

In addition to the municipal survey conducted, the County also utilized an on-line tool to conduct a survey of non-profit agencies to determine needs of residents for public services and improvements. The CDC felt the existing non-profits and neighborhood resource centers would have the best idea on the services needed since they work with clients on a regular basis, hear their stories, and determine the needs of the community. Over 30 topics were surveyed including needs for basic goods and services, domestic and substance abuse client services, senior, homeless, and numerous other issues. Each topic was quantified, assigned a point value, and declared either as a high or low priority. The 4 highest priorities identified were:

- Substance Abuse Services
- Employment Services
- Affordable Rental Unites
- Affordable Transportation

Because the survey documented ongoing unmet need, the CDC will continue to fund the HUD allowed maximum of 15% of CDBG funds for public services and will also continue to offer funds for capital projects for non-profit agencies to make improvements on their existing properties to improve or increase the service to their respective clients. More details on the methodology can be found in the Needs Assessment Section NA-50 and each survey can be

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found in Appendix C. A complete table of the Non-Profit Agency Community Needs can be found in the Needs Assessment, table NA-7.

4. Influence of Market Conditions

a. Influence of Market Conditions by Affordable Housing Type

Affordable Housing Type	Market Characteristics that will influence the use of funds available for housing type
Tenant Based Rental Assistance (TBRA)	The need for such a program has increased because of the number of homeless persons and families in homeless shelters in DuPage County. Discussions with DuPage PADS and the DuPage County Health Department indicate that there are homeless persons, families, and those with disabilities who would be able to leave the shelter system if they could obtain rental assistance. The waiting list for vouchers through the DuPage Housing Authority is lengthy. DuPage County has not made significant progress in assisting renters at the 0-30% MFI level, which is a high priority need. The DuPage Continuum of Care Coordinated Assessment Process will also be able to document the needs of persons suitable for the TBRA program. For these stated market conditions, DuPage County has been working to develop a TBRA program and will implement it during the Consolidated Plan period. This discussion of market conditions and the TBRA certification signed as part of this Consolidated Plan and Action Plan in accordance with 24 CFR 91.425(a)(2)(i) shall be considered a fulfillment of 24 CFR 92.209(b) <i>General requirement</i> for the use of HOME funds for TBRA.
TBRA for Non-Homeless Special Needs	Persons will be accepted in to the TBRA program discussed above, based on their eligibility under the program plan and policies.
New Unit Production	The County estimates 190 new units will be created or preserved in the next 5 years. A majority of new construction projects offering affordable housing utilize a mix of Low-Income Housing Tax Credits, Private Loans, Grants, and HOME funds provided by the County. Of the units created, all units will affordable to incomes less than 60% MFI with additional set asides from the total new units to specifically serve households at less than 50% (20 units) and households at less than 30% (10 units).
Rehabilitation	The current owner occupied rehabilitation program will be utilizing a more focused approach concentrating on assisting eligible homeowners to correct code violations, health and safety issues, and increase energy efficiency. Priority will be given to seniors and persons with disabilities. The County estimates 60 households will be served if funding remains constant over the next 5 years.
Acquisition, including preservation	The County offers assistance for qualified low income new homebuyers. In the previous 5 years, the County assisted 91 families by providing down payment assistance and closing cost grants. Policy changes have been implemented to limit the amount of funding a household can receive in the last 3 years, making additional funds available for more households. The County predicts 100 households can be assisted with down payment assistance if funding remains constant and market conditions remain favorable for homebuyers.

Table 54 – Influence of Market Conditions

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5. Anticipated Resources

a. Anticipated Resources

The County anticipates receiving annual funding for CDBG, HOME, and ESG funds from the Department of Housing and Urban Development. Funding fluctuates on an annual basis, and the amount of CDBG and HOME funds have dropped 18% and 37%, respectively, since 2010. Staff allocates funds to several different categories depending on the needs of the communities. In addition to general administration, planning, and fair housing, the County expects to fund the following categories:

Housing

These funds include owner housing (buyer programs and owner occupied rehab), renter housing (acquisition, new construction, and rehab), and special needs housing for seniors or persons with disabilities (acquisition, new construction, and rehab).

Neighborhood Investment and Public Facilities

Funds will be used for projects such as water, sewer, and street improvements, in low-moderate income neighborhoods, removal of architectural barriers; and public facility improvements for special needs populations.

Homeless

Funds are used for all points on the continuum of care for persons who are homeless including rapid rehousing, prevention of homelessness, emergency shelters, and street outreach. Funds are also used to help support the HUD required Homeless Management Information System (HMIS).

Other Public Services

Funds are also provided to seven neighborhood resource centers and programs that provide legal assistance, substance abuse treatment, and foreclosure prevention.

Community Development Block Grant – Disaster Recovery (CDBG-DR)

DuPage County has been awarded two allocations of CDBG-DR funds. DuPage County was required to publish an Action Plan for the purpose of receiving a Community Development

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Block Grant-Disaster Recovery Grant (CDBG-DR) in the amount of \$7,000,000 in accordance with the Disaster Relief Appropriations Act, 2013 (Public Law 113-2). The U.S. Department of Housing and Urban Development guidance for the funding was published December 16, 2013 in the Federal Register as Docket No. FR-5696-N-07 (the “Notice”) with an effective date of December 23, 2013. On June 3, 2014, a supplemental allocation of \$18.9 million was published in the Federal Register as Docket No. FR-5696-N-09 (“Second Notice”) with an effective date of June 9, 2014. This brings the total allocation to DuPage County to \$25.9 million. These funds are being made available to assist disaster recovery efforts in response to a declared major disaster occurring in DuPage County in April, 2013. These funds can be used only for specific disaster recovery-related purposes.

The funds are currently programmed to the following activities and national objectives. Since the program is just beginning and additional needs may be identified (or identified needs may not exist to the extent funds have been programmed), amendments to the below scheduled are anticipated over the course of the funding.

DuPage County CDBG-DR Budget	Programming of Funds		National Objective	
	1st Allocation	2nd Allocation	Low/Mod	Urgent Need
Administration	350,000	945,000	N/A	N/A
Planning	140,000	378,000	N/A	N/A
Strategic Buy-Out	2,700,000	3,297,000	2,700,000	3,297,000
HMGP Buy-Out Match		1,250,000	300,000	950,000
Rehab/Mold Remediation	300,000		300,000	
Carol Stream - Klein Creek Watershed Flood Control Plan/ Armstrong Park Facility	3,010,000	3,500,000	6,510,000	
Municipal Activities	500,000	1,500,000	500,000	1,500,000

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Bloomingtondale - Springbrook Culvert		450,000		450,000
Villa Park - Downtown Green Infrastructure		1,000,000		1,000,000
Warrenville - West Branch River Restoration & Flood Mitigation		4,400,000	4,400,000	
Westmont - Liberty Park Improvement		1,000,000		1,000,000
Glen Ellyn - Lake Ellyn Outlet		245,000		245,000
Glen Ellyn - Perry's Pond		275,000		275,000
Villa Park - Sugar Creek Watershed Improvement		550,000		550,000
Winfield - Winfield Creek Watershed Plan		110,000		110,000
TOTALS	\$7,000,000	\$18,900,000	\$14,710,000	\$9,377,000
				At least 50% of funds must meet Low/Mod National Objective

Figure SP-3 – DuPage County CDBG-DR Budget

DuPage County has developed and will maintain a website regarding all disaster recovery activities assisted with these funds. All documents related to the CDBG-DR funds are posted on the website at <http://www.dupageco.org/cdbg-dr/>. A link to the website is also featured prominently on, and is easily navigable from, the County’s homepage at www.dupageco.org (please see CDBG Disaster Recovery under Quick Links on the left hand side of the page).

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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	Pre-populated	\$3,493,505	\$101,807	\$287,595	\$3,882,907	\$13,584,618	CDBG Funds will be used to support community development programming in low and moderate income neighborhoods. Programs include neighborhood investment, acquisition, capital rehabilitation, and public services and improvement.

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HOME	Public - Federal	Pre-populated	\$1,312,014	\$321,980	\$602,646	\$2,236,640	\$4,323,430	HOME funds will be used to develop affordable housing for low-income residents. Projects will include new construction, rehab, TBRA, and homebuyer assistance.
ESG	Public - Federal	Pre-populated	\$255,126	-0-	-0-	\$255,126	\$1,020,504	ESG funds will be used to assist homeless individuals with shelter services, transitional housing, and rapid re-housing services.

Table 55 – Anticipated Resources

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

The CDBG Program regulations do not require matching funds. DuPage County, however, requires that CDBG funded neighborhood investment projects including road, sewer, sidewalk, tree removal, and other infrastructure improvements provide at least 25% leveraging on the part of the applicant for a project to be eligible. Additional points are awarded in the application process for providing additional leveraging. A funding request may not exceed \$400,000 in order to provide assistance to additional community residents.

DuPage County requires that CDBG funded removal of barriers to improve accessibility activities provide at least 50% leveraging on the part of the applicant for a project to be eligible. Additional points are awarded in the application process for providing additional leveraging. A funding request may not exceed \$50,000 in order to provide assistance to additional community residents.

DuPage County does not require CDBG funded capital improvement and acquisition of property activities for non-profit agencies to provide additional leveraging or match, however additional points are awarded during the application process, if such leveraging is provided. A funding request may not exceed \$400,000 in order to provide assistance to additional community residents.

The HOME Program regulations require a 25% match. DuPage County does not require match on a project by project basis, as some projects do not have the ability to produce 25% match. Other projects are able to provide more than 25% match, often through donated land and/or materials. By balancing projects that can provide match with those that cannot, the overall match requirement is monitored and met. Additional funding (leveraging) is supplied by Low Income Housing Tax Credits, private funding, and a number of other funding sources.

The ESG Program regulations require 100% match. This requirement is met by DuPage County general funds distributed for homeless programs through the County's Human Services Grant Fund and through private foundation and United Way grants.

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

One of the highest priorities for the CDBG-DR funds was construction of flood control measures and a reservoir at Armstrong Park in Carol Stream. DuPage County now owns the parcel on which this facility is being constructed to meet the identified need in this neighborhood. The County does not own any other specific parcels of land that could be used to address the needs identified in this plan; however, many of the needs identified in this plan will be met utilizing lands publicly owned by municipalities within DuPage County.

d. Discussion

The County will continue to utilize a competitive application process and diversification of funds across multiple activities to ensure that the highest priority projects are funded that serve the lowest income populations. Local funding and minimum matching requirements will continue to be required to ensure funding is diversified across multiple agencies and municipalities. The County will continue to review the needs of the residents and adjust funding where needed over the next five years and adjust if funding is reduced.

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6. Institutional Delivery Structure

a. 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
Prairie State Legal Services	Subrecipient	Homelessness Non-homeless special needs	Jurisdiction
Midwest Shelter for Homeless Veterans	Subrecipient	Homelessness	Jurisdiction
NAMI of DuPage	Non-profit org	Non-homeless special needs	Jurisdiction
St. Irene Church	Community/faith-based org	Homelessness Non-homeless special needs	Jurisdiction
Bridgeway of Bensenville	Community/faith-based org	Non-homeless special needs	Jurisdiction
Teen Parent	Non-profit org	Non-homeless special needs	Jurisdiction
St. Patricks	Community/faith-based org	Non-homeless special needs	Jurisdiction
Block Affordable Housing	Affordable housing consultant	Affordable housing owners	State
PACT	Non-profit org	Non-homeless special needs	Jurisdiction
NIFB	Non-profit	Non-homeless special needs	Jurisdiction

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Family Shelter Service	Subrecipient	Homelessness Non-homeless special needs	Jurisdiction
New Community Ministries	Non-profit org	Non-homeless special needs	Jurisdiction
Wellness House	Non-profit org	Non-homeless special needs	Jurisdiction
Sharing Connections	Non-profit org	Non-homeless special needs	Jurisdiction
IL Advocates for the Deaf-Blind	Non-profit org	Non homeless special needs	State
DuPage Housing Authority	Government	Homelessness	Jurisdiction
Ecumenical Adult Day Care	Non-profit org	Non-homeless special needs	Jurisdiction
Alden Foundation	Private industry subrecipient	Non-homeless special needs	region
Naperville CARES	Non-profit org	Homelessness non-homeless special needs	Jurisdiction
Trinity Services	Non-profit	Non-homeless special needs	Jurisdiction
St. Paul Lutheran Wheaton	Community/faith-based org	Homelessness Non-homeless special needs	jurisdiction
American Red Cross Greater Chicago Area	Non-profit org	Non-homeless special needs	Region
Helping Hand Rehab Center	Non-profit org	Non-homeless special needs	Jurisdiction

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Outreach Community Ministries	Non-profit org	Homelessness, Non-homeless special needs, Public services	jurisdiction
Rosecrance Foundation	Non-profit org	Non-homeless special needs	Region
Equity Sharing Partners	Subrecipient	Affordable housing owners	Jurisdiction
The Community House	Subrecipient	Non-homeless special needs	Jurisdiction
Liberty Village	Private industry	Affordable housing rental	Jurisdiction
Marklund Children's Home	Non-profit org	Non-homeless special needs	Jurisdiction
Easter Seals DuPage and Fox Valley	Non-profit org	Non-homeless special needs	Region
Mayslake Village	Non-profit org	Affordable housing rental	Region
Wayne/Winfield Area Youth/Family Service	Non-profit org	Non-homeless special needs	Jurisdiction
Hope for Tomorrow, Inc	Non-profit org	Non-homeless special needs	Region
Linscott Park Developments	Private industry	Affordable housing owners	State
YWCA Metropolitan Chicago	Non-profit org	Non-homeless special needs	Region
Kids in Need	Non-profit org	Non-homeless special needs	Nation
Cupertino Home	Non-profit org	Non-homeless special needs	Jurisdiction

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Almost Home Kids	Subrecipient	Non-homeless special needs	Jurisdiction
Senior Home Sharing	Non-profit org	Affordable housing rentals	Jurisdiction
Bluestem Housing Partners	Non-profit org	Affordable housing owners rental	State
Bridge Communities	Subrecipient	Homelessness non-homeless special needs	Jurisdiction
First Church of Lombard	Comm/faith-based org	Non-homeless special needs	Jurisdiction
Hope Fair Housing Center	Subrecipient	Homelessness Non-homeless special needs	Jurisdiction
360 Youth Services	Subrecipient	Homelessness Non-homeless special needs	Jurisdiction
Kindred Guardian Services	Private industry	Non-homeless special needs	Jurisdiction
Little City	Subrecipient	Non-homeless special needs	Jurisdiction
Childserv	Non-profit org	Non-homeless special needs	Region
Robert Crown Center for Health Education	Non-profit org	Non-homeless special needs	Jurisdiction
Humanitarian Service Project	Non-profit org	Non-homeless special needs	Jurisdiction
YMCA of Metro Chicago	Non-profit org	Non-homeless special needs	Region

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DuPage Federation	Non-profit org	Homelessness public services	Jurisdiction
DuPage Senior Citizens Council	Non-profit org	Non-homeless special needs, Public services	Jurisdiction
Serenity House Counselling Services	Subrecipient	Homelessness Non-homeless special needs	Jurisdiction
Little Friends	Subrecipient	Non-homeless special needs	Jurisdiction
DuPage United - Faith Lutheran Church	Community/faith-based org	Non-homeless special needs,	Jurisdiction
Access Community Health Network	Non-profit org	Non-homeless special needs, Public services	Jurisdiction
Spectrios Institute for Low Vision	Non-profit org	Non-homeless special needs	Jurisdiction
Naperville Area Humane Society	Non-profit org	Non-homeless special needs	jurisdiction
Exodus World Services	Non-profit org	Non-homeless special needs	Jurisdiction
Educare of West DuPage	Non-profit org	Non-homeless special needs	Nation
West Suburban Community Pantry	Non-profit org	Non-homeless special needs	Jurisdiction
Tabor Hills Health Care Facility	Non-profit org	Non-homeless special needs	Jurisdiction
Loaves and Fishes Community Pantry	Non-profit org	Non-homeless special needs	Jurisdiction
Metropolitan Asian Senior Services	Non-profit org	Non-homeless special needs	Jurisdiction

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Samaritan Interfaith Counseling Center	Non-profit org	Non-homeless special needs	Jurisdiction
Tri-Town YMCA	Non-profit org	Non-homeless special needs	jurisdiction
Breaking Free	Non-profit org	Non-homeless special needs	Jurisdiction
Youth Outlook	Non-profit org	Non-homeless special needs	Jurisdiction
Access DuPage	Non-profit org	Non-homeless special needs	Jurisdiction
Downers Grove Community Church	Community/faith-based org	Non-homeless special needs	Jurisdiction
Dupage Habitat for Humanity	Non-profit org	Non-homeless special needs	Jurisdiction
G and A Senior Residence of Addison	Private industry	Affordable housing rental	Jurisdiction
Metropolitan Family Service	Non-profit org	Non-homeless special needs	Jurisdiction
Adult Christian Care	Community/faith-based org	Non-homeless special needs	jurisdiction
Neighborhood Food Pantries	Community/faith-based org	Non-homeless special needs	Jurisdiction
DuPage Homeownership Center	Non-profit org	Affordable housing ownership	Jurisdiction
Elmhurst Walk-In Ministry	Community/faith-based org	Non-homeless special needs	Jurisdiction
People's Resource Center	Subrecipient	Non-homeless special needs, Public services	Jurisdiction

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Full Circle Communities	Non-profit org	Affordable housing rental	Region
Greater Chicagoland Fellowship	Non-profit org	Affordable housing owners rental, public service	Region
Northeastern Illinois Area Agency on Aging	Non-profit org	Non-homeless special needs, public service	Region
Family Focus DuPage	Non-profit org	Non-homeless special needs, Public service	Jurisdiction
St. Joan of Arc Church	Community/faith-based org	Non-homeless special needs, public service	Jurisdiction
Operation Support Our Troups - Illinois, Inc	Non-profit org	Non-homeless special needs, public services	State
Outreach Community Services	Subrecipient	Homelessness, public services	jurisdiction
DuPage Legal Aid	Non-profit org	Non-homeless special needs	Jurisdiction
Lutheran Child & Family	Community/faith-based org	Non-homeless special needs	State
Chinese Mutual Aid Society	Non-profit org	Non-homeless special needs	Region
Our Children's Homestead	Non-profit org	Non-homeless special needs	Region
Aging and Disability Foundation	Non-profit org	Affordable housing owners, rental	State
Parents Alliance Employment Project	Non-profit org	Non-homeless special needs	Jurisdiction

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Hamdard Center	Non-profit org	Non-homeless special needs, public services	Jurisdiction
First United Methodist Church	Community/faith-based org	Non-homeless special needs, public services	Jurisdiction
We Grow Dreams Greenhouse & Garden Center	Non-profit org	Non-homeless special needs	Jurisdiction
Literacy Volunteers of America-DuPage Inc.	Non-profit org	Non-homeless special needs	Jurisdiction
HCS Family Services	Non-profit org	Non-homeless special needs	Jurisdiction
Lutheran Social Services of Illinois	Community/faith-based org	Non-homeless special needs	State
Franciscan Ministries	Community/faith-based org	Affordable housing rental, non-homeless special needs	Region
Catholic Charities	Subrecipient	Homelessness, non-homeless special needs	Region
UCP Seguin	Subrecipient	Non-homeless special needs	Jurisdiction
Canticle Ministries	Community/faith-based org	Non-homeless special needs	Jurisdiction
Glen Ellyn Food Pantry	Non-profit org	Non-homeless special needs	Jurisdiction
New Directions Housing Corp	Non-profit org	Affordable housing owners, rental, homelessness, non-homeless special needs	Region

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West Suburban Association for the Retarded	Non-profit org	Non-homeless special needs	Jurisdiction
Optimum Management Resource	Not enough info		
Community Career Center	Non-profit org	Non-homeless special needs	Jurisdiction
Evangelical Child & Family Agency	Community/faith-based org	Homelessness, Non-homeless special needs	Region
Fellowship Church of Carol Stream	Community/faith-based org	Non-homeless special needs	Jurisdiction
World Relief DuPage	Community/faith-based org	Non-homeless special needs	Region
Community Housing Advocacy and Development (CHAD)	Subrecipient	Affordable housing owners, rental	Region
Ray Graham Association	Subrecipient	Non-homeless special needs	Jurisdiction
DuPage Pads	Subrecipient	Homelessness	Jurisdiction
Yorkville Food Pantry	Non-Profit Organization	Non-homeless special needs	County Wide
Addison Neighborhood Resource Center	Subrecipient	Non-homeless special needs	Neighborhood Jurisdiction
DuPage County Convalescent Center	Subrecipient	Non-homeless special needs	County Wide
Cornell Interventions	Private industry	Non-homeless special needs	Jurisdiction

Table 56 – Institutional Delivery Structure

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b. Assessment of Strengths and Gaps in the Institutional Delivery System

DuPage County is home to over 300 non-profit agencies that assist the residents of not only DuPage County, but surrounding counties across northern Illinois. Numerous agencies have collaborated over the years to serve the ever changing issues by forming partnerships and working together to produce top quality programs and services. DuPage County, through its Community Development Commission, has funded millions of dollars to several of these agencies in the past and will continue to select applications that serve the lowest income and special populations. The County will also continue to provide resources to residents in need through the units in the Community Services Department: Senior Services, Adult Protective Services, Psychological Services, Family Center (Neutral Exchange & Parenting Help), the York Community Center, LIHEAP, Weatherization, Family Self Sufficiency Program, client services for housing needs and Community Development.

Despite the work by each agency located within DuPage and the service the County offers, gaps in assistance still exist. Every year the number of applications for funding exceeds the dollar amount available and nonprofit agencies are in continued need of additional fundraising to meet the needs of their clients. DuPage County is fortunate to have a network of private and non-profit agencies that are community based, knowledgeable, and have sufficient capacity to carry out a variety of programs and services to residents in need. Many of these services are also targeted to homeless persons, as indicated on the following table.

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c. 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
Homelessness Prevention Services			
Counseling/Advocacy	X	X	X
Legal Assistance	X	X	X
Mortgage Assistance	X		
Rental Assistance	X	X	
Utilities Assistance	X	X	
Street Outreach Services			
Law Enforcement	X		
Mobile Clinics	X		
Other Street Outreach Services	X	X	
Supportive Services			
Alcohol & Drug Abuse	X	X	
Child Care	X		
Education	X	X	
Employment and Employment Training	X	X	
Healthcare	X	X	X
HIV/AIDS	X		
Life Skills	X	X	X
Mental Health Counseling	X	X	X
Transportation	X		

Table 57 – Homeless Prevention Services Summary

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

Chronically homeless individuals and families and families with children: DuPage County responds to those who become homeless through coordination with emergency shelters, domestic violence shelters, transitional housing programs, educational & legal services partners & the community. The DuPage Continuum of Care (CoC) provides information and access points for emergency housing assistance to health care programs including mental health, hospitals, substance abuse treatment and health clinics. Our homelessness prevention and rapid rehousing agencies, emergency shelters, domestic violence shelters and transitional housing programs case managers and counselors explore and assess each client’s disabling conditions; referring and

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linking to resources for further assistance when warranted. Our emergency shelters coordinate services with the Health Department, Medical Providers and Educational partners to identify, engage, assess and comprehensively serve those who are chronically homeless or at-risk who may have special needs.

Veterans and their families: Creating new permanent housing for veterans is a CoC priority. The Midwest Shelter for Homeless Veterans is a primary provider of veterans housing and services. They operate the only VA grant and per diem housing program in DuPage County. Midwest Shelter also conducts a weekly street outreach program to identify unsheltered veterans. Clients are referred as needed to Hines Veterans Hospital for both medical care and case management and Midwest Shelter for housing and services. The Dept. of Veterans Affairs at Hines hospital is a critical linkage providing primary medical, psychiatric, and substance abuse treatment. They visit the shelters to meet homeless veterans and explain programs and benefits. The IL Dept of Veterans Affairs helps apply for veterans benefits/entitlements such as pension, disability, etc. Prairie State Legal Services also provides assistance with applications to mainstream services including Social Security benefits for those who are homeless regardless of Veteran status.

Unaccompanied youth: 360 Youth Services provides a transitional housing program to service homeless young adults struggling with maintaining independence and who currently have no place to reside.

e. 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

The strengths of the DuPage service delivery system are the collaborations that exist between DuPage County, the Continuum of Care, and the faith-based community. Case Managers across all these sectors connect clients to mainstream benefits and assist program participants in gaining employment, improving education/job skills, learning budgeting skills, initiating savings plans, locating stable housing & accessing medical, dental, credit, and legal help. The county also offers Tenant Landlord Rights education includes information on fair housing and other issues to increase successful tenancy. Improvements in data collection and reporting through the HMIS

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over the last five years have also resulted in the ability to make better data driven decisions in delivery of services and to document services received by homeless persons. There continues to be a gap in the number of beds needed for permanent supportive housing, as well as the accompanying need for services to persons with mental illness.

f. 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

There are currently two strategies in the process of being implemented to help fill this gap. The first is a new 30,000 square-foot Mental Health Community Center that is under construction on the DuPage County campus. This facility is a collaboration between NAMI-DuPage and the DuPage County Health Department. This facility will serve as a regional hub for the network that provides support for the mentally ill. Among the services will be employment programs and housing referrals and supports to place people with mental illness in suitable residential settings. It will also house “The Living Room” which will provide a non-medical setting where people experiencing extreme agitation or anxiety can receive help de-escalating their symptoms with the goal of providing alternatives to emergency room visits and incarceration to keep the mentally ill from harming themselves or others. The second strategy is the implementation of a coordinated assessment system, as now required for the Continuum of Care. Service providers have been setting up a best practice model through the Needs Assessment Committee of the Continuum of Care which will better place homeless persons and those at risk of homelessness in appropriate housing.

7. Goals Summary

a. Goals Summary Information

Table 58 identifies goals for the next five years (2015-2019). The projected persons assisted was determined based on the currently funded projects and the projected funding the County will receive over the next five years. The projected persons assisted number may be adjusted based on changes in funding.

Goal	Description	Category	Outcome	Objective	Priority Needs Addressed	Projected Persons Assisted
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#1 – Viable Urban Community - Infrastructure	Infrastructure Improvements	Non-Housing Community Development	Sustainability	Create Suitable Living Environments	Neighborhood Investment – Water, Sewer, and Street	16,200
#2 – Suitable Living Environment – Non-Profit Capital	Public Facilities Capital Improvements	Non-Housing Community Development	Availability / Accessibility	Create Suitable Living Environments	Neighborhood Investment – Public Facilities	9,700
#3 – Suitable Living Environment – Spec. Needs Facility	Construction and Rehab of Special Needs Facilities	Non-Homeless Special Needs	Availability / Accessibility	Create Suitable Living Environments	Neighborhood Investment – ADA Compliance and Public Facilities	15
#4 – Viable Urban Community – Public Service	Public Service – Non-Housing	Public Services Including NRCs	Availability / Accessibility	Create Suitable Living Environments	H&S Child Abuse and Life Skills – Budget and Financial Consulting	21,800
#5 – Provide Decent Housing – Public Service	Public service - Housing Benefit	Affordable Housing	Affordability	Provide Decent Affordable Housing	Housing – First Time Homebuyer Assistance	1,800
#6 – Provide Decent Housing – New Rental	Construct Affordable Rental Units	Affordable Housing	Affordability	Provide Decent Affordable Housing	Housing – Affordable Rental Units Need	230
#7 – Provide Decent Housing – Rehab Rental Units	Rehab Affordable Housing	Affordable Housing	Affordability	Provide Decent Affordable Housing	Housing – Affordable Rental Units Need	60
#8 – Suitable Living Environment – Homeless	Provide Interim and Overnight Housing	Homeless	Availability / Accessibility	Create Suitable Living Environments	Housing – Emergency Shelters	6,300
#9 – Suitable Living Environment – Homeless Prevention	Homeless Prevention Services in Courts and Facilities	Homeless	Availability / Accessibility	Create Suitable Living Environments	H&S – Substance Abuse and Mental Health Services, Housing – Legal Counsel	7,800
#10 – Provide Decent Housing – Single	Rehabilitation of Owner Occupied Homes	Affordable Housing	Affordability	Provide Decent Affordable Housing	Housing – Rehab of Owner Occupied Units Need	35

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Family Rehab						
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Table 58 – Goals Summary

c. 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)

During the five year period of this consolidated plan, DuPage County estimates that 190 new rental units will be created or preserved. Of the units created, all units will be affordable to incomes less than 60% MFI with additional set asides from the total units to specifically serve households at less than 50% (20 units) and households at less than 30% (10 units). *During the five year period of this consolidated plan, DuPage County estimates assisting 60 households at 80% or less of MFI through its first-time homebuyer program.*

8. Public Housing Accessibility and Involvement

a. Need to increase the number of accessible units (if required by a Section 504 Voluntary Compliance Agreement)

DuPage County currently does not have any public housing units. The Housing Choice Voucher program seeks to provide safe, decent and affordable housing to the citizens of DuPage County; but to fully meet the needs of the community, the special needs of certain populations must be considered. Some of these populations include the elderly, persons with intellectual or physical disabilities, the homeless, veterans, and persons with mental illness or other impairments that require specific on-site support services. To meet these needs, the DuPage Housing Authority issues Project Based Vouchers (PBV). A PBV provides a rental subsidy for a specific unit in a building. Any person who is income eligible and resides in that unit will receive the subsidy. If that individual moves out of the unit, the next person who moves into that unit receives the subsidy. A PBV is attached to a unit while a traditional HCV is attached to the head of household.

b. Activities to increase resident involvements?

This question is not applicable.

c. Is the public housing agency designated as troubled under 24 CFR part 902?

This question is not applicable.

d. Plan to remove the “troubled” designation

This question is not applicable.

9. Barriers to Affordable Housing

a. Barriers to affordable housing and strategies to remove or ameliorate the barriers to affordable housing

In developing a strategy for the creation of affordable housing, multiple barriers have been identified pertaining to new development, particularly of rental units, and helping residents find housing:

Local Planning and Zoning

Zoning regulations are divided up between each municipality across the Consortium boundaries. Each municipality has different regulations, and depending on the community, the opportunities to construct affordable housing are sometimes limited. The County encourages all municipalities to incorporate zoning regulations and long term planning efforts to further affordable housing in all areas of the community. These types of planning and zoning changes can often receive negative backlash from the community and form “NIMBY, not in my back yard” thoughts that make it difficult for changes to take place.

Building Codes

Building regulations are essential to protect the health and safety of citizens and the welfare of the community. Municipalities administer building regulations within their borders, and the County administers building regulations in the unincorporated areas.

While building codes have positive contributions, these codes can contribute to higher construction costs. An analysis of building codes has not been completed for this Comprehensive Housing Affordability Strategy (CHAS), nor has there been an analysis of the potential effectiveness of building codes modifications on making housing more affordable. However,

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actions that can be taken by individual jurisdictions to further affordable housing and help minimize any negative impacts of restrictive building codes may include the following:

- Encouraging fast-track or one-stop permit processing. Such a process has become more difficult during the past few recessionary years as many municipalities have outsourced permitting and inspections, causing additional delays in processing.
- Promoting the use of time-saving and cost-saving techniques within reasonable health and safety parameters
- Providing technical assistance, information and other support to local communities
- Encouraging affordable housing by using development controls (i.e., the zoning ordinance and subdivision regulations) to pursue this goal

Fragmented Local Government Structure

The land area of DuPage County is governed by 39 independent municipalities, and County government for the unincorporated areas. A five-year strategy for addressing affordable housing issues would not be complete without some discussion of the complexity that results from the cumulative impact of land use and development decisions that are made by multiple units of government. This complexity, seen here as a possible obstacle that will need special attention in the formulation of strategies, can contribute to housing affordability problems in multiple ways.

First, independent units of local government, each governing a relatively small portion of the Consortium area, make it difficult to plan for housing diversity and balance with job growth. Communities that have concentrations of affordable housing will plan for increasing diversity by encouraging less affordable housing. Communities with shortages of affordable housing often find it difficult (due to market forces and community attitudes) to plan for lower cost housing.

Additionally, implementing strategies to address affordable housing needs is difficult in an environment with multiple independent units of government. For example, incentives for

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affordable housing production, if implemented in only one or two municipalities and not comprehensively, may not have the effect they intend. A positive incentive (attractive to developers) may result in such housing being concentrated in a few areas rather than countywide. A negative incentive (such as extra requirements to encourage more affordable housing) may simply not be effective since builders can just go to other jurisdictions. Therefore, the development of strategies for encouraging new affordable housing opportunities requires a cooperative approach.

The countywide planning process, mentioned above, is a framework for such an approach, but it is clear that the implementation of strategies will need to encourage all units of government to participate in the solution.

Costs

As DuPage County reaches a “built out” state, there are fewer parcels available for development. Parcels that are available may still be available because of barriers to development (for example, located in a flood plain). As buildable land becomes more scarce, the price of land becomes prohibitive. Construction costs also continue to rise, as Illinois Prevailing Wage does not allow the exemptions for small housing projects that could be realized under the HOME program. Past construction budgets would indicate an approximately 30% higher cost when prevailing wage must be paid on a small construction project.

Housing the Most Difficult Populations

Criminal background has become one of the most difficult obstacles to overcome in obtaining any housing.

b. Strategy to Remove or Ameliorate the Barriers to Affordable Housing

Homeownership is becoming slightly more attainable as the economy slowly improves, more jobs are available, and the price of some homes remains affordable in several areas throughout the County and the DuPage Homeownership Center continues to develop strategies for

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homeownership. The number of households able to participate in the DuPage Homestead program has been increasing over the last two years and is projected to stay strong.

The barriers described above most often pertain to development of new rental units. DuPage County will continue to collaborate with municipal community development departments through the Community Development Commission to seek solutions to permitting and inspection situations.

It is also important to note that issues that affected “affordable” housing often are also “fair housing issues” because they are experienced by protected classes. The County will continue to fund agencies that specialize in the legal areas of affordable housing. HOPE Fair Housing is also funded by CDBG dollars. HOPE’s mission is “to create greater housing opportunities for all. We want to ensure everyone has the chance to live in the community/home/apartment of their choice free from discrimination based on race, color, religion, national origin, sex, disability, familial status, or any other characteristics protected under state or local laws. HOPE accomplishes this through education, outreach, enforcement, training, and advocacy.”

Because the obstacles are becoming more difficult, DuPage County Community Development is partnering with HOPE on a “DuPage Area Housing Dialogue – Creating Community Solutions” event in February, 2015. This event will invite all housing stakeholders to collaboratively identify housing issues/obstacles and brainstorm feasible plans that work to ensure the housing needs of residents are met – both now and in the future. It is hoped that this one day event will grow into an ongoing conversation and strategies among non-profits, housing developers, providers of special needs housing, banks, realtors, the faith community, and government to address the barriers head on.

10. Homelessness Strategy

a. Reaching out to homeless persons (especially unsheltered persons) and assisting their individual needs

The DuPage Continuum of Care (COC) provides outreach to those in need with multiple information and access points for emergency assistance. Faith and community based

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organizations and local education agencies are made aware of available housing and emergency assistance and participate in joint planning. Information is available to the public through wide distribution of printed brochures, web-based information systems, an Information & Referral Hotline & a 24-hour housing hotline. Free legal representation is available at Eviction Court. CoC agencies partake in community fairs, “clinics” or walk-in events designed to engage unsheltered persons in services. Other efforts such as street outreach & meal-only service at the shelter target unsheltered homeless persons. The DuPage Health Dept. participates in these efforts to engage the unsheltered for placement in their chronically homeless beds.

Persons calling the DuPage Information & Referral Hotline are screened for housing risk and homelessness followed by an in-depth telephone assessment of housing status, risks and opportunities. Agencies prioritize those who are homeless for expedient services. The CoC’s Homelessness Prevention Providers (HPP) develops standard protocols for screening, and eligibility determination. Case Managers complete assessments to determine the best way to assist an applicant regain stability in their current housing; to achieve stability as they move to new permanent housing or, for those in emergency shelters or who are unsheltered, to move as quickly as possible into permanent housing and achieve stability.

With proper authorization, coordination of services is standard through use of the Homeless Management Information System (HMIS).

b. Addressing the emergency and transitional housing needs of homeless persons

Persons identified as homeless will be connected with easy-to-access housing providers within CoC agencies strategically located throughout the County.

As with homelessness prevention services, when no other housing option is available, persons may be connected with financial and supportive services with the goal to both secure and establish stability in permanent housing. Assistance provided may include: assistance with rental application fees, security deposits, last month’s rent, utility deposits and payments, moving costs, case management, landlord-tenant mediation and credit repair.

To secure housing, the DuPage County Community Services can offer a housing packet which includes local housing resources, information on non-profit landlords and web- based resources

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for a broader search. Use of the Shared Housing Program expands housing resources by matching “seekers” with housing “providers”; in some cases, “rent” can be paid via services to the provider.

DuPage County dedicates nearly all of its public service funding cap under the Community Development Block Grant to shelter and transitional housing operation and essential services. Additionally, Community Development Block Grant funds are used to produce or preserve units of transitional and permanent supportive housing.

c. 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.

In coordination with emergency shelters, domestic violence shelters, transitional housing programs, educational & legal services partners & the community, we will respond to those who become homeless.

The CoC provides information and access points for emergency housing assistance to health care programs including mental health, hospitals, substance abuse treatment and health clinics. Our homelessness prevention and rapid rehousing agencies, emergency shelters, domestic violence shelters and transitional housing programs case managers and counselors explore and assess clientele’s disabling conditions; referring and linking to resources for further assistance when warranted. Our emergency shelters coordinate services with the Health Department, Medical Providers and Educational partners to identify, engage, assess and comprehensively serve those who are chronically homeless or at-risk who may have special needs.

Creating new permanent housing beds for disabled veterans is a CoC priority. The Midwest Shelter for Homeless Veterans is a primary provider of veterans housing and services. They operate the only VA grant and per diem housing program in DuPage County. Midwest Shelter

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also conducts a weekly street outreach program to identify unsheltered veterans. Clients are referred as needed to Hines Veterans Hospital for both medical care and case management and Midwest Shelter for housing and services. The Dept. of Veterans Affairs at Hines hospital is a critical linkage providing primary medical, psychiatric, and substance abuse treatment. They visit the shelters to meet homeless veterans and explain programs and benefits. The IL Dept of Veterans Affairs helps apply for veterans benefits/entitlements such as pension, disability, etc. Prairie State Legal Services also provides assistance with applications to mainstream services including Social Security benefits for those who are homeless regardless of Veteran status.

Assessments interviews and assistance application assess income and expenses to ensure ability to maintain housing. Case Managers connect clients to mainstream resources and provide case management service beyond the assistance. Case management services assist program participants in gaining employment, improving education/job skills, learning budgeting skills, initiating savings plans, locating stable housing & accessing medical, dental, credit, and legal help. The county also offers Tenant Landlord Rights education includes information on fair housing and other issues to increase successful tenancy.

d. 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 CoC provides information and access points for emergency housing assistance to health care programs including mental health, hospitals, substance abuse treatment and health clinics. Our homelessness prevention and rapid rehousing agencies, emergency shelters, domestic violence shelters and transitional housing programs case managers and counselors explore and assess clientele's disabling conditions; referring and linking to resources for further assistance when warranted. Our emergency shelters coordinate services with the Health Department, Medical Providers and Educational partners to identify, engage, assess and comprehensively serve those who are chronically homeless or at-risk who may have special needs.

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The goal of the CoC is to eliminate homelessness in DuPage County by providing a comprehensive, seamless array of services that begin by preventing homelessness whenever possible and end with ensuring that every resident of this county has their basic needs of food, clothing, and housing met along with achieving their maximum level of self-sufficiency. Through a coordinated system of a small network of agencies, the Continuum of Care's Homeless Prevention Providers Committee develops best practices to assess, qualify and deliver services to operate efficiently and assist the maximum number of persons possible using both public and private resources. Access is essential; any person who needs emergency assistance to avoid homelessness will be able to obtain this assistance without location, cultural, or language barriers. Assessment is key to ensure the most effective use of homelessness prevention resources; standardized practices for eligibility determination and documentation exists across agencies. The provision of supportive services aids to prevent homelessness in the immediate situation as well as the long term. Coordination of services prevents duplication of effort among collaborative agencies and promotes cooperative planning and service delivery.

360 Youth Services provides a transitional housing program to service homeless young adults struggling with maintaining independence and who currently have no place to reside. "Formalized Systems Prevention Advocacy" is part of the CoC Plan to End Homelessness. Discharge protocols have been created for foster care, health care, mental health, and corrections.

The CoC is exploring options to make significant improvements to our standardized intake, assessment and follow up protocol. Using the HMIS system, this uniform assessment will gather data required as we respond to emergency needs.

11. Lead Based Paint Hazards

a. Actions to address LBP hazards and increase access to housing without LBP hazards

DuPage County experiences relatively few incidents of lead poisoning due to the large volume of newer housing in the county and effective regulations that address this issue. The non-profit survey conducted across the County identified lead paint issues as a low priority. The Illinois Department of Public Health – Childhood Lead Poisoning Prevention Program has primary responsibility for the education and screening activities relating to lead hazards. They provide

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four types of services, as described below, and will continue to provide these services throughout the period of this plan.

Screening: Identification of children with elevated blood lead levels ensures that appropriate medical follow-up occurs and adverse effects of lead poisoning are minimized. According to Illinois law, physicians are required to test all children ages 6 months through 6 years if they reside in a high-risk area, and they are required to be assessed if they reside in a low-risk area. The Illinois Lead Program recommends all children be assessed or tested as indicated at ages 12 months and 24 months using the program's Childhood Lead Risk Assessment Questionnaire. Illinois law directs child care facilities, pre-schools and kindergartens to require each parent or legal guardian of a child between the ages of 6 months through 6 years to provide a statement from a physician or health care provider that the child has been risk assessed if the child resides in an area defined as low risk by the Department or screened for lead poisoning if the child resides in an area defined as high risk.

Case Management: Children with confirmed venous elevated blood lead levels of 10 mcg/dL or higher are provided comprehensive case management. For children younger than 36 months of age, at confirmed venous levels of 10 mcg/dL and above and children older than 36 months of age at levels of 15 mcg/dL and above, public health nurses conduct home visits to educate families on ways to lower the blood lead level, including proper nutrition, hygiene and housekeeping. Home visits include a visual assessment of the residence to include education on other hazards in the home that could result in negative health effects.

Education/Training: Educational efforts focus on prevention methods and target high-risk groups. Lead poisoning awareness is increased by the distribution of educational materials, through various community-based outreach activities, annual health fairs, conferences, and coordination of training sessions. Training provides skills and knowledge to local health care providers related to lead poisoning prevention, treatment and reporting.

Dwelling Inspections: The Illinois Department of Public Health's Lead Program employs regional and local health department staff to inspect the dwellings of children who exhibit

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elevated blood lead levels. Homes with hazardous lead-based paint conditions are required to have the paint or the component that is coated with lead-based paint removed. The Department's Lead Program licenses lead paint inspectors, lead risk assessors, lead abatement contractors, lead supervisors, and lead workers. The Lead Program also approves lead training courses for individuals.⁵⁹

Lead Hazard Evaluation and Reduction in Existing Housing Programs

HUD's Lead Safe Housing Rule, 24 CFR 35, reflecting changes made by an amendment on June 21, 2004. These regulations form the basis of new standards for addressing lead hazards in existing housing programs. A technical amendment to this Rule took effect on June 21, 2004.

b. How are the actions listed above related to the extent of lead poisoning and hazards?

Proper inspections lower the risk of possible lead poisoning if the problem can be addressed before the family moves into a new house. For inspections where a family already lives in the unit, proper identification can also reduce the chance or trigger family members possibly poisoned to get proper treatment testing completed.

c. How are the actions listed above integrated into housing policies and procedures?

Assessment and Hazard reduction in Owner Occupied Rehab - Homeowners are provided informational brochures on lead safe renovation. For homes built prior to 1978, an XRF Lead Risk Assessment is conducted by a certified assessor. If lead is present, a grant of up to \$10,000 is provided to provide appropriate lead remediation, which is performed by properly licensed workers. Lead clearance testing is conducted.

Assessment and Hazard Reduction in Multi-Family Rehab - The application for HOME and CDBG rehabilitation funding documents the age of the structure to be rehabbed. For structures built prior to 1978, the applicant is required to include the results of lead testing with the application for funding. Proper lead remediation must be part of the project and clearance testing conducted. Lead clearance testing must be completed.

⁵⁹ Illinois Lead Poisoning Prevention and the Healthy Home." *Illinois Lead Program*. Illinois Department of Public Health, n.d. Web. 2 Nov. 2014

Homebuyer Programs, Rapid Re-Housing and Homelessness Prevention – each of these programs requires some level of visual inspection for units constructed prior to 1978 with properly performed remediation of any identified deteriorating paint.

12. Anti-Poverty Strategy

a. Jurisdiction goals, programs, and policies for reducing the number of poverty-level families.

DuPage County, when compared to the rest of Illinois, has experienced lower levels of poverty. According to the 2013 American Community Survey estimates, roughly 7% of households are defined as living in poverty and 3% of families are living in extreme poverty compared to roughly 13.7% of the total population of Illinois. Despite these lower numbers, over 60,000 residents continue to live in poverty in DuPage County and must rely on programs and additional resources to keep their home affordable to live in. The County is in full support of maintaining services to enhance the lives of all residents including low income, persons with disabilities, and others in need of assistance.⁶⁰

Goals:

The goals of DuPage County are to connect those in poverty with all available resources, ensure they are receiving all benefits to which they are entitled (including health care), and move persons to self-sufficiency to the extent they are able.

Programs available to assist in reducing the number of poverty-level families are:

Making the Connection resources available through the DuPage Federation on Human Services Reform which train human service providers in how to help unbenefited persons obtain mainstream benefits, food, and services under the Affordable Care Act.

Family Self Sufficiency – administered through DuPage County Community Services empowers individuals to take control of their lives so they may become independent, productive members of their community. FSS provides comprehensive case management, counseling, educational and

⁶⁰ United States. U.S. Department of Commerce. United States Census Bureau. *2009-2013 American Community Survey 5-Year Estimates*. N.p., Feb. 2013. Web. 29 Oct. 2014.

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employment planning, to help income eligible clients to reach their personal and professional goals.

Women, Infants, and Children Supplemental Nutrition Program (WIC) acts as an income supplement by providing healthy food, nutrition education, case management, and coordination with other needed services for those at a high risk of malnutrition. Additional programs supplied by the state and federal government assist by providing housing vouchers, healthcare assistance, supplemental nutrition (SNAP) and other family services such as violence and pregnancy prevention services.

Youth Housing Assistance Program (DCFS) – To help attain or maintain housing stability for youth who are currently or previously the legal responsibility of the Illinois Department of Children & Family Services.

Housing Counseling Programs – Housing Choice Partners of Illinois, Inc. works with area housing authorities to offer voucher families a wide range of housing choices throughout the metropolitan Chicago region. DuPage Homeownership Center provides housing counseling services to low and moderate-income individuals and families who are seeking credit repair, homeownership, or foreclosure prevention.

Illinois Affordable Assisted Living Initiative – was funded to develop assisted living units state-wide. As a result of this Initiative, there are currently supportive living facilities in DuPage County.

LIHEAP – administered through DuPage County Community Services and providing energy assistance to extremely low income households.

Programs which can assist with better utilization of resources, which in turn can help reduce the families living in poverty are:

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Affordable Housing Trust Fund (Illinois Housing Development Authority (IHDA))

Acquisition, rehab, new construction, home buyer assistance, rental assistance for affordable housing, supportive housing for homeless and special needs persons. The source of Trust Fund revenue is half of the state real estate transfer fee. The availability of funding from the Trust Fund has varied widely over the last few years, due to economic shortfalls in the State of Illinois budget.

Chicago Metropolitan Agency for Planning (CMAP) – Local Technical Assistance (LTA)

Program. CMAP was awarded a Sustainable Communities Regional Planning grant by HUD in October, 2010. With the grant, CMAP launched the LTA program. The following DuPage municipalities have ongoing planning projects funded through this grant: Addison, Bartlett, Bensenville, Carol Stream, Glen Ellyn, Hinsdale, Oak Brook, Villa Park, Wood Dale. DuPage County Department of Economic Development & Planning and the DuPage Water Commission have also received assistance.

Community Investment Corporation – Energy Savers Program. This energy audit program is available to owners of multifamily rental buildings containing at least five units. Low interest loans are available to initiate energy improvements.

Policies:

DuPage County will enact policies that build up the capacity of the non-profit community to leverage the resources available to reach its anti-poverty goals. To enact such policies, DuPage County dedicates local resources to Giving DuPage for the purpose of non-profit capacity building. DuPage County also dedicates \$1 million in local funding each year for the non-profit community with an emphasis on projects that build self-sufficiency and reduce poverty.

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

DuPage County will utilize CDBG funds for neighborhood investment projects to lower income neighborhoods. Capital rehab and acquisition projects are funded to further the mission of agencies, and salary reimbursement is provided to agencies to increase the number of individuals assisted.

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DuPage County will utilize HOME funds to maintain and increase the supply of affordable housing and provide tenant based rental assistance.

DuPage County will utilize ESG funds to support providers of shelter and service to homeless persons by funding street outreach, emergency shelter, homeless prevention, rapid re-housing and the Homeless Management Information System (HMIS)

DuPage County currently allocates \$1 million of local dollars each year to fund the Human Service Grant Fund. Numerous agencies are selected and provided reimbursement for salaries and programs that assist residents facing a variety of issues including poverty.

DuPage County supports Giving DuPage, a non-profit corporation that works to increase volunteerism and giving in DuPage County – directly building the capacity of multiple non-profit organizations that help residents facing the issues of poverty.

DuPage County currently allocates \$150,000 to the Northern Illinois Food Bank to provide food resources for poverty level seniors.

13. Monitoring

a. 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

Historically, the CDC has responded to changing conditions and needs of its community development partners. Changes to its application and selection process occur in order to emphasize a direct connection between activities funded and achievement of Consolidated Plan goals. This emphasis promotes measurement of outcomes of activities, and priorities are placed on activities that best achieve measurable movement toward ConPlan goals. To support this effort, the consortium will continue to:

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- Analyze and present changes in trends in housing and community development needs to policy makers.
- Evaluate the effectiveness of local organizations in implementing recommended strategies.
- Improve methods of measuring the outcomes of activities funded by the consortium's housing and community development programs.
- Recommend modifications that should be made in implementation strategies.

In addition to the measurement of progress on outcomes undertaken by the staff of the Community Development Commission, monitoring encompasses all aspects of program implementation.

Project Agreements: All agencies not part of County government (e.g., municipalities, non-profit groups, for profit companies, etc.) enter into an agreement with the County that sets the terms of the funding. For County departments, a Memorandum of Understanding is executed for a similar purpose. These agreements or memoranda of understanding outline the expectation for the submission of progress reports on a quarterly basis for public service project and on a monthly basis for capital and infrastructure projects. In an effort to lean the process, the County may change these monthly progress reports to quarterly reports.

Performance in Meeting ConPlan Objectives: The County is required to monitor its own performance in meeting the objectives of the Consolidated Plan. Using the information from progress reports, the County is able to produce an annual report that describes the overall progress in achieving ConPlan objectives.

Compliance with Program Requirements: For individual activities, the progress reports alert staff to program components that may need to be monitored closely for compliance issues and guidance is provided during implementation to assure compliance. The agreements specify that such guidance will be given. In addition, project sponsors activities subject to certain requirements such as procurement standards, Davis-Bacon labor requirements, or property acquisition requirements are required to submit key documents to the CDC office and receive clearance before proceeding, or before receiving payment on invoices. Finally, the CDC office

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requires project sponsors to submit audits of funded activities. These strategies help the County monitor compliance on an on-going basis.

Long-term Compliance of Housing Projects: HOME-assisted rental housing projects are inspected and monitored at the time they are under construction, at the time they are put into service and thereafter in accordance with the requirements of the HOME program. DuPage County has approximately 1,000 rental units in service that are located in 39 projects that require monitoring. Monitoring requires a physical inspection of a sample of units, as well as the overall building and grounds of the project; a review of tenant files for income eligibility and documentation compliance; and a review of the financial stability and ongoing viability of the project. The CDC office maintains an ongoing log of all such properties indicating the date when inspections and site visits are due. Homeownership units through the DuPage Homeownership Center are inspected both by an inspector on behalf of the homebuyer and County staff on behalf of the County.

Subrecipients: Monitoring of subrecipients begins during the project selection process and continues until the terms and conditions of the project agreement have been completed. The following policies and procedures are applied:

- A risk assessment is conducted to determine which subrecipients will require the most comprehensive monitoring. Low-risk subrecipients are organizations that have satisfactory past performance, little turnover of key staff members, and that receive no more than \$50,000. High-risk subrecipients are organizations with no past performance history, organizations receiving more than \$50,000, and/or organizations going through significant changes or turnover of key staff members.
- Applicants for funding through the CDC cluster process must attend a mandatory meeting with CDC staff at the beginning of the application process. CDC staff also meets individually with each applicant for housing funding, on site if possible.
- Applicants for funding must provide financial statements and budgets for the project, as well as for the entire organization. Audited financial statements are required at various stages of the application/funding process.

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- CDC staff conducts a set-up meeting to review expectations, procedures, and Federal requirements with each subrecipient at the beginning of each project (on site whenever possible).
- CDC staff conducts desk reviews through review of progress reports submitted for capital, infrastructure, and public service projects, and the back-up documentation required for each pay request.
- Low-risk subrecipients are monitored through at least one on-site visit during each program year.
- High-risk subrecipients are monitored through on-site visits as often as CDC staff deems necessary to evaluate project performance and ensure compliance with all Federal requirements. Length and complexity of the activity and the experience and capacity of the subrecipient are considered.

The County encourages Minority Business Enterprise (MBE) and Women Business Enterprise (WBE) participation in all programs covered by this Consolidated Plan. The County maintains a list of certified MBE / WBE contractors which is updated throughout the year and all participants are re-certified annually. See Appendix D for the current list. Bid specifications and advertisements utilized by subgrantees, subrecipients, and developers include language encouraging MBE / WBE participation. Likewise, the MBE / WBE list is provided to subgrantees, subrecipients, and developers prior to soliciting bids so that any companies on the list that provide the work being solicited are alerted to the opportunity to bid on the work. There is currently no minimum on the number of contracts that need to be awarded to each respective enterprise listed above. In addition to outreach to MBE/WBE/Section 3 for federally funded projects, the County also follows Davis Bacon and Illinois Prevailing wage requirements to ensure proper payment is paid to each worker.



FIRST YEAR ACTION PLAN

This section provides a concise summary of the actions, activities, and programs that will take place during the 2015 program year to address the priority needs and goals identified in the Strategic Planning section.

VI. First Year Action Plan

1. Expected Resources

This section provides a summary of the actions, activities, and programs that will take place during the 2015 program year to address the priority needs and goals identified in the Strategic Planning section. Appendix B is the memorandum approved by the Community Development Commission Executive Committee on December 2, 2014 that explains the County's funding rationale and specific projects.

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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	Acquisition Admin and Planning Economic Development Housing Public Improvement Public Services	\$3,493,505	\$101,807	\$287,595	\$3,882,907	\$13,584,618	CDBG Funds will be used to support community development programming in low and moderate income neighborhoods. Programs include neighborhood investment, acquisition, capital rehabilitation, and public services and improvement.

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HOME	Public - Federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental rehab New construction for ownership TBRA	\$1,312,014	\$321,980	\$602,646	\$2,236,640	\$4,323,430	HOME funds will be used to develop affordable housing for low-income residents. Projects will include new construction, rehab, and homebuyer assistance.
ESG	Public - Federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional Housing	\$255,126	-0-	-0-	\$255,126	\$1,020,504	ESG funds will be used to assist homeless individuals with shelter services, transitional housing, and rapid re-housing services.

Table 59 - Expected Resources – Priority Table

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

The CDBG Program regulations do not require matching funds. DuPage County, however, requires that CDBG funded neighborhood investment projects including road, sewer, sidewalk, tree removal, and other infrastructure improvements provide at least 25% leveraging from the applicant for a project to be eligible. Additional points are awarded in the application process for providing additional leveraging. A funding request may not exceed \$400,000 in order to provide assistance to additional community residents.

DuPage County requires that CDBG funded removal of barriers to improve accessibility activities provide at least 50% leveraging from the applicant for a project to be eligible. Additional points are awarded in the application process for providing additional leveraging. A funding request may not exceed \$50,000 in order to provide assistance to additional community residents.

DuPage County does not require CDBG funded capital improvement and acquisition of property activities for non-profit agencies to provide additional leveraging, however additional points are awarded during the application process, if such leveraging is provided. A funding request may not exceed \$400,000 in order to provide assistance to additional community residents.

The HOME Program regulations require a 25% match. DuPage County does not require match on a project by project basis, as some projects do not have the ability to produce 25% match. Other projects are able to provide more than 25% match, often through donated land and/or materials. By balancing projects that can provide match with those that cannot, the overall match requirement is monitored and met. Additional funding (leveraging) is supplied by Low Income Housing Tax Credits, private funding, and a number of other funding sources.

The ESG Program requires 100% match. This requirement is met by DuPage County general funds distributed for homeless programs through the County's Human Services Grant Fund and through private foundations and United Way grants.

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

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One of the highest priorities for the CDBG-DR funds was construction of flood control measures and a reservoir at Armstrong Park in Carol Stream. DuPage County now owns the parcel on which this facility is being constructed to meet the identified need in this neighborhood. The County does not own any other specific parcels of land that could be used to address the needs identified in this plan; however, many of the needs identified in this plan will be met utilizing land owned by municipalities within DuPage County.

c. Discussion

The County will continue to utilize a competitive application process and diversification of funds across multiple activities to ensure the best projects serving the lowest income and most in need are funded. Local funding and minimum matching requirements will continue to be required to ensure funding is diversified across multiple agencies and municipalities. The County will continue to review the needs of the residents and adjust funding where needed over the next 5 years and adjust if funding is reduced.

2. Annual Goals and Objectives

a. Goals Summary Information

Goal	Description	Category	Outcome	Objective	Priority Needs Addressed	Projected Persons Assisted
#1 – Viable Urban Community - Infrastructure	Infrastructure Improvements	Non-Housing Community Development	Sustainability	Create Suitable Living Environments	Neighborhood Investment – Water, Sewer, and Street	3,240
#2 – Suitable Living Environment – Non-Profit Capital	Public Facilities Capital Improvements	Non-Housing Community Development	Availability / Accessibility	Create Suitable Living Environments	Neighborhood Investment – Public Facilities	1,940
#3 – Suitable Living Environment – Spec. Needs Facility	Construction and Rehab of Special Needs Facilities	Non-Homeless Special Needs	Availability / Accessibility	Create Suitable Living Environments	Neighborhood Investment – ADA Compliance and Public Facilities	6
#4 – Viable Urban Community – Public Service	Public Service – Non-Housing	Public Services Including NRCs	Availability / Accessibility	Create Suitable Living Environments	H&S Child Abuse and Life Skills – Budget and Financial Consulting	4,360
#5 – Provide Decent Housing	Public service - Housing	Affordable Housing	Affordability	Provide Decent	Housing – First Time	360

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– Public Service	Benefit			Affordable Housing	Homebuyer Assistance	
#6 – Provide Decent Housing – Rehab Rental Units	Rehab Affordable Housing	Affordable Housing	Affordability	Provide Decent Affordable Housing	Housing – Affordable Rental Units Need	12
#7 – Suitable Living Environment – Homeless	Provide Interim and Overnight Housing	Homeless	Availability / Accessibility	Create Suitable Living Environments	Housing – Emergency Shelters	1,260
#8 – Suitable Living Environment – Homeless Prevention	Homeless Prevention Services in Courts and Facilities	Homeless	Availability / Accessibility	Create Suitable Living Environments	H&S – Substance Abuse and Mental Health Services, Housing – Legal Counsel	1,560
#9 – Provide Decent Housing – Single Family Rehab	Rehabilitation of Owner Occupied Homes	Affordable Housing	Affordability	Provide Decent Affordable Housing	Housing – Rehab of Owner Occupied Units Need	7

Table 60 – Goals Summary

b. Introduction

The County will administer approximately \$24,412,000 in funds over the next 5 year timeframe and a number of initiatives and activities are planned to address the issues facing the community.

Appendix B outlines projects that will be funded in 2015 by the Community Development Block Grant (CDBG), HOME Investment Partnerships (HOME), and Emergency Shelter Grant (ESG) programs. The funds available from these grant programs include new grants expected to be received in 2015. Additionally, this Action Plan covers the use of program income earned on prior years' expenditures and investments, such as loan proceeds and repaid funds, and the use of reallocated dollars from prior years. Projects receiving funding over \$200,000 will be funded over a 2 year period.

Tables AP-1 through AP-4 below outlines the projects for the next year.

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2015 FUNDING RECOMMENDATION - CAPITAL PROJECTS

	Final
Capital funds available:	\$ 1,091,616
TOTAL	\$ 1,091,616

Applicant	Project	Total Capital Cost	Capital Request	Mts Min Req	Total Pts	Recommendation	
						A-List	B-List
Ray Graham Association for People With Disabilities	Specialized Living Center Renovation: 24 Bathrooms	\$393,984.00	\$351,886.00	Yes	69.57	\$200,000.00	\$151,886.00
United Cerebral Seguin Services - UCP Seguin Services	Employment and Life Skills Center for Persons with Developmental Disabilities	\$800,000.00	\$400,000.00	Yes	65.14	\$200,000.00	\$200,000.00
Almost Home Kids	Naperville Capital Improvements	\$190,000.00	\$160,000.00	Yes	64.68	\$160,000.00	\$0.00
HOPE Fair Housing Center	A Home for HOPE	\$420,800.00	\$200,000.00	Yes	60.30	\$200,000.00	\$0.00
Little City Foundation	CILA Home Renovation - Danby Court (Hanover Park)	\$39,085.00	\$25,985.00	Yes	59.39	\$25,985.00	\$0.00
Family Shelter Service	Rehabilitation for Shelter Facilities	\$92,422.92	\$92,422.92	Yes	59.20	\$92,422.00	\$0.00
DuPage PADS	Roof Replacement for the 703 W Liberty	\$13,209.00	\$13,209.00	Yes	56.44	\$13,209.00	\$0.00
Lutheran Child & Family Services of Illinois	Lutherbrook Child and Adolescent Center	\$800,000.00	\$400,000.00	Yes	56.27	\$200,000.00	\$200,000.00
Senior Home Sharing	Purchase of New Residence	\$1,420,180.00	\$400,000.00	Yes	55.00	\$0.00	\$0.00
Community Housing Advocacy and Development (CHAD)	CHAD Headquarters Building Rehab	\$174,687.38	\$87,343.69	Yes	54.30	\$0.00	\$0.00
Elmhurst - Yorkfield Food Pantry	Building and Accessible Food Pantry for Eastern Dupage County	\$908,400.00	\$230,000.00	Yes	52.67	\$0.00	\$0.00
Bridge Communities	Capital Rehabilitation Project for Headquarter Office Building	\$133,000.00	\$113,000.00	Yes	44.45	\$0.00	\$0.00
DuPage County Convalescent Center	Center and South Building Window Replacement Project	\$688,879.00	\$400,000.00	Yes	37.34	\$0.00	\$400,000.00
TOTAL		\$6,074,647.30	\$2,873,846.61			\$1,091,616.00	\$951,886.00

Figure AP-1

2015 FUNDING RECOMMENDATION - NEIGHBORHOOD INVESTMENT (NI)

	Final
NI funds available:	\$ 918,228
TOTAL	\$ 918,228

Applicant	Project	Total Eligible Cost	CDBG Request	Mts Min Req	Total Pts	Recommendation	
						A-List	B-List
The Village of Villa Park	North Princeton Water Main Improvement Project	\$528,000.00	\$396,000.00	Yes	49.0	\$200,000.00	\$196,000.00
City of Wood Dale	Mill Road Water Main Replacement	\$850,000.00	\$400,000.00	Yes	42.4	\$200,000.00	\$200,000.00
The Village of Addison	Iowa Avenue Watermain Replacement & Resurfacing Project	\$566,000.00	\$395,500.00	Yes	39.0	\$200,000.00	\$195,500.00
Village of Woodridge	Street Resurfacing - Scenicwood Lane and Elm Avenue	\$157,638.33	\$118,228.75	Yes	36.6	\$118,228.00	\$0.00
The Village of Glendale Heights	East Fullerton Avenue - Roadway Construction	\$947,304.88	\$400,000.00	Yes	31.9	\$200,000.00	\$200,000.00
TOTAL		\$3,048,943.21	\$1,709,728.75			\$918,228.00	\$791,500.00

Figure AP-2

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2015 FUNDING RECOMMENDATION - NEIGHBORHOOD RESOURCE CENTER CLUSTER									
		Original	Change	Final					
Public services funds:		\$ 76,564	\$ -	\$ 76,564					
TOTAL		\$ 76,564	\$ -	\$ 76,564					

Applicant	Project	Total Pub Serv Cost	Pub Serv Request	Total Capital Cost	Capital Request	Mts Min Req	FY11 Total Pts	Recommendation	
								A-List	B-List
Community House	The Willowbrook Corner Learning Program	\$247,364	\$35,000	-	-	Yes	111.0	\$13,774	\$21,226
Outreach Community Services, Inc. d.b.a. Outreach Community Center	Superb Student/Learn2Earn	\$116,612	\$15,000	-	-	Yes	108.5	\$13,468	\$1,532
Addison Student Participation Center, Inc.	Henry Hyde Resource Center After School Program	\$190,000	\$20,000	-	-	Yes	106.0	\$13,156	\$6,844
Outreach Community Services, Inc. dba Puente del Pueblo	Main Park Neighborhood Resource Center	\$98,944	\$15,000	-	-	Yes	103.0	\$12,782	\$2,218
Addison Student Participation Center, Inc.	Addison SPC After School Program	\$41,000	\$20,000	-	-	Yes	98.4	\$12,215	\$7,785
Outreach Community Services, Inc. dba Puente del Pueblo	Timberlake Neighborhood Resource Center	\$72,323	\$18,531	-	-	Yes	90.0	\$11,168	\$7,363
TOTAL		\$766,243	\$123,531	\$0	\$0		617	\$76,564	\$46,967

Figure AP-3

2015 FUNDING RECOMMENDATION - ACCESSIBILITY (ADA)									
				Final					
ADA funds available:				\$ 50,000					
TOTAL				\$ 50,000					

Applicant	Project	Total Eligible Cost	CDBG Request	Mts Min Req	Total Pts	Recommendation	
						A-List	B-List
Village of Hinsdale, Memorial Building, 19 E. Chicago Avenue	Memorial Building ADA Improvements	\$102,900.00	\$50,000.00	Yes	46.8	\$50,000.00	
TOTAL		\$102,900.00	\$50,000.00			\$50,000.00	\$0.00

Figure AP-4

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2015 FUNDING RECOMMENDATION - HOUSING & HOMELESS						
		Final				
Public services funds:		\$	414,000			
TOTAL		\$	414,000			
Applicant	Project	Total Pub Serv Cost	Pub Serv Request	Mts Min Req	Type of Activity	Funding Recommendation
360 Youth Services	Cornerstone Shelter for Boys	\$771,888	\$33,000	Yes	Housing	\$33,000
Bridge Communities, Inc.	Essential Program Services for Homeless Families	\$2,184,895	\$33,000	Yes	Housing	\$33,000
Catholic Charities, Diocese of Joliet	Emergency Services & Homeless Prevention & Daybreak Transitional Housing Program	\$561,640	\$33,000	Yes	Housing	\$33,000
Catholic Charities, Diocese of Joliet	Hope House	\$360,470	\$33,000	Yes	Housing	\$33,000
DuPage Homeownership Center (DHOC)	Foreclosure Prevention/Homelessness Prevention/Counselor in Court	\$412,200	\$15,000	Yes	Services	\$15,000
DuPage P.A.D.S.	Interim Housing Program and Client Service Center	\$770,152	\$33,000	Yes	Housing	\$33,000
DuPage P.A.D.S.	Street Outreach	\$996,432	\$27,000	Yes	Services	\$27,000
Family Shelter Services	Shelter Services	\$652,463	\$33,000	Yes	Housing	\$33,000
HCS Family Services	Homeless Assistance and Prevention Support	\$324,315	\$15,000	No	Services	\$0
Midwest Shelter for Homeless Veterans., Inc.	Marine L. Cpl. Nicholas Larson Home	\$313,604	\$33,000	Yes	Housing	\$33,000
Outreach Community Services, Inc.	Case Management Program	\$320,131	\$15,000	Yes	Services	\$15,000
People's Resource Center	Homeless Prevention Program	\$163,400	\$15,000	Yes	Services	\$15,000
Prairie State Legal Services	Homelessness Prevention Legal Project	\$132,000	\$33,000	Yes	Housing	\$33,000
Prairie State Legal Services	Homeless Prevention Continuum of Care Replacement Funds	\$132,000	\$45,000	Yes	Housing	\$45,000
Serenity House Counseling Services, Inc.	Residential Substance Abuse Treatment Program - Extended Residential Care (ERC)	\$787,744	\$33,000	Yes	Housing	\$33,000
TOTAL		\$8,891,334	\$429,000			\$414,000

Figure AP-5

c. Describe the reasons for allocation priorities and any obstacles to addressing underserved needs

The County conducted extensive surveys of both municipal and non-profit partners. High and low priorities are determined via those surveys, and the County attempts to fund projects that meet municipal and non-profit agency needs, within the constraints of diminishing resources.

The main obstacle for addressing underserved needs over the next five years is the funding available and the uncertainty of future amounts that will be available in the coming years. In 2014 the County received only 82% of the portion, \$767,298 less, than it received in 2010. Each year application requests continually exceed the funding available and the County tries to allocate funding proportionally to the activities identified as the highest need.

3. Geographic Distribution

a. Description of the geographic areas of the entitlement (including areas of low-income and minority concentration) where assistance will be directed

The County does not have a specific geographic area(s) it plans to invest into. A project must be located in a HUD defined low-moderate income block group of at least 35.83% if it is serving a defined service area. The most recent figures provided by HUD will be used until newer data is released. The most recent HUD figures were provided June 10, 2014 with an effective date of July 1, 2014. The size of block groups has increased when compared to the size of the block groups used in 2000. Staff will determine if the project location reasonably coincides with the block group area. If the service area does not reasonably coincide with the block group area then a HUD-approved income certification process must be completed. Service areas with a higher percentage concentration of low income residents will generally be a higher priority. The choice to apply for these funds will be in the hands of each municipality located within the County jurisdiction and will be scored competitively.

b. Rationale for the priorities for allocating investments geographically

It is the policy of the DuPage Community Development Commission and the DuPage HOME Advisory Group that greater locational choice is promoted in the development of affordable housing in the DuPage County area. This policy will be promoted in the implementation of the Community Development Block Grant Program and the HOME Investment Partnership Act program.

All project applications reviewed by the DuPage Community Development Commission for funding by the DuPage County CDBG program or reviewed by the DuPage HOME Advisory Group for funding by the DuPage Consortium HOME program that propose new construction of affordable housing or otherwise adding to the affordable housing stock will be evaluated for the suitability of the proposed site. The County's HOME Advisory Group adopted the Community Development Commission's "Geographic Distribution Policy", attached as Appendix G. That policy promotes greater locational choice for both low and moderate-income persons and minorities.

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The County has not identified any specific priority areas for neighborhood investment activities such as road, sewer, and sidewalk reconstruction. Eligible projects must be located in a block group with a low-mod percentage of at least 35.8% or be demonstrated as low income by a HUD approved income survey. Additional points are awarded for a project that serves a higher percentage of low-mod income individuals. The same guidelines apply to public service projects that serve individuals on a local level such as a specific neighborhood rather than residents from across the County. The remainder of funds will be distributed to agencies that income qualify each client or fall into a presumed benefit category defined by HUD.

4. Affordable Housing

a. Introduction

During the next year, DuPage County estimates that 38 new rental units will be created or preserved. Of the units created, all units will be affordable to incomes less than 60% MFI with additional set asides from the total units to specifically serve households at less than 50% (20 units) and households at less than 30% (10 units). *During the next year, DuPage County estimates assisting 12 households at 80% or less of MFI through its first-time homebuyer program.*

As noted in the Strategic Plan, homeownership is becoming slightly more attainable as the economy slowly improves, more jobs are available, and the price of some homes remains affordable in several areas throughout the County and the DuPage Homeownership Center continues to develop strategies for homeownership. The number of households able to participate in the DuPage Homestead program has been increasing over the last two years and is projected to stay strong.

Barriers to affordable housing, which include local planning and zoning, building codes, fragmented local government structure, costs and housing the most difficult populations most often pertain to development of new rental units. DuPage County will continue to collaborate with municipal community development departments through the Community Development Commission to seek solutions to permitting and inspection situations.

It is also important to note that issues that affected “affordable” housing often are also “fair housing issues” because they are experienced by protected classes. The County will continue to fund agencies that specialize in the legal areas of affordable housing. HOPE Fair Housing is also funded

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by CDBG dollars. HOPE’s mission is “to create greater housing opportunities for all. We want to ensure everyone has the chance to live in the community/home/apartment of their choice free from discrimination based on race, color, religion, national origin, sex, disability, familial status, or any other characteristics protected under state or local laws. HOPE accomplishes this through education, outreach, enforcement, training, and advocacy.”

One Year Goals for the Number of Households to be Supported	
Homeless	0
Non-Homeless	87
Special-Needs	3
Total	90

Figure AP-5

One Year Goals for the Number of Households Supported Through:	
Rental Assistance	0
The Production of New Units	46
Rehab of Existing Units	32
Acquisition of Existing Units	12
Total	90

Figure AP-6

b. Discussion

A total of 90 households are projected to be supported through a number of strategies in the next year. Although 0 homes dedicated to homeless households are projected, salary reimbursements to a number of non-profit agencies specializing in providing homeless services will be provided through CDBG and ESG grants. The County will continue to look for opportunities to fund activities to support households facing homelessness by providing salary reimbursement for exceptional non-profit agencies.

5. Public Housing

a. Introduction

The DuPage Housing Authority (DHA) does not manage any public housing. Previous Consolidated Plans included information about the Aurora Housing Authority. The City of Aurora has withdrawn from the DuPage Consortium; therefore, information regarding the Aurora Housing

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Authority and its units of public housing will no longer appear in the DuPage County Consolidated Plan. The DHA has been serving the County for 72 years and continues to primarily provide safe, decent, sanitary, and affordable housing. Their primary service is to operate the Housing Choice Voucher (HCV), which allows eligible families to lease a housing unit, suited their family size by any landlord. The landlord agrees to participate in the program and to maintain the housing in compliance with the Housing Quality Standards required by the U.S. Department of Housing and Urban Development (HUD).

During FY 2014, the DuPage Housing Authority served 3,066 families composed of 8,208 individuals. Of the 3,066 households served in the last year, 89% were households with a female as the head. The remaining 11% had a male head of household. Of the 8,208 individuals served, 44% (3,616) were children under the age of 18. Although there are several factors that must be evaluated to determine a household's eligibility to participate in the HCV program, financial status is a primary driver for this program.

b. Actions planned during the next year to address the needs to public housing

The DuPage Housing Authority does not expect growth in the Housing Choice Voucher program during the coming year, and anticipates few changes in the core demographics for the program. The Authority will continue to reach out to potential landlords to maintain an adequate supply of affordable housing for the HCV program participants.

DHA is participating as the administering agency for two Rental Assistance Demonstration (RAD) conversions. This is a special program of HUD that allows public housing agencies to convert their Tenant-Based Vouchers into Project Based Vouchers. DHA began to administer sixty-six RAD Project Based Vouchers in 2014, a number that will remain the same in 2015.

c. Actions to encourage public housing residents to become more involved in management and participate in homeownership

DuPage County does not currently have any public housing units within its jurisdiction. The DuPage Homeownership Center (DHOC) assists first-time home buyers and low-income, single-parent and minority households through various programs, such as education for first-time home

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buyers, credit counseling, financial literacy training, and foreclosure prevention counseling. DHOC also links home buyers to financing packages that help reduce interest charges, and thereby increase the purchasing power of low-income households.

d. If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance

This question is not applicable. DuPage County does not have any public housing.

5. Homeless and Other Special Needs Activities

a. Introduction

The DuPage County planned actions toward ending homelessness are guided by the County Plan to End Homelessness, updated in 2008, citing fundamental service delivery components and key homeless system foundation and resources.

Service Delivery Components

Homeless Prevention: assist persons at risk to maintain their housing through emergency assistance and eviction prevention.

Outreach & Engagement: conduct outreach to shorten homelessness, and community outreach to build awareness and support.

Housing: generate long-term housing solutions (supply, vouchers, and models) and a way to navigate the system in order to re-house everyone in a timely way.

Employment/ Other Income: provide access to mainstream benefits, employment and other income.

Services: provide and link to case management, mental health, substance use, and health care services to shorten homelessness and increase housing stability.

Key Homeless System Foundation & Resources

Needs Assessment Data: utilize the Homeless Management Information System (HMIS), and

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the homeless count to influence system decisions.

Funding: seek funding from the HUD Continuum of Care, Illinois Dept. of Human Services Homeless Prevention and ESG funds, DuPage County Community Development Block Grant Funds, Human Services Grant Fund and others as available.

Systems Change: promote discharge planning and housing advocacy to prevent homelessness and shorten the length of time people spend homeless.

The DuPage County planned actions further the significant progress already made through the focused support of service delivery components and systemic foundation and resources for homeless, at-risk of homelessness, non-homeless special-needs populations that will benefit from supportive housing. These will be supported in the action plan through funding allocations for homeless interim and overnight housing, outreach to unsheltered homeless, homelessness prevention in courts and facilities, public services providing non-housing and specific housing needs, and non-homeless special needs facilities construction and rehabilitation.

b. Describe the jurisdiction one-year goals and actions for reducing and ending homelessness

The one year goals and actions direct the efforts of the County to meet the 2008 Updated Plan to End Homelessness with continued support of the system delivery components and system foundation and resources, through infrastructure improvement, public facilities capital improvements, construction and rehab of special-needs facilities, public service non-housing and public service housing benefit, construction of affordable housing rental units, rehabilitation of affordable housing, interim and overnight housing, prevention services in courts and facilities, and rehabilitation of owner occupied homes.

The one year goals and actions for reducing and ending homelessness allocate resources to meet the needs of the homeless, those at-risk of homelessness, and the non-homeless special needs populations through direct funding to rental assistance, production of new housing units, rehabilitation of existing units and acquisitions of existing units.

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The DuPage Continuum of Care (CoC) service delivery components that prevent homelessness and rapidly re-house the homeless with a housing first model are supported with allocated funding that allows providers to dedicate outreach to those in need with multiple information and access points for emergency assistance. Faith and community based organizations and local education agencies are made aware of available housing and emergency assistance and participate in joint planning.

The CoC's Homelessness Prevention Providers (HPP) develops standard protocols for screening, and eligibility determination. Case Managers complete assessments to determine the best way to assist an applicant regain stability in their current housing; to achieve stability as they move to new permanent housing or, for those in emergency shelters or who are unsheltered, to move as quickly as possible into permanent housing and achieve stability.

Persons identified as homeless will be connected with easy-to-access housing providers within CoC agencies strategically located throughout the County.

As with homelessness prevention services, when no other housing option is available, persons may be connected with financial and supportive services with the goal to both secure and establish stability in permanent housing. Assistance provided may include: assistance with rental application fees, security deposits, last month's rent, utility deposits and payments, moving costs, case management, landlord-tenant mediation and credit repair.

The DuPage County Community Development Commission and Community Services focus funding allocations to meet the system foundation and resources through capital improvement, affordable housing construction and rehabilitation of rental units, special-needs facilities construction and rehabilitation, and acquisition of existing affordable housing units.

To secure housing, the DuPage County Community Services can offer a housing packet which includes local housing resources, information on non-profit landlords and web-based resources for a broader search. Use of the Shared Housing Program expands housing resources by matching "seekers" with housing "providers"; in some cases, "rent" can be paid via services to the provider.

c. Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

The DuPage Continuum of Care (COC) provides outreach to those in need with multiple information and access points for emergency assistance. Faith and community based organizations and local education agencies are made aware of available housing and emergency assistance and

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participate in joint planning. Information is available to the public through wide distribution of printed brochures, web-based information systems, an Information & Referral Hotline & a 24-hour housing hotline. Free legal representation is available at Eviction Court. CoC agencies partake in community fairs, “clinics” or walk-in events designed to engage unsheltered persons in services. Other efforts such as street outreach & meal-only service at the shelter target unsheltered homeless persons. The DuPage Health Dept. participates in these efforts to engage the unsheltered for placement in their chronically homeless beds.

Persons calling the DuPage Information & Referral Hotline are screened for housing risk and homelessness followed by an in-depth telephone assessment of housing status, risks and opportunities. Agencies prioritize those who are homeless for expedient services. The CoC’s Homelessness Prevention Providers (HPP) develop standard protocols for screening, and eligibility determination. Case Managers complete assessments to determine the best way to assist an applicant regain stability in their current housing; to achieve stability as they move to new permanent housing or, for those in emergency shelters or who are unsheltered, to move as quickly as possible into permanent housing and achieve stability.

With proper authorization, coordination of services is standard through use of the Homeless Management Information System (HMIS).

d. Addressing the emergency shelter and transitional housing needs of homeless

Persons identified as homeless will be connected with easy-to-access housing providers within CoC agencies strategically located throughout the County.

As with homelessness prevention services, when no other housing option is available, persons may be connected with financial and supportive services with the goal to both secure and establish stability in permanent housing. Assistance provided may include: assistance with rental application fees, security deposits, last month’s rent, utility deposits and payments, moving costs, case management, landlord-tenant mediation and credit repair.

To secure housing, the DuPage County Community Services can offer a housing packet which includes local housing resources, information on non-profit landlords and web- based resources for

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a broader search. Use of the Shared Housing Program expands housing resources by matching “seekers” with housing “providers”; in some cases, “rent” can be paid via services to the provider.

DuPage County dedicates nearly all of its public service funding cap under the Community Development Block Grant to shelter and transitional housing operation and essential services. Additionally, Community Development Block Grant funds are used to produce or preserve units of transitional and permanent supportive housing.

e. 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

In coordination with emergency shelters, domestic violence shelters, transitional housing programs, educational & legal services partners & the community, the County will respond to those who become homeless.

The CoC provides information and access points for emergency housing assistance to health care programs including mental health, hospitals, substance abuse treatment and health clinics. Our homelessness prevention and rapid rehousing agencies, emergency shelters, domestic violence shelters and transitional housing programs case managers and counselors explore and assess clientele’s disabling conditions; referring and linking to resources for further assistance when warranted. Our emergency shelters coordinate services with the Health Department, Medical Providers and Educational partners to identify, engage, assess and comprehensively serve those who are chronically homeless or at-risk who may have special needs.

Creating new permanent housing beds for disabled veterans is a CoC priority. The Midwest Shelter for Homeless Veterans is a primary provider of veterans housing and services. They operate the only VA grant and per diem housing program in DuPage County. Midwest Shelter also conducts a weekly street outreach program to identify unsheltered veterans. Clients are referred as needed to Hines Veterans Hospital for both medical care and case management and Midwest Shelter for

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housing and services. The Dept. of Veterans Affairs at Hines hospital is a critical linkage providing primary medical, psychiatric, and substance abuse treatment. They visit the shelters to meet homeless veterans and explain programs and benefits. The IL Dept of Veterans Affairs helps apply for veterans benefits/entitlements such as pension, disability, etc. Prairie State Legal Services also provides assistance with applications to mainstream services including Social Security benefits for those who are homeless regardless of Veteran status.

Assessments interviews and assistance application assess income and expenses to ensure ability to maintain housing. Case Managers connect clients to mainstream resources and provide case management services beyond the assistance. Case management services assist program participants in gaining employment, improving education/job skills, learning budgeting skills, initiating savings plans, locating stable housing & accessing medical, dental, credit, and legal help. The County also offers Tenant Landlord Rights education which includes information on fair housing and other issues to increase successful tenancy.

f. 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

The CoC provides information and access points for emergency housing assistance to health care programs including mental health, hospitals, substance abuse treatment and health clinics. Our homelessness prevention and rapid rehousing agencies, emergency shelters, domestic violence shelters and transitional housing programs case managers and counselors explore and assess clientele's disabling conditions; referring and linking to resources for further assistance when warranted. Our emergency shelters coordinate services with the Health Department, Medical Providers and Educational partners to identify, engage, assess and comprehensively serve those who are chronically homeless or at-risk who may have special needs.

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The goal of the CoC is to eliminate homelessness in DuPage County by providing a comprehensive, seamless array of services that begin by preventing homelessness whenever possible and end with ensuring that every resident of this county has their basic needs of food, clothing, and housing met along with achieving their maximum level of self-sufficiency. Through a coordinated system of a small network of agencies, the Continuum of Care's Homeless Prevention Providers Committee develops best practices to assess, qualify and deliver services to operate efficiently and assist the maximum number of persons possible using both public and private resources. Access is essential; any person who needs emergency assistance to avoid homelessness will be able to obtain this assistance without location, cultural, or language barriers. Assessment is key to ensure the most effective use of homelessness prevention resources; standardized practices for eligibility determination and documentation exists across agencies. The provision of supportive services aids to prevent homelessness in the immediate situation as well as the long term. Coordination of services prevents duplication of effort among collaborative agencies and promotes cooperative planning and service delivery.

360 Youth Services provides a transitional housing program to service homeless young adults struggling with maintaining independence and who currently have no place to reside.

"Formalized Systems Prevention Advocacy" is part of the CoC Plan to End Homelessness.

Discharge protocols have been created for foster care, health care, mental health, and corrections.

The CoC is exploring options to make significant improvements to our standardized intake, assessment and follow up protocol. Using the HMIS system, this uniform assessment will gather data required as we respond to emergency needs.

6.Barriers to Affordable Housing

a. Introduction

The lack of affordable housing for lower-income households has been linked with instability and an increased risk of homelessness. With cost burdens of >30% and >50% affecting owner households and renter households alike, instability and the risk of homelessness affect many households.

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Other areas that could impact stability and an increased risk of homelessness are prolonged unemployment, foreclosure, mental illness, domestic violence, drug or alcohol addiction, unanticipated medical expenses, disabilities, exiting an institution such as jail or a mental health facility, exiting a skilled nursing care center and other emergency expenses. Each area that impacts the ability to maintain affordable housing requires specific attention and the County can take steps and collaborate with agencies and local governments to continue increasing the stock of affordable housing in all neighborhoods.

b. 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

Housing problems continue to affect residents of DuPage County. Using 2006-2010 CHAS data, the County identified 13% of households as having one or more of the four housing problems listed in this section. Approximately 5% of households in DuPage County were living with 0-30% AMI. Households operating at a deficit see higher rates of homelessness, frequent changes of residence, and a multitude of other issues.

Even though homeownership is more attainable today than it has been in recent years, there is still an affordability gap even for moderate income households. Strategies to address barriers for affordable housing include:

-Federal and State Funding - These sources of funding to meet affordable housing needs are not sufficient to meet all needs. To address this shortfall it is important to apply for all the resources that are available the County. Therefore, the County will not only apply for all resources it is eligible for, but will also assist other agencies in applying for funds.

-Innovative Private and Public Sector Financing and Partnerships - The County will continue to work with private lenders and with the DuPage Housing Authority to develop new ways of financing affordable housing. The DuPage Homeownership Center continues to develop innovative strategies for homeownership. The County has partnered with DuPage Habitat for Humanity to

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build a 13 home subdivision and to rehabilitate houses under the Neighborhood Stabilization Program. Habitat's vast network of corporate partners and volunteers provides needed leveraging.

-Containing Costs - The ability of government to contain the high cost of housing to the consumer is limited. The DuPage Homeownership Center will continue to work with local lenders and seek government subsidies to lower the cost of financing for low-income buyers. The County and the DHA will continue to work to lower financing costs for developers of new housing and investors seeking to maintain existing affordable housing.

-Strategic Plan for DuPage County Government – In May of 2007, the County Board approved a strategic plan which set goals for affordable housing. The goals include expanding the County's leadership role in affordable housing solutions through education, coordination, and collaboration and to actively participate in local efforts to create practical models for affordable housing development.

-Individual Jurisdiction Actions – Each jurisdiction can take actions to help minimize any negative impacts of restrictive building codes by encouraging fast-track or one-stop permit processing, promoting the use of time-saving and cost-saving techniques within reasonable health and safety parameters, provide technical assistance, information and other support to local communities, and encourage affordable housing by using development controls to pursue goals.

-Cooperation Between Units of Government – The development of strategies for encouraging new affordable housing opportunities requires a cooperative approach. The countywide planning process is a framework for such an approach, but it is clear that the implementation of strategies will need to encourage all units of government to participate in the solution.

-GO TO 2040 Plan – The Chicago Metropolitan Agency for Planning is working on a regional plan entitled "GO TO 2040". This plan encourages building a regional vision to "create more compact, mixed-use, livable communities" and places an emphasis on transit oriented development. The Center for Neighborhood Technology has also completed a "housing plus transportation" study of the Chicago region.

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-Educating the Community – The public’s misperception of affordable housing can lead to resistance to the development of affordable housing within their community. The DuPage County Community Development Commission stays informed of legislative efforts through the DuPage Housing Action Coalition (DHAC), an organization that advocates for affordable housing at the local, state, and national level.

c. Discussion

DuPage County along with agencies operating throughout DuPage County, seek to address the housing problems residents experience by increasing the supply of affordable housing, reducing housing cost burden, reducing overcrowding and facilitating investment to improve substandard housing in neighborhoods across the County.

7. Other Actions

a. Introduction

The actions identified below will improve the county’s ability to develop a viable urban county, maintain and increase decent, affordable housing, and provide a suitable living environment.

b. Actions planned to address obstacles to meeting underserved needs

The most ominous obstacle for meeting underserved needs is diminishing resources. The County always receives more eligible, viable requests for funds than the amount of funds available. Since the last 5-year Consolidated Plan the CDBG Program has decreased from \$4,260,803 to \$3,493,505 (-18%). Likewise, the HOME Program has fallen from \$1,951,789 to \$1,312,014 (-32%). The County will continue to encourage, and, depending on the type of project, require leveraged funds. The CDBG Program regulations do not require matching funds. DuPage County, however, requires that CDBG funded neighborhood investment projects including road, sewer, sidewalk, tree removal, and other infrastructure improvements provide at least 25% leveraging from the applicant for a project to be eligible. Additional points are awarded in the application process for providing additional leveraging. A funding request may not exceed \$400,000 in order to provide assistance to additional community residents.

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DuPage County requires that CDBG funded removal of barriers to improve accessibility activities provide at least 50% leveraging from the applicant for a project to be eligible. Additional points are awarded in the application process for providing additional leveraging. A funding request may not exceed \$50,000 in order to provide assistance to additional community residents.

DuPage County does not require CDBG funded capital improvement and acquisition of property activities for non-profit agencies to provide additional leveraging, however additional points are awarded during the application process, if such leveraging is provided. A funding request may not exceed \$400,000 in order to provide assistance to additional community residents.

The HOME Program regulations require a 25% match. DuPage County does not require match on a project by project basis, as some projects do not have the ability to produce 25% match. Other projects are able to provide more than 25% match, often through donated land and/or materials. By balancing projects that can provide match with those that cannot, the overall match requirement is monitored and met. Additional funding (leveraging) is supplied by Low Income Housing Tax Credits, private funding, and a number of other funding sources.

The ESG Program requires 100% match. This requirement is met by DuPage County general funds distributed for homeless programs through the County's Human Services Grant Fund and through private foundations and United Way grants.

c. Actions planned to foster and maintain affordable housing

The County will continue to evaluate and fund projects that increase the stock of affordable housing. A project that maintains or increases the affordable housing stock will be identified as a high priority. In addition to providing funding for rehab or new construction of affordable housing, collaboration will be encouraged with outside agencies to leverage funding, eliminate barriers to affordable housing and provide services for residents to find housing within DuPage County. Additional details and analysis to further affordable housing can be found in the Strategic Plan.

d. Actions planned to reduce lead-based paint hazards

Estimates of lead based paint hazards in owner occupied and renter occupied units are based on the year that structures are built. Studies of the incidence of lead paint hazards done at the national level have determined the likelihood of these hazards existing in units built prior to 1980. Units built

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from 1960 to 1979 have a 62% chance of lead paint hazards, units built from 1940 to 1959 have an 80% chance, and units built before 1940 have a 90% chance.

Based on these probabilities and low-income occupancy information, it is estimated that there are 62,000 low-income households in the Consortium area that could potentially be at risk of lead hazards. This number would include 37,000 renters and 25,000 owners. However, despite these high potential numbers, the actual incidence of lead poisoning, as reported by the Illinois Department of Public Health, is relatively low. The “Illinois Lead Program Annual Surveillance Report” issued November 2012 covered the year 2011. Of the 9,442 children tested in DuPage County for the first time in 2011, 41 had elevated blood lead levels. Nonetheless, the estimate of potentially affected homes is large enough to suggest that the County should be prepared to deal with these hazards. In order to address this issue, the County has developed a two-part strategy that is described below.

PUBLIC EDUCATION AND SCREENING

DuPage County experiences relatively few incidents of lead poisoning due to the large volume of newer housing in the county and effective regulations that address this issue. The Illinois Department of Public

Health – Childhood Lead Poisoning Prevention Program has primary responsibility for the education and screening activities relating to lead hazards. They provide four types of services, as described below, and will continue to provide these services throughout the period of this plan.

- **Public Information:** The Illinois Department of Public Health provides information to the general public about the dangers of lead poisoning and how residents can address the issue. Flyers are provided on request, and distributed through its Childhood Lead Prevention program.
- **Testing for Lead Hazards in the Home:** Testing is done in cases where a lead hazard is suspected, or when a child’s blood lead level meets the threshold to require the environmental testing.
- **Screening for Elevated Blood Levels:** Where tests produce evidence of children being exposed to lead hazards, the Illinois Department of Public Health will screen children for lead poisoning.

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- **Counseling:** When lead hazards are present or when there are positive tests for lead poisoning, counseling for the family is made available.

LEAD HAZARD EVALUATION AND REDUCTION IN EXISTING HOUSING PROGRAMS

HUD's Lead Safe Housing Rule, 24 CFR 35, took effect on September 15, 2000. These regulations form the basis of standards for addressing lead hazards in existing housing programs. Additionally, the U.S. Environmental Protection Agency's 2008 Lead-Based Paint Renovation, Repair and Painting Program Rule became fully effective April 22, 2010. The new rule requires contractors, property managers and others paid to replace windows or renovate residential houses, apartments and child-occupied facilities built before 1978 to be certified by the U.S. Environmental Protection Agency (EPA). The following outlines the County's procedures for the implementation of these standards.

ASSESSMENT AND HAZARD REDUCTION IN SINGLE FAMILY REHAB

- An Application is completed by the homeowner, which includes a question concerning the age of the home.
- EPA brochure "Protect Your Family from Lead in Your Home" is enclosed with the application package.
- The homeowner/applicant is required to sign a statement that they have received and read the lead brochure.
- For homes built prior to 1978, an XRF Lead Risk Assessment is authorized to be conducted by a certified assessor.
- If lead is present, a grant of up to \$10,000 is provided to the homeowner to provide appropriate lead remediation measures.
- Lead remediation work is performed in accordance with EPA standards by lead abatement workers, licensed by the Illinois Department of Public Health. All contractors must be certified lead renovators and the company must be registered as a firm by the U.S. EPA.
- After the rehab project is completed on a home with a positive initial lead test, lead clearance testing is conducted.

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- Additional EPA information, such as “Lead in Your Home: A Parent’s Reference Guide” is supplied to appropriate clients.

ASSESSMENT AND HAZARD REDUCTION IN MULTI-FAMILY REHAB

- The applications for HOME and Community Development Block Grant (CDBG) Funds include a question concerning the age of the structure to be rehabbed.
- For structures built prior to 1978, the applicant is required to include the results of lead testing with the application for funding.
- For structures with a positive initial lead test, applications must include complete and accurate estimates, developed by a licensed lead abatement contractor, of the cost of lead abatement work.
- For approved projects, the cost of the lead abatement work is included in the project budget.
- All units of the rehabbed structure must pass a lead clearance test prior to the project being certified habitable.

e. Actions planned to reduce the number of poverty-level families

DuPage County, when compared to the rest of Illinois, has experienced lower levels of poverty. According to the 2013 American Community Survey estimates, roughly 7% of households are defined as living in poverty and 3% of families are living in extreme poverty compared to roughly 13.7% of the total population of Illinois. Despite these lower numbers, over 60,000 residents continue to live in poverty in DuPage County and must rely on programs and additional resources to keep their home affordable to live in. The County is in full support of maintaining services to enhance the lives of all residents including low income, persons with disabilities, and others in need of assistance.⁶¹

Goals:

The goals of DuPage County are to connect those in poverty with all available resources, ensure they are receiving all benefits to which they are entitled (including health care), and move persons to self-sufficiency to the extent they are able.

Programs available to assist in reducing the number of poverty-level families are:

⁶¹ United States. U.S. Department of Commerce. United States Census Bureau. *2009-2013 American Community Survey 5-Year Estimates*. N.p., Feb. 2013. Web. 29 Oct. 2014.

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Making the Connection resources available through the DuPage Federation on Human Services Reform which train human service providers in how to help unbenefited persons obtain mainstream benefits, food, and services under the Affordable Care Act.

Family Self Sufficiency – administered through DuPage County Community Services empowers individuals to take control of their lives so they may become independent, productive members of their community. FSS provides comprehensive case management, counseling, educational and employment planning, to help income eligible clients to reach their personal and professional goals.

Women, Infants, and Children Supplemental Nutrition Program (WIC) acts as an income supplement by providing healthy food, nutrition education, case management, and coordination with other needed services for those at a high risk of malnutrition. Additional programs supplied by the state and federal government assist by providing housing vouchers, healthcare assistance, supplemental nutrition (SNAP) and other family services such as violence and pregnancy prevention services.

Youth Housing Assistance Program (DCFS) – To help attain or maintain housing stability for youth who are currently or previously the legal responsibility of the Illinois Department of Children & Family Services.

Housing Counseling Programs – Housing Choice Partners of Illinois, Inc. works with area housing authorities to offer voucher families a wide range of housing choices throughout the metropolitan Chicago region. DuPage Homeownership Center provides housing counseling services to low and moderate-income individuals and families who are seeking credit repair, homeownership, or foreclosure prevention.

Illinois Affordable Assisted Living Initiative – was funded to develop assisted living units state-wide. As a result of this Initiative, there are currently supportive living facilities in DuPage County.

LIHEAP – administered through DuPage County Community Services and providing energy assistance to extremely low income households.

Programs which can assist with better utilization of resources, which in turn can help reduce the families living in poverty are:

Affordable Housing Trust Fund (Illinois Housing Development Authority (IHDA))

Acquisition, rehab, new construction, home buyer assistance, rental assistance for affordable housing, supportive housing for homeless and special needs persons. The source of Trust Fund

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revenue is half of the state real estate transfer fee. The availability of funding from the Trust Fund has varied widely over the last few years, due to economic shortfalls in the State of Illinois budget.

Chicago Metropolitan Agency for Planning (CMAP) – Local Technical Assistance (LTA) Program. CMAP was awarded a Sustainable Communities Regional Planning grant by HUD in October, 2010. With the grant, CMAP launched the LTA program. The following DuPage municipalities have ongoing planning projects funded through this grant: Addison, Bartlett, Bensenville, Carol Stream, Glen Ellyn, Hinsdale, Oak Brook, Villa Park, Wood Dale. DuPage County Department of Economic Development & Planning and the DuPage Water Commission have also received assistance.

Community Investment Corporation – Energy Savers Program. This energy audit program is available to owners of multifamily rental buildings containing at least five units. Low interest loans are available to initiate energy improvements.

Policies:

DuPage County will enact policies that build up the capacity of the non-profit community to leverage the resources available to reach its anti-poverty goals.

f. Actions planned to develop institutional structure

The DuPage County Consortium has long emphasized coordination and collaboration as key strategies in meeting housing and community development needs. The Community Development Commission (CDC) itself is a collaboration of local units of government that sets policies for the CDBG, HOME, and ESG programs and is the lead agency for the development of the Consolidated Plan. Other collaborations that the County has formed include the DuPage County Continuum of Care, the DuPage Health Coalition, the DuPage Housing Action Coalition, the DuPage Funders' Collaborative, Positive Parenting, and the Interagency Paratransit Coordinating Council. The sections below describe the role of collaborative networks, local government, and non-government organizations in this structure and the emphasis on developing resources and monitoring success.

Role of Collaborative Networks

The examples of collaborative networks mentioned above work to identify and prioritize needs related to housing, health care, homelessness and other issues facing low and moderate income

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residents of DuPage County. Collaborative networks are an important part of the effort to meet local needs. The role of these networks includes: (a) sharing information on their activities including descriptions of programs, housing opportunities, development projects, and other initiatives; (b) sharing information on grant programs and other financing options; (c) encouraging cooperation among participants on specific programs and projects, including the development of joint projects and applications for funding; (d) working together on advocacy efforts; (e) providing countywide and broad-based leadership opportunities to local agencies that would not be available outside of these collaborations; and (f) providing broad based and regular input into the Consolidated Planning process.

Role of Local Governments

The CDC is the focus of local government participation in the Consolidated Planning process and in the implementation of the Plan. There are currently 28 municipalities that are members and 18 DuPage County Board members. The municipal members of the CDC are appointed by their respective municipalities, and the County Board Chairman appoints the County Board and may appoint two additional members to the CDC. This structure has fostered a strong working relationship between the municipalities and County government. Based on this structure, local governments have continuing opportunities to play a role in meeting housing and community development needs.

These opportunities include: (a) examination of their zoning and building ordinances and subdivision regulations to try to create additional opportunities for affordable housing; (b) taking affirmative actions to preserve and enhance existing affordable neighborhoods; (c) playing a leadership role in countywide collaborations (current examples being the County's leadership in the Continuum of Care and mental health access planning, and the County Health Department's leadership in the Partnership for Behavioral Health); (d) working through the CDC to continue a strong commitment to affordable housing funding; and (e) continuing to provide incentives for coordination and cooperation among providers.

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Role of Non-Governmental Organizations

Non-government organizations, primarily non-profit groups and housing developers, provide a large portion of the housing and services that address needs of the low-income population of DuPage County. The role of these organizations is described in the section on collaboration above. However, it is important to continue to provide the support that these organizations need to be successful. Therefore, DuPage County continues to give technical assistance to increase the capacity of local organizations to provide housing and other services and continues to maintain data on community needs that will help local organizations set priorities and apply for various grant funding.

Increase Financial Resources

Each collaboration described above has a primary goal of enhancing the ability of its partners to maximize resources. The DuPage Federation on Human Services has developed a training program called “Making the Connection”. This training gives agency participants the information and tools necessary to connect clients to Federal mainstream resources (such as Medicaid, SSI, TANF, Food Stamps, etc.) to increase their opportunity to achieve economic stability. In addition, efforts will continue to build a pool of matching funds for the HOME program. Past efforts have been successful to the extent that HOME-financed activities that would not be able to generate sufficient matching funds on their own are now possible.

g. Actions planned to enhance coordination between public and private housing and social service agencies

See above roles and collaboration.



PROGRAM SPECIFIC REQUIREMENTS

This section describes specific HUD program requirements for the Community Development Block Grant (CDBG), HOME Investment Partnerships (HOME), Emergency Solutions Grant (ESG) programs.

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VII. Program Specific Requirements

1. Community Development Block Grant Program (CDBG)

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.

a. 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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2. HOME Investment Partnership (HOME)

a. A description of other forms of investment being used beyond those identified in Section 92.205 is as follows:

DuPage County does not utilize forms of investment beyond those identified in 24 CFR 92.205(b).

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b. A description of the guidelines that will be used for the resale or recapture of HOME funds when used for homebuyer activities as required in 92.254, is as follows:

The only homebuyer activity anticipated under this Action Plan is the first time homebuyer program administered through the DuPage Homeownership Center. This activity will provide down payment assistance for acquisition of existing housing. This activity will utilize recapture, with a pro-rata reduction for the time the homebuyer has owned and occupied the housing, measured against the required affordability period. The maximum HOME funds available to the homebuyer are \$14,999, so the affordability period is five years. (HOME regulations require the following minimum periods of affordability in relation to the HOME dollars invested per unit: Under \$15,000 – five years; \$15,000 to \$40,000 – ten years; over \$40,000 – 15 years.) These funds are direct subsidy; there are no development costs involved in this activity. (Development subsidy is not subject to recapture.) The HOME funded homebuyer assistance will be secured by a zero-interest, deferred payment mortgage on the property. When the property is sold or the title transfers, the pro rata balance will be due. If the property is no longer occupied by the HOME-eligible household that originally purchased the property during the period of affordability, entire amount of the HOME investment becomes due. This recapture is subject to the limitation that when the recapture requirement is triggered by a sale (voluntary or involuntary, and also including foreclosure or deed in lieu of foreclosure) of the housing unit, and there are no net proceeds or the net proceeds are insufficient to repay the HOME investment due, DuPage County can only recapture the net proceeds, if any. Recaptured funds will be deposited in the HOME account and used for other HOME-eligible activities.

DuPage County will not be undertaking any other homebuyer activities under this Action Plan, nor will it be undertaking any homebuyer activities using “resale” under this Action Plan.

c. 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:

As stated above, the only homebuyer activity anticipated under this Action Plan is the first time homebuyer program administered through the DuPage Homeownership Center. This activity will provide down payment assistance for acquisition of existing housing. This activity will utilize recapture, with a pro-rata reduction for the time the homebuyer has owned and occupied the housing, measured against the required affordability period. The maximum HOME funds available

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to the homebuyer are \$14,999, so the affordability period is five years. (HOME regulations require the following minimum periods of affordability in relation to the HOME dollars invested per unit: Under \$15,000 – five years; \$15,000 to \$40,000 – ten years; over \$40,000 – 15 years.) These funds are direct subsidy; there are no development costs involved in this activity. (Development subsidy is not subject to recapture.) The HOME funded homebuyer assistance will be secured by a zero-interest, deferred payment mortgage on the property. When the property is sold or the title transfers, the pro rata balance will be due. If the property is no longer occupied by the HOME-eligible household that originally purchased the property during the period of affordability, entire amount of the HOME investment becomes due. This recapture is subject to the limitation that when the recapture requirement is triggered by a sale (voluntary or involuntary, and also including foreclosure or deed in lieu of foreclosure) of the housing unit, and there are no net proceeds or the net proceeds are insufficient to repay the HOME investment due, DuPage County can only recapture the net proceeds, if any. Recaptured funds will be deposited in the HOME account and used for other HOME-eligible activities.

DuPage County will not be undertaking any other homebuyer activities under this Action Plan, nor will it be undertaking any homebuyer activities using “resale” under this Action Plan.

d. 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:

DuPage County will not be undertaking any refinancing of existing debt secured by multifamily housing that is rehabilitated with HOME funds.

3. Emergency Solutions Grant (ESG)

a. Include written standards for providing ESG assistance (may include as an attachment)

The Homelessness Prevention Providers Committee (HPP) of the CoC has written standards for providing assistance under the Emergency Solutions Grant. They are provided as an attachment in Appendix H.

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b. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

The CoC is working to implement a coordinated assessment system and centralized waiting list. The Needs Assessment Committee of the CoC appointed a subcommittee to undertake this project. Representatives from the DuPage County Health Department, DuPage PADS, Catholic Charities, People's Resource Center, Family Shelter Service, the DuPage Housing Authority, and DuPage County Community Services sit on the committee. By May, 2014, the subcommittee had instituted a pilot program whereby the Vulnerability Index-Service Prioritization and Decision Assistance Tool (VI-SPDAT) was being utilized in client interviews with existing clients on the waiting list to determine if the tool was accurately identifying the housing needs of the clients versus case management identified needs. Subsequent to that time, other tools have been discussed and HMIS staff has been working to see how HMIS can incorporate the coordinated assessment tool. The next meeting of the subcommittee will be January 9, 2015, and the information in this paragraph will be updated after that meeting.

c. Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations (including community and faith-based organizations).

The Administration funds will be utilized by DuPage County, the recipient of the ESG funds; no sub-award of Administration funds will be made. The HMIS funds will be utilized by DuPage County as the lead agency of the CoC and entity responsible for the HMIS; no sub-award of HMIS funds will be made. The remainder of the ESG allocation is available to organizations that are members of the CoC and which are undertaking projects that advance the strategic plans of the CoC. The CoC determined that Homelessness Prevention and Rapid Re-Housing funds will be made available for sub-recipients that previously received sub-awards under HPRP, as a "pool" of funds. The CoC also determined that the subawards to DuPage PADS, Catholic Charities, and Bridge Communities would continue in accordance with the forward commitment of funding approved through the CoC during the 2013 and 2014 program years. The award to Prairie State Legal Services was approved through the CoC to replace funding lost under the HUD Super-NOFA process, as CoC agencies regard the legal assistance provided by Prairie State to be an essential component of the collaborative effort to resolve issues that prevent homeless persons from obtaining and sustaining housing stability.

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d. 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.

Because the County Board is an elective body, it is not possible to provide for the participation of a homeless individual or formerly homeless individual on the board. A formerly homeless individual sits on the Leadership Committee of the CoC. We will further implement the following consultation plan: (1) survey of persons existing an ESG funded program or shelter to determine what needs were met by the program and what needs are unmet; (2) focus group of homeless individuals.

e. Describe performance standards for evaluating ESG

The application process and selection criteria for ESG funding has been developed in conjunction with and approved by the Leadership Committee and Grants Funding Committee of the CoC. Outcome measures (performance standards) are then developed for each subrecipient, based on their application, and reported through HMIS. Targeting those who need assistance most is accomplished at the application review, as needs with higher priority in the Consolidated Plan are assigned a higher multiplier so that applications addressing those needs receive a higher score. We continue our efforts to better identify best practices for reducing the number of people living on the streets or in emergency shelters and for shortening the time people spend homeless by continuous data quality analysis of data being entered into HMIS. Current case management practices are aimed at reducing each program participant's housing barriers or housing stability risks and are quantified and captured as needs identified and needs met in HMIS. The written standards are attached as Appendix H.