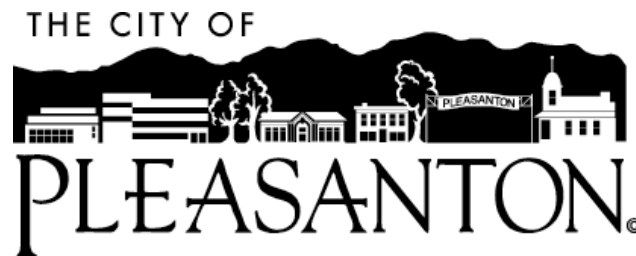


# **Consolidated Plan**

## **Housing and Community Development Strategic Plan**

### **FY 2010 – FY 2014**



**Alameda County  
HOME Consortium**  
**May 18, 2010**

## **INTRODUCTION: GUIDING PRINCIPLES**

In September 2009, a multi-jurisdictional subcommittee comprised of commission and staff representatives from the cities of Pleasanton and Livermore held two joint workshops to discuss issues of common interest related to the upcoming preparation by both cities of the respective 5-Year Consolidated Plans. In addition to developing specific priorities, objectives, goals, and measures, the subcommittee developed an overarching set of guiding principles for the next Consolidated Plan. Specifically, the activities and programs supported under this Plan will:

- Be culturally accessible, appropriate and inclusive
- Encourage community engagement and involvement
- Promote energy and resource efficiency
- Encourage networking and information sharing across service providers
- Encourage process streamlining
- Consolidate service delivery

## **PART I. PRIORITY HOUSING NEEDS**

**Priority: Increase the availability of affordable rental housing for extremely low income (30%), very low (50%), and low income (80%) households.**

### **Priority Analysis and Obstacles to Meeting Underserved Needs**

The need for affordable rental housing in Alameda County has increased dramatically in the past ten years. The need for truly affordable units targeted to low, very low, and extremely low income households far exceeds the supply of affordable rental housing in the Alameda County HOME Consortium. The Alameda County HOME Consortium Housing Needs Analysis indicates that the majority of low income rental households (earning 80 percent or less of the Area Median Income, or AMI) spend more than 30% of their incomes on housing costs.

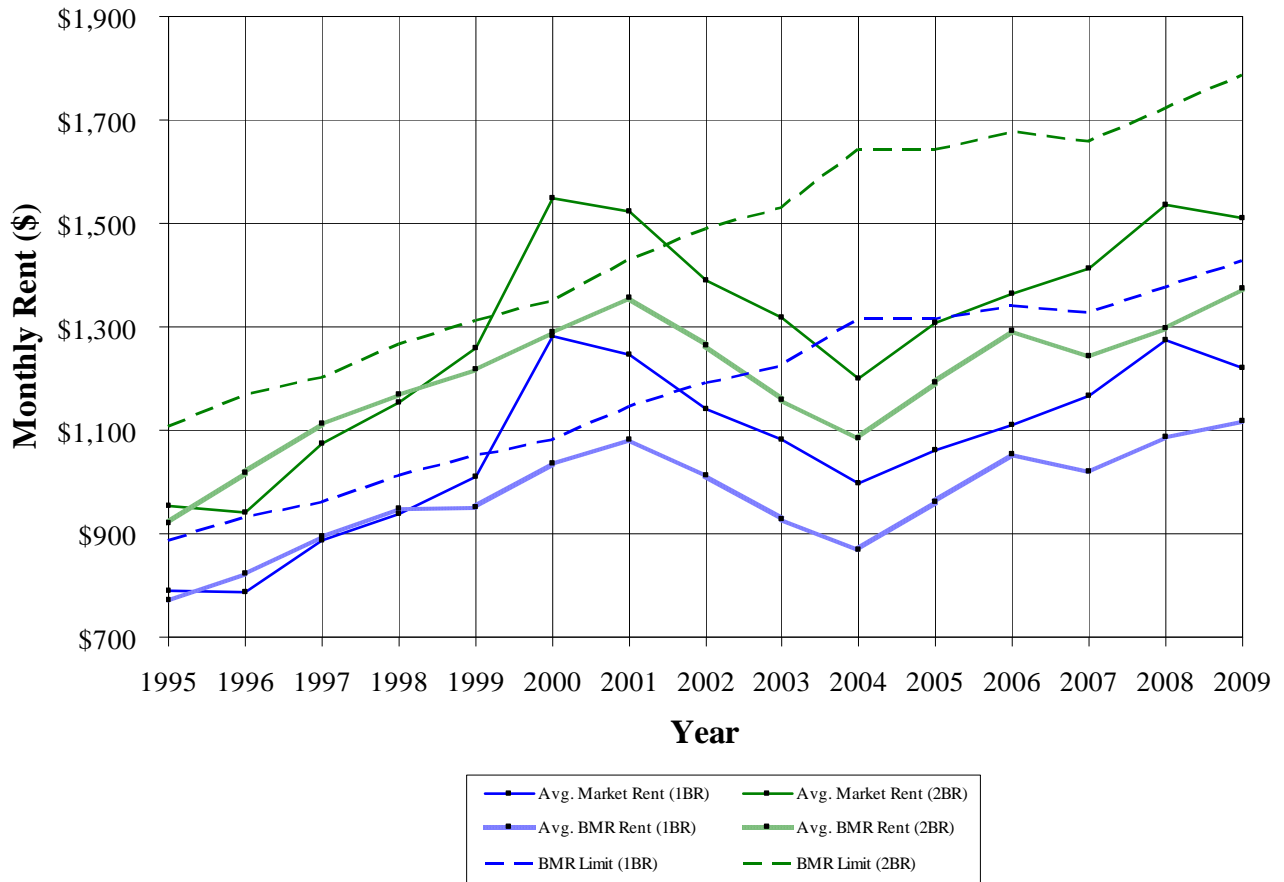
Affordable housing is in short supply throughout the county. Very high cost housing markets reduce the supply of affordable housing even further. During the past several years, the effect has been exacerbated by increased competition in the rental market due from former homeowners who have been displaced due to foreclosure. As rents increase, subsidies in rental assistance programs also increase, which results in a reduction in the number of persons that can be served in these programs.

In the late 1990's, rents increased significantly while vacancy rates decreased. These trends peaked in 2000-01 and again in 2008. The resulting competition resulted in an extremely tight rental market, notably in Pleasanton and the surrounding Tri-Valley area. Some landlords who had

previously accepted Section 8 were no longer willing to do so because of the limitations on the rents that can be charged under the program. Rents have recently indicated a trend toward stabilization after the recent peak reached in 2008. However, the rental market still poses a significant challenge to households in the lower income categories.

Figure 1 shows rent trends in Pleasanton between 1995 and 2009. The figure includes average rents for one- and two-bedroom apartments during the time period as well as the applicable annual maximum limits for below-market rent (BMR) apartments based on 80% of AMI.

**Figure 1:**  
**Rent Trends in Pleasanton**  
**1995 - 2009**



Data from the 2010 Census are not yet available. The most recent Census from 2000 indicated that there were over 54,992 low income renters in the Alameda County HOME Consortium with a household income less than 80% of AMI. In Pleasanton, the figure is 1,747 households, or 28.7% of all renters. Although the number of low income renters in Pleasanton was (and likely still is) relatively low compared to the county as a whole, the need for affordable housing in Pleasanton is amplified for low income renters due to the dual challenge of limited income and the disproportionately high cost of housing in the area. Table 1 shows household income statistics for Pleasanton renters (based on 2000 Census data).

**Table 1:  
Pleasanton Households (Renters) by Income Level, 2000**

	Households	% of Total	
Extremely Low Income (≤30% Median)	550	9.0%	28.7%
Very Low Income (>30% to ≤50% Median)	540	8.9%	
Low Income (>50 to ≤80% Median)	657	10.8%	
Moderate and Above (>80% Median)	4,338	71.3%	
<b>Total Households (Renters)</b>	<b>6,085</b>	<b>100.0%</b>	

*Source: 2000 Census – CHAS Data Book*

Census information indicated that there were over 86,000 low income renters in Alameda County in 2000. The need for affordable housing is especially acute among extremely low income renters (30% of median income). Over seventy-five percent of extremely low income renters had difficulty finding suitable housing that they can afford. Almost all (92%) extremely low income renters with large families had problems finding housing.

Alameda County Housing and Community Development (HCD) completed an update of its Inventory of Subsidized Rental Housing in Alameda County in 2007. In Alameda County, there are approximately 26,300 rental housing units with long-term affordability and income restrictions (project-based units). The majority of these units are small (e.g., one- and two-bedroom) and are more suitable for singles, elderly and smaller households than for larger families. Of the total designated subsidized units, approximately 10,800 are designated for family housing, 9,500 are designated for senior housing, 1,600 are Single Room Occupancy (SRO) units, and 2,500 units have been identified as accessible to people with disabilities (note that these numbers may overlap with each other or with other types of housing).

Table 2 shows similar information for Pleasanton (again based on the 2000 census). As seen in the table, half of large family households (5 or more persons) who rent were paying more than 30% of their household income for housing, while almost 5% paid more than 50% of their income. For elderly households who rent, nearly 54% paid more than 30% of their income, while 27% paid more than 50% of their income. In most cases, the percentage of households with this type of housing problem increased between 1990 and 2000 based on information collected in the decennial censuses.

The 2000 Census did not reveal any clear trends regarding housing problems among minorities. However, census data from 1990 and 2000 indicate a gradual shift toward greater ethnic diversity in Pleasanton, and a continuation of this trend is expected in the 2010 Census. Therefore, the City will continue to monitor housing trends among different ethnic groups in the future.

In 2005, it was reported that a sizeable portion of the subsidized units in Alameda County faced conversion to market-rate rents in the near future. This trend appears to have stabilized over the past five years through the addition of new subsidized units combined with a softening of the rental market. Nevertheless, the potential loss of rent-restricted units continues to be an on-going concern throughout the county.

A total of 98 below-market rental units in two Pleasanton apartment complexes reverted to market rates between 2005 and 2010 due to the expiration of regulatory agreements. This occurred in spite of the City's efforts to create financial and other incentives for apartment owners to extend the agreement terms. These trends indicate that very low income families face an increasing risk of becoming homeless, experiencing overcrowded housing conditions and/or paying precariously high percentages of their incomes for housing. In response to this trend, all City regulatory agreements since 2001 have required that the affordability restrictions remain in place in perpetuity (e.g., Archstone Hacienda Apartments, The Kensington).

Most subsidized housing developments with units for very low income households have long waiting lists, and the waiting time can be two years or more. Section 8 and Public Housing programs within the HOME Consortium have approximately 10,000 households on their waiting lists. The number of landlords who are willing to provide subsidized housing will still not keep up with demand, even with these additional vouchers.

There are approximately 6,800 Section 8 vouchers in use in the portion of the county administered by the Housing Authority of Alameda County, or HACA (Pleasanton, Dublin, Castro Valley, Emeryville, Fremont, Hayward, Newark, San Leandro, San Lorenzo, Union City, and the unincorporated county). Approximately 17,600 more vouchers are in use in other areas of Alameda County. When HACA last opened its waiting list in December 2001 (it has been closed since that time), 12,560 applications were received. However, only 3,500 or about a quarter of these were placed on a waiting list (through a lottery process).

Table 2: Housing Problems by Income Level and Tenure, Pleasanton (1990 and 2000)

RENTERS:

Household by Type, Income, & Housing Problem	Elderly (1 & 2 persons)			Small Related Households (2 to 4 persons)			Large Related Households (5+ persons)			All Other Households			Total Renters		
	1990	2000	% Diff	1990	2000	% Diff	1990	2000	% Diff	1990	2000	% Diff	1990	2000	% Diff
Extremely Low Income (<=30% Median)	180	239	32.8%	86	155	80.2%	10	25	150.0%	136	131	-3.7%	412	550	33.5%
Very Low Income (>30% to <=50% Median)	75	159	112.0%	179	207	15.6%	9	18	100.0%	226	156	-31.0%	489	540	10.4%
Low Income (>50 to <=80% Median)	38	53	39.5%	320	285	-10.9%	38	69	81.6%	334	250	-25.1%	730	657	-10.0%
Moderate and Above (>80% Median)	8	189	2262.5%	309	2,099	579.3%	15	315	2000.0%	280	1,735	519.6%	612	4,338	608.8%
<b>Total Households</b>	<u>391</u>	<u>640</u>	<u>63.7%</u>	<u>2,577</u>	<u>2,746</u>	<u>6.6%</u>	<u>281</u>	<u>427</u>	<u>52.0%</u>	<u>2,119</u>	<u>2,272</u>	<u>7.2%</u>	<u>5,368</u>	<u>6,085</u>	<u>13.4%</u>
<i>Paying &gt;30% income for housing (%)</i>	54.5%	53.6%	-0.9%	37.9%	36.1%	-1.8%	39.9%	49.9%	10.0%	44.8%	31.7%	-13.1%	41.9%	37.3%	-4.6%
<i>Paying &gt;50% income for housing (%)</i>	25.3%	27.0%	1.7%	10.7%	11.6%	0.9%	3.6%	4.4%	0.8%	12.2%	9.0%	-3.2%	12.0%	11.8%	-0.2%

OWNERS:

Household by Type, Income, & Housing Problem	Elderly (1 & 2 persons)			Small Related Households (2 to 4 persons)			Large Related Households (5+ persons)			All Other Households			Total Owners		
	1990	2000	% Diff	1990	2000	% Diff	1990	2000	% Diff	1990	2000	% Diff	1990	2000	% Diff
Extremely Low Income (<=30% Median)	149	212	42.3%		135			34		114	58	-49.1%	263	439	66.9%
Very Low Income (>30% to <=50% Median)	202	305	51.0%		124			4		138	74	-46.4%	340	507	49.1%
Low Income (>50 to <=80% Median)	217	390	79.7%		308			42		320	140	-56.3%	537	880	63.9%
Moderate and Above (>80% Median)	104	1791	1622.1%		9,894			1720		445	1,829	311.0%	549	15,234	2674.9%
<b>Total Households</b>	<u>1619</u>	<u>2698</u>	<u>66.6%</u>		<u>10,461</u>			<u>1800</u>		<u>11,688</u>	<u>2,101</u>	<u>-82.0%</u>	<u>13,307</u>	<u>17,060</u>	<u>28.2%</u>
<i>Paying &gt;30% income for housing (%)</i>	20.8%	27.0%	6.2%		25.2%			31.0%		39.7%	41.4%	1.7%	37.4%	28.1%	-9.3%
<i>Paying &gt;50% income for housing (%)</i>	8.7%	13.7%	5.0%		6.8%			6.5%		4.5%	12.8%	8.3%	5.0%	8.6%	3.6%

Source: U.S. Census Bureau (1990 and 2000)

As of March 2010, Pleasanton had 162 households with Section 8 vouchers , including 53 families with children and 100 elderly and/or disabled households (HACA, March 2010). The majority of vouchers were used to rent one-bedroom units, with an average monthly subsidy of slightly less than \$500. For families, the average length of participation in the Section 8 program in Pleasanton is approximately four years. The length of participation for elderly and disabled households is longer due to the on-going need for the subsidy. Only 12 Pleasanton households were successful in being selected for HACA’s waiting list in the December 2001 application and lottery process.

For the past several years, increasing numbers of Section 8 vouchers have been returned to housing authorities because participants cannot find landlords who are willing to rent to them. HACA has requested and received authorization to charge "exception rents," rent levels that are higher than the Fair Market Rents set by HUD. This allows participants to pay higher rates than currently set for the area by HUD. While this gives tenants the ability to rent units at market rates, it will create a greater cost burden for these participants.

More detailed information regarding rental housing trends and housing affordability can be found in the City’s General Plan Housing Element. This document can be viewed on the City’s web site ([www.ci.pleasanton.ca.us](http://www.ci.pleasanton.ca.us)). Copies are also available at the Pleasanton Library (400 Old Bernal Avenue, Pleasanton) or at the City of Pleasanton Planning Department (200 Old Bernal Avenue, Pleasanton; tel. 925-931-5600).

## Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Promote the production of affordable rental housing by supporting the acquisition, rehabilitation, and new construction of units by non-profit developers. A combination of funds will be used, including federal, state, and local housing program funds.	Identify existing rental properties that might benefit from rehabilitation. Enter into regulatory agreements with owners to ensure long-term affordability (using CDBG and City Housing Funds).	At least 100 rental units will receive rehabilitation, with a minimum of 30 units (15 low and 15 very low income) available at below-market rents in perpetuity for eligible households.
Encourage the inclusion of affordable rental housing by the private sector in new housing developments.	Support the efforts of private developers seeking to develop affordable rental housing in Pleasanton (City financial assistance and fee waivers; tax credits secured by project developers).	There will be 50 additional rental units (30 low income and 20 very low income) constructed that will be available in perpetuity for eligible households.
	Seek opportunities to acquire one or more vacant sites for new affordable rental housing development.	N/A (dependent upon the availability of suitable land).

<b>Five Year Objectives</b>	<b>Five Year Goals</b>	<b>Performance Measures</b>
Support the development of high density rental housing in conjunction with BART stations and other transit centers including a portion of the units as affordable to extremely low and very low income households.	Support the efforts of the Housing Authority of Alameda County to secure additional Section 8 Assistance certificates and vouchers for low and very low income Pleasanton residents.	The number of vouchers held by Pleasanton residents will increase by 50 for the five-year period.
	Encourage the execution of new agreements for Below Market Rate (BMR) units through the Inclusionary Zoning Ordinance in future private multiple family developments.	There will be at least 50 new rental units affordable to low income households for the five-year period.
	Work with ECHO Housing through the agency's contacts to promote opportunities for affordable housing in Pleasanton (provide information to one-third of ECHO's estimated 300 clients per year).	Affordable housing information and referrals will be provided to 500 persons or households during the five-year period.

## **GEOGRAPHIC DISTRIBUTION**

Except where a specific location is indicated, all of the programs listed above will be available throughout the City of Pleasanton. There are currently no concentrations of ethnic groups or special needs populations within the city (with the exception of several large senior housing complexes). The City will continue to monitor demographic trends and will incorporate new or modified policies to address changes that may occur in the future.

**Priority: Preserve existing affordable rental and ownership housing households at or below 80% of Area Median Income (AMI).**

**Priority Analysis and Obstacles to Meeting Underserved Needs**

The Alameda County HOME Consortium Housing Market Analysis describes the condition of the Consortium's housing stock, including the existence of substandard rental and ownership housing. According to data collected from the U.S. Census in 2000, about 43% of rental housing stock and 34% of the owner housing stock in the Urban County were defined as having housing problems.

As compared to the County as a whole, Pleasanton's housing stock is in generally excellent condition overall – a reflection of the large percentage of newly built structures. Only 660 units, or 3 percent of the existing housing stock, were built prior to 1950. As shown in Table 3, an additional 34 percent of the existing stock was constructed between 1950 and 1970, while 63 percent was built after 1970.

In the 2000 census, only 60 units, or 0.3 percent of the total housing stock, were found to be lacking complete plumbing facilities, and only 14 units lacked complete kitchen facilities. Eight units lacked adequate heating equipment.

At the same time, the City's Building and Safety Division estimated that no more than 100 units required major rehabilitation and no more than 10 required replacement city-wide. Through the City's housing rehabilitation program (targeted toward lower-income households), approximately 35 dwellings and mobile homes units received minor home repair services, and 6 homes received major rehabilitation work between 2005 and 2009. In addition, many property owners conducted their own rehabilitation work independent of the City's program; there are several hundred older buildings in the Downtown area which have been privately restored and/or which have been well maintained through the years.

In the 2000 census, dwellings had an average of 6.3 rooms per unit. Over time, the trends in new home construction have favored larger units. Consequently, very few examples of overcrowding exist in Pleasanton. Only 3.0 percent, or 694 units, contained more than one resident per room.

Since 2005, the City has rehabilitated relatively few substandard units. This is because of the allocation of most of the City's housing-related resources to meeting housing needs through new construction. At the same time, the City has lost fewer than 5 units to demolition, and in almost all cases these were replaced with a greater number of new units. In the short-term, housing condition is unlikely to change significantly. However, in the next five or ten years, homes that were constructed in the 1950's may begin to experience structural problems unless they have been well maintained or rehabilitated. The 660 units built prior to 1950 will require increasing maintenance to avoid demolition in the long-term. Most of the units with structural problems are located in the Downtown area, which is targeted as a specific plan area to address these and other issues.

Nevertheless, due to the increased cost of housing and the desirability of living in or near the Downtown, a significant number of older single-family homes and two multiple-family residential structures have been rehabilitated independently by the property owners since 2005.

**Table 3 – Age of Housing Stock**

<b>Year Built</b>	<b>No. of Units</b>	<b>% of Total</b>
2005 – 2009	896	3%
2000 – 2004	1,245	5%
1995 – 1999	2,617	10%
1990 – 1994	1,807	7%
1985 – 1989	5,806	22%
1980 – 1984	1,936	7%
1975 – 1979	2,058	8%
1970 – 1974	4,611	18%
1960 – 1969	3,713	14%
1950 – 1959	589	2%
1940 – 1949	212	1%
Pre1940	448	2%
<b>Total</b>	<b>25,938</b>	<b>100%</b>

*Sources: California Department of Finance, Summary Reports: Alameda County Controlled Population Estimates, 2000 – 2009; U.S. Bureau of the Census, 1990 Census of Population and Housing; City of Pleasanton General Plan 2005-2025.*

The incidences of lead paint hazards in the County’s older housing stock, which poses dangers for young children living in those dwellings, has been documented in the Consortium’s Housing Needs Assessment. According to California Department of Finance, 68% (63,451) of the housing stock in the Urban County was constructed pre-1980’s. As shown above, 45% of Pleasanton’s housing stock was constructed prior to 1980.

The use of lead paint was banned in 1978. Use of lead paint dwindled in the years prior to 1978; however, there is a potential hazard in a significant percentage of Pleasanton’s housing stock. Alameda County’s Lead Poisoning Prevention Program has worked since 1991 to mitigate lead-based paint in the housing stock. Starting in July 2010, the City will begin to routinely compile lead paint data for each new residential rehabilitation project processed through the Housing Rehabilitation Program, including assumed lead present, lead safe work practices followed, testing, abatement, and clearance test performed.

Many low income homeowners cannot afford the substantial costs involved in rehabilitating their homes. In Pleasanton’s housing rehabilitation program, which is currently administered by Neighborhood Solutions, the average cost of major rehabilitation projects is \$35,000 to \$40,000 per

unit. The program has seen a steady increase in costs in recent years as the costs of building materials and labor increases. According to the CHAS data there were 2,698 elderly homeowner households in Pleasanton in 2000. Of those households, nearly 20% (517) were extremely low and low income households. The additional rehabilitation needs of the low and moderate income owner-occupied stock creates a priority for programs to preserve that supply.

As of March 2010, there were 860 units specifically reserved for very-low- and low income households in rental apartment complexes in Pleasanton as part of the City's Below-Market-Rate Program regulatory agreements. Of this total, about 565 units were reserved for the elderly and about 295 units for other qualifying households. These units are supported by a variety of assistance sources, including HUD Section 236 funding, CHFA tax-exempt bonds, non-profit consortiums, City funding, and private regulatory agreements through the City's Inclusionary Zoning Ordinance.

Although two projects (with a total of 98 below-market-rent apartment units) lost their affordability restrictions within the past five years, there is currently only one additional project (Pleasanton Gardens, a 40-unit Section 236 / Section 8 development for very low income seniors) facing potential expiration. As noted earlier, all of the regulatory agreements executed by the City since 2001 will not be subject to expiration and will apply in perpetuity by agreement with the affected property owners. In addition, the 40 units at Pleasanton Gardens are owned by an interfaith non-profit group, and it is unlikely that these units will convert to market when the owner becomes eligible to pay off the HUD mortgage in 2010. However, it may be necessary for the City to provide financial and/or technical assistance to ensure that this is the case. The City is currently working on a project to redevelop Pleasanton Gardens in conjunction with another adjacent development, Kottinger Place, that was also developed in the early 1970's.

At present rates for new construction and/or acquisition and rehabilitation, it costs approximately \$250,000 or more to create one unit of housing that is comparable in size and rent levels to the units that are at risk of losing their affordability provisions. Therefore, it would cost approximately \$10 million to replace the 40 below-market housing units at Pleasanton Gardens. However, as noted earlier, it is anticipated that these units will be preserved through efforts that are currently under way.

The data in Table 2 show that low income households in Pleasanton are highly likely to pay more for housing than they can afford and have other housing related problems. These housing related problems include overcrowding of units, substandard plumbing and electrical, inadequate kitchen facilities, low numbers of affordable units and high rents. The affordability problems facing low income renters in Pleasanton were summarized under the previous Priority and more fully discussed in the Housing Needs Assessment Section.

## Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Provide Minor Home Repair assistance to low and moderate income homeowners in order to maintain and preserve their housing.	Maintain and expand the Housing Rehabilitation program (currently administered by Neighborhood Solutions) to increase the number of existing ownership units rehabilitated.	50 very low and 50 low income households will receive housing rehabilitation services over the five-year period, including an estimated 50 percent elderly households.
Promote the preservation of existing owner housing stock occupied by low and moderate income households.	Continue to monitor existing rental units required to be rented at Below Market Rate (BMR) rent levels through City regulatory agreements and encourage the extension of existing BMR agreements through the programs stated in the City's Housing Element policies, including provision of grants and/or technical assistance to management groups and non-profit organizations, tenant groups interested in purchasing their complexes, and other means.	40 affordable units will be maintained affordable to low and very low income households during the five-year period.
Promote the preservation of existing rental housing stock occupied by low and moderate income households.	Continue to monitor the sale of existing PHAP ownership and use available means (resale restrictions under property deeds or City acquisition) to ensure that units are maintained in the ownership of income-eligible households.	Existing units (approximately 90) plus any new units constructed during the period will be maintained affordable to very low, low, and moderate income households during the five-year period.
Use all resources available to preserve restricted or subsidized housing that could potentially opt out or expire; in order to keep units affordable.	Support the efforts of the Housing Authority of Alameda County (HACA) to preserve existing Section 8 vouchers for Pleasanton residents.	The number of Section 8 voucher holders will Pleasanton (currently 162) will remain stable or will increase during the five-year period.

## GEOGRAPHIC DISTRIBUTION

Except where a specific location is indicated, all of the programs listed above will be available throughout the City of Pleasanton.

## **Priority: Assist low and moderate income first time homebuyers.**

### **Priority Analysis and Obstacles to Meeting Underserved Needs**

The Alameda County HOME Consortium Housing Needs Analysis documented that a sizable proportion of low income households (80% of AMI) spend over 30% of their incomes on housing costs. Data for Pleasanton echo this statistic, as shown in the preceding Table 2, where it can be seen that 20% of all owner households pay over 30% of their income toward housing, while nearly 9% more pay over 50% of their income. This observation is partly due to the long-term trend of Bay Area household incomes not keeping pace with increasing rental and ownership costs. The gap between median incomes and median home prices is sizable.

In 2009, according to HUD, the median household income (for a family of four) for Alameda County is \$89,300, while the countywide median home price was \$310,000 (DataQuick, 2009). Although this reflects a 37% decrease during the past five years countywide, median home prices in Pleasanton remained stable during the same period and actually saw a 1% increase. Consequently, in spite of a softening housing market, ownership housing has continued to remain relatively out of reach in Pleasanton since a low income household making \$89,300 per year can only comfortably afford to purchase a home with sales price of \$257,000 or less.

As described above, sales prices for homes in Pleasanton are higher than the county average. Recent data on house sales compiled by Bay East Association of Realtors® indicate that the median sales price for single-family homes in Pleasanton was approximately \$688,000 in 2009, while the median price for condominiums was \$391,000. Trends in average and median house sales prices for the past several years are shown in Table 4:

**Table 4 – Pleasanton House Sales Prices, 2009**

*Reprinted with permission of the Bay East Association of Realtors®, July 2009 (www.bayeast.org)*

Year	Single Family Homes			Condominiums		
	# Sales	Avg.	Med.	# Sales	Avg.	Med.
2009 (as of July)	270	\$893,103	\$688,000	77	\$480,337	\$391,000
2008	270	\$1,064,371	\$845,000	64	\$496,578	\$442,500
2007	424	\$1,117,938	\$872,000	114	\$552,100	\$550,000

With the high cost of ownership housing, combined with a volatile market for housing financing, it is very difficult for even moderate income households to become homeowners. Initial down payment and closing costs, as well as high on-going mortgage and other costs, are significant barriers to homeownership. High rents in the area make accumulation of initial capital needed even more difficult. First time home buyers, who do not have the equity windfall from the sale of their previous home, face increasing costs. Younger working households are moving further out of the

urban areas in order to afford a home, reducing economic vitality, adding to jobs/housing imbalances, and increasing congestion and environmental concerns. The high costs of ownership can also lead to neighborhood destabilization as homeowners sell to investors who then offer the properties for rent, rather than first-time homebuyers who may become long-term residents of the community.

## Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Assist moderate and middle income, first-time homebuyers through provision of City-assisted down payment assistance and second mortgage loans.	Continue to offer down payment assistance loans through the Down Payment Assistance program to help bridge the gap between a minimum down payment and first mortgage and increase buying capacity.	Down payment loans will be provided to 20 households during the five-year period.
Continued participation in the Mortgage Credit Certificate (MCC) Program administered by HCD.	Contribute City Housing Funds annually toward the administrative costs of the MCC program by Alameda County HCD.	MCC's will be issued to 25 Pleasanton low and moderate income homebuyers during the five-year period.
Continued participation in American Dream Downpayment Initiative (ADDI) Program administered by HCD.	[Administered by HCD]	[Administered by HCD]
Assist moderate and middle income, first-time homebuyers through dissemination of information on affordable ownership housing opportunities.	Continue and augment efforts to promote opportunities for affordable ownership housing in Pleasanton through the dissemination of information on new housing construction, price trends in new and resale homes, and PHAP assistance, including expansion of existing marketing on the City's web site.	500 households seeking home ownership opportunities will be provided information on City and other programs during the five-year period as measured through additions to the City's ownership mailing list and referrals to the Tri-Valley Housing Opportunity Center.
Assist moderate and middle income, first-time homebuyers through construction of new affordable ownership housing units.	Continue to work with local housing developers to construct additional ownership homes for sale under the Pleasanton Homeownership Assistance Program (PHAP) at affordable prices.	20 new units for low and moderate income homebuyers will be constructed and sold during the five-year period.
Assist moderate and middle income, first-time homebuyers through the establishment of a "clearing house" for home ownership programs in the Tri-Valley area.	Work collaboratively with the cities of Livermore, Dublin, San Ramon, and Danville to continue to support the growth and capacity of the Tri-Valley Housing Opportunity Center (TVHOC) which opened September 2005 in Livermore.	25 households will attain home ownership in Pleasanton during the five-year period.

<b>Five Year Objectives</b>	<b>Five Year Goals</b>	<b>Performance Measures</b>
All homeowner programs will adhere to HUD and EPA lead requirements.		

**GEOGRAPHIC DISTRIBUTION**

Except where a specific location is indicated, all of the programs listed above will be available throughout the City of Pleasanton.

## Priority: Reduce housing discrimination.

### Priority Analysis and Obstacles to Meeting Underserved Needs

The Alameda County HOME Consortium Housing Market Analysis shows that Alameda County is racially and ethnically diverse. In 2000, over half of the population was people of color. By the 2010 Census, it is expected that people of color will be in the majority in many communities. Pleasanton is comparatively less diverse, with about 20% of the population comprised of persons of color based on 2000 Census data (see Table 5 below). However, the City's population increased in diversity from 1990, when persons of color comprised only about 10% of the population. This trend is projected to continue in the future as data from the 2010 Census become available. Census data do not show any geographic concentrations of people of color in Pleasanton at this time.

**Table 5 – Pleasanton Population by Race/Ethnicity, 2000**

<b>Race / Ethnicity</b>	<b>Persons</b>	<b>Percent</b>
<b>Total population</b>	<b>63,654</b>	<b>100%</b>
<b>One race:</b>	<b>61,313</b>	<b>96.3%</b>
White	51,203	80.4%
Black or African American	876	1.4%
American Indian and Alaska Native	210	0.3%
Asian	7,444	11.7%
Native Hawaiian and Other Pacific Islander	85	0.1%
Some other race	1,495	2.3%
<b>Two or more races:</b>	<b>2,341</b>	<b>3.7%</b>
<i>Hispanic or Latino (of any race)</i>	<i>5,011</i>	<i>7.9%</i>

Eden Council for Hope and Opportunity (ECHO Housing), a local fair housing advocacy organization, reports in recent years it has received increased numbers of fair housing complaints which charge discrimination based on race, ethnicity, family composition and size. A review of the complaints received by ECHO and audits by the agency indicates that these issues have been consistently identified as the basis for complaints.

Fair housing services are provided to reduce housing discrimination. In Pleasanton, these services are currently provided through a contract with ECHO. Services include housing counseling to tenants and landlords on their rights and responsibilities, investigating complaints of housing discrimination, dispute mediation and resolution, and education and training for realtors and property owners on fair housing laws. Tenant / landlord counseling also includes information and referral, mediation/attempted reconciliation, and referral to attorneys or small claims court.

Despite increased knowledge of fair housing law and continued community efforts, discrimination continues to exist. The discrimination has also become much more subtle. In tight housing markets, investigating complaints is harder due to the speed at which vacancies are filled and the hesitancy of tenants to complain due to fear of losing their housing. It also gives the landlords the ability to pick and choose among prospective tenants, which may lead to increased discrimination.

**Objectives**

The objectives presented in this section reflect the broad areas that will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Continue to support programs to reduce housing discrimination by investigating complaints, counseling tenants and landlords, and educating the owners and managers of rental housing in Pleasanton through fair housing and complaint investigation services.	Contract annually with ECHO Housing or a similar agency for fair housing and complaint investigations services throughout the City. This service is funded through a combination of City Housing Funds and CDBG funding and includes information and outreach to owners, renters, and buyers concerning their rights and obligations and the support services available in the community.	Based on prior years' case loads, the City estimates the investigation of approximately 100 complaints of discrimination based on race, ethnicity, family composition, and household size during the five-year period.
Continue to support programs to reduce housing discrimination by investigating complaints, counseling tenants and landlords, and educating the owners and managers of rental housing in Pleasanton through tenant/landlord counseling.	Contract annually with ECHO Housing or a similar agency for fair housing and complaint investigations services throughout the City. The service includes mediation services provided by housing counselors and referral to other agencies.	Based on prior years' case loads, the City estimates that counseling services will be provided to approximately 2,000 households during the five-year period.

**GEOGRAPHIC DISTRIBUTION**

Except where a specific location is indicated, all of the programs listed above will be available throughout the City of Pleasanton.

## **PART II. PRIORITY HOMELESS NEEDS**

**Priority: Maintain, improve and expand (as needed) the capacity of housing, shelter and services for homeless individuals and families including integrated healthcare, employment services and other supportive services.**

### **Priority Analysis and Obstacles to Meeting Underserved Needs**

Homelessness is one of the most difficult problems facing the HOME Consortium jurisdictions. For many adults and children homelessness is a frightening and isolating experience. Homelessness typically occurs because housing is not affordable and/or there is insufficient income to weather a personal crisis such as loss of employment or a family illness and continue to pay for housing. Mental disabilities, domestic violence, and alcohol or drug addiction and other problems are contributing factors. Homeless people live in cars, parks, abandoned buildings, on the streets, in emergency shelters, doubled up with friends and family members, and in transitional housing.

HUD's definition of homelessness is an individual who lacks a fixed, regular, and adequate nighttime residence; or an individual who has a primary nighttime residence that is: 1) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); 2) an institution that provides a temporary residence for individuals intended to be institutionalized; or 3) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

The 2009 Alameda County Homeless Count identified three distinct homeless populations: 1) literally homeless – people who are residing on the streets, places not meant for human habitation, in shelter or in transitional housing program; 2) chronically homeless – unaccompanied, disabled people who have been homeless for extended periods of time; and 3) hidden homeless – people who are living temporarily with a friend or relative, in a motel, or facing eviction within seven days.

The National Coalition for the Homeless reports (2007) 842,000 people are homeless on any given night nationally. About half of the individuals who experience homelessness over the course of a year live in family units; about 38% of these are children. The other 50% of people who are homeless on any given night are single adults. Most enter and exit the system fairly quickly (80%).

Nine percent use the system approximately five times a year for up to two months. The remainder, (10%) essentially live in the homeless assistance system, or in a combination of shelters, hospitals, the streets, and jails and prisons. There is also runaway and throwaway youth homeless population. This population is of indeterminate size. A significant portion of these youth are gay and lesbian teens that have been kicked out of their homes by parents when the youth's sexual orientation was discovered.

A family of four is considered extremely low income (30% of area median income adjusted for household size), with an annual income of \$26,790 (Feb. 2009) in Alameda County. The National Low Income Housing Coalition found that it would take \$21.02 per hour at 40 hours per week (\$43,720 annually) to afford the median fair market rent for a one bedroom unit.

Present California minimum wage is \$8.00 per hour. The California Employment Development Department estimates that seven out of ten occupations have mean wages below the County's housing wage for two-bedroom housing (\$21.02/hour). The housing wage is the hourly wage rate needed to afford a fair market rent unit using 30% of total monthly income. The majority of new jobs projected between 2006 and 2016 will pay \$18,168 (Combined Food Preparation and Serving workers – including fast food) to \$93,646 (Nurses) annually. The majority of these positions have no or very limited benefits and opportunity for advancement or training.

The lack of affordable housing is the other major component of raising rates of homelessness. Some of the economic and social dynamics of the area that contribute to the causes of homelessness include: 1) low vacancy rates; 2) very high housing costs; 3) the many entry level jobs in the local economy have shifted from manufacturing to retail sales/services (see above); 4) high levels of unemployment and 5) residential foreclosures.

Affordable housing units are making a modest gain in Alameda County. Between 2001 and 2007, there were 4,960 affordable subsidized housing units gained in Alameda County; for a total of 23,655 affordable subsidized housing units.

The waiting list for the Housing Authority of Alameda County will be reopened this year (2010). It last opened in December 2001. Excessive waiting periods for public housing means that people live in housing that is more expensive than they can afford and may become homeless. This means more people must live on the streets or in their vehicles. In many cases, homeless people are more likely to live with relatives, friends or in other unsuitable types of housing than be on the street.

For the past two decades, Alameda County, cities in the county, non-profits, the faith-based community, businesses and concerned citizens have responded to the needs of homeless youth, families, and single adults. This response has included food, clothing, transportation, shelter, housing, employment related services and health related services. As the need for services continued to grow, the need to formalize the funding and operation of homeless service became a necessity. Over time, many valuable partnerships and organizational links have been created to meet the needs of the homeless individuals and families.

Responding to the need for comprehensive planning and coordination of services for the homeless, the 45-member Alameda County-wide Homeless Continuum of Care Council was formed in 1997. In 2004, a unique collaboration was formed among community stakeholders, cities and Alameda County government agencies representing three separate care systems — homeless services, HIV/AIDS services and mental health services — that share overlapping client populations. The collaboration arose from their recognition that stable housing is a critical cornerstone to the health

and well-being of homeless and at-risk people, and our communities. Rather than continue on their separate paths toward housing solutions, the agencies creating these plans realized that they serve many people with similar needs — and in many cases, the same individuals — and came together to develop one plan with mutual goals and joint effort for implementation. The collective knowledge, funding and expertise of the collaborative, joined with extensive input and guidance from a wide variety of community-based organizations and service consumers, yielded the Alameda Countywide Homeless and Special Needs Housing Plan, now known as the EveryOne Home plan. The plan is a regional and multifaceted response to address the social and economic issues of homelessness and housing instability that affect communities throughout the county. In January 2008 EveryOne Home became a community based organization to implement the Plan and now serves as the County's Continuum of Care.

EveryOne Home coordinates local efforts to address homelessness, seeks to maintain the existing service capacity, build new partnerships that generate greater resources for the continuum of housing, services, and employment, and establish inter-jurisdictional cooperation. EveryOne Home leverages substantial federal, state, and local resources for homeless housing and services, standardize data collection, and facilitate a year-round process of successful collaboration. EveryOne Home includes representation from HOME Consortium jurisdictions and CDBG entitlement jurisdictions in the County, service providers and advocates, homeless or formerly homeless persons, representatives of the faith community, business representatives, and education and health care professionals. EveryOne Home receives administrative funding through Alameda County's General Fund as well as contributions from each of Alameda County's jurisdictions.

EveryOne Home envisions housing and services system that partners with consumers, families and advocates; provides appropriate services in a timely fashion to all who need them; and ensures that individuals and families are safely, supportively and permanently housed. To achieve those objectives, the plan is structured around five major goals that outline multi-faceted solutions for a multi-dimensional problem:

- **Prevent homelessness and other housing crises.** The most effective way to end homelessness is to prevent it in the first place by making appropriate services accessible at the time they are needed. In particular, people leaving institutions such foster care, hospitals, jails and prisons need interventions and planning that will prevent them from exiting into homelessness.
- **Increase housing opportunities for the plan's target populations.** Increasing affordable and supportive housing opportunities requires creative use of existing resources, developing new resources and using effective models of housing and services. This plan identifies a need for 15,000 units of housing for people who are homeless or living with HIV/AIDS or mental illness over the next 15 years.
- **Deliver flexible services to support stability and independence.** Culturally competent, coordinated support services must accompany housing. Direct service providers in all

systems throughout the county must have a degree of knowledge about and access to a range of housing resources and supportive services.

- **Measure success and report outcomes.** Evaluating outcomes will allow systems and agencies to identify successful programs and target resources toward best practices.
- **Develop long-term leadership and build political will.** The goals of EveryOne Home will only be achieved by developing a long-term leadership structure that can sustain systems change activities. Implementation of this plan will also require building and sustaining political and community support for its vision and activities.

For more detailed information please refer to the EveryOne Home website: [everyonehome.org](http://everyonehome.org).

### Estimated Numbers of Homeless People in Alameda County

As required by HUD, Alameda County conducts a research study every two years to count how many people are homeless in the county and several key characteristics of those who are unhoused. Field work and surveys will generate a report that presents data crossing two variables:

- **Homeless status** (unsheltered, sheltered in emergency and transitional housing, other homeless situations).
- **Enumeration and subpopulations** (counts of total persons, number of households with children, number of households without children, chronically homeless singles, severe mental illness, chronic substance abuse, veterans, HIV/AIDS, domestic violence, unaccompanied youth under the age of 18).

In 2003 and 2009 Alameda County conducted a more extensive study that produces data for geographic regions of the county (regions include countywide, Oakland, Berkeley, other north county, mid county, south county, and east county). The broader study also allows us to count those who make up the hidden homeless: households who are living temporarily with friends, relatives, or in a motel who do not have the resources to move into housing and have been notified that the situation is short-term; or households that are facing eviction within 7 days.

Key findings from the 2009 count included:

#### Literally Homeless

People who are residing on the streets, places not meant for human habitation, in shelters or in transitional housing programs (the “literally homeless”) decreased by 10% since 2007, from 4,838 to 4,341.

- Since 2003, the literally homeless population declined by 15%.
- Every region of the County showed a reduction of literally homeless families with minor children.
- The total population remained fairly flat from 2003 – 2005, with major gains beginning in

2005, showing a 6% reduction in 2007, and a 10% reduction in 2009.

### Chronically Homeless

Countywide, 231 homeless unaccompanied, disabled people (chronically homeless) moved off the streets and out of shelters into permanent supportive housing and other permanent housing since 2007 – a reduction of 18%. The current chronically homeless population is 1,026.

- This year's decrease was the largest ever in the County, far exceeding the 3% reduction from 2005 to 2007.

### Hidden Homeless

Since this data was last collected in 2003, the number of hidden homeless (living temporarily with a friend or relative, in a motel, or facing eviction within seven days) has increased by more than two and a half times.

- From January 2003 to January 2009, the point-in-time hidden homeless population increased from 1,134 to 3,042 people.
- The hidden homeless population is three-quarters as large as the literally homeless population.

### Characteristics of the Homeless Population

As shown in Table 6, homelessness exists throughout the County but it is concentrated in Oakland: Oakland – 2,091 (48%); Berkeley – 680 (19%); Other North – 433 (10%); Mid County – 385 (9%); South – 564 (13%); and East – 186 (4%).

**Table 6 – Homeless Persons in Alameda County**

<b>Demographics</b>	<b>Alameda County</b>	<b>Oakland</b>	<b>Berkeley</b>	<b>Other North</b>	<b>Mid-County</b>	<b>South County</b>	<b>East County</b>
<b><u>Household Composition</u></b>							
Adults – All adult households	2,771	1,562	549	180	150	278	52
Adults – Accompanied by children	576	193	49	100	84	106	44
Children with surveyed adult	994	336	82	153	151	180	90
<b>Total</b>	<b>4,341</b>	<b>2,091</b>	<b>680</b>	<b>433</b>	<b>385</b>	<b>564</b>	<b>186</b>
Children as a % of homeless population	23%	16%	12%	35%	39%	32%	48%
Average children in family with children	1.7	1.7	1.7	1.5	1.8	1.7	2.0
<b><u>Gender</u></b>							
Male	55%	62%	56%	61%	35%	50%	34%
Female	45%	38%	44%	39%	65%	50%	66%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
<b><u>Age</u></b>							
Younger than 25	4%	2%	5%	1%	4%	13%	8%
26-40	19%	14%	21%	22%	29%	28%	27%
41-60	62%	70%	62%	55%	46%	48%	44%
61+	15%	14%	12%	22%	21%	11%	21%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
Average age in years	43	45	43		43		40
<b><u>Race/ethnicity</u></b>							
American Indian or Alaskan Native	2%	2%	<1%	2%	<1%	2%	2%
Asian	3%	2%	1%	0%	6%	8%	8%
Black/African American	51%	69%	59%	70%	8%	5%	6%
Hispanic	15%	8%	4%	4%	6%	27%	2%
White	33%	19%	24%	13%	69%	67%	74%
Other	2%	1%	7%	4%	4%	3%	6%

Source: EveryOne Home, *Alameda Countywide Homeless Count and Survey (12/09)*

*Ethnicity*

Table 6 above shows the following is a breakdown by ethnicity of homeless people seeking services in Alameda County (Homeless Survey, 2009): American Indian, Alaska Native 2%, Asian 3%, African American 51%, Hispanic 15%, White 33%, Other 2%. African Americans and Native Americans make up a disproportionate percentage of the County’s homeless when compared to the general County ethnicity percentages.

*Age*

Many homeless people are youth and seniors: four percent of those homeless in Alameda County are children under the age of 25. Most of the homeless population is between 26 and 60 years of age (71%). Fifteen percent of the homeless populations are seniors 61 years old and older (Table 6). This number may reflect underrepresented homeless seniors, who may be reluctant to seek services, due to their physical vulnerability and tendency not to seek assistance.

*Gender*

Women account for an estimated 45% of the total adult homeless population at any given time (Table 6). Women make up the majority of the homeless population in Mid, South and East County, while men are the majority in North County cities.

#### *Self-Defined Disability*

Sixty –eight percent of the population reported having a disability. Thirty-eight percent of the population reported alcohol or drug abuse and 24% reported that they suffered from severe mental illness.

#### *Persons Living With HIV/AIDS*

Estimating the number of homeless people with HIV or AIDS is very difficult, since many people are unaware or prefer not to reveal their HIV status. The National Commission on AIDS estimates that the rate of HIV infection among homeless people is estimated at 15-25% of the total homeless adult population. In the homeless survey 1% self-identified as HIV positive.

#### *Violence and Victimization*

Violence from either outside or inside the family appears to affect about 15% of the homeless. Twenty-two percent report being victimized physically or sexually by a non-family member in the past twelve months. The prevalence of within-family victimization or threats of violence happened to 18% of the Alameda County homeless population.

#### *Veterans*

Fifteen percent of Alameda County’s homeless adults reported having served in the United States military. Based on reported discharge information, virtually all of the homeless veterans are eligible for services provided by the Veterans Administration. Only 11% of those reporting a U.S. military service history also reported a Veteran’s Administration cash benefit or pension.

#### Resources and Gaps in the Continuum in Alameda County

The goal of the EveryOne Home Plan is to provide a coordinated and comprehensive system of housing and supportive services to prevent and reduce homelessness. Systems, including programs that have historically been difficult for homeless people to access, must be coordinated at every level and resources allocated to ensure that services and housing, along the entire continuum, are available and are appropriate for the population that needs them. Efforts to promote awareness of the issue of homelessness and improve public perceptions of homeless and affordable housing projects will help reduce impediments and create an environment where program success is enhanced.

#### Outreach and Emergency Response

Emergency services are the first point of entry for most homeless people. Some will make their first contact directly with an emergency shelter; others will utilize food services, referrals or drop-in programs. All of these emergency programs provide both an outreach and a direct service function.

### *Information, Referral, Outreach and emergency Services*

The primary source of county-wide information and referral is Eden Information and Referral, which is Alameda County's 211 provider. Many homeless service providers in Alameda County provide 24-hour hotlines that provide information about their own services and referrals.

There are five organizations in Alameda County that provide regular street outreach to homeless people, including two mobile health and mental health teams (Health Care for the Homeless and the Community Crisis Response Team). These programs target homeless people who are living on the streets, or in other places unsuited for habitation, and seek to provide immediate services and link them with ongoing services and shelter or housing. Health Care for the Homeless provides support services including food assistance, financial benefits counseling, transportation, and employment assistance as well as referrals for medical and dental services, housing or food assistance.

Two primary sources of emergency services are food programs and drop-in centers. Food programs provide meals to homeless people and to housed people who are hungry. Some food programs provide hot meals at the site. Others provide grocery bags that can be taken away or vouchers to purchase food. There are more than 150 sites in Alameda County that provide food for homeless people. The majority of these programs are in the North County area. Not all food programs are open every day.

Multi-Service Centers (drop-in centers) provide a place for homeless people to go during the day. They often provide on-site services as well as referrals to other agencies. They generally offer services which include providing homeless people with an address, access to phones, showers, clothing and assistance with other basic needs. Most of these are located in the North County area. However, they also exist in Livermore and Fremont.

### *Emergency Shelter*

Emergency shelters often draw from a wider geographic area than do food and drop-in programs. There are now approximately 36 shelters in the County. Allowable stays in shelters average 45 days and range from 30 days to 6 months. One hundred additional beds are available in the cold weather months at the winter shelter on the Oakland Army Base. An additional 45 winter shelter beds for families are available in the South County area.

### Transitional Housing and Services: An Intermediary Step for Stabilization

#### *Transitional Housing*

For many, exiting homelessness requires addressing chronic life issues, such as AOD problems or domestic violence and saving enough money to obtain permanent housing. Transitional housing with services such as job training, financial planning assistance and counseling for AOD or mental health issues provides an intermediate step for many to recover from homelessness and to develop life skills that will enable them to move to permanent housing with lower risk of repeated homelessness. Residents can stay in transitional housing for up to 6 to 24 months. Currently, there are eighty-two transitional housing programs that offer housing to singles, families, victims of domestic violence and veterans.

### *Job Training/Employment*

In order to exit homelessness and stabilize their lives, homeless people must have access to income. Although many homeless people suffer from chronic disabilities and are unable to work and require some form of income support, most homeless people are interested in working and indicate that they would like to work. Locally, and nationally, about 20% of homeless people are working but are unable to obtain housing. (See Housing Needs Analysis for more detail.)

Finding a job today with the changing job market is not easy for low income people who have housing. For homeless people with few skills it is even harder. Homeless people encounter multiple barriers to getting and retaining employment – that most job seekers do not share – including the need for both interim and permanent housing, food, child care, transportation, access to telephone and message services, clothing appropriate for employment, health care, substance abuse and mental health treatment, job training and financial planning and assistance. Childcare is the greatest barrier to employment for homeless families, particularly for single women with children.

Mainstream job training and job placement programs often lack resources or the experience with the homeless population to meet the multiple needs that homeless trainees and job seekers present. Programs such as CalWorks, which focus on quick results, rather than long term employment goals, are less well equipped to serve homeless people. However, CalWorks funds some training programs which accept homeless people.

More frequently, homeless people seek training and placement assistance through programs targeted to their multiple needs. Several homeless programs in the County focus on the needs of homeless people seeking job training and linking them to support services. Also see the Welfare-to-Work in the previous section.

### *Childcare/Education*

Resources for childcare for low income families are scarce. The lack of childcare is one of the primary factors preventing homeless and low income women on SSI and CalWorks recipients have a very high need for infant childcare and school aged childcare, particularly for children in emergency and transitional housing programs.

For school-aged children, homelessness creates difficulties in attending school. Homeless children move frequently and are often forced to change schools. If homeless families do not have access to their children's records, including immunization records, they may be denied access to school. Once in school, homeless children have a hard time keeping up, due to the stress in their lives as well as the lack of a place in which to do homework.

### *Alcohol and Drug Treatment*

There are sixteen residential programs for alcohol and other drug treatment programs in Alameda County. These include 3-5 day detox programs and short (30-90 day) and long-term (6 to 18 months) residential treatment programs. Many beds in these programs are funded by the County and

are available to people with very low incomes. The County funded slots include beds for men, women and special programs for women with children. No County beds are specifically dedicated to homeless people, although the County estimates that as many as 62% of the people in the County reimbursed treatment facilities may be homeless.

In a study of people in alcohol treatment programs, homeless clients presented a more complex clinical picture than did others. They had more severe and chronic alcohol problems, co-occurring drug dependence and poorer mental health status. This study suggests that homeless clients are likely to require a broader array of therapeutic services and perhaps a lengthier intervention that are usually available in traditional alcohol treatment programs. Staff at the County Department of Behavioral Health Care Services cite three primary needs in the housing of homeless addicted people and their families: 1) an increase in the number of beds in residential recovery facilities to meet the needs of homeless people; 2) supportive transitional housing to provide clean and sober living/life skills needed to live independently; and 3) supportive permanent housing for those not able to stay clean and sober and housed in the community at large.

#### *Health and Mental Health Care*

Health Care for the Homeless operates a mobile health team that goes to the sites where homeless people gather and provides a range of health services to them. In 2003, Health Care for the Homeless provided 31,090 “encounters” (consisting of primary care services, alcohol and drug services, and case management services) to 6,550 different homeless individuals. Local clinics, such as Berkeley Free Clinic and the Tri-City Health Center also serve homeless people in addition to the general low income population. For those who are eligible, MediCal provides health coverage which allows patients to see doctors throughout the community.

Transitional and ongoing mental health care is provided through Community Support Centers and through transitional programs, multi-service centers and local health centers. There are limited Community Support Centers in Alameda County, several of them are in north county, one is in south county and one in east county.

#### Permanent Housing and Services: Ongoing Support for Self-Sufficiency

##### *Permanent Supportive Housing*

While self-sufficiency is the ultimate goal of EveryOne Home, those with serious disabilities (often the most visible homeless) may require long-term support services linked to permanent housing if they are to avoid a repeat of homelessness. The Alameda County Shelter Plus Care Program is the primary provider of permanent supportive housing, with long-term rental assistance and services for chronically homeless people with mental disabilities, alcohol or other drug problems, and/or HIV/AIDS. The Alameda County Shelter Plus Care Program includes dedicated units throughout the County in independent and supported housing environments, including 59 units of SRO housing at the Harrison Apartments in Oakland where an on-site service team delivers support to all of the residents who request it. Shelter Plus Care participants work with a service coordinator to develop individualized service plans. Services are provided by numerous agencies working collaboratively in a multidisciplinary approach based on the service plan.

Alameda County Housing and Community Development Department coordinates the Reciprocal Integrated Services for Empowerment (RISE) Program funded by McKinney/Vento Supportive Housing Program (SHP) funds. It provides homeless people with disabilities access to permanent housing. It also provides supportive services: emergency and transitional shelter while working on finding permanent housing; alcohol and drug treatment advocacy; life skills training; housing search assistance; vocational assessment and employment services; and veteran specific services.

*Permanent Subsidized Housing*

In addition to housing specifically dedicated to homeless or disabled populations, there are other resources available to very low income individuals and families. These include Section 8 rental assistance programs, public housing, and non-profit housing. (See Housing Market Section for a discussion of Section 8 and Public Housing available.) Homeless people must compete for these broader resources against low and very low income people who are currently housed.

The lack of affordable housing is cited by almost every service provider and funder in the Alameda County HOME Consortium as the biggest barrier to moving out of and a significant cause of moving into homelessness.

**Objectives**

The objectives presented reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources and regular reassessment of the proposed objectives and accomplishments.

<b>Five Year Objectives</b>	<b>Five Year Goals</b>	<b>Performance Measure</b>
Pursue continued funding and renewal of subsidized rental assistance programs such as Supportive Housing Program (SHP), Shelter Plus Care (S+C), Project Independence and Section 8.	1. 245 people with HIV or AIDS, who are homeless or at imminent risk of being homeless will receive rent subsidies through S+C. 2. Reciprocal Integrated Services for Empowerment Program (RISE) will serve 775 participants in Southern Alameda County who are homeless and disabled. 3. Jobs/Housing Linkages Program will serve 235 homeless families in Southern Alameda County through transitional rental subsidies, case management and other supportive services, job preparation and placement.	On an annual basis see a decrease in the number of chronically homeless individuals in the community.
	4. The Shelter Plus Care Program will provide safe, secure housing for 330 homeless people disabled by serious mental illness, chronic	On an annual basis see a decrease in the number of chronically homeless individuals in the community.

Five Year Objectives	Five Year Goals	Performance Measure
	alcohol and other drug problems, and/or HIV/AIDS.	
Promote the production of affordable housing and transitional and permanent with supportive services by supporting the acquisition and rehabilitation and new construction of units by non-profit developers.	Create 100 units of transitional and permanent housing county-wide for homeless individuals and families who are extremely low and low income households.	On an annual basis see a decrease in the number of chronically homeless individuals in the community.
The Urban County will administer any Emergency Shelter Grant (ESG) entitlement funds that become available.	Conduct a Request for Proposal (RFP) process that will address emerging needs from the EveryOne Home Plan.	On an annual basis see a decrease in the number of chronically homeless individuals in the community.
Promote adequate funding for homeless housing and services.	<ol style="list-style-type: none"> <li>1. Expand the supply of housing for homeless populations by advocating for additional sources of funds.</li> <li>2. Rehabilitation of homeless shelter in Newark.</li> </ol>	On an annual basis see a decrease in the number of chronically homeless individuals in the community.

## GEOGRAPHIC DISTRIBUTION

All of the activities described above will serve Pleasanton residents. The Tri-Valley Haven shelter and community service building, the new transitional housing project, and some of the homeless services in the area are located in Livermore but serve residents of the greater Tri-Valley area.

**Priority: Maintain and expand activities designed to prevent those currently housed from becoming homeless.**

### Priority Analysis and Obstacles to Meeting Underserved Needs

For many people, housing is typically the largest expense in the household budget. Federal, state, and local housing programs frequently require that low income households should pay no more than 30% of their gross income towards housing costs. The National Low Income Housing Coalition found that in order to afford the median fair market rent for a two bed-room unit in Alameda County it would require a job that paid \$24.90 per hour at 40 hours per week. (Present State minimum wage is \$8.00 per hour). The more housing costs rise, the less disposable income low income households have for other necessities, including food, health care, and education. Most low income families live from paycheck to paycheck and are only one paycheck away from losing their current housing.

Even when housing is available and a household can afford the rent payment, there are barriers which make it difficult for households to obtain and maintain the housing. The move-in costs of first and last month's rent and security deposit are a large barrier to low income households who have

difficulty making ends meet at the end of the month. Any crisis such as job loss, health emergency, alcohol or drug (AOD) problems can cause the household to begin the spiral into homelessness.

Rental assistance programs are part of the Urban County's efforts to keep individuals and families in housing. Most of these rental subsidies are directed specifically at populations with disabilities who tend to be more at risk than other populations of losing their housing. HCD is funded directly by HUD for Project Independence, a Housing Opportunities for Persons with AIDS (HOPWA) Special Project of National Significance which provides shallow rental assistance and accessibility modifications to people living with HIV/AIDS throughout Alameda County.

Prevention activities need to be expanded in programs that provide short-term rental assistance, rental guarantees, move-in costs, and long term rental assistance such as Section 8 to homeless and very low income people. It is usually less expensive to prevent someone from becoming homeless than to help them once homeless and far less disruptive to the family.

As an additional countywide program to address homelessness, the County has received Homelessness Prevention and Rapid Re-Housing Program (HPRP) funds through the American Recovery and Reinvestment Act of 2009 (ARRA). Funding for this program is being distributed based on the formula used for the Emergency Shelter Grants (ESG) program. A regional hub has been established in Livermore to distribute resources and services in the East County region.

The HPRP funds have created an opportunity for jurisdictions within the County to centralize and coordinate homeless service systems in order to enhance delivery, and create more effective and efficient programs. Alameda County is comprised of fifteen different jurisdictions. Each jurisdiction has agreed to create distinct geographic hubs in order to provide HPRP services. Households in need of assistance will be able to access a centralized referral system by calling 211, who will refer callers to the HPRP hub in their area. Each geographic hub may include linkages to existing resources for homelessness prevention and rapid re-housing other than HPRP, including programs funded through the Continuum of Care process.

## **Objectives**

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Pursue continued funding and renewals of subsidized rental assistance programs such as Supportive Housing Program (SHP), Shelter Plus Care (S+C), Project Independence and Section 8.	<ol style="list-style-type: none"> <li>1. Project Independence will provide 200 households Alameda County with rental assistance.</li> <li>2. Approximately 2,000 persons living with HIV/AIDS will receive supportive services through HOPWA funding.</li> <li>3. Shelter Plus Care's Tenant-Based Rental Assistance program will provide County-wide rental assistance and supportive services to 1,070 disabled, formerly homeless individuals &amp; their families.</li> </ol>	90% of HOPWA clients will be able to maintain housing stability, avoid homelessness and access care.
Promote the production of affordable housing to achieve public and mental health outcomes.	<ol style="list-style-type: none"> <li>1. Provide information and access to housing for homeless populations.</li> <li>2. Develop and implement transitional planning for discharged clients.</li> <li>3. Develop and fund comprehensive crisis intervention services.</li> </ol>	On an annual basis see a decrease in the number of chronically homeless individuals in the community.
Support and expand programs that assist persons who are at risk of becoming homeless, including the Homeless Prevention and Rapid Rehousing Program (HPRP), Tri-Valley Housing Scholarship Program, and ECHO Housing's Senior Reverse Mortgage Counseling Program.	Continue to support the operation of the East County HPRP hub which coordinates housing resources and supportive services for households that are at risk of becoming homeless.	100 households will retain housing during the five-year period.
	Continue to support the operation and expansion of the new Tri-Valley Housing Scholarship Program which offers tenant-based rental assistance to households who are homeless or at risk of being homeless. Subsidies are provided while the head of household is undergoing job training and are gradually phased out after employment is secured.	30 households will be assisted during the five-year period.
	The City will continue to offer, through ECHO Housing, a program offering counseling services to senior homeowners considering a reverse mortgage program to ensure that their participation does not result in the loss of their home.	N/A

## GEOGRAPHIC DISTRIBUTION

All of the activities described above will serve Pleasanton residents citywide.

**Priority: Build on inter-jurisdictional cooperation to achieve housing and homeless needs.**

**Priority Analysis and Obstacles to Meeting Underserved Needs**

Housing and homeless needs in Alameda County are guided by the EveryOne Home Plan that was completed in 2007. The Plan identified gaps in the current service delivery system and is intended to link homeless policies and plans in each of the three HOME jurisdictions in Alameda County: Berkeley, Oakland and the Alameda County HOME Consortium. The Plan has led to the creation of Consumer Rights Standards, assessment and implantation of Health, Safety, and Accessibility Standards for shelters, and advocacy for retaining and expanding critical support services and housing.

EveryOne Home recently implemented a Homeless Management Information System (HMIS) and Standards of Service in Alameda County. The HMIS for homeless service providers was developed and implemented to obtain an unduplicated count of demographics and needs of homeless individuals and families in Alameda County. The HMIS system allows better tracking and shared information on individuals while they are in the housing system. The goal is to prevent duplication of services to clients and allow the client to get the assistance they need depending on where they stand in the continuum.

**Objectives**

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
County-wide Continuum of Care coordination will continue to strengthen partnerships among participating jurisdictions and ensure widespread participation in the process.	1. Link housing and service providers for immediate and long term homeless needs. 2. Identify gaps and barriers in service provision.	On an annual basis see a decrease in the number of chronically homeless individuals in the community.
Increase the capacity of non-profit organizations to encourage the development of affordable housing with supportive services.	Continue to provide technical assistance to non-profit organizations involved in provision of affordable housing and/or supportive services.	On an annual basis see a decrease in the number of chronically homeless individuals in the community.
Continue the tradition of joint jurisdictional funding of projects with mutual benefits throughout Alameda County.	Seek out opportunities when appropriate.	On an annual basis see a decrease in the number of chronically homeless individuals in the community.

Five Year Objectives	Five Year Goals	Performance Measures
Continue and expand the City's involvement in regional and subregional programs and efforts related to homeless service and housing issues, including participation in EveryOne Home, working with the County and other jurisdictions.	Continue to participate (and will attempt to expand its involvement with) EveryOne Home which brings together representatives from jurisdictions and homeless care providers throughout Alameda County.	N/A
	Continue and expand collaboration efforts with its Tri-Valley neighbors (e.g., Livermore, Dublin) in local programs such as the HPRP East County Hub, Tri-Valley Housing Scholarship Program, and the Tri-Valley One-Stop Center to address homeless issues at the subregional level.	N/A

**GEOGRAPHIC DISTRIBUTION**

All of the programs described in this section will be available throughout Pleasanton.

## **PART III . PRIORITY SUPPORTIVE HOUSING NEEDS**

**Priority: Increase the availability of service-enriched housing for persons with special needs.**

### **Priority Analysis and Obstacles to Meeting Underserved Needs**

Low income persons and families with special needs, including the frail elderly, persons with disabilities, persons with HIV/AIDS, persons with alcohol or other drug problems, and victims of domestic violence need housing with supportive services. Within the HOME Consortium there is a critical need to increase the amount of housing with supportive services to meet a variety of special needs. Supportive housing can increase life expectancy and quality of life for persons with special needs. For many, it can be the key to preventing or permanently ending homelessness.

Each special needs population requires different levels of service and support. Persons with acute disabilities, such as end-stage AIDS or severe mental illness, may require a high level of service available on site. Less vulnerable populations may need fewer services at their residence, but may require access services in the broader community. Services often associated with supportive housing include case management, alcohol and drug counseling, health and mental health care, money management and childcare.

The California Department of Rehabilitation estimates that 3% of the total populations have disabilities which affect their housing requirements to a significant degree, forcing the disabled to live near medical facilities, live in specially designed homes, or live in congregate housing. Many have difficulty obtaining housing when vacancy rates are low and housing is unaffordable. Most affordable housing does not have accessibility to accommodate a physically disabled person. Education of landlords and disabled tenants regarding reasonable accommodations is sporadic. The landlords' misunderstanding of the needs of the disabled tenants often leads to eviction proceedings rendering the disabled person homeless and with a poor tenant history making future rental opportunities more difficult.

Although services for people with identified special needs are the most critical, more limited service-enriched housing can be beneficial to lower income populations which do not have special needs. Each of us has a range of service needs, such as childcare, healthcare, advice about financial matters and educational opportunities. People with adequate resources are able to purchase these services in the community. Those who lack these resources benefit from affordable housing with services that can help stabilize individuals and families and also serve as a community base through which services can be provided.

## Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Promote the production of affordable housing both transitional and permanent with supportive services by supporting the acquisition and rehabilitation and new construction of units by non-profit developers.	Create 300 units of transitional and permanent housing county-wide for special needs individuals and families who are extremely low and low income households.	There will be 55 unit-years of affordability in rental projects.
Promote the production of affordable housing both transitional and permanent with supportive services for people with HIV/AIDS by supporting the acquisition and rehabilitation and new construction of units by non-profit developers.	Approximately 350 people living with HIV will receive housing assistance through the use of HOPWA development funds.	90% of HOPWA clients will be able to maintain housing stability, avoid homelessness and access care.
Increase the availability of supportive housing opportunities for special needs groups through construction of new supportive housing for seniors and disabled persons and rehabilitation of existing housing to serve as supportive housing for seniors and disabled persons.	Continue efforts to support the operation of an assisted living facility for seniors on a City-owned parcel at Sunol Boulevard and Junipero Drive immediately south of the Pleasanton Senior Center.	30 units of assisted living (including housing and services) for low and very low income elderly persons will be available throughout the five-year period.
	Provide assistance to local nonprofit agencies (e.g., HOUSE, Inc., BACS, RCD, and others) seeking to construct or acquire housing for special needs populations in Pleasanton, including persons with physical, mental, and developmental disabilities.	Estimated 30 low and very low income disabled persons assisted during the five-year period.
	Preserve and maintain the existing stock of housing units available to seniors and disabled persons.	N/A

## GEOGRAPHIC DISTRIBUTION

All of the programs described in this section will be available throughout Pleasanton.

## **PART IV. PRIORITY COMMUNITY DEVELOPMENT** **(Non - Housing) NEEDS**

**Priority: Improve community health and access to basic and specialty care including dental and optometry care, behavioral and mental health care services particularly for low income, uninsured and under-insured residents with emphasis on activities that 1) support the maintenance and expansion of services and programs aimed at wellness and preventative care services; and 2) increase outreach and access for underserved populations including limited English speaking persons, youth, disabled, seniors and homeless persons.**

### **Introduction**

Pleasanton and the surrounding Tri-Valley region has traditionally been one of the most affluent areas in Alameda County. However, in the difficult economic times of the past several years, more and more Tri-Valley residents have faced the loss of jobs and health insurance. Consequently, many have turned to subsidized sources for their medical care. In the Tri-Valley area, the main community clinic serving the uninsured is the Axis Community Health clinic which is located in downtown Pleasanton.

Axis Community Health offers medical, mental health, substance abuse counseling and health education services to residents of the Tri-Valley. Founded in 1972 as a licensed nonprofit organization, Axis serves 14,000 community members annually through direct services and school- and community-based education, prevention and treatment programs. The agency operates three facilities in Pleasanton and one in Livermore and is supported by local, state and federal funding, foundation grants, client revenues and community donations.

Because Axis is the only provider of primary care medical services in eastern Alameda County and the Tri-Valley area, its resources have always been stretched to capacity. Recently, the effect has been amplified with more than 200 new clients turning to the clinic each month for medical care. As this trend continues, Axis expects to serve an additional 4,000 patients and provide 21,000 more medical visits each year for the next two years. This increased demand will require that the clinic augment its capacity to provide mental health counseling (250 new clients, 6,000 more visits) and substance abuse services (500 clients, 15,000 visits).

Axis was recently designated a Federally Qualified Health Center (FQHC) New Access Point and was awarded a \$1.3 million American Recovery and Reinvestment Act grant. Axis is one of 126

community health centers nationwide (12 in California) that were identified as recipients of \$155 million in New Access Point grants, which will help provide health services to a total of 750,000 Americans and create 5,500 jobs. It is projected that the funding coming to California will enable the clinics to provide 80,890 additional residents with medical care while creating 600 new jobs.

While the advent of this new funding is positive, it creates new challenges for Axis in terms of its strained infrastructure. Through significant financial assistance provided by the City of Pleasanton and its neighbor cities, Axis recently completed construction on a new women’s clinic and opened a new behavioral health site. However, the New Access Point grant will generate a need to expand capacity even further.

Approximately 40% of Axis clients are Limited English Proficiency (LEP) Individuals (primarily Spanish-speaking). Axis has met this additional challenge by providing a range of resources and services that cater to the LEP population and ensure that their access to important health services is not impeded.

**Short and Long Term Objectives**

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Increase the availability and access to basic and specialty care including dental and optometry care, behavioral and mental health care services particularly for low income, uninsured and under-insured residents.	Continue to provide technical and material support to Axis Community Health and its operation of the clinic located at 4361 Railroad Street in downtown Pleasanton (and its satellite facilities).	12,000 unduplicated individuals will receive medical services throughout the five-year period.

**GEOGRAPHIC DISTRIBUTION**

All of the activities described above will serve Pleasanton residents. The Axis Community Health clinic is located at 4361 Railroad Street in downtown Pleasanton but serves residents of the greater Tri-Valley. The agency has several other satellite facilities located throughout the Tri-Valley area.

**Priority: Increase and maintain affordable and accessible wellness and development opportunities for youth that are age-appropriate.**

**Introduction**

Pleasanton is committed to nurturing a safe, supportive community that is responsive to the full range of needs of all youth and their families. In partnership with youth, the City strives to provide the essential environment to stimulate young people to achieve their individual potential as responsible, contributing adults.

The Pleasanton City Council and Pleasanton Unified School District Board of Trustees, at a joint meeting in 1998, approved a staff recommendation calling for the establishment of a Youth Master Plan for the City of Pleasanton. The staff report supporting the recommendation stated:

*"A need has been identified by members of the Pleasanton Youth Collaborative, the Pleasanton Unified School District Ad Hoc Committee, Human Services, Parks and Recreation, and Youth Commissions and interested citizens to develop a community vision for youth and an organized approach to implementing services. While many services and programs are already available to youth through a variety of agencies and organizations, a uniformed approach is needed to respond to youth issues and create a supportive environment. A well developed Youth Master Plan would help in identifying that community vision and strategies for improving services/programs."*

The staff report further recommended:

- A joint commitment for the funding and staffing of the project,
- The creation of a Youth Master Plan of Pleasanton Steering Committee with representatives from government, business, education, and human services agencies, the community at large and local middle schools and high schools, and
- That the Youth Master Plan Steering Committee be charged with the creation of a vision, goals and objectives, and implementation strategies for a comprehensive plan for Pleasanton youth.

Representatives from government, business, education, human services agencies and schools were appointed to the Youth Master Plan of Pleasanton Steering Committee by their respective agencies in October 1998. Additional community-at-large representatives were interviewed and selected by the Steering Committee in November. The committee presented the results of its work to the City Council, and the Council approved the Youth Master Plan of Pleasanton in 2001. The Plan is based on the following guiding principles:

- The Plan encompasses youth ages 0-22 years.

- Youth are partners in the development, implementation and monitoring of all aspects of the Youth Master Plan of Pleasanton.
- The entire community will be encouraged to play an active role.
- The developmental needs of youth are at the core of the Youth Master Plan of Pleasanton.
- Youth are resources that play a valued role in the community.
- The welfare of the community is dependent on how we nurture, educate, respect and challenge youth.
- The Youth Master Plan of Pleasanton will support families as a valued entity, acknowledging that families come in many structures.

The Plan established goals, objectives, and implementation strategies in the following areas:

- Child care and supervised youth activities
- Support of the City of Pleasanton’s adopted Community of Character principles
- Healthy youth and families
- Intergenerational relationships
- Jobs and leadership
- Communication
- Coordination of the implementation of the Youth Master Plan

The Youth Master Plan of Pleasanton serves as the guideline for establishing and maintaining an array of services to meet the many needs of Pleasanton youth.

### Short and Long Term Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives (Areas)	Five Year Goals	Performance Measures
Support the provision of adequate child care and supervised youth activities	[see Youth Master Plan for Pleasanton]	[performance data from the Youth Master Plan will be reported generally in each year’s Annual Action Plan]
Support the City of Pleasanton’s adopted Community of Character principles		
Support programs that foster healthy youth and families		
Support programs that create jobs and leadership opportunities for youth		
Support the development of strong communication and access for local youth		

## **GEOGRAPHIC DISTRIBUTION**

All of the programs described in this section will be available throughout Pleasanton.

## **Priority: Support and expand programs and opportunities that keep seniors engaged and involved in their community.**

### **Introduction**

There is a variety of health, recreational and social opportunities for seniors in the Tri-Valley. The key provider of senior services is Senior Support Programs of the Tri-Valley located in Pleasanton. It offers a “friendly visiting” program, two supportive service registries, case management, in-home mental health counseling, and a nutrition and fitness program. The Livermore Area Parks and Recreation District (LARPD) operates a similar, but smaller scale, city-based program for its senior residents.

Furthermore, the cities of Dublin, Livermore, and Pleasanton operate senior centers through their parks and recreation department. The senior centers do not provide a level of intervention as high as Senior Support Programs. Instead, the centers focus on providing recreational opportunities, camaraderie, and basic assistance such as resource and referrals to other senior services, daily meals, and, in the case of Pleasanton, the operation of a limited area paratransit service.

In addition to supportive services, the Tri-Valley offers several opportunities for seniors who are no longer able to live on their own. These include Residential Care Facilities for the Elderly (RCFEs), which provide room, board, and assistance with basic activities like personal hygiene, dressing, eating, and walking.<sup>4</sup> In the City of Livermore, there are 16 licensed RCFEs with a total of 212 licensed beds. In Pleasanton, there are 14 facilities with 169 licensed beds. Dublin has six RCFE facilities with 34 licensed beds.

Skilled Nursing Facilities (SNFs), commonly referred to as nursing homes, are institutionalized care facilities with 24-hour medical care. There are three nursing home facilities in the City of Livermore with 150 certified beds. The Pleasanton Convalescent Hospital is the only SNF in Pleasanton, and has 139 beds. There are no nursing home facilities in the City of Dublin.

Several commercial Assisted Living Facilities (ALFs) have recently been constructed in the Tri-Valley area to meet a growing demand for seniors who either desire or need assistance with Activities of Daily Living (ADLs) but do not require the level of care found in more expensive SNFs or RCFEs. Of particular note is The Parkview which was constructed and opened in 2007 through the collaborative efforts of the City of Pleasanton and BRIDGE Housing Corporation. The 105-unit Parkview complex includes 31 units that are affordable to very low (50% AMI) and extremely low (25% AMI) income seniors at a flat monthly rate that includes all assisted living services regardless of the level of service required by the individual. The average monthly subsidy (i.e., the gap between the market and below-market rate) per resident varies between approximately \$3,000 and \$4,000.

## Tri-Valley Human Services Needs Assessment

In 2002, the cities of Livermore and Pleasanton collaborated to conduct a Human Services Needs Assessment for the Tri-Valley area. In the prior ten years, the Tri-Valley had witnessed dramatic population growth that sorely taxed local facilities and infrastructure, resulting in an ever-increasing demand for human services from residents in the cities of Dublin, Livermore, and Pleasanton. Each city had also seen substantial changes in its residential population, not only in terms of race and ethnicity, but also age distribution, income, and disability. In fact, all three cities were found to be significantly more diverse than they had been ten years prior.

Since Dublin, Livermore, and Pleasanton are geographically close to one another and were confronting similar issues related to their human services network, the cities sought guidance to better plan for and allocate their limited resources to improve the quality of life of Tri-Valley residents. In particular, the cities were interested in an assessment of the Tri-Valley's human services network, including the identification of service gaps and shortcomings to the overall network, and recommendations to strengthen the delivery of human services in the future.

With the help of a consultant, the cities researched and analyzed the Tri-Valley's rapidly changing population and assessed the efforts of community-based organizations, private institutions, and city agencies to respond to the complex and changing human service needs of the region. The research incorporated both primary and secondary data sources related to the Tri-Valley's human service needs, including Census data on demographic changes as well as in-depth interviews and focus groups with community members, service providers, and other key stakeholders.

The research focused on eight human service areas including health care, mental health, substance abuse services, HIV/AIDS services, children and youth services, senior services, disability services, and homeless services. Efforts were focused on collecting feedback from community members and key stakeholders with direct community involvement to determine the Tri-Valley's human service needs. This research led to the identification of specific service gaps and shortcomings to the human services network that need to be addressed by Tri-Valley cities. While most of the identified gaps were general in nature, two areas related to the specific service needs of senior citizens:

*Inadequate access to senior programs for homebound seniors.* As the senior population expands in the Tri-Valley, many service providers expressed a growing need for outreach activities that are focused on assisting relatively isolated seniors with home-based services such as activities of daily living and case management, as well as transportation and increased opportunities for socialization.

*Inadequate access to local and regional transportation.* As seniors age and eventually give up the use of their cars, they become dependent on relatives or friends and/or the public transit system. The needs assessment found that many community members do not understand the existing paratransit service that is available through the City of Pleasanton. A common problem for Tri-Valley residents—especially seniors—is confusion about registering for the service. An

additional obstacle is the fact that an appointment for pickup must be made three days in advance, which requires forward planning from residents. Also, paratransit is often not available, which reduces the desire of potential riders to use the service on it on a regular basis. Further, dialysis clients consume many of the available time slots, significantly impacting the region’s paratransit system.

Federal funding programs such as CDBG have traditionally played an important role in supplementing local funding sources to provide important services for seniors. While the 15% public services cap in CDBG limits the beneficial impact of these federal funds, they are critical as an important source for leveraging and stretching local dollars. The implementation of the recommendations of the Tri-Valley Human Services Needs Assessment has resulted in greater efficiencies among the agencies delivering services in the Tri-Valley area. The cities of Pleasanton and Livermore are planning an update to the needs assessment in 2010 and 2011.

**Short and Long Term Objectives**

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Improve access to senior programs for homebound seniors	Work with the City of Pleasanton Paratransit Program and agencies that deliver services to seniors (e.g., Spectrum, Open Heart Kitchen, Senior Support Program, etc.) to improve outreach and access.	The number of clients in these programs will increase by 20% during the five-year period.
Improve access to local and regional transportation	Work with the City Paratransit Program, WHEELS, and other senior-serving agencies to improve the coordination of transportation with services.	Improved transportation coordination will result in a service increase of 20% during the five-year period.

**GEOGRAPHIC DISTRIBUTION**

All of the programs described in this section will be available throughout Pleasanton.

**Priority: Foster and encourage innovative programs that meet emerging community needs with emphasis on low income and underserved populations.**

**Introduction**

Through documents such as the General Plan, Housing Element, and Tri-Valley Human Services Needs Assessment, the City establishes general policies and programs for the delivery of important human services to Pleasanton residents. Another key tool that encourages the emergence of innovative solutions is the City’s Housing and Human Services Grant (HHSG) program. The HHSG program was developed in 2009 as a refinement and consolidation of four separate grant programs:

1. Federal Community Development Block Grant (CDBG) Funds
2. Federal HOME Investment Partnership Program (HOME) Funds
3. City Lower Income Housing Funds for Housing
4. City General Funds for Human Services (formerly “City Grant”)

The consolidation of these four funding sources into a single streamlined grant program is expected to create greater efficiencies in the allocation of limited funding sources as well as the coordination and delivery of human services. While each source has specific priorities and requirements, there is an overarching priority for funding programs and services that benefit low income residents. The first HHSG grants will be allocated in spring 2010. The City will continue to monitor and refine the HHSG program to ensure that it fulfills the goal of fostering innovation in the design and delivery of services that meet the needs of low income and underserved populations.

**Short and Long Term Objectives**

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Foster and encourage innovative programs that meet emerging community needs with emphasis on low income and underserved populations	Continue implementation and refinement of the Housing and Humans Services Grant (HHSG) program as a resource for fostering innovative programs and services	Three entirely new programs or services for low income and/or underserved populations will be assisted during the five-year period

**GEOGRAPHIC DISTRIBUTION**

All of the programs described in this section will be available throughout Pleasanton.

## Priority: Public Service Support

### Introduction

The City of Pleasanton supports a wide array of non-profit agencies which provide needed services in the community. Support comes in part from the 15% of the City's annual CDBG funding which may be allocated toward public services. In addition, the City Council made a commitment several years ago to allocate General Funds to fund certain public services and established an application process called the "City Grant Program." As discussed earlier, both programs were recently consolidated into the new consolidated Housing and Human Services Grant (HHSG) program. The HHSG program also offers federal and local funds for capital improvements and rehabilitation projects that are related to the provision of public services. The City Council and Human Services Commission evaluate applications for service funding based on local need and agency capacity. In some cases, financial assistance has been provided to agencies based outside of Pleasanton provided that they serve Pleasanton residents.

The City has continued to make adjustments to its annual funding allocation process for public service providers through efforts such as the introduction of the new HHSG program. The City's Human Services Commission holds annual joint meetings with its counterpart at the City of Livermore to discuss public service issues of joint interest and receive input from local service providers. As in the past, potential decreases in funding during the five-year period may limit the City's ability to fund needed public services and/or decrease support for local service agencies.

### Short and Long Term Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Provide HHSG funds to approximately 10 to 15 local non-profit agencies each year.	Provide services in the following areas: child care services; services for persons with developmental disabilities; shelter, counseling, and related services for domestic violence victims; pediatric medical services; services for victims of HIV/AIDS; services to Pleasanton school-age at-risk youth; meal delivery service to homebound elderly persons; Alzheimers counseling and referral services and senior day care; bereavement counseling for low income seniors.	N/A

### GEOGRAPHIC DISTRIBUTION

The majority of agencies funded are located in Pleasanton, although some agencies are based in Livermore and surrounding cities (but serve residents of southern and eastern Alameda County or the Tri-Valley area). The services funded by the City would be targeted to Pleasanton residents.

## Priority: Capital Improvement Projects

### Introduction

The City of Pleasanton has utilized CDBG funds for capital improvement projects initiated by the City as well as by local non-profit agencies. During the 1980's, the majority of the City's CDBG funding went to several street improvement projects and accessibility projects in the Downtown target area, resulting in significant improvements to both the residential and commercial climate in Pleasanton's oldest neighborhoods. More recently, the City has allocated CDBG funds toward projects by non-profit agencies such as Axis Community Health (enabling a major renovation of the community pediatric clinic in 1999 and construction of a women's clinic in 2009) and Tri-Valley Haven (construction of a new counseling office and capital improvements at a shelter facility for women and children victims of domestic violence).

While the need for significant public street improvements in the Downtown target area has been largely satisfied, the City continues to provide CDBG funds to assist non-profit agencies with capital improvement projects in order to enhance service delivery. During the next five years (based on past trends), the City expects to allocate at least 30 percent of its annual grant toward capital improvement projects.

### Short and Long Term Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Allocate CDBG funds for the acquisition of housing for the developmentally disabled, domestic violence shelter improvements, and major capital improvements at a community medical clinic.	Contribute HOME and City Housing funds toward the acquisition of new housing for developmentally disabled persons by HOUSE, Inc., a local non-profit agency which has received CDBG funding in the past.	N/A
	Allocate CDBG funds toward the capital improvements at a shelter facility run by Tri-Valley Haven for women and children victims of domestic violence.	N/A
	Allocate funding for major rehabilitation activities at Axis Community Health clinic.	N/A

Five Year Objectives	Five Year Goals	Performance Measures
	Allocate CDBG funds in the longer term to non profit agencies seeking assistance with specific capital improvement projects. Specific projects have not yet been identified but will be considered on a case-by-case basis through the annual CDBG allocation process.	N/A

**GEOGRAPHIC DISTRIBUTION**

Since the majority of capital improvement projects planned for the five-year period will be initiated through non-profit agencies, they will be distributed at various locations and will be available to Pleasanton residents citywide. While all projects will serve Pleasanton residents, the Tri-Valley Haven facility is located in Livermore.

# Priority: Downtown Economic Development

## Introduction

Census Tract 4506.07 includes the old downtown area of Pleasanton, which dates from before the City's incorporation in 1894. This census tract is the only one in Pleasanton which has been recognized in the past by HUD as a target area due to the relative large proportion of older buildings and households in the lower income range (including a large percentage of seniors). [However, this census tract ceased to be designated as a target area in the 2000 Census.]

The City allocated \$10,000 in FY 1994/95 CDBG funds to support the establishment of a Downtown Economic Development program to fund loans to assist small businesses in the area to make improvements such as URM (unreinforced masonry) building upgrades, storefront remodels, historic preservation, sign upgrades, and design assistance for façade and related improvements. The program was not heavily utilized due a strong upturn in the local economy. However, the City will continue to offer this small program using local funds (rather than HUD funds) to address the needs of the few small businesses that might not be able to make physical improvements without this type of assistance. The program will eventually become self-supporting to the extent that loans are repaid.

## Short and Long Term Objectives

The objectives presented in this section reflect the broad areas which will be pursued under this priority. Implementation will be contingent on current and projected need, availability of financial and other resources, and regular re-assessment of the proposed objectives and accomplishments.

Five Year Objectives	Five Year Goals	Performance Measures
Continue to support the Downtown Design Assistance loan program using City funds.	Assist businesses based on demand. If increased need is perceived, consider expanding the program and adjusting according to level and types of need.	One to two businesses will receive assistance each year during the five-year period.

## GEOGRAPHIC DISTRIBUTION

The Downtown Economic Development program will be available to businesses located within the Downtown Revitalization District, which is a subarea within Census Tract 4506.07.

## **PART V. OTHER ACTIONS**

### **BARRIERS TO AFFORDABLE HOUSING**

#### Funding

The City of Pleasanton will continue to apply CDBG, HOME, and City Housing funds toward affordable housing projects and programs as long as funding is available.

#### Land Costs

The City does not have ownership of many parcels of land at the present time; therefore, the market cost of land may pose a constraint to new affordable housing development in which the City has direct involvement. However, the City will work with individual developers and with large land holders to attempt to reserve additional sites for affordable housing development during the five-year period.

#### Housing Development Costs

The City will continue to work to offset the costs of housing development by waiving certain City fees for affordable rental and ownership housing units and by providing financial assistance (e.g., bridge loans and other tools) on a case-by-case basis.

### **LEAD-BASED PAINT HAZARD REDUCTION**

No new programs are being considered for the five-year period to reduce lead-based paint hazards inasmuch as the City's housing stock is generally young and in good condition. Mitigations are currently implemented on an as-needed basis in conjunction with County-administered Housing Rehabilitation and Minor Home Repair Program activities. The City is not currently a party to the joint powers agreement which established Alameda County's existing lead abatement program. However, Pleasanton is likely to increase its involvement in lead-based paint hazard reduction as involvement in housing rehabilitation programs increases in the future. The City will continue its collaboration with the Alameda County Lead Hazard Prevention Program on marketing and outreach efforts in the Tri-Valley area.

### **ANTI-POVERTY STRATEGY**

The Section 8 certificate and voucher program is currently coordinated through the Alameda County Housing Authority. The City will consider supporting requests by residents of local senior apartment complexes to receive additional rent subsidies for seniors as opportunities arise.

The City of Pleasanton recently established an Economic Vitality Committee to promote economic development in Pleasanton. A new staff position of Economic Vitality Manager was initiated several years ago. This individual helps to coordinate the efforts of the Committee, which will work

closely with the Pleasanton Chamber of Commerce and the Pleasanton Convention and Visitors Bureau to promote increased economic development and community job retention.

Due to a strong local economy in recent years, the City of Pleasanton has had significant success in attracting new retail commercial, office, and industrial development to the City. Existing business and retail complexes have drawn significant new commercial development and have created new employment opportunities for residents.

The City of Pleasanton's Housing Commission, with support from the City Council and Planning Commission, has aggressively pursued new affordable housing both for rental and ownership during the past several years through its Inclusionary Zoning Ordinance. In particular, recent accomplishments in the area of affordable ownership housing have been successful in reducing the number of households in the City who cannot afford to own a home.

## **PUBLIC/PRIVATE COORDINATION**

The City of Pleasanton will coordinate CDBG, HOME, and City funding sources (e.g., Lower Income Housing Fund, General Funds for human services) through its Housing and Human Services Grant (HHSB) program to provide housing programs, public service assistance, capital improvement assistance, and economic development opportunities to the community during the next five years.

The City of Pleasanton's Human Services Commission meets monthly to coordinate the delivery of services (including housing) to lower income residents and special needs groups in the area in cooperation with "Interact," a body comprised of representatives of each of the social service agencies in the Tri-Valley area. Approximately twice yearly, the Commission holds a special, joint meeting with the City of Livermore Human Services Commission. The purpose of these joint meetings is to coordinate the delivery of services in the greater Tri-Valley area.

The Human Services Commission also collaborates twice each year with the City's Housing Commission to conduct a joint review as part of the annual process of allocating HHSB funds. This collaborative effort, begun in 1996, has helped to improve the coordination of assistance to housing and services in the area and has helped to simplify the process of allocating funds to local non-profits, thereby improving service delivery.

In 1998, the City of Pleasanton joined with the City of Livermore to implement the new Tri-Valley Housing Scholarship Program discussed earlier. This program, which is administered by Abode Services, is part of a series of collaborative efforts that have improved the delivery of housing and services to Tri-Valley residents.

The City of Pleasanton has continued to take a lead role in the activities of the Tri-Valley Affordable Housing Committee (TVAHC), which is made up of representatives of cities in the Livermore-Amador Valley area (Pleasanton, Livermore, Dublin, San Ramon, and Danville). The TVAHC has actively participated in annual outreach activities promoting public awareness of affordable housing in the Tri-Valley area, working with the East Bay Housing Organizations (EBHO). In addition, the TVAHC recently initiated the development of the Tri-Valley Housing

Opportunity Center (TVHOC). The TVHOC was opened in September 2005 and serves as a “clearing house” initially for ownership programs and ultimately for a continuum of housing assistance of different types.

## **INSTITUTIONAL STRUCTURE**

The City of Pleasanton hired a Housing Specialist in 1995. This position has had the responsibility for coordinating a variety of housing-related efforts that were formerly distributed among various City departments and contract agencies, including administration of the CDBG and HOME programs as well as local housing programs. This staffing change has significantly improve the City's ability to coordinate and deliver housing services during the past five years. A half-time intern position was added in 2003 and is expected to provide further improvements during the next five-year period.

## **PUBLIC HOUSING IMPROVEMENTS AND RESIDENT INITIATIVES**

In November 2003, the City Council approved a 11-member task force to study the potential for redeveloping Kottinger Place, a 50-unit Public Housing complex for elderly persons located at 240 Kottinger Drive in Pleasanton. This is part of a long-term effort to plan for the eventual replacement of these units, which comprise the only housing units administered by the Pleasanton Housing Authority. The project may also involve an adjacent senior development, Pleasanton Gardens (40 units located across the street at 251 Kottinger Drive).

The task force includes representatives from the City Council, Housing Commission, and the Parks and Recreation Commission as well as eight at-large members (including residents of the two senior complexes). The group met regularly since 2004 and obtained consultant services (with Christian Church Homes) to analyze processing and financing issues for the project. In early 2010, the City Council reviewed information collected by the task force and confirmed its interest in moving forward with the project. The task force is considering replacing one or both of the existing developments with a larger number of units, using the current affordability levels as a minimum for any future project. Due to the scope of this project, it will likely extend beyond the term of the five-year Consolidated Plan.

No resident initiatives are deemed necessary in the five-year period. However, the City is working with the Pleasanton Housing Authority on the preparation of the next five-year Housing Authority Agency Plan required by HUD. The City will continue to coordinate with the Housing Authority during the coming five-year period.