

Chesterfield County, VA HOME-ARP Allocation Plan

March 2023

Chesterfield County Department of Community Enhancement



Executive Summary

The American Rescue Plan of 2021 appropriated \$5 billion in funding to provide housing, services, and shelter to individuals experiencing homelessness and other vulnerable population through the Home Investment Partnership Program – American Rescue Plan (HOME-ARP) Program. The U.S. Department of Housing and Urban Development administers the HOME-ARP Program and Chesterfield County, Virginia was awarded \$2,124,036 in HOME-ARP funds on April 28, 2021.

This Allocation Plan outlines the intended use the HOME-ARP funds allocated to Chesterfield County. After conducting thorough data analysis and robust community stakeholder consultation, in partnership with neighboring participating jurisdictions, Chesterfield has determined the best use of the HOME-ARP allocation is capital funding for development of affordable rental housing. Specifically, the funding will be directed at capital subsidies for the creation of new Permanent Supportive Housing (PSH) inventory designed to meet the needs of qualifying populations with the highest housing and service needs.

The gap analysis revealed a significant need for permanent housing affordable to individual adults experiencing long-term homelessness and living with disabling conditions, and the stakeholder consultation supported this analysis. The gaps in shelter availability were significantly lower than the gaps in permanent housing options and history shows that development of affordable rental housing, specifically PSH, will also reduce shelter capacity by providing reasonable options to help people move out of shelter more quickly. Significant stakeholder engagement substantiated the findings of the analysis. Using the HOME-ARP funds to support production of high quality PSH is key to a long-term approach to addressing the Qualifying Populations' needs by providing permanent solutions that will also improve the overall capacity of the housing and service delivery system.

To ensure existing resources meet the Qualifying Populations (QPs) identified as highest need, a preference will be established for the segment of the QPs experiencing long-term homelessness. Individuals will be identified for referrals through the Continuum of Care's Coordinated Entry system and the regional Housing Resource Line, which together serve all members of the QPs. Recognizing the regional nature of homelessness, Chesterfield will partner with neighboring HOME-ARP jurisdictions, Henrico County and the City of Richmond, to explore coordinated strategies for soliciting and funding projects that will produce high quality affordable and supportive rental housing that meets the unique housing and services needs of the population.

The following plan explains the process that led to this conclusion as well as the goals of the intended use of funds.

Consultation

Describe the consultation process including methods used and dates of consultation:

Chesterfield County collaborated with the City of Richmond and Henrico County to conduct a regional approach to the stakeholder consultation process. This cross-jurisdictional partnership was formed in recognition that homelessness and housing instability in the Richmond metro area is a regional issue, requiring a regional approach to understanding the needs of the qualifying populations and developing collective strategies for the best use of HOME-ARP funds to address this need.

To assist with the needs assessment, gaps analysis and consultation process, Chesterfield County contracted with the Corporation for Supportive Housing (CSH) to conduct a stakeholder consultation process in accordance with HOME-ARP requirements. The consultation process included virtual meetings, listening sessions with HOME-ARP required and key community stakeholders to provide information on the HOME-ARP program, collect data and information on the needs of the qualifying populations, and solicit input on the best use of HOME-ARP funds to address these needs. Two surveys were also administered to provide an additional avenue for stakeholders to provide input and to obtain input from people with lived experience. Below is a summary of the consultation process, including the methods and dates of consultation:

07/01/2022-CSH and Chesterfield met with the lead HMIS agency, Homeward, to discuss the HOME-ARP opportunities including Qualifying Populations and eligible uses. Homeward agreed to share HMIS data, annual reports, and PIT and HIC data in service of the Needs Assessment and Gaps Analysis and recommended a series of other contacts that could provide data for the remaining QPs. Homeward also offered insight into the priority needs of the QPs.

07/12/2022-CSH met with the lead DV hotline and data collective, EmpowerNet, to provide an overview of the HOME-ARP opportunity and request data to inform the Needs Assessment and Gaps Analysis. EmpowerNet provided background information about the DV service provider network in Chesterfield and throughout the Richmond metro region and shared data from the 24/7 DV hotline that serves the PJ's geography.

07/15/2022-CSH met with Housing Resource Line personnel to request data to help describe the size and demographic makeup of the populations at risk of homelessness in Chesterfield. The Housing Resource Line, administered by the Partnership for Housing Affordability, provided data on the callers to the hotline since its inception in September 2020.

08/19/2022-CSH met with the Chesterfield Department of Social Services (DSS), which serves as the local Housing Choice Voucher administrator contracted through Virginia Housing, the state Housing Finance Agency and Housing Choice Voucher administrator for the balance of state. Discussions centered on the services the department provides and the needs of the qualifying populations they serve. Chesterfield DSS provided data on

their service requests from both people experiencing homelessness and people at risk of homelessness.

11/07/2022-CSH presented preliminary findings from the needs assessment and gap analysis to the jurisdictional and Continuum of Care (CoC) partners to engage them in the analysis and obtain initial feedback via a 2-hour virtual meeting. This meeting included jurisdictional representatives from Chesterfield and Henrico Counties, as well as leadership from Homeward, the regional Continuum of Care Collaborative Applicant and homeless services planning and coordinating organization.

11/14/2022-CSH, Chesterfield and regional jurisdictional partners, conducted a webinar, broadly marketed to community partners via email and by utilizing homeless system networks, to present the initial findings. The webinar included an overview of HOME-ARP eligible uses and populations, an initial findings report of the needs and gaps analysis, and provided information on the community consultation process and encouraged participation in the listening sessions.

12/01/2022-CSH subcontracted with Virginia Community Voice (VACV), a local organization based in Richmond to host a virtual listening session for homeless service providers as determined by the stakeholder consultation plan developed by CSH and jurisdictional partners. VACV was chosen due to its focus on equitable community engagement and ability to provide translation services for Spanish speakers, a primary and increasing population in the region. The Greater Richmond CoC (via Homeward) were also consulted to provide a comprehensive list of providers. The session was held via Zoom with a time allotment of two hours. There were a total of nineteen (19) homeless services provider agencies and twenty-two (22) overall provider participants represented at the session. Participants were encouraged to provide feedback directly at the listening session or via an online survey, which was displayed during the community webinar, after the listening session, and distributed via email following the listening session.

12/01/2022, cont.- CSH partnered with VACV to host a separate virtual listening session for key stakeholders as determined by the HUD HOME-ARP allocation plan guidelines including, but not limited to; domestic violence service providers, veterans' groups, public agencies that address the needs of the qualifying populations, and public or private organizations that address fair housing, civil rights, and the needs of persons with disabilities. The session was held via Zoom with a time allotment of two hours. There was a total of thirteen (13) homeless services provider agencies and fourteen (14) overall provider participants represented at the session. Participants were encouraged to provide feedback directly at the listening session or via an online survey, which was displayed during the community webinar, after the listening session, and distributed via email following the listening session.

12/13/2022-12/21/2022- CSH and VACV provided in-person outreach at two regional temporary shelters to collect feedback from members of the qualified population via

detailed survey and comment section which was completed with individuals one-by-one. A total of fourteen (14) surveys were completed with individuals meeting the criteria for one or more of the Qualifying Populations.

11/14/2022-01/06/2022-CSH distributed an online survey via service provider networks, jurisdictional partners, email outreach, and by providing the link at the Community Webinar to collect feedback from stakeholders who were unable to attend the webinar and listening sessions. The survey was distributed to over seventy (70) organizations throughout the region directly via email and shared via community partner listservs.

12/12/2022-01/09/2022-CSH conducted interviews with key stakeholders who were identified based on the results of the Needs Assessment, the resources they administer, and their connections to serving qualifying populations in the region. The stakeholders interviewed included the Greater Richmond Continuum of Care Board, all regional Community Services Boards (Virginia’s public behavioral health and developmental disability service entities); the Richmond Redevelopment and Housing Authority; State Housing and Services Partners/Funders including, the Virginia Department of Behavioral Health and Developmental Services (DBHDS), the Virginia Department of Housing and Community Development (DHCD), and Virginia Housing, the state’s Housing Finance Agency as well as Housing Choice Voucher administrator for the balance of state, which includes Chesterfield County.

List the organizations consulted:

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
Regional Homeless Services Providers	<ul style="list-style-type: none"> • Homeless Services Providers • Fair Housing Organizations • Domestic Violence Services Providers • Public Agencies <p><i>See Table below for list of attendees.</i></p>	Two-Hour Virtual Listening Session conducted 12/01/2022	Service providers named building / rehabbing affordable rental housing as both the biggest need and the eligible activity that will most impact folks experiencing homelessness. Furthermore, participants shared that even when there are units available, not everyone will accept housing vouchers, or the vouchers, even when able to go up to 130% of FMR, do not cover soaring rents in the region. Participants also shared that additional Permanent Supportive Housing would positively impact those

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
			<p>experiencing chronic homelessness and free up capacity in other parts of the system. Many participants view PSH as a “huge priority” that would “enable long-term change.” Folks also shared that any new permanent supportive housing programs should include supportive services that are customized to meet individual needs.</p>
<p>Regional Community Partners (beyond Homeless Service Providers)</p>	<ul style="list-style-type: none"> • Fair Housing Organizations • Re-Entry Organizations • Domestic Violence Services Providers • Public Agencies <p><i>See Table below for list of attendees.</i></p>	<p>Two-Hour Virtual Listening Session conducted 12/01/202</p>	<p>Regional Community Partners said that building additional / rehabbing affordable rental housing units, would make the biggest impact for our unhoused neighbors. Additional housing units also need to be deeply affordable so that people with extremely low incomes can afford them. Participants also recognized that building and rehabbing these units would not be a short-term solution, but a longer-term, more permanent solution. Participants shared the need for education on landlord- tenant rights and financial literacy for members of the qualifying populations. Feedback around supportive services acknowledged that these are most effective when combined with affordable and accessible housing (vouchers, rental units, etc) as well as flexible funding to holistically address needs.</p>

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
Individuals with Lived Experience	<p>Individuals with Lived Experience with Homelessness served through emergency shelter.</p> <p><i>See Table below for list of participants.</i></p>	<p>In-person surveys conducted on 12/15/2022 and 12/20/2022</p>	<p>When asked which of the previous eligible activities would be most helpful, the majority of the respondents replied with more accessible shelter connected to housing access. Respondents stated an immediate need for shelter and safety is not being met by the resources that are currently available in the region. The next most referenced eligible activity was building long-term affordable housing. Many lamented the accessibility and safety of affordable housing, saying it was hard to find and can be dangerous to live in.</p>
Greater Richmond Continuum of Care Executive Board	<p>Continuum of Care</p> <p><i>See Table below for list of attendees.</i></p>	<p>Virtual Meeting held 12/27/2022</p>	<p>Lack of affordable units is preventing people from leaving shelter even with vouchers. Lack of identification and other qualifying documents is also a barrier to being able to access housing in a timely manner. The barriers to accessing housing further extends the length of time persons spend experiencing homelessness. Long-term, affordable, supportive housing is the best solution. Coordinated Entry should be used, access points should be increased and more available to persons experiencing street homelessness.</p>
Key State Partners	<p>Virginia Department of Behavioral Health and Developmental Services</p>	<p>Virtual Meeting held 01/04/2023</p>	<p>The Commonwealth has had a priority to increase permanent supportive housing</p>

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
	<p>Virginia Department of Housing and Community Development</p> <p>Virginia Housing (state housing finance agency, and Housing Choice Voucher Administrator)</p> <p><i>See Table below for list of attendees.</i></p>		<p>opportunities for the past decade, initially driven by the state’s Olmstead settlement (a mandate to ensure community integration in housing options for people with disabilities) as well as priority to address homelessness. This has led to new resources and program incentives to develop Permanent Supportive Housing (PSH) for people with Intellectual Disabilities as well as people with serious mental illness experiencing homelessness and unnecessary institutionalization. These efforts have been led by an interagency structure, with DBHDS, Virginia Housing, and DHCD as primary agency leads. While there has been progress, there is a need to build community capacity and local resource commitments to ensure this can continue and scale to meet the needs of the qualifying populations. DBHDS PSH programs align with SAMHSA PSH fidelity standards, including adherence to optimizing choice, ensuring low barrier access, and a clear separation of housing and services. DHCD provides scoring preferences for projects that provide qualified PSH units (5 point increase on 100 point scale). Minimum of 1 unit, up to 5-8% depending on size of building. Priority populations</p>

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
			<p>are people exiting homelessness, ID/DD, or SMI. MOUs with a service organization for referrals are required to ensure they can fill those units in a timely manner. DHCD values leveraging of available local resources when assessing applications for state funding and prioritizes projects that come in with a reasonable mix of committed sources. Virginia Housing requires a 10% leasing preference for special populations within the Virginia LIHTC program. Additionally, Virginia Housing is pursuing allowing project basing of Housing Choice Vouchers (HCV) in their catchment area to address underutilization of vouchers due to the lack of housing inventory across the state.</p>
<p>Community Services Boards (Public behavioral health and developmental disability services agencies)</p>	<p>Local CSBs: Chesterfield County Community Services Board Henrico Mental Health and Developmental Services Richmond Behavioral Health Authority <i>See Table below for list of attendees.</i></p>	<p>Virtual Meeting held 01/04/2023</p>	<p>The regional community services boards shared that they are seeing an increase in housing need among justice involved populations, and that homelessness in the region is being addressed by detaining persons experiencing homelessness in jail, increasing their justice involvement and therefore housing barriers. Additionally, they reported an increase in the number of individuals entering homelessness from state hospitals or other institutional settings. They would like to see</p>

Agency/Org Consulted	Type of Agency/Org	Method of Consultation	Feedback
			the services/programmatic emphasis be on housing status rather than disability type in order to have more flexibility and better meet the needs of the populations served. Overall, there is a great need for low barrier, deeply affordable housing stock that has considerations for multiple historically marginalized populations.
Department of Social Services	Regional DSS <i>See Table below for list of attendees.</i>	Virtual meetings held 08/19/2022 & 01/09/2023	The regional DSS partners reported that the biggest need is affordable housing. There is a significant impact on individuals' ability to find housing due to wide-spread generational poverty. Many of the individuals seeking housing are having difficulty making payments or are behind on utilities and other bills, further preventing them from rental eligibility. The housing made available must be low barrier for historically marginalized populations and should be well integrated into the community and close to resources.
Richmond Redevelopment and Housing Authority	Public Housing Authority <i>See Table below for list of attendees</i>	Virtual Meeting held 01/11/2023	There are thousands of households on the waitlist now with over 10,000 people on the waitlist for one-bedroom units. Voucher utilization has been impacted by the lack of housing inventory and, for single adults. Barriers such as documentation and accessibility prolong the time people spend in crisis.

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			Specialty vouchers are usually paired with other service providers so they often have someone helping them overcome these barriers. People coming in without case managers often need more help and are not housed as quickly. RRHA is working with the Greater Richmond CoC to build off their partnership on EHV and implement referrals and preferences for people identified through the CoC's Coordinated Entry System.
Key Stakeholders	Community Based Organizations <i>See Table below for list of participants.</i>	Online survey distributed via direct emails, blasted via the GRCoC Listserv, and distributed to all Listening Session attendees	Long-term, affordable housing, specifically, permanent supportive housing was identified as the greatest need. It was reported that the community has been "saturated" with Tenant Based Rental Assistance (TBRA), but there are not enough housing units to utilize for these vouchers (either due to tenant barriers, cost of rent, or landlord refusal to work with a voucher).

Homeless Services Providers Listening Session Invitees (*denotes invited but did not attend)

Name	Agency	Type of Agency	QPs Served
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A
Stephen Batsche	The Salvation Army Central Virginia	Homeless Services Provider	QP 1
Jonathan Penn	Chesterfield-Colonial Heights Social Services	Public Agency	All QPs
Lexie Haglund	CARITAS	Homeless Services Provider	QP 1
Donna Stallings	Housing Opportunities Made Equal of VA	Fair Housing Organization	All QPs

Katie Chlan	Richmond Behavioral Health Authority	Public Agency	QP 1
Sharonita Cousin	Virginia Supportive Housing	Homeless Services Provider, Veterans Services, Housing Developer	QP 1, 4
Erica Holmes	SJV- Flagler Housing and Homeless Service	Homeless Services Provider	QP 1, 2, 4
Kelly Green-Bloomfield	SJV- Flagler Housing and Homeless Service	Homeless Services Provider	QP 1, 2, 4
Katelyn Schoelles	SJV- Flagler Housing and Homeless Service	Homeless Services Provider	QP 1, 2, 4
Noah Page	YWCA Richmond	Domestic Violence Provider	QP 3
Katie Rhodes	YWCA Richmond	Domestic Violence Provider	QP 3
Kristin Riddick	Housing Families First	Homeless Services Provider	QP 1, 2
Karen O'Brien	CARITAS	Homeless Services Provider	QP1
Nathan Ruckman	Virginia Supportive Housing	Homeless Services Provider, Veterans Services, Housing Developer	QP 1, 4
Kelly King Horne	Homeward	Continuum of Care	QP 1, 2
Heather Fritz	EMS of Virginia	Private Services Organization	QP 2, 4
Cathy Easter	Safe Harbor	Domestic Violence Provider	QP 3
Marc Rene	Richmond Metro Habitat	Private Housing Provider	QP 4
Cory Richardson-Lauve	Virginia Home for Boys and Girls	Private Disability Services Org	QP 4
Anita Bennett	Daily Planet Health Services	Homeless Services Provider	QP 1
Sarah Tunner	Daily Planet Health Services	Homeless Services Provider	QP 1
Jessica Sagara	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Sarah Chua	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A
Rachael Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
Lily Miller	(not reported)	N/A	N/A
*	Commonwealth Catholic Charities	Homeless Services Provider	QP 1
*	HomeAgain	Homeless Services Provider, Veterans Services	QP 1

Community Partners Listening Session Invitees (*denotes invited but did not attend)

Name	Agency	Type of Agency	QPs Served
Jovan Burton	Partnership for Housing Affordability	Regional Planning Org, Housing Resource Line Administrator	QP 2, 4
Kalisha Jackson	Housing Opportunities Made Equal of VA	Fair Housing Organization	All QPs

Ben Wong	OAR of Richmond	Private Organization, Re-Entry Assistance for Justice Involved Populations	QP 4
Donna Stallings	Housing Opportunities Made Equal of VA	Fair Housing Organization	All QPs
Brenda Hicks	Housing Opportunities Made Equal of VA	Fair Housing Organization	All QPs
Hana Yun	ACTS	Private Organization, Housing Services	QP 2, 4
Jonathan Penn	Chesterfield DSS	N/A	N/A
Nathan Ruckman	Virginia Supportive Housing	Homeless Services Provider, Veterans Services, Housing Developer	QP 1, 4
Julie Anderson	Virginia Supportive Housing	Homeless Services Provider, Veterans Services, Housing Developer	QP 1, 4
Karen Swansey	Virginia Boys and Girls Home	Private Disability Services Org	QP 4
Leslie Beard	Partnership for Housing Affordability-Housing Resource Line	Regional Planning Org, Housing Resource Line Administrator	QP 2, 4
Marion Cake	Project Homes	Private Organization, Affordable Housing	QP 4
Shaniqua Faulk	Virginia Supportive Housing	Homeless Services Provider, Veterans Services, Housing Developer	QP 1, 4
Veronica Reid	Virginia Community Voice	Private Organization, Community Advocacy	All QPs
Andi MacDougall	(not reported)	N/A	N/A
Michelle Jones	Housing Opportunities Made Equal of VA	Fair Housing Organization	All QPs
Sharonita Cousin	Virginia Supportive Housing	Homeless Services Provider, Veterans Services, Housing Developer	QP 1, 4
Jessica Sagara	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Sarah Chua	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Luanda Fiscella	Henrico County Department of Community Revitalization	PJ Partner	N/A
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A
Rachael Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
*	Veterans Outreach	Veterans Services	QP 1, 2
*	DLW Veterans Outreach and Training Center	Veterans Services	QP 2, 4
*	Vietnam Veterans of America	Veterans Services	QP 2, 4
*	Moments of Hope	Veterans Services	QP 2, 4

*	HandUp Community Resource Center	Veterans Services	QP 1
*	Start By Believing	Domestic Violence Provider	QP 3

Survey with Persons with Lived Experience

Katya	Person with Lived Experience	QP1 & 3
Jazmine	Person with Lived Experience	QP1
Kris	Person with Lived Experience	QP1
Vicky	Person with Lived Experience	QP1
Telecia	Person with Lived Experience	QP1 & 3
Lillian	Person with Lived Experience	QP1, Other (Veteran)
Richard	Person with Lived Experience	QP1
Melvin	Person with Lived Experience	QP1, Other
James	Person with Lived Experience	QP1
Michael	Person with Lived Experience	QP1
Donavon	Person with Lived Experience	QP1
Thomas	Person with Lived Experience	QP1, Other (Veteran)
Rodney	Person with Lived Experience	QP1
Marcus	Person with Lived Experience	QP1

Interview with Greater Richmond Continuum of Care Executive Board

Name	Agency	Type of Agency	QPs Served
Kelly King Horne	Homeward	Continuum of Care Collaborative Applicant and HMIS Lead	QP 1, 2
Irene Zolotorofe	CoC Board Member, Virginia Commonwealth University	Healthcare: Injury and Violence Prevention	All QPs
Dr. P. Cook	CoC Board Member, Virginia Commonwealth University	Healthcare: Injury and Violence Prevention	All QPs
Katie Rhodes	CoC Board Member, YWCA	Domestic Violence	QP 3
Anette Cousins	CoC Board Chair, Community Foundation of Greater Richmond	Other	N/A
Matt Scaparro	CoC Board Member, Better Housing Coalition	Private Org, Affordable Housing Developer	QPs 2, 4
Beth Vann-Turnbull	CoC Board Member, Housing Families First	Homeless Services Provider	QPs 1, 2
Sherrill Hampton	City of Richmond Department of Housing and Community Development	PJ Partner	N/A

Eric Leabough	Henrico County Department of Community Revitalization	PJ Partner	N/A
Rachael Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A

Interview with Key State Stakeholders (DBHDS, DHCD, Virginia Housing)

Name	Agency	Type of Agency	QPs Served
Kristin Yavorksy	DBHDS	Public Agency, Disability Services	QP 1, 4
Abby Boyd	Virginia Housing	Public Housing Authority	All QPs
Chloe Rote	DHCD	Public Agency, Affordable Housing Development	All QPs
Dan Cohen	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Jessica Sagara	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Sarah Chua	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Rachael Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
Eric Leabough	Henrico County Department of Community Revitalization	PJ Partner	N/A

Interview with Regional Departments of Social Services-Chesterfield

Name	Agency	Type of Agency	QPs Served
Kiva Rogers	Chesterfield County DSS	Public Agency	All QPs
Danika Briggs	Chesterfield County DSS	Public Agency	All QPs
Lolita Moody	Chesterfield County DSS	Public Agency	All QPs

Interview with Regional Departments of Social Services-Henrico

Name	Agency	Type of Agency	QPs Served
Gretchen Brown	Henrico County DSS	Public Agency	All QPs
Eric Leabough	Henrico County Department of Community Revitalization	PJ Partner	N/A
Rachel Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A

Interview with Regional Community Services Boards

Name	Agency	Type of Agency	QPs Served
Katie Chlan	Richmond Behavioral Health Authority	Public Agency	QP 1, 2, 4
Doug Bilski	Chesterfield Community Services Board	Public Agency	QP 1, 2, 4
Michael Nielsen	Henrico Mental Health and Developmental Services	Public Agency	QP 1, 2, 4
Adam Seehaver	Chesterfield Community Services Board	Public Agency	QP 1, 2, 4
Daniel Rigsby	Henrico Mental Health and Developmental Services	Public Agency	QP 1, 2, 4
Karen Bowker	Chesterfield Community Services Board	Public Agency	QP 1, 2, 4
Rachael Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A
Jessica Sagara	Chesterfield County Department of Community Enhancement	PJ Partner	N/A
Sarah Chua	Chesterfield County Department of Community Enhancement	PJ Partner	N/A

Interview with Richmond Redevelopment and Housing Authority

Name	Agency	Type of Agency	QPs Served
Fatimah Hargrove	RRHA	Public Housing Authority	All QPs
Eric Leabough	Henrico County Department of Community Revitalization	PJ Partner	N/A
Rachael Thayer	Henrico County Department of Community Revitalization	PJ Partner	N/A
Cara Kaufman	Henrico County Department of Community Revitalization	PJ Partner	N/A
Sherill Hampton	City of Richmond Department of Housing and Community Development	PJ Partner	N/A
Sarah Chua	Chesterfield County Department of Community Enhancement	PJ Partner	N/A

Online Survey Participants

Name	Agency	Type of Agency	QPs Served
Martha Shephard	Henrico Area Mental Health & Developmental Services	Public Agency	All QPs
Anita Bennett	Daily Planet Health Services	Homeless Services Provider	QP 1
Lexie Haglund	CARITAS	Homeless Services Provider	QP 1
Veronica Reid	Virginia Community Voice	Community Advocacy Organization	All QPs

Kelly King Horne	Homeward	Continuum of Care	QP 1, 2
Katie Chlan	Richmond Behavioral Health Authority	Public Agency, PSH Provider	QP 1, 2, 4
Nancy Kunkel	Board Secretary and Housing Steering Committee Member, RISC	Private Organization, Advocacy	Other
Ben Wong	OAR	Private Organization, Re-entry	QP 1, 2, 4
Matt Scaparro	Better Housing Coalition	Affordable Housing Developer	QP 2, 4

Summarize feedback received and results of upfront consultation with these entities

Feedback received through the community consultation process revealed the overwhelming need for increased permanent housing options across all HOME-ARP qualifying populations, but most acutely for people with complex housing and service needs, and lengthy histories of homelessness living in unsheltered and sheltered locations. Consistent themes included:

- There is not enough affordable rental housing for people with no to extremely low incomes (0-30% AMI) in the region
- When available, majority of existing housing stock is not accessible to members of the qualifying population and therefore, increases the length of time individuals spend experiencing homelessness. This exacerbates and overwhelms the shelter system.
- Those with direct contact with the qualifying populations stated specifically that there is a need for Permanent Supportive Housing (PSH) in the region.
- Service providers indicate the number of individuals entering homelessness from institutional settings and/or cycling through local jails is increasing rapidly, and the acuity of the population is resulting in higher service needs, beyond current system capacity. Additionally, the acuity and vulnerability of the population experiencing homelessness in terms of complex health and disabling conditions was affirmed through data analysis.
- Across stakeholders consulted, including the Public Housing Authorities operating in the region, highlighted that the need for tenant based rental assistance for members of the qualified population was as a lower priority due to the lack of accessible housing inventory to pair with housing assistance vouchers.
- Some stakeholders, including members of the qualified population, expressed a need for shelter to address immediate needs, but the overall greatest need expressed was for more accessible and affordable rental housing for people experiencing homelessness, including people residing in shelters. Members of the Qualified Populations shared that their immediate needs were not being met largely due to a lack of or insufficient resources. Many noted that the housing options in the region have high barriers and the timeline to access the resources prevents some individuals from ever gaining access to permanent housing options.

Additionally, housing and homelessness system leaders and funders expressed the need for and support for Permanent Supportive Housing and a regional approach to meeting this need:

- Representatives from the Greater Richmond Continuum of Care stated that they would support a regional PSH effort by exploring options to expand Coordinated Entry access points and continued community collaboration with the Housing Resource Line to ensure low barrier access to those with the greatest housing and services needs.
- Representatives from state housing and service partners (DBHDS, DHCD, Virginia Housing) identified the development of new PSH inventory as a state priority and have prioritized PSH unit development within their funding programs through a combination of required preferences and incentives.

Based on this feedback, Chesterfield County's allocation of HOME-ARP should be directed to rental housing development through the provision of capital subsidies, specifically for the creation of new Permanent Supportive Housing inventory designed to meet the needs of qualifying populations with the highest housing and service needs. This will be accomplished by establishing a preference for this segment of the qualifying populations and identifying individuals for referrals through the CoC's Coordinated Entry system and the regional Housing Resource Line, which together serve all members of the Qualifying Populations. Chesterfield will also work with regional HOME-ARP jurisdictional partners, Henrico County and the City of Richmond, to explore coordinated strategies for soliciting and funding projects that will produce high quality affordable and supportive rental housing that meets the unique housing and services needs of the population. Chesterfield, Henrico, and Richmond established an MOU to coordinate these efforts on December 14th, 2021.

Public Participation

Describe the public participation process, including information about and the dates of the public comment period and public hearing(s) held during the development of the plan:

- ***Date(s) of public notice: 1/25/2023***
- ***Public comment period: start date – 2/6/2023 end date - 3/7/2023***
- ***Date(s) of public hearing: 2/9/2023***

Describe the public participation process:

In accordance with Chesterfield County's Citizen Participation Plan, a 30-day public comment period on the draft HOME-ARP Allocation Plan was held from February 6, 2023 – March 7, 2023. A Public Hearing on the draft plan was held on February 9th, 2023. The meeting was held in-person with the option to join virtually. Citizens in attendance had the opportunity to ask questions and provide comments on the findings and recommendations found in the draft plan.

Describe efforts to broaden public participation:

The public comment period and public hearing were advertised in the Richmond Times-Dispatch, on county website and social media, and through various other community forums. Throughout the public comment period the draft HOME-ARP Allocation Plan was available for review on the Department of Community Enhancement website. There also was a form available for citizens to submit comments on the Community Enhancement website throughout the public comment period. Chesterfield made efforts to broaden public participation through inviting all CoC members and other community partners that work with the QPs to attend the public hearing and/or provide comments, conducting focus groups with people with lived experience, and posting notices on the public county events calendar and social media.

Summarize the comments and recommendations received through the public participation process either in writing, or orally at a public hearing:

The Public Hearing on February 9th, 2023 brought forward concerns from one community member about the ease of access to units and services. Many current homelessness services professionals provided more detailed information about the Coordinated Entry process and the concerns of the individual were otherwise addressed by county officials through clarifying the anticipated regional response efforts. Otherwise, comments received in person were in general support of the proposed Plan.

All comments received in writing during the Public Hearing were in support of the Plan as stands and provided positive feedback on the County's efforts to contribute to a regional approach.

Chesterfield received four comments via the online comment submission portal. These comments were mostly in favor of the activities as planned. Two comments offered additional housing and services support suggestions that would not align with HOME-ARP criteria and therefore cannot be incorporated into the Plan.

See appendix for comments received and further details.

Summarize any comments or recommendations not accepted and state the reasons why:

All comments received were accepted and considered equally. Comments that did not align with the activities established in this Plan were addressed and commentors were given an opportunity to understand why the suggestions were not appropriate for this funding source.

Needs Assessment and Gaps Analysis

Table 1: Homeless Needs Inventory and Gap Analysis Table

Homeless													
	Current Inventory					Homeless Population				Gap Analysis			
	Family		Adults Only		Vets	Family HH (at least 1 child)	Adult HH (w/o child)	Vets	Victims of DV	Family		Adults Only	
	# of Beds	# of Units	# of Beds	# of Units	# of Beds					# of Beds	# of Units	# of Beds	# of Units
Emergency Shelter	256	84	193	193	0								
Transitional Housing	13	3	22	22	21								
Permanent Supportive Housing	181 45 (CH)	65	586 221 (CH)	807	113 (fam) 405 (adults)								
Other Permanent Housing	9	2	86	86	14								
Sheltered Homeless						85	353	163*	255**				
Unsheltered Homeless						0	85	*	**				
Current Gap										(10)	(2)	223	213

Data Sources: 1. Point in Time Count (PIT 2022); 2. Continuum of Care Housing Inventory Count (HIC 2022); 3. Consultation with CoC - PIT Data in these tables are from the entire CoC, which includes Chesterfield, Richmond, and Henrico.

Explanation of Gap Analysis Calculation, above:

Family Beds: Number of homeless persons in households with at least one adult and one child (259) – number of ES + TH beds (269)

Family Units: Number of homeless households with at least one adult and one child (85) – number of ES +TH units (87)

Adult Beds: Number of homeless persons in households without children (438) – number of ES + TH beds (215)

Adult Units: Number of homeless households without children (428) – number of ES + TH units (215)

*2022 PIT does not include veteran status, but the HMIS data for the CoC indicates 163 veterans served through CE and Street Outreach

** 2022 PIT does not include DV status, but the HMIS data for the CoC indicates 255 households who reported either fleeing DV or identified as survivors of DV

Table 2: Housing Needs Inventory and Gap Analysis Table

Non-Homeless			
	Current Inventory	Level of Need	Gap Analysis
	# of Units	# of Households	# of Households
Total Rental Units	30,275		
Rental Units Affordable to HH at 30% AMI (At-Risk of Homelessness)	2,301		
Rental Units Affordable to HH at 50% AMI (Other Populations)	13,036		
0%-30% AMI Renter HH w/ 1 or more severe housing problems (At-Risk of Homelessness)		4,125	
30%-50% AMI Renter HH w/ 1 or more severe housing problems (Other Populations)		4,820	
Current Gaps			1,824*

Data Sources: 1. American Community Survey (ACS); 2. Comprehensive Housing Affordability Strategy (CHAS); PUMS

*Gap calculated as ELI Renter HH with 1 or more housing problem (4,125) minus the number of rental units affordable to this population (2,301) → 4,125-2,301 = 1,824 units needed

Describe the size and demographic composition of qualifying populations within the PJ’s boundaries:

Homeless as defined in 24 CFR 91.5

The table above reports the 2022 Point in Time (PIT) Count conducted by the Greater Richmond CoC. The PIT Count offers a snapshot of the population experiencing homelessness on one night and could obscure the true size and demographic composition of the population experiencing homelessness. To paint a more accurate picture of this QP, other data sources were consulted as well.

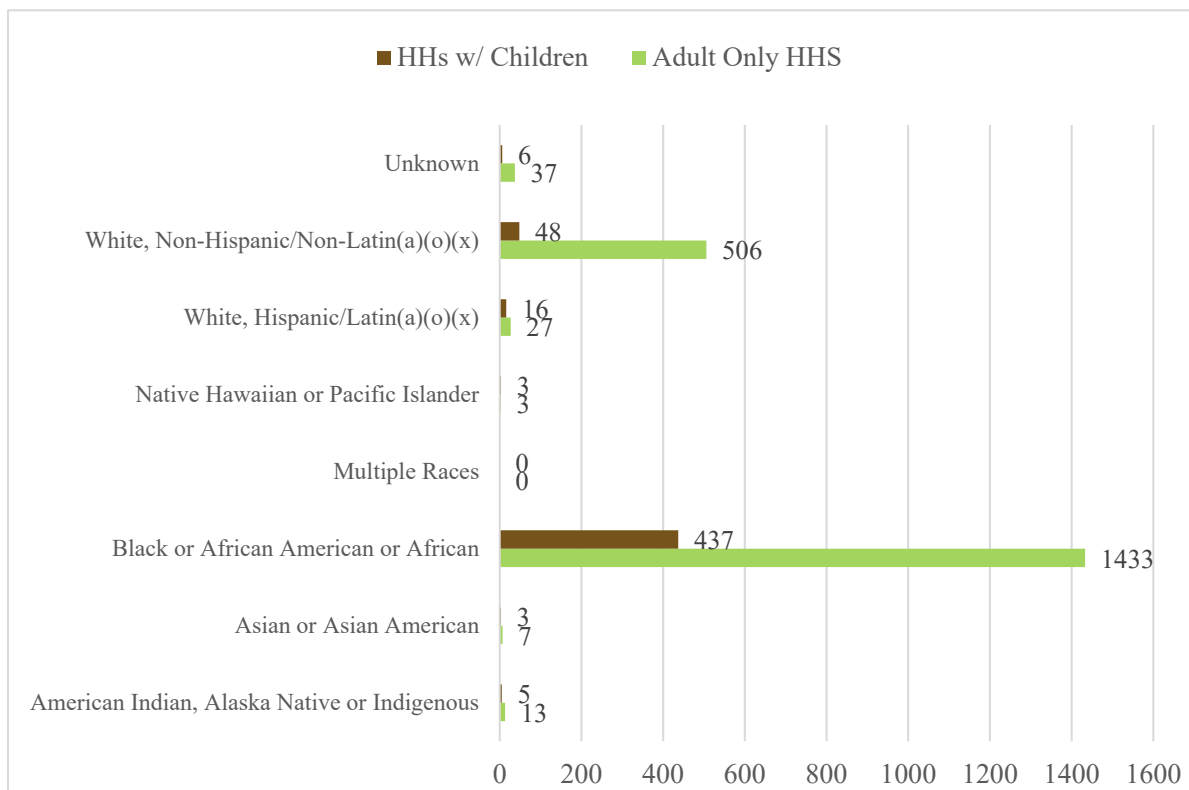
The 2022 Gaps Analysis conducted by Homeward, the CoC Lead for the region, estimated the population experiencing homelessness in Chesterfield to be 546 people (reporting period 4/1/21-3/31/22). Within this population, there were 326 Adult Only households and 219 people in families, although the report does not specify the number of families represented, only total numbers of individuals.

Because this analysis doesn’t include other demographic information, it is helpful to also use the LSA data as reported in the Stella P database, administered by HUD. This database collects data submitted by Homeward to provide a more detailed picture of the size and demographic composition of the QP in the CoC footprint. The Greater Richmond CoC includes Chesterfield as well as the neighboring jurisdictions of Richmond City, Henrico County, Hanover County, Goochland County, New Kent County, and Charles City County. Though this is regional data, it is appropriate for the purposes of describing the size and demographics of the QP in Chesterfield because of the regional nature of homeless services in this particular region. The Greater

Richmond region has population that frequently travels between jurisdictions, particularly because Richmond City is the only jurisdiction in the region with emergency shelter and the majority of services are located in the City of Richmond. This obfuscates the understanding of the population experiencing homelessness in the neighboring counties; therefore, a regional analysis is most appropriate for describing the size and demographic composition of the population experiencing homelessness.

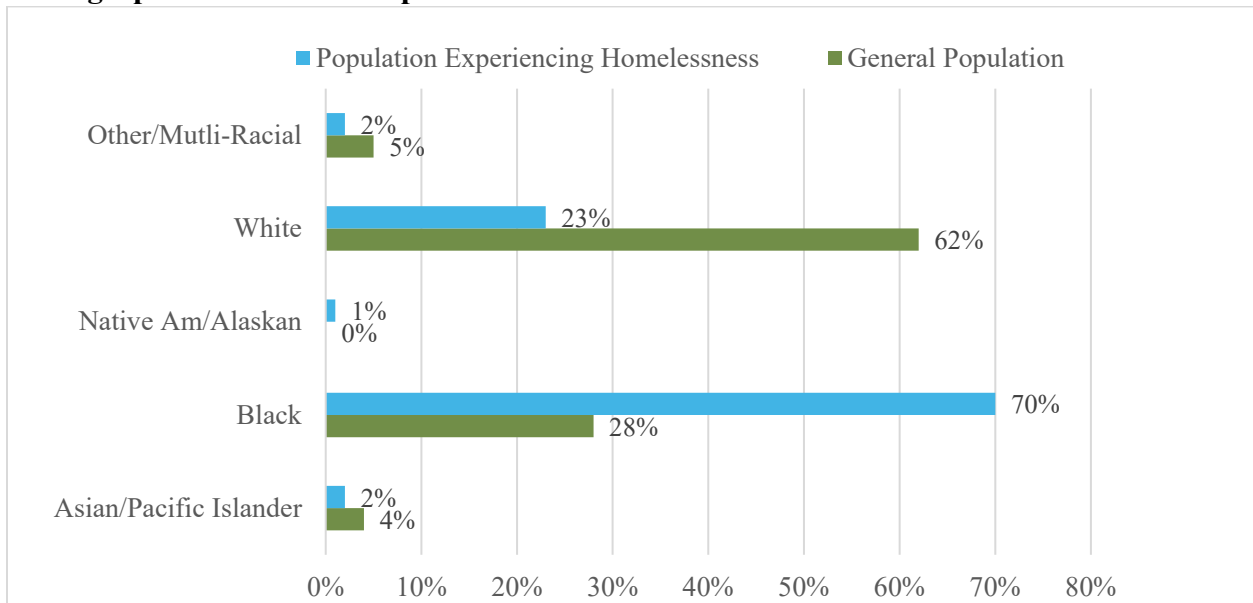
In the most recent reporting period available in the Stella P database (10/1/2020-9/30/2021), the database described in the paragraph above, there were 3,308 people served by shelters and transitional housing in the Richmond CoC. This included 2,477 households: 2,060 Adult Only HHs and 410 HHs with Children. **Figure 1** below shows the racial demographics of these households. For both Adult Only HHs and HHs with children, the highest represented racial group is Black/African American/African. **Figure 2** shows the comparison of the racial make-up of the population experiencing homelessness against the general population. This graph shows the disproportionate representation of Black residents within the population experiencing homelessness: though 28% of the general population of the Richmond CoC is Black, 70% of the population experiencing homelessness is Black. Though 62% of this general population is white, only 23% of the population experiencing homelessness is white. These data demonstrate that homelessness in the Richmond CoC disproportionately impacts the Black population.

Figure 1: Race and Ethnicity of Households Experiencing Homelessness



Data Source: Stella P (reporting period 10/1/20 – 9/30/21)

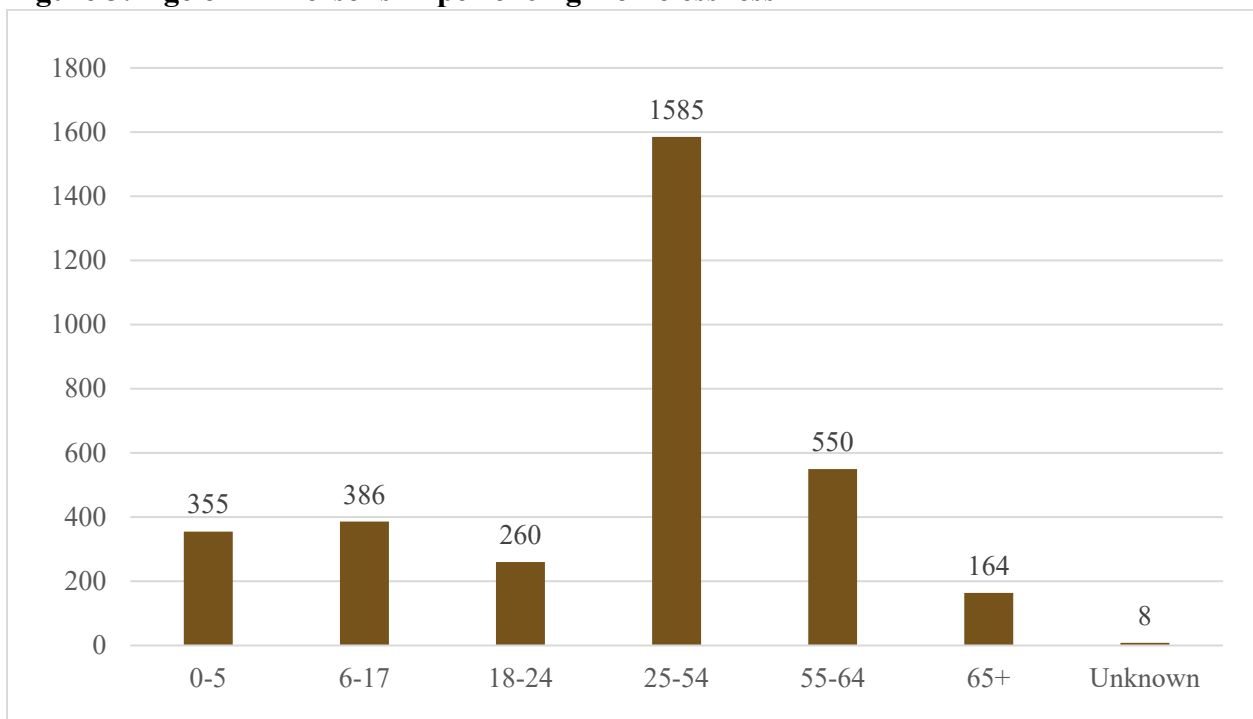
Figure 2: Racial Demographics of Population Experiencing Homelessness vs. Racial Demographics of General Population



Data Sources: ACS, Stella P (reporting period 10/1/20-9/30/21), CoC Racial Equity Analysis Tool (HUD)

Figure 3 below shows the age of all persons experiencing homelessness in the CoC. Notably there is a smaller portion of elderly individuals represented, likely due to the lower life expectancy of people experiencing homelessness, specifically long-term homelessness.

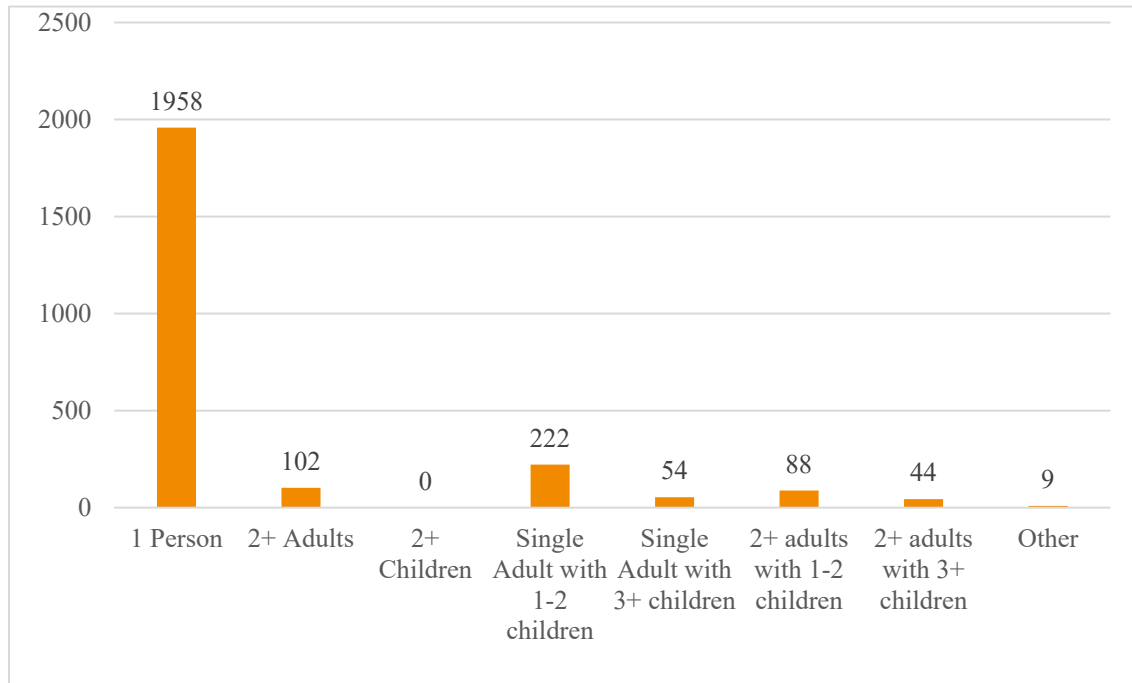
Figure 3: Age of All Persons Experiencing Homelessness



Data Source: Stella P (reporting period 10/1/20-9/30/21)

Figure 4 below shows the household composition of people experiencing homelessness in the Richmond area. 79% of HHs experiencing homelessness are made up of one person, and the second highest composition is single adult with 1-2 children, making up around 9% of HHs. Another population of note in this grouping was the 61 households of parenting youth: HHs with children where the head of household is aged 18-24. These parenting youth households made up 15% of all HHs with children.

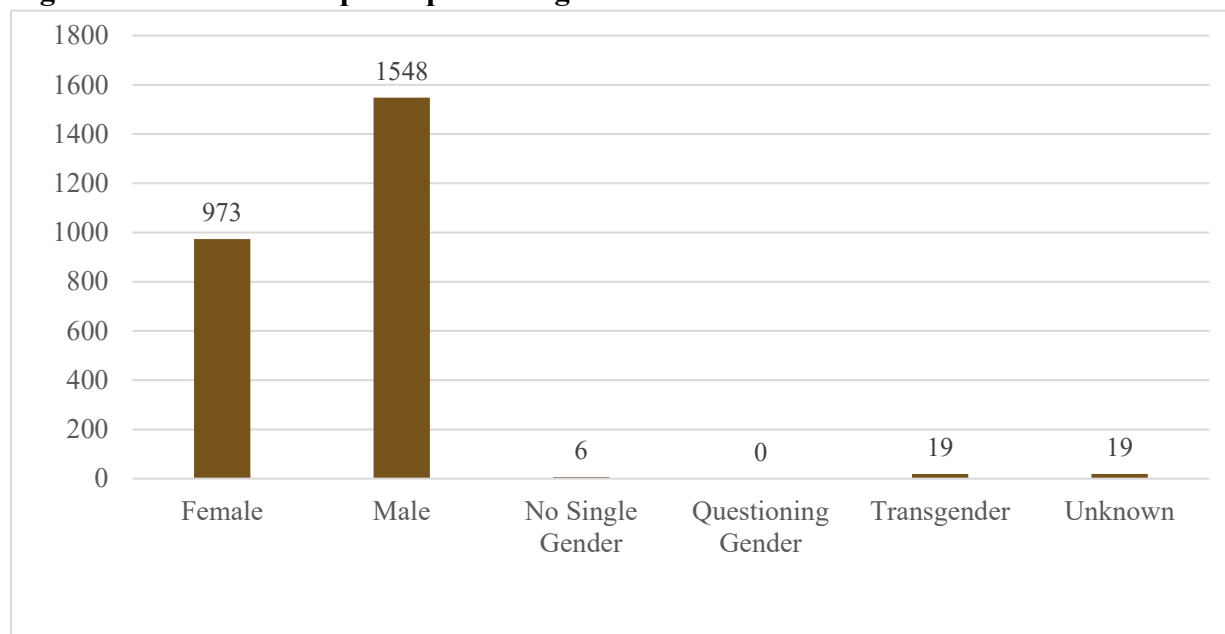
Figure 4: Household Composition of People Experiencing Homelessness



Data Source: Stella P ((reporting period 10/1/20-9/30/21))

Figure 5 below shows the gender of people experiencing homelessness. While the gender breakdown of the region is close to 50-50 between male and female, with smaller percentages for the other categories, around 60% of people experiencing homelessness in the region are male.

Figure 5: Gender of People Experiencing Homelessness



Data Source: Stella P (reporting period 10/1/20-9/30/21)

Other demographic details of note for this population experiencing homelessness are as follows: 10% of people experiencing homelessness in the Richmond area were veterans, and 26% were either survivors of domestic violence who are currently fleeing or survivors of domestic violence who were not currently fleeing (Source: Stella P reporting period 10/1/20-9/30/21).

The population experiencing homelessness in the Chesterfield area also includes significant portions with disabilities or other medical vulnerabilities. The 2022 Gaps Report compiled by Homeward reported that within single adults experiencing homelessness, 52% report a mental health disability, 35.5% report a chronic health condition, and 28.5% report a physical disability. Among adults in families, 44% reported a mental health disability, 25.6% report a chronic health condition, and 9% report a physical disability.

HMIS data provided by the CoC’s HMIS Lead, Homeward showed that the median income of HHs served by the homelessness system was \$272/month, or 3% of AMI. Around half of the households reported no income at all, and the median income for those with positive income was \$1,000 (12% AMI).

At Risk of Homelessness as defined in 24 CFR 91.5

HUD defines the Area Median Income for Chesterfield County (Richmond, VA MSA) as \$101,000 for a family of 4. Using this standard, ELI households are those with incomes at or below 30% AMI, or \$30,200. As reported by the most recent CHAS data (2015-2019), there are 30,275 total renter households in Chesterfield. Of those renter households, 4,810 (16%) have incomes at or below 30% AMI.

As displayed in **Table 3** below, of the 4,810 ELI renter households in Chesterfield, 4,000 are cost burdened (83%) and 3,665 are severely cost-burdened (76%). This demonstrates that the overwhelming majority of ELI renter households in Chesterfield are at risk of homelessness, as this population is defined.

Table 3: Income and Cost-Burden in Chesterfield

AMI	\$101,000
30% AMI (ELI)	\$30,200
Total Renter Households	30,275
ELI Renter Households	4,810
ELI Renter Households Cost Burdened	4,000 (83%)
ELI Renter Households Severely Cost Burdened	3,665 (76%)
ELI Renter Households with at least 1 housing problem	4,125 (86%)

Data Sources: CHAS (2019), HUD AMI Tables

CHAS data reports that 86% of these ELI renter households have at least 1 housing problem, further suggesting high risk of homelessness within this population.

Consultation with the Chesterfield Department of Social Services revealed that during the year between July 2021 and June 2022, the Chesterfield DSS received 338 requests for assistance from households who were within 30 days of losing their housing.

CSH consulted key stakeholder, Partnership for Housing Affordability, which administers the Housing Resource Line established in September 2020. Clients call this line to be directed to an organization or resource to help with their housing challenge. The population seeking assistance from this line is an indication of the population at risk of homelessness and those other populations who require housing assistance to prevent homelessness (QPs 2 and 4). Caller data is used as a proxy to describe the demographic composition of this population at risk of homelessness.

In the time between September 2020 and June 2022, there were a total of 2,058 calls to the Housing Resource Line from Chesterfield (about 17% of all callers). The following narratives and chart describe the characteristics of people who called the hotline from Chesterfield:

Over half of the Chesterfield callers asked for rental support and about a quarter reported either experiencing or being at risk of homelessness. Other concerns expressed included financial assistance (about 1/3), food insecurity, mental health crisis, or other needs. 94% of callers reported needing immediate assistance and another 4% needed assistance within the next 3 months.

Table 4: Demographic Characteristics of Callers to Housing Resource Line from Chesterfield (Population At Risk of Homelessness)

Family Composition	
Single Person	729 (50%)
2-person Household	441 (26%)
3-person Household	234 (14%)
4-person Household	165 (10%)
5+ person Household	125 (7%)
Household Annual Income	
<\$25,000	1116 (71%)
\$25,000-\$50,000	299 (19%)
\$50,000-\$75,000	37 (2%)
>\$75,000	7 (0.4%)
Not disclosed	100 (6%)
Race/Ethnicity	
Black/African American	1043 (53%)
White	500 (25%)
American Indian/Alaskan Native	11 (0.6%)
Asian	18 (0.9%)
Hispanic/Latinx	61 (3%)
Multi-Racial	66 (3%)
Age	
Under 17	1 (0.05%)
18-24	146 (7%)
25-34	492 (25%)
35-44	417 (21%)
45-54	359 (18%)
55-64	312 (16%)
65+	205 (10%)
Gender	
Female	1454 (73%)
Male	531 (26%)
Non-Binary	1 (0.05%)
Transgender	3 (0.1%)
Other Characteristics	
Veteran	99 (5%)
1 or more Mental Health challenge	353 (18%)
Disability or Chronic Health Issue	1020 (52%)

Data Source: Housing Resource Line (reporting period 9/1/2020 – 6/30/2022)

Note: not all percentages add up to 100 due to missing data or overlap in categories

Note: Language for all characteristics in the table matches the language used by Housing Resource Line

As noted in **Table 4** above, most of the households seeking assistance from the Housing Resource Line were individuals or small families: 729 households were single persons, 441 were 2-person households, and 234 were 3-person households. 961 of the callers reported no minors living in the household.

Callers to the hotline were overwhelmingly those who fall into either low- or extremely low-income AMI bands. 71% of those who reported their household income earn less than \$25,000 and 20% earn between \$25,000-\$50,000. Relatedly, 67% of the callers who reported income earn below 30% AMI while another 18% of the callers earn between 30-50% AMI. In raw numbers, at least 1,322 people in Chesterfield who called the Housing Resource Line for housing assistance fall into the income bands defining QPs 2 and 4.

Just over half the callers from Chesterfield were Black/African-American, one quarter were White, 4% were Multi-Racial, 3% Hispanic or Latino, less than 1% Asian, less than 1% American Indian/Alaskan Native, and 14% did not disclose race. Just as with the population experiencing homelessness, this racial makeup does not match the racial composition of the county as a whole, and Black residents are disproportionately represented in the population at risk of homelessness relative to their portion of the population as a whole.

Half of callers reported having a disability or chronic health issue, 99 were veterans, and 353 reported one or more mental health challenges.

The age of callers to the Housing Resource Line was relatively evenly distributed across age groups: There was 1 caller under 17, 146 were aged 18-24, 492 callers aged 25-34, 417 callers aged 35-44, 359 callers aged 45-43, 312 callers aged 55-64, and 205 callers older than 65.

1,454 callers were Female, 531 were Male, 3 were Transgender, and 1 Non-Binary.

Finally, 861 callers had asked for support in the past, suggesting a high prevalence of repeated housing needs for this population.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

There is no one overarching source of data for the population fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking in Chesterfield. Using LSA data recorded in Stella P, there was an estimated 211 households experiencing homelessness that included a person who had experienced domestic violence and was currently fleeing (8% of all HHs) and an estimated 458 households that included a survivor of Domestic Violence where the fleeing status was unknown (18% of all HHs). (Source: Stella P)

In addition to these LSA numbers, a variety of agencies serving the QP were consulted in an effort to measure and describe this QP (see stakeholder engagement section). The agency with the most descriptive data was EmpowerNet, a collaborative of agencies in the Richmond area serving survivors and people experiencing or fleeing domestic violence. EmpowerNet collects data from a 24/7 crisis hotline for all people fleeing or attempting to flee domestic violence, human trafficking and related situations of sexual or dating violence or harassment. Data from this hotline are used as a proxy to describe the size and demographic composition of this QP.

Between July 1, 2021 and July 30, 2022 (one year), there were 1,442 calls to the hotline, 238 of whom stated they were calling from Chesterfield. EmpowerNet does not break down the demographics of callers by location, so the demographic make-up of these callers is for the whole region, not Chesterfield specifically. However, just as the population experiencing homelessness accesses and utilizes services across the region, regardless of jurisdictional boundaries, so do, and perhaps even more so, do individuals and families fleeing violence. Therefore, a regional understanding of demographics and characteristics is imperative.

Table 5: Characteristics of Callers to DV Hotline

Race/Ethnicity	
African American	741 (51%)
Caucasian	428 (30%)
Asian	25 (2%)
Native American/Alaskan Native	16 (1%)
Native Hawaiian/Pacific Islander	6 (0.4%)
Hispanic	125 (9%)
Unknown	147 (10%)
Gender	
Female	1330 (92%)
Male	93 (6%)
Transgender Identifies Female	11 (0.7%)
Transgender Identifies Male	2 (0.1%)
Other	6 (0.4%)
Other Characteristics	
Immigrant, refugee, or asylum seeker	33 (2%)
Limited English Proficiency	35 (2%)
Disability	133 (9%)
Medical or Health Needs (including pregnancy)	44 (3%)
Experiencing Homelessness	110 (8%)
Incarcerated	16 (1%)

Data Source: EmpowerNet (reporting period 7/1/21-6/30/22)

Note: percentages do not always add up to 100 due to missing data and categorical overlaps

Note: Language for all characteristics in the table matches the language used by EmpowerNet

Of the total callers, 1,330 (92%) were women, 93 (6%) were male, 11 (0.7%) were transgender identifying as female, 2 (0.1%) transgender identifying as male, and 6 (0.4%) other.

741 (51%) callers identified themselves as African-American, 428 (30%) identified themselves as Caucasian, 125 (9%) identified themselves as Hispanic, 25 (2%) identified themselves as Asian, 16 (1%) identified themselves as Native American/Alaskan Native, 6 (0.4%) identified as Native Hawaiian/Pacific Islander, and 147 (10%) are unknown when it comes to race and ethnicity. Note these percentages do not add up to 100 because some people identified with multiple races.

33 (2%) of the callers identified as an immigrant, refugee, or asylum seeker, and 35 (2%) identified themselves as a person with limited English proficiency.

133 (9%) of the callers stated they have a disability, and 14 stated that disability was a result of domestic and/or sexual violence. 44 (3%) callers reported current medical or health needs, including pregnancy.

110 (8%) callers identified themselves as experiencing homelessness at the time of the call and 16 stated they were currently incarcerated. 54 callers experiencing Sexual Violence (SV) and 281 callers experiencing Domestic Violence (DV) reported becoming homeless as a result of their experience and 114 callers experiencing SV and 610 callers experiencing DV reported having to relocate as a result of their experience. Relatedly, 569 callers requested shelter or emergency housing services.

EmpowerNet asks callers whether they have experienced loss of income and/or financial security as a result of the domestic and/or sexual violence experienced. 24 callers experiencing sexual violence and 178 callers experiencing domestic violence reported they had experienced loss of income and/or financial security as a result of this violence.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability, as defined by HUD in the Notice

Other households requiring housing assistance to prevent homelessness, and those experiencing housing instability who do not fall into the “At Risk of Homelessness” QP described above include households with incomes between 30%-50% AMI. In Chesterfield, these are households with annual incomes between \$30,200 and \$50,350.

There are 5,590 renter households in Chesterfield with incomes between 30-50% AMI. Of these households, 4,750 are cost burdened (85%) and 1,775 (32%) are severely cost burdened. CHAS data reports that 4,820 households in the 30%-50% AMI income band (86%) have at least 1 housing problem, further suggesting a high risk of housing instability within this population.

Of *all* 30,275 renter households in Chesterfield, representing all income bands, 44% are cost-burdened and 19% are severely cost-burdened. This suggests a lack of affordable housing at all income levels, but this problem is the most extreme for renters in these lower income bands. (Source: CHAS 2015-2019)

Chesterfield DSS received a total of 268 calls from households requiring housing assistance who were not immediately at risk of homelessness (>30 days from losing housing) during the year between July 2021 and June 2022. HMIS data showed a similar figure: 117 households in Chesterfield entered their system through the homeless prevention program. Of those 117 households, the median monthly income is \$950 (11% AMI). 63 of the households reported no income. Within these 117 households in Chesterfield in the homeless prevention program, 65

households identified as Black/African American/African, 14 identified as multiracial, 37 identified as white, and 1 identified as American Indian/Alaskan Native/Indigenous.

Further demographic characteristics of this population can be found in the discussion of the Housing Resource Line clients, earlier in the report.

Identify and consider the current resources available to assist qualifying populations, including congregate and non-congregate shelter units, supportive services, TBRA, and affordable and permanent supportive rental housing (Optional):

Table 2 above indicates the number of units reported by the Greater Richmond CoC in the 2022 Housing Inventory Count (HIC). In addition to the numbers in the table above for Emergency Shelter, Transitional Housing, Permanent Supportive Housing, and Other Permanent Housing, the HIC reported a total of 307 Rapid Re-Housing beds, including 168 RRH beds available for families (46 units), 107 RRH beds available for single adults, 8 RRH beds available for families of veterans, 22 RRH beds for single adult veterans, and 2 RRH beds for unaccompanied youth. There were also 47 Safe Haven beds for single adults and 44 Safe Haven beds for single adult veterans. Again, these counts include beds in Chesterfield, Henrico, and Richmond.

Chesterfield Community Services Board operates a new PSH program that offers 30 slots for adult only Households through tenant based rental assistance. As of the time of the stakeholder interview with the representatives from this program (January 2023), all program slots were full.

In the summer of 2022, all non-congregate shelter options in the Greater Richmond CoC footprint closed with no intention of reopening.

Chesterfield does not have its own public housing authority, but there are 414 vouchers administered by Virginia Housing in partnership with Chesterfield County Department of Social Services. There are 317 project-based vouchers available in Chesterfield from Richmond Redevelopment and Housing Authority and 1,150 Tenant-Based vouchers. Utilization rates for these vouchers are currently not available although stakeholders indicate significant difficulty in finding available housing units that meet quality standards that are impacting voucher lease up rates. (Source: Community Assessment Reporting Tool, HUD).

Describe the unmet housing and service needs of qualifying populations:

Homeless as defined in 24 CFR 91.5

As noted in the **Table 1** above, the number of beds for families experiencing homelessness just about matches the need (as counted by the PIT, which may not be an accurate representation of the need, as discussed above), but the existing shelter resources are insufficient for the population of single adults experiencing homelessness. The need is estimated at around 223 shelter beds for individual adults. The 2022 Gaps Assessment conducted by Homeward, the CoC lead agency, showed a relatively equal number of shelter

entrances and exits, suggesting added shelter capacity is not a great need for this population. However, Homeward also noticed an increase in average length of shelter stay (2-4 times longer than pre-pandemic levels), leading to concern about capacity issues in the future. Homeward also expressed concern about pandemic-related shelter resources ending, furthering these capacity concerns.

Shelter resources do not adequately meet the needs of this QP. Because shelter or transitional housing is only a temporary solution for people experiencing homelessness, permanent housing options are also considered in this analysis. The data in the sections above demonstrate that there are not enough permanent housing options for this population's income level. As previously discussed, the median household income among households experiencing homelessness is 12% of AMI. Rent affordable to this population would be no more than \$290/month. According to the ACS, there are a total of 134 units with rents affordable to this population in all of Chesterfield. This suggests a significant need for deeply affordable permanent housing options in Chesterfield.

The 2022 Gaps Analysis from Homeward emphasized a need for more affordable housing resources (including funding/incentives to build housing affordable to ELI households), and permanent housing options for those exiting shelter. One of the critical evidence-based resources for permanently ending long-term homelessness is Permanent Supportive Housing: deeply affordable housing combined with wrap-around voluntary services that help tenants use housing as a platform to thrive. The Homeward Gaps Analysis estimates that only 30 PSH beds open per year in the region, but the need is an estimated 350 per year. CSH estimated the need for Permanent Supportive Housing using a modeling tool that incorporates assumptions based on national data on needs of various populations. This analysis reflected a similar number of beds available per year (27), but a much higher estimate of the annual need for PSH in the region: an estimated gap of 85 units for families and 1,015 for individuals.

Consultation with community partners matched this data analysis: feedback from the CoC, Community Services Boards (local mental health governing bodies), and organizations serving all QPs indicated unmet needs of affordable rental housing for all the QPs, particularly populations experiencing homelessness with the highest barriers to housing.

At Risk of Homelessness as defined in 24 CFR 91.5

The existing housing stock is too expensive for populations at risk of homelessness. Using the national standard for housing affordability (housing costs of no more than 30% of income), a gross rent of \$758/month is affordable to an Extremely Low-Income family. The median gross rent in Chesterfield is \$1,266/month (Source: ACS).

There are an estimated 4,810 ELI renter households in Chesterfield, but only an estimated 2,301 units affordable to this population (Source: CHAS, PUMS). This leaves a gap of at least 2,509 units affordable and available for ELI households. Existing affordable housing

will likely dwindle soon, as affordability compliance periods end. The majority of affordable housing in Chesterfield is built with LIHTC and an analysis of Chesterfield's existing LIHTC stock shows the affordability period for the majority of units (1,948) will expire by 2040 (Source: Chesterfield Market Analysis). While the general housing development pipeline is accelerating in Chesterfield, the affordable housing development has stagnated.

Furthermore, there are not enough subsidized housing options available to ELI renters, as discussed in the narrative above.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

The 2022 HIC reported 22 beds for households fleeing Domestic Violence (DV) (9 units) and 7 beds for single adults in this population. While the exact number of people in this QP is uncertain, as explained above, the estimates suggest there are not enough shelter beds for this population. There was little to no emphasis expressed from stakeholders consulted in the plan development process. However, given the high rates of experiences of violence among populations experiencing homelessness and housing instability, continued focus on trauma informed practices in housing and service delivery are imperative.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability as defined by HUD in the Notice

The housing stock in Chesterfield is nearly unaffordable to this QP, based purely upon income. Households earning 50% of AMI can afford rent of \$1,263/month, which is only slightly higher than FMR for a 2 bedroom unit (\$1,189). Any larger households in this income band, and those with lower incomes, will likely be cost burdened. According to research from the National Low-Income Housing Coalition in the annual Out of Reach Report, a renter earning minimum wage would need to work 71 hours per week to afford a studio, 73 hours per week to afford a 1 bedroom unit, and 83 hours per week (over 2 full time jobs) to afford a 2 bedroom unit. Similarly, as noted above, the monthly rent affordable to an ELI household is \$758, but the FMR for a zero-bedroom unit is \$1,022. The existing housing stock is insufficient to serve the needs of households at risk of housing instability. (Source: National Low Income Housing Coalition)

Identify any gaps within the current shelter and housing inventory as well as the service delivery system:

As noted in the data tables above, there is a clear and demonstrated need for affordable rental housing, specifically affordable rental housing for the population with incomes at or below 30% AMI, especially those with no or little income, including those receiving SSI/SSDI. Comparison of Point-In-Time and Housing Inventory Count, as expressed in Table 1 above, reveal a gap of around 223 shelter beds for individuals and no shelter gap for families, a relatively small need compared to the PSH need of 1,015 units for individuals and 85 for families. Affordable rental housing needs for ELI populations are also estimated in the thousands.

Stakeholder consultation supported the data. People present in shelters expressed need for more emergency shelter, and all stakeholder groups expressed need for affordable rental housing and supportive services that were accessible to qualifying populations. Common barriers to accessing housing included stringent criminal background, credit and rental history criteria within market rate and affordable rental housing inventory. Suggesting a need for reductions in these practices as a whole as well as intentional housing development designed to reduce these barriers for the population.

There was also expressed need for easier access to services, whereby a range of services (i.e. health, housing navigation, income and employment supports, legal assistance, etc) could be accessible to individuals in one place, thereby reducing the burden of accessing services across different agencies and resources.

Permanent Supportive Housing programs, including the Chesterfield Community Services' Board's Permanent Supportive Housing program for people with Serious Mental Illness, are at capacity with very little turnover in available units/slots. However, many of these programs are exploring expansion and additional projects to respond to the growing need in the region.

Putting the data and analysis and stakeholder consultation together, it is clear that Permanent Supportive Housing and other permanent housing opportunities for populations experiencing homelessness and at risk of homelessness is the greatest need.

Under Section IV.4.2.ii.G of the HOME-ARP Notice, a PJ may provide additional characteristics associated with instability and increased risk of homelessness in their HOME-ARP allocation plan. These characteristics will further refine the definition of "other populations" that are "At Greatest Risk of Housing Instability," as established in the HOME-ARP Notice. If including these characteristics, identify them here:

Not applicable. The County does not plan to further refine the definition of "other populations".

Identify priority needs for qualifying populations:

The priority needs for all qualifying populations are deeply affordable rental housing units and access to supportive services.

In particular, the greatest needs are:

- 1) New inventory of affordable rental housing with supportive services accessible to people who are experiencing homelessness (QP1) who have:
 - a. lengthy histories of homelessness
 - b. housing barriers related to credit and rental history and justice involvement
 - c. Incomes between 0-15% AMI, and
 - d. complex and chronic health conditions

Explain how the PJ determined the level of need and gaps in the PJ's shelter and housing inventory and service delivery systems based on the data presented in the plan:

Chesterfield County contracted with Corporation for Supportive Housing (CSH) to conduct the needs assessment and gaps analysis. CSH consulted a variety of data sources including the following:

- Stella P (HUD) - (Data visualization of HMIS data)
- HMIS (Homeward, CoC Lead)
- American Community Survey (Census Bureau)
- CoC Racial Equity Analysis Tool (HUD)
- 2022 Gaps Analysis (Homeward)
- Housing Inventory Count/Point In Time Count (Homeward)
- Comprehensive Housing Affordability Strategy (CHAS – HUD/Census Bureau)
- Racial Equity in Virginia Sourcebook (Housing Forward Virginia)
- Hotline Database (EmpowerNet)
- Hotline Database (Housing Resource Line)
- GAP Report and Out Of Reach Report (NLIHC)
- Chesterfield Housing Market Analysis
- HCV Utilization Dashboard (HUD)

In the data collection process, CSH consulted with a variety of stakeholders, who are listed in the stakeholder engagement section and identified as data contributors. CSH also utilized a unique modelling tool that uses national level data to model the need for permanent housing interventions.

Using these data and tools, CSH compared the need numbers with the resources that exist for each QP. CSH presented initial findings to the PJ, CoC, and other stakeholders to check the data against local experience and impressions, and then supplemented the data using additional sources recommended by the PJ and information collected during stakeholder consultation.

HOME-ARP Activities

Describe the method(s) that will be used for soliciting applications for funding and/or selecting developers, service providers, subrecipients and/or contractors:

Chesterfield County will issue a solicitation for the development of affordable rental housing either independently or in coordination with regional jurisdictional partners. The RFP will specify that all HOME-ARP assisted units must be reserved for qualifying populations, with a preference for people identified and prioritized through the CoC's Coordinated Entry System in coordination with the region's Housing Resource Line.

The competitive selection process will include consideration for the applicant's experience and capacity to carry out the eligible activities in accordance with HOME-ARP regulations as well as delivering high quality affordable and supportive rental housing and services to the qualifying

populations. This will include a consideration for projects that ensure units are affordable to people with extremely low incomes, accessible to people with high barriers to housing and provide tenant centered supportive services according to evidence-based practices.

Describe whether the PJ will administer eligible activities directly:

Chesterfield will fund the development projects selected through the RFP process, and will not be conducting the development of affordable housing directly.

If any portion of the PJ’s HOME-ARP administrative funds are provided to a subrecipient or contractor prior to HUD’s acceptance of the HOME-ARP allocation plan because the subrecipient or contractor is responsible for the administration of the PJ’s entire HOME-ARP grant, identify the subrecipient or contractor and describe its role and responsibilities in administering all of the PJ’s HOME-ARP program:

N/A

CSH was contracted to assist with the HOME-ARP plan development, but will not be responsible for administration of Chesterfield County’s HOME-ARP grant.

In accordance with Section V.C.2. of the Notice (page 4), PJs must indicate the amount of HOME-ARP funding that is planned for each eligible HOME-ARP activity type and demonstrate that any planned funding for nonprofit organization operating assistance, nonprofit capacity building, and administrative costs is within HOME-ARP limits.

Use of HOME-ARP Funding

	Funding Amount	Percent of the Grant	Statutory Limit
Supportive Services	\$ #		
Acquisition and Development of Non-Congregate Shelters	\$ #		
Tenant Based Rental Assistance (TBRA)	\$ #		
Development of Affordable Rental Housing	\$ 1,805,431		
Non-Profit Operating	\$ #	0 %	5%
Non-Profit Capacity Building	\$ #	0 %	5%
Administration and Planning	\$ 318,605	15 %	15%
Total HOME ARP Allocation	\$ 2,124,036		

Describe how the PJ will distribute HOME-ARP funds in accordance with its priority needs identified in its needs assessment and gap analysis:

Chesterfield County will use the majority of the HOME-ARP funds (85%) for the development of affordable and supportive rental housing. The remaining 15% will be used for administration and planning.

The priority need identified in the needs assessment and gaps analysis was permanent housing for individual adults experiencing long-term homelessness with extremely low-incomes. Through the allocation of HOME-ARP is for affordable rental housing production, specifically capital subsidies, the program will ensure that new inventory of housing is constructed and operated for the long term to provide permanent housing options for members of the qualifying population. Providing capital to accelerate the development of this type of housing has been determined to be the most effective and impactful among the eligible activities.

Describe how the characteristics of the shelter and housing inventory, service delivery system, and the needs identified in the gap analysis provided a rationale for the plan to fund eligible activities:

The gap analysis revealed a significant need for permanent housing affordable to individual adults experiencing long-term homelessness and living with disabling conditions, and the stakeholder consultation supported this analysis. The gaps in shelter availability were significantly lower than the gaps in permanent housing options (gap of 223 shelter beds vs. 1,015 PSH units). Furthermore, history shows that development of affordable rental housing, specifically PSH, will also reduce shelter capacity, as the shelter bottleneck described in stakeholder consultation exists because there is a lack of affordable housing options to move people out of shelter. Accessing the existing service delivery system is exacerbated due to the lack of affordable rental housing as people remain homeless and housing unstable, making effective use of services difficult. The rationale to fund affordable and supportive rental housing production is key to a long-term approach to addressing the qualifying populations needs by providing permanent solutions that will also improve the overall capacity of the housing and service delivery system.

HOME-ARP Production Housing Goals

Estimate the number of affordable rental housing units for qualifying populations that the PJ will produce or support with its HOME-ARP allocation:

The number of affordable rental housing units produced through the County's HOME-ARP allocation is estimated to be between 6-63 units, depending on the project types received through the solicitation process and the potential to leverage other state and local financing for housing development. Estimates were derived using \$300,000 per unit total development costs based on current costs of existing projects and assuming the creation of 1 Bedroom units, aligned with the priority needs identified.

The following chart provides estimates of unit creation based on these assumptions:

	100% HOME-ARP Funded	50% HOME-ARP Funded	Regional 100% HOME-ARP Funded	Regional 50% HOME-ARP Funded
HOME-ARP	\$1,805,431	\$1,805,431	\$9,504,492	\$9,504,492
Other Sources	\$0	\$1,805,431	\$0	9,504,492
# of Units	6	12	32	63

Leveraging other resources within projects would produce more units, but may take longer to come online. Fully funding a project may shorten the development timeline and bring units online quicker and provide more intentional design and operations to meet qualifying populations needs. Additionally, coordinating across the three regional HOME-ARP jurisdictions (Chesterfield, Henrico, Richmond) to provide capital to projects would produce the most units for the qualifying populations. Unit production estimates are also contingent on project sponsors securing project based rental subsidies, or other sources of ongoing operating subsidy, as well as adequate services funding. While potential sources for additional capital, operating, and services have been identified, they are not currently secured. However, the allocation of HOME-ARP funds for this purpose will serve as a key driver for alignment of additional local, state, and federal sources to support high quality projects.

Describe the specific affordable rental housing production goal that the PJ hopes to achieve and describe how the production goal will address the PJ’s priority needs:

The goal of Chesterfield’s HOME-ARP program is to maximize the jurisdiction’s allocation to produce high quality affordable rental housing accessible to members of the qualifying population with priority needs, including those with high barriers to housing and in need of robust community-based supports and services. While many factors will impact the number of units produced, Chesterfield has set a goal of 30 units produced through HOME-ARP funds. This goal is subject to change depending upon market conditions, funding availability, regional coordination, and other factors. This represents the middle range of the estimated production outlined above and, while achievable, represents an ambitious goal given the jurisdiction does not currently have existing housing of this type and for this population. Given the significant need identified through the development of this plan, an ambitious goal is warranted and provides the most impact on the priority needs outlined in this plan to reduce homelessness.

Preferences

Identify whether the PJ intends to give preference to one or more qualifying populations or a subpopulation within one or more qualifying populations for any eligible activity or project:

The housing funded by HOME-ARP will be open to all QPs, but preference will be given to individuals experiencing homelessness, as prioritized through the local Coordinated Entry (CE) system. No qualifying populations will be excluded from eligibility.

If a preference was identified, explain how the use of a preference or method of prioritization will address the unmet need or gap in benefits and services received by individuals and families in the qualifying population or subpopulation of qualifying population, consistent with the PJ's needs assessment and gap analysis:

The needs assessment, gap analysis, and stakeholder consultation revealed that the QP segment with the most significant need was individual adults experiencing long-term homelessness with disabling conditions and incomes at or below 15% AMI. Implementing a preference for this QP will ensure that projects are designed to address the needs of this group, who are experiencing significant barriers to safe and stable housing. This addresses a gap in the existing inventory of currently available rental housing by providing accessible, permanent options with the services and supports the population needs to thrive in community.

Referral Methods

Identify the referral methods that the PJ intends to use for its HOME-ARP projects and activities. PJ's may use multiple referral methods in its HOME-ARP program. (Optional):

HOME-ARP funded rental housing projects will be required to accept referrals from two regional sources - the Housing Resource Line and the CoC's Coordinated Entry process. Combined, these referral sources serve all QPs, ensuring that no QP will be excluded.

If the PJ intends to use the coordinated entry (CE) process established by the CoC, describe whether all qualifying populations eligible for a project or activity will be included in the CE process, or the method by which all qualifying populations eligible for the project or activity will be covered. (Optional):

The CE process includes three primary access points, a phone based Homeless Connection Line, a coordinated street outreach team, and the regional DV hotline. Therefore, the CE process includes the QPs of populations experiencing homelessness and populations fleeing or attempting to flee domestic violence (QP 1 & 2). The other two QPs (at risk of homelessness and other populations requiring assistance) will be covered by the use of the Housing Resource Line, another regional hotline serving this population. Housing Resource Line referrals will be added to the CE referrals to ensure that all QPs are covered in the referral process.

If the PJ intends to use the CE process established by the CoC, describe the method of prioritization to be used by the CE. (Optional):

In order to address priority needs identified in the plan, a preference will be given to referrals from the CoC's Coordinated Entry process. The CE process, which has been developed and implemented over the past 10 years, provides a transparent, comprehensive prioritization and matching of housing resources rooted in addressing the community's need. First, information is gathered from assessments and used to identify an individualized housing and service intervention best suited to end the household's homelessness. Community prioritization criteria, through HMIS reporting, creates real-time by name lists/priority pools to match clients to PSH and other housing program slots. Prioritization is based on length of homelessness, disabling conditions, and vulnerability as documented through assessments, HMIS records, and outreach and homeless services staff observations and documentation. Once prioritized, referrals to housing units are made after base verification of client eligibility for the program and the client's expressed interest in the housing placement. The CE process is documented through policies and procedures and is regularly reviewed and updated in accordance with HUD regulations.

If the PJ intends to use both a CE process established by the CoC and another referral method for a project or activity, describe any method of prioritization between the two referral methods, if any. (Optional):

HOME-ARP funded projects will receive referrals from the CoC's CE process and the regional Housing Resource Line, ensuring referral coverage of all QPs. Referrals from the CoC's CE process will be prioritized, with the characteristics of the specific funded project and the client's choice and interests in the available unit considered.

Limitations in a HOME-ARP rental housing or NCS project

Describe whether the PJ intends to limit eligibility for a HOME-ARP rental housing or NCS project to a particular qualifying population or specific subpopulation of a qualifying population identified in section IV.A of the Notice:

Chesterfield County does not intend to implement any limitations.

If a PJ intends to implement a limitation, explain why the use of a limitation is necessary to address the unmet need or gap in benefits and services received by individuals and families in the qualifying population or subpopulation of qualifying population, consistent with the PJ's needs assessment and gap analysis:

Chesterfield County does not intend to implement any limitations.

If a limitation was identified, describe how the PJ will address the unmet needs or gaps in benefits and services of the other qualifying populations that are not included in the limitation through the use of HOME-ARP funds (i.e., through another of the PJ's HOME-ARP projects or activities):

Chesterfield County does not intend to implement any limitations.

HOME-ARP Refinancing Guidelines

If the PJ intends to use HOME-ARP funds to refinance existing debt secured by multifamily rental housing that is being rehabilitated with HOME-ARP funds, the PJ must state its HOME-ARP refinancing guidelines in accordance with 24 CFR 92.206(b). The guidelines must describe the conditions under which the PJ will refinance existing debt for a HOME-ARP rental project, including:

Chesterfield does not intend to use HOME-ARP funds to refinance existing debt.

- *Establish a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing to demonstrate that rehabilitation of HOME-ARP rental housing is the primary eligible activity*

N/A

- *Require a review of management practices to demonstrate that disinvestment in the property has not occurred; that the long-term needs of the project can be met; and that the feasibility of serving qualified populations for the minimum compliance period can be demonstrated.*

N/A

- *State whether the new investment is being made to maintain current affordable units, create additional affordable units, or both.*

N/A

- *Specify the required compliance period, whether it is the minimum 15 years or longer.*

N/A

- *State that HOME-ARP funds cannot be used to refinance multifamily loans made or insured by any federal program, including CDBG.*

N/A

- *Other requirements in the PJ's guidelines, if applicable:*

N/A

HOME-ARP Allocation Plan Appendices

Appendix A: SF-424, SF-424B, SF-424D and Certifications

Appendix B: Public Hearing/Public Comment Period Notices

Appendix C: Documentation supporting the development of the HOME-ARP Allocation Plan:

1. Listening Session Outreach
2. Listening Session Summary
3. Interview Notes
4. Survey Results
5. HIC Data
6. PIT Data
7. Homeward Gaps Analysis 2022
8. EmpowerNet Data
9. Community Outreach Webinar Presentation
10. Email Outreach
11. Public Hearing Presentation
12. Public Comments Submitted