



NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE
40 NORTH PEARL STREET
ALBANY, NEW YORK 12243-0001

Andrew M. Cuomo
Governor

January 31, 2012

John Redden
Deputy Commissioner
Clinton County Department of Social Services
13 Durkee Street
Plattsburgh, New York 12901

Dear Deputy Commissioner Redden:

I am pleased to inform you that the Clinton County proposed Safety Net Assistance (SNA) shelter supplement program for single adults and childless couples has been approved effective February 1, 2012.

The terms of the plan are approved with the understanding that amendments to the plan may be granted only with State approval. A copy of the approved plan is enclosed with this letter.

I look forward to the success of your program. If you have any questions or need additional information regarding the shelter supplement process please contact Greg Nolan at (518) 474-9101 or Greg.Nolan@otda.state.ny.us.

Sincerely,

s/PM/ 1-31-2012
Phyllis Morris
Deputy Commissioner
Center for Employment and Economic Supports

Enclosure

cc: Commissioner LePage
Kristin Proud
Elizabeth Berlin
Maria Vidal
Elizabeth Dexter-Hinton
Jeffrey Gaskell
Greg Nolan

"providing temporary assistance for permanent change"

REQUEST FOR DIVISION OF THE BUDGET APPROVAL

| | | |
|--|------------------------------------|---|
| AGENCY: OTDA | REQUEST DATE: 01/12/2012 | APPROVAL REQUESTED: <input type="checkbox"/> Certificate of Allocation <input type="checkbox"/> Contract / RFP <input type="checkbox"/> Grant Approval <input type="checkbox"/> New Organization / Function <input type="checkbox"/> NS Salary Plan / Performance Advance Plan <input type="checkbox"/> Memorandum of Understanding (MOU) <input checked="" type="checkbox"/> Program Plan / County Plan <input type="checkbox"/> Rates / Fee Structure / Allocation Plan <input type="checkbox"/> Spending Plan / Personnel Plan <input type="checkbox"/> State Plan <input type="checkbox"/> Other: |
| BUDGET EXAMINER (LAST, FIRST): Maura, Alison | | |
| AGENCY AUTHORIZATION NAME: Jeff Reynders | TELEPHONE #: 3-0808 | |
| AGENCY CONTACT: Susan Grant | TELEPHONE #: 3-3545 | |
| AGENCY PROGRAM DIVISION AND UNIT: OBF&DM | | |

DESCRIPTION OF REQUEST AND JUSTIFICATION (include specific date needed by):

Attached for your review and approval is a new shelter supplement plan for Clinton County. This plan proposes to provide a supplement to meet the needs of SN singles and childless couples who are homeless or facing homelessness based on a verified threat of eviction that are eligible for or in receipt of Temporary Assistance. Clinton County estimates that having this supplement available for this population will save approximately \$627,600 per year. Your expeditious review of this supplement plan is appreciated.

DIVISION OF THE BUDGET ACTION:

| | | |
|---|--|----------------------------------|
| <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> RETURN - NO ACTION <input type="checkbox"/> DISAPPROVED | SIGNATURE AND TITLE: <i>Alison Maura</i> SENIOR BUDGET EXAMINER | DATE: JANUARY 27, 2012 |
| Comments: | | |

January 10, 2012

District Application for SNA Shelter Supplement

Local District: Clinton County

Contact Person(s): John Redden (518) 565-3321
Starr Burke (518) 565-3299

Email Address: John.Redden@co.clinton.ny.us
Burkes@co.clinton.ny.us

Projected Implementation Date: Upon approval of plan

Summary: The continued rising cost of housing in Clinton County has made it extremely difficult for Safety-Net Assistance (SNA) applicants/recipients (A/R) to obtain/retain decent, affordable housing. Due to the severe flooding in the spring of 2011, one of our largest low income housing complexes (190 units) was flooded, residents evacuated and to date that facility has not opened and it is unlikely to reopen which has compounded the housing shortage even further. Clinton County is therefore requesting approval for a Shelter Allowance Supplement for our SNA population in order to meet the housing needs for single/childless couples that are facing homelessness or are homeless.

Amount of Supplement:

| TA Household Size | Shelter Allowance Effective 7/1/10 | Shelter Supplement | New Shelter Maximum Allowance | Bedrooms | * Clinton County Fair Market Rental Amount |
|--------------------------|---|---------------------------|--------------------------------------|-----------------|---|
| 1 | \$156.00 | \$250.00 | \$406.00 | 0 | \$655.00 |
| 1 | \$156.00 | \$250.00 | \$406.00 | 1 | \$657.00 |
| 2 | \$181.00 | \$250.00 | \$431.00 | 2 | \$788.00 |

* HUD fair market rates for Clinton County

Target Population covered by the Shelter Allowance Supplement:

The proposed shelter supplement will be provided to single individuals/childless couples who are homeless or facing homelessness based on a verified threat of eviction who are eligible for or in receipt of Temporary Assistance.

Eligibility Criteria for the Shelter Supplement:

1. The single individual or childless couple must reside in Clinton County for at least three (3) months prior to the application for the shelter supplement.

2. The single individual or childless couple must be eligible for or receiving temporary assistance based on the standard of need without regard to the shelter supplement.
3. Any case that has a TA sanction will be ineligible for the shelter supplement.
4. The household cannot have willfully lost Section 8 housing assistance within the last two years without good cause.
5. The household MUST apply for Section 8 Rental Assistance and make use of the benefit, if eligible.
6. The shelter supplement will not be provided to individuals receiving Section 8 housing assistance except for Section 236 housing or “enhance” voucher housing.
7. The household must verify household composition, including SSI recipients and non-applying members.
8. The relationship of non-TA household members and third party contributors must be verified in order to ensure compliance with TA filing unit regulations and legal lines of responsibility. Relationship will be verified by review of any prior case history, current documentation and if needed, referral to the Fraud Unit for research/verification.
9. The income of all household members and third party contributors must be verified in order to ensure that the household will be able to maintain their shelter payment responsibility.
10. All non-temporary assistance co-tenants must agree to contribute their pro rata share of the rent or at a minimum 30 percent of their gross income whichever is less. SSI recipients and ineligible aliens will be expected to contribute either their prorated share of the rent or 30 percent of their gross wages, whichever is less. All adults living in the dwelling will be required to verify their income. Failure of a non – SNA household member to verify their income will result in possible denial or loss of eligibility for a shelter supplement.
11. All household members without income must apply for TA and comply with all TA requirements in order to remain eligible.
12. The applicant must be the tenant of record. This will be verified by a lease, tenancy agreement, shelter form (LDSS-3668). The apartment must be in compliance with all local code standards and be approved by the Department before any arrears or shelter supplement payments made.
13. If applicable, the recipient must apply for SSI/SSD. They must comply with all requirements with our Disabled Client Assistance Program (DCAP) if that unit is assisting the individual. Failure to comply will result in discontinuance of the shelter supplement.
14. The district will require the recipient to report changes related to the shelter supplement, household circumstance and household income with 10 days. Failure to report such changes may result in discontinuance of the shelter supplement and the TA grant.
15. The supplement will not adversely affect the ability of non-TA recipient individuals or childless couples (i.e. low income working individuals or childless couples) to find and retain affordable housing as the gross rent costs are well below HUD fair market standards.

Criteria Regarding Evictions:

1. In cases involving the non-payment of rent, maintenance fees or mortgages, there must be a threat of eviction. Threat of eviction will be verified by either a 72 hour notice, letter from the landlord or verbal contact with the landlord. The non-payment of the shelter obligation must not be due to the mismanagement of income or the willful withholding of the payment. In cases where there is a co-tenant (per the lease) in receipt of TA, the co-tenant is responsible for his/her portion of the arrears. If the co-tenant of record is not on TH, he/she will be responsible for one half of the rental obligation.
2. Under no circumstance will arrears be paid in excess of six months. Circumstances surrounding the eviction will be evaluated for good cause, including but not limited to late filing of the eviction by the landlord, sudden and unforeseen illness, death of a household member or loss of household income. Documentation of any of the above circumstances will be required prior to consideration of an arrears payment. If the recipient does not have good cause for nonpayment of rent, the individual(s) will not be eligible for an arrears payment. The individual(s) may receive shelter supplement if they are able to avoid eviction or find alternate affordable housing. There will be no non arrears onetime payment to any landlord.
3. Under no circumstances will court costs, legal fees or late charges be paid related to the eviction.
4. Receipt of the shelter supplement and any payment of arrears must ensure the recipient remains in housing. The rental must be within recipient's budgetary means. There will be no time limit imposed regarding the length of time the recipient must remain in the housing; however, relocation must be approved by the department in order to remain eligible for the rent supplement.

Other Considerations:

1. If a case becomes ineligible for TA, the shelter supplement will be discontinued.
2. The shelter supplement will be discontinued if the individual(s) move outside the county/state.
3. If a non-TA household member discontinues or reduces their contribution, the shelter supplement will be re-evaluated.
4. If the recipient moves to a new apartment, with the approval of the Department, the need for the supplement must be reevaluated.

Application for Shelter Supplement and Local Checklist:

1. Shelter supplement applicants requesting assistance must complete the LDSS-2921. In addition, each request for a shelter supplement must be accomplished by a completed Shelter Supplement checklist (attached). The checklist must be completed by the Social Welfare Examiner and reviewed and approved by a supervisor. All supporting documentation must be included.

Length of Time Supplement will be offered to Individual Cases:

1. The shelter supplement will be restricted to a 24 month time limit unless extenuating circumstances exist. Extenuating circumstance may include, but not limited to:

Unforeseen emergency beyond the recipients control such as medical/psychiatric conditions rendering the individual unable to work for an extended period of time; an SSI applicant whose case is in the appeals process, loss of income, fire, flood, loss of housing for good cause such as domestic violence, etc.

2. The 24 month time limit does not have to be concurrent if there is a need for the supplement.
3. The recipient must be compliant with all TA regulations including employment requirements and actively seeking/maintain employment in order to retain the supplement if not otherwise exempt.

Estimate of Cost Savings/Neutrality:

| YEAR | Average # of People/Week | Total Yearly Cost |
|-------------|---------------------------------|--------------------------|
| 2010 | 65 | \$601,227.00 |
| 2011 | 72 | \$776,766.00 |

Cost of Motel Rooms per month for Single Individual/childless couples

72 rooms x 225.00 per week = \$16,200 per week
 \$16,200 x 4 weeks = \$64,800.00 per month

Cost of Shelter Supplement per month for single individuals/childless couples

50 shelter supplements x 250.00 per month = \$12,500.00 per month; \$150,000.00 per year

Cost of emergency housing in motels = \$64,800.00 per month
 Cost of supplement = \$12,500.00 per month
 Monthly savings = \$52,300.00 per month/\$627,600.00 saving per year

Purpose/Justification for Rent Supplement:

In Clinton County the problem of homelessness has reached significant proportions. In order to address the issue the Clinton County Housing Coalition was established. The Coalition consists of interested parties from the non-profit and public sectors. The Coalition contracted with the State University of New York Plattsburgh Technical Assistance Center (TAC) to identify gaps in housing needs and develop a strategic plan to address homelessness/housing over the next ten years. A high priority identified was the need for rental subsidies for low income individuals.

With the continued rising cost for housing coupled with the downturn in the economy it has become increasingly difficult to meet the housing needs for a significant segment of our Safety Net population. In Clinton County the unemployment rate continues to exceed eight percent making it even more difficult for our SN population to obtain meaningful employment and become self-sufficient.

Emergency housing is extremely limited in Clinton County. The Department currently contracts with Evergreen Townhouse Community (ETC) for six emergency shelter units dedicated to Social Services with an additional 7 units, if available. Social Services must rely on 6-7 local hotel/motels to house our Safety Net population. The current average price at one of these hotel/motels is \$225.00 per week. In 2010 the Department of Social Services housed 255 homeless Safety Net individuals. Of that, 30 percent were sheltered for 7 months or more; 27 percent for 4-6 months; 24 percent for 1-3 months and 19 percent for less than 1 month. On average we have over 100 Safety Net individuals sheltered per month. Through October 2011 the Department has housed 443 individuals (unduplicated). Of that, 325 were single/childless couples with an average stay of 14 plus weeks.

It is estimated (census and local realtor information) that there are approximately 9,000 rental units; 6% are considered as vacant. Approximately 10 percent are \$500.00 per month or less. Projected 2012 HUD fair market rates for Clinton County estimates that the average rental for an efficiency is \$655.00, a one bedroom is \$657.00 and a two bedroom is \$788, plus utilities. In addition, according to data from local courts there were 289 petitions filed for evictions in the past 12 months.

The approval of this Shelter Allowance supplement would allow Clinton County to avoid costly Motel placements and would result in a potential gross savings of approximately \$627,600.00 annually.

In addition to the potential cost savings, the supplement will also allow single recipients to access permanent housing within a reasonable timeframe and reduce the length of stay in a motel. Homeless individuals that are placed in a motel struggle to achieve self-sufficiency and becomes increasingly difficult in obtaining employment when they have no idea where they will be spending the night. Providing a shelter supplement will allow recipients the stability needed to obtain self-sufficiency.

