

CITY OF STOCKTON

SUBSTANTIAL AMENDMENT TO THE CITY OF STOCKTON 2020-2024 CONSOLIDATED PLAN AND FISCAL YEAR 2021 ANNUAL ACTION PLAN TO INCLUDE HOME-ARPA FUNDING SP – 05 EXECUTIVE SUMMARY 91.200 (c), 91.220 (b), 91.300 (c), 91.320 (b)

On April 8, 2021, in response to the pandemic outbreak of the coronavirus disease COVID-19 the US Department of Housing and Urban Development (HUD) announced the allocation of nearly \$5 billion in American Rescue Plan Act funds to help communities across the country create affordable housing and services for people experiencing or at risk of experiencing homelessness, individuals fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking.

In 2021, the City of Stockton submitted the 2020 – 2024 Consolidated Plan and the FY 2021 Annual Action to the Department of Housing and Urban Development (HUD).

To prevent and contain the spread of COVID-19 and its financial and health impacts HUD has waived certain CDBG and ESG program requirements. The CDBG 15 percent public service cap has been eliminated, the public comment period has been reduced from 30 days to five days (5), and allows for the ability to conduct virtual meetings in lieu of in-person public hearings in order to comply with national and local social distancing requirements.

SUBSTANTIAL AMENDMENT TO FY 2020-2024 CONSOLIDATED PLAN:

Amendments to the approved Consolidated Plan and the Annual Action Plan shall be required whenever the City seeks to:

- 1) Make a change in its allocation priorities or a change in the method of distribution of funds.
- 2) Carry out an activity, using funds from any program covered by the Consolidated Plan (including program income), not previously described in the Annual Action Plan; or
- 3) Change the purpose, scope, location, or beneficiaries of an activity.

Amendments are categorized as “substantial” or “non-substantial”. An amendment is considered “substantial” if it exceeds five percent (5%) of the City’s annual entitlement.

- SP-35 Anticipated Resources 91.215(a)(4), 91.220(c)(1,2). \$6,380,677 in HOME-ARP funds is identified as additional financial resources.

CITIZEN PARTICIPATION PLAN PROCESS:

HOME -ARPA guidelines require a 15-day public notice period to ensure that reasonable notice and the opportunity for community comment are provided. HUD also allows for the ability to conduct virtual meetings in lieu of in-person public hearings to comply with national and local social distancing requirements. The 15-day public comment period began on May 31, 2022, with the posting of the public notice in the Record, on the City of Stockton website, and through email, distribution to the program distribution list inviting comments through June 14, 2022.

**CITY OF STOCKTON
SUBSTANTIAL AMENDMENT TO FY 2021-2022 ACTION PLAN**

AP 15 Expected Resources:

Annual Action Plan is substantially amended to allocate HOME-ARPA funds to the following eligible activities to prevent and respond to the spread of COVID-19.

Program	Proposed Activity	Ending Date	Existing Budget	New Budget
HOME-ARPA	Homeless Services and Housing Activities	9/30/2030	One-time award	\$5,742,610
HOME-ARPA	Program Administrative	9/30/2030	One-time Award	\$638,067
Total HOME-ARPA Funding				\$6,380,677

FY 2021-2022 Annual Action Plan**AP-35 Projects expected resources \$6,380,677 HOME-ARPA Funding.**

- Funding will be focused on homeless housing activities, not limited to acquisition, rehabilitation, new construction, and rental assistance.
- Eligible local nonprofits are eligible to apply for HOME-ARPA funds.
- Funded activities are supported by the Homeless Needs Assessment as outlined in the 2020-20224 Consolidated Plan and attached as part of this exhibit.



2020-2024

HOMELESS NEEDS ASSESSMENT

**Economic Development Department Housing
Division**

400 East Main Street, 4th Fl.

Stockton, CA 95202

(209) 937-8539

www.stocktonca.gov/housing

NA-40 Homeless Needs Assessment – 91.205(c)

Introduction:

The following section describes the nature and extent of unsheltered and sheltered homelessness in the City of Stockton. The data presented in this section were collected from the Central Valley Low Income Housing Corporation (CLIHC), which acts as the Homeless Information Management System (HMIS) manager for the San Joaquin County/Stockton Continuum of Care (CoC). The San Joaquin CoC represents a network of local government agencies, as well as non-profit and private organizations, that provide services and assistance to homeless individuals and families. The goal of the CoC is to coordinate local efforts to identify and address the needs of the homeless population, provide coordinated outreach services, and to identify gaps and shortfalls where additional resources and coordination may be necessary. Though the CoC effort is led by the San Joaquin County Community Development Department, it incorporates the resources and efforts of a wide variety of jurisdictions, organizations and agencies. These include CVLIHC, the Housing Authority of San Joaquin County (HACSJ), Gospel Center Rescue Mission, Ready to Work, Community Medical Centers, Health Plan of San Joaquin, and representative from other cities throughout the county including the City of Stockton among other important organizations and agencies.

The tables provided below identify the estimated number of unsheltered and sheltered homeless individuals and families in the City of Stockton. The tables present data collected through the 2019 PITC and 2018 annual shelter count. It should be noted that preliminary results indicate an increase in the total number of unsheltered homeless included in the 2019 PITC, compared to the 2017 count. The increase may be attributed to improvements in the survey method and increased outreach, though actual increases in the size of the unsheltered homeless population are also likely. The data on the number of sheltered homeless residing in emergency and transitional housing facilities are those reported in the HMIS system for facilities located within the City of Stockton.

Homeless Needs Assessment

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)	398	0	6,250	3,520	5,980	0
Persons in Households with Only Children	3	0	75	60	70	14
Persons in Households with Only Adults	426	921	2,000	900	1,600	0
Chronically Homeless Individuals	83	183	600	250	0	0
Chronically Homeless Families	3	0	25	12	0	0
Veterans	63	39	250	120	0	0
Unaccompanied Child	19	23	760	600	0	35
Persons with HIV	14	0	25	10	0	0

Table 31 - Homeless Needs Assessment

Data Source Comments:

Indicate if the homeless population is: Has No Rural Homeless

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

The 2019 PITC identified 2,629 unduplicated homeless individuals countywide, including 1,558 unsheltered homeless and 1,071 persons in emergency shelters and transitional housing facilities. The 2017 PITC identified a total of 1,552 unduplicated homeless individuals, including 567 unsheltered homeless and 985 persons in emergency shelters and transitional housing facilities. Overall, this represents a 73 percent increase in the number of homeless individuals countywide. Note, however, that the PITC may not represent a complete census of the homeless population. Due to methodological improvements, the 2019 count likely captured a larger proportion of the existing homeless population, which implies that the increase in the number of surveyed homeless individuals could be less pronounced than it would otherwise appear.

Additional information provided by the CVLIHC indicates that 2,325 unique individuals utilized emergency shelter facilities within the City of Stockton during the 2018 calendar year. The reported average length of stay for shelter residents who exited a facility during the 2018 calendar year was 42 days, while the median length of stay was seven days. The average length of stay for residents still residing in a shelter at the end of 2018 was 275 days, with a median stay of 76 days. For households with both adults and children, the average length of stay in an emergency shelter was 30 days, compared to 66 days for veterans and households with adults only.

There were also 290 persons who resided in transitional housing in Stockton in 2018. Note that there may be some duplication of persons that resided in emergency shelter facilities, but then moved into a transitional housing facility, during the same calendar year. The reported average length of stay for transitional housing residents who exited a facility during the 2018 calendar year was 178 days, while the median length of stay was 92 days. The average length of stay for residents still residing in transitional housing at the end of 2018 was 206 days, with a median stay of 148 days. The average length of stay in transitional shelter facilities for both family households (i.e., both adults and children), adults-only households, and veterans was 230 days.

Nature and Extent of Homelessness: (Optional)

See discussion below.

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

Household Type	Unsheltered (a)	Sheltered	
		Emergency**	Transitional**
Adults	799	435	118
Children	4	224	55
Unknown	119	0	0
Total	922	659	173
<i>Chronically Homeless (Adults and Head of Households)</i>	183	72	n.a.
<i>Families with Children</i>	<i>n.a.</i>	92	18
<i>Mentally Ill</i>	170	103	19
<i>Substance Abuse</i>	280	125	44
<i>Elderly (60 years and over)</i>	42	72	7
<i>Unaccompanied Youth</i>	<i>n.a.</i>	13	5
<i>Veterans</i>	39	27	34
Note: (a) Data presented as a subset of the total reported unsheltered population (e.g. families with children, mental health problems, etc.) and only represents information for the 469 unsheltered individuals who were surveyed as part of the PITC. Another 453 unsheltered individuals were observed, but not surveyed for the information provided in this section of the table			

Table 32 - Unsheltered and Sheltered Homeless by Population Type

Data Source: 2019 PIT, HMIS

Table 32 report the number of homeless persons in the City of Stockton during the 2019 PITC. There were a total of 922 unsheltered persons in Stockton on the night of the PITC, including 799 homeless adults and four children, as well as 119 persons whose age could not be identified. The PITC recorded 659 persons residing in emergency shelters, including 435 adults and 224 children. There were 173 persons residing in transitional housing facilities, including 118 adults and 16 children. While data was not collected regarding the number of unsheltered families with children there were a total of 92 sheltered families with young children residing in emergency shelters in Stockton, and 18 families with children in emergency shelter facilities. Additional data from the 2018 annual shelter count identified 209 families with children residing in emergency shelters and 23 residing in transitional housing throughout 2018.

The PITC also did not collect information regarding unsheltered unaccompanied minors, however, 13 unaccompanied minors were living in emergency shelters in Stockton, while five unaccompanied minors were living in transitional housing in Stockton.

The count identified a total of 280 unsheltered individuals with substance abuse issues, and 170 with mental health issues. Another 169 sheltered persons in the City of Stockton experienced substance abuse issues, while 122 experienced mental health issues.

The PITC identified a total of 39 unsheltered veterans and 42 individuals age 62 years or older living in the City of Stockton. There were 61 sheltered veterans living in Stockton as of the 2019 PITC, and 79 sheltered individuals age 62 years or older.

Note that the unsheltered figures provided in the bottom section of Table 32 (i.e., families with children, individuals with mental health issues, etc.) only includes information for the 469 individuals who were surveyed as part of the 2019 PIT, and does not include another 469 individuals whom surveyors observed, but did not interview and did not collect the detailed information on, similar to that provided at the bottom of Table 32. Nature and Extent of Homelessness

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

Racial/Ethnic Group	Unsheltered	Sheltered	
		Emergency	Transitional
American Indian	11	7	0
Asian	25	18	4
African American	249	265	52
Pacific Islander	9	16	4
White	476	301	106
Multi-Racial	13	45	4
Unknown	139	7	3
Total, All Racial Groups	922	659	173
Non-Hispanic/Latino	488	449	133
Hispanic/Latino	245	202	34
Unknown	189	8	6
Total, All Ethnic Groups	922	659	173

Table 33 - Unsheltered and Sheltered Homeless by Race and Ethnicity

Data Source: 2019 PIT, HMIS

Table 33 identifies the number of sheltered and unsheltered homeless persons present within the City of Stockton by racial and ethnic group. Based on these data, around 52 percent of the unsheltered homeless identified in the 2019 PITC were White, with African American individuals making up the second largest sub-group at 27 percent of the total. Homeless persons living in emergency and transitional shelters had similar characteristics, with 51 percent of the population in emergency shelters

being White and 33 percent being African American. The population living in transitional shelters was 46 percent White, and 40 percent African American. In terms of ethnic heritage, an estimated 27 percent of unsheltered homeless were Hispanic, while 53 percent were non-Hispanic, while the ethnic heritage for another 20 percent could not be determined. Around 32 percent of the population residing in emergency shelters were Hispanic, while 66 percent were non-Hispanic. Ethnic heritage could not be determined for two percent of unsheltered individuals. Within transitional housing, 31 percent of the population was Hispanic, 68 percent was non-Hispanic, and ethnic heritage could not be determined for one percent of the population.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

As described previously, the data reported in Table 32 and Table 33 indicate that there were approximately 922 unsheltered homeless on a given night within the City of Stockton in 2019. The majority were adults, with only four children identified in the count. The count data indicate that there were 659 persons in emergency shelter, and 173 persons in transitional housing on the day of the survey. Roughly one-third of individuals residing in emergency shelters were children, including 92 families with children residing in emergency shelters. A little less than a third of transitional housing residents were children, with 18 families with children living in transitional housing.

Federal regulations provide special priority for four distinct sub-populations, including chronically homeless individuals and families, homeless veterans, and unaccompanied and transition age youth. The 2019 PITC identified 39 unsheltered veterans and 183 chronically homeless persons. The PITC did not report unsheltered unaccompanied youth within the City of Stockton. Additional data from the 2019 PITC indicate that there were 27 homeless veterans in emergency shelters in Stockton, and 34 veterans in transitional housing facilities. There were 183 unsheltered chronically homeless adults and head of households, and 72 chronically homeless adults and head of households in emergency shelters within the City of Stockton. There were 13 unaccompanied youth in emergency shelters and five unaccompanied youth in transitional housing.

Discussion:

Not applicable.

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

Introduction:

The following section describes, to the extent practicable, the housing needs of persons who are not homeless, but require supportive housing. This is done through a brief analysis of the characteristics and housing needs of six special needs groups, including:

- Elderly (defined as 62 years of age and over)
- Frail elderly (defined as an elderly person who requires assistance with three or more activities or daily living, such as bathing, walking, and performing light housework)
- Persons with mental, physical, and/or developmental disabilities
- Persons with alcohol or other addictions
- Victims of domestic violence, dating violence, sexual assault, and stalking

These housing needs were identified through consultations with various organizations and service providers representing each of the special needs groups. The facilities and services available to meet the needs of these subpopulations are discussed in the Market Analysis (MA-35) section of this plan.

Describe the characteristics of special needs populations in your community:

Elderly and Frail Elderly

According to the 2011-2015 CHAS, 27,694 Stockton households contained at least one resident age 62 and over, accounting for 30.0 percent of total households. There were 9,329 households that contained at least one person age 75 and over, representing 10.1 percent of all Stockton households. The 2013-2017 ACS indicate that 43.2 percent of persons age 65 and over are disabled. Approximately 30.7 percent of disabled individuals age 65 and have ambulatory difficulty, while 23.0 percent have difficulty living independently, 13.5 percent have a cognitive disability, and 12.0 percent have difficulty with self-care. Roughly 15.0 percent have difficulty hearing, while eight percent have vision difficulty. A person may have more than one disability.

Persons with Disabilities

According to the 2013-2017 ACS, an average 13.7 percent of Stockton residents had a disability, regardless of age. The largest disabled subpopulation included those between the ages of 18 and 64, which accounted for 56.1 percent of all disabled persons. The second largest subgroup was those age 65 and over, which accounted for 35.9 percent of all disabled persons. Disabled children age five to 17 represented 7.6 percent of all disabled persons. Disabled children under five years of age represented 0.3 percent of all disabled persons. The most common disabilities included ambulatory difficulties, which affected approximately 60 percent of the disabled population. Cognitive and independent living difficulties impacted 43 percent and 40 percent of disabled individuals, respectively. The remaining disability categories, including hearing, vision, and self-care difficulties each impact around 20 percent of all disabled persons.

Persons with Alcohol/Drug Addiction

According to the 2017 U.S. Department of Health and Human Services conducts the National Survey on Drug Use and Health (NSDUH) approximately 11.2 percent of the national civilian, non-institutionalized population, age 12 years and over used illicit drugs during the prior month. Estimates for California indicate that approximately 13.1 percent of the statewide population used illicit drugs during the month prior to taking the survey. Nationally, around 52 percent of the population use alcohol, with 47 percent being binge drinkers. In California, approximately 50 percent of the population are alcohol users, with 24 percent being binge drinkers.

While no city-level data is available through the NSDUH, the 2019 PITC identified 280 unsheltered homeless individuals, 125 individuals in emergency shelter, and 44 individuals in transitional housing who acknowledged suffering from alcohol and/or drug addiction.

Victims of Domestic Violence

The available data on the prevalence of domestic violence, dating violence, sexual assault, and stalking are quite limited. As described earlier, the WCYFS assisted 3,000 victims of domestic violence and of sexual assault via their 24-hour help-lines in fiscal year 2017/2018. While not all victims of domestic violence or sexual assault require housing assistance, the WCYFS provided emergency shelter to 305 unique individuals at the DAWN House facility in fiscal year 2018/2019. The Women's Center Safe House facility housed 101 homeless and runaway youth in fiscal year 2017/2018. Between the Safe House and Opportunity House facility, the WCYFS housed 127 young adults and seven children, and provided services to 111 homeless youth at their Drop In Center in fiscal year 2017/18. The WCYFS also provides essential services for victims of human trafficking and operates the County's Human Trafficking Task Force. In fiscal year 2017/2018, the WCYFS assisted an average of three and a half victims per month and identifies 44 a risk or confirmed CSECs.

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

Elderly and Frail Elderly

The Stockton Housing Element Background Report identifies, and consultations confirm, that three main factors that contribute to the ability of elderly households to secure and maintain adequate housing, including transportation, income, and housing. Many elderly persons are unable to drive and depend on public transportation, transportation provided by others, or walking. The elderly often rely on fixed income sources, like Social Security or Supplemental Security Income (SSI). Recipients often have difficulty finding market-rate housing that fits their budget. Consultations indicate that the elderly are one of the fastest-growing populations accessing food assistance. Many elderly households consist of a single person living alone or a couple, and often desire smaller more affordable housing units that require less maintenance. Elderly homeowners not living in these lower cost, lower maintenance units

may require assistance with regular household and yard upkeep.

Persons with Disabilities

Disabled persons housing needs depend on the nature and severity of their disability. Physically disabled persons require modifications to their housing units, such as the installation of wheelchair ramps, elevators or lifts, accessible fixtures and appliances, handrails, etc. In those cases where a person's disability prevents them from operating a vehicle, proximity to services and access to quality public transportation is critical. When disability prevents an individual from working or limits income, housing costs are challenging. The elderly disabled, as well as those with employment and independent living difficulties, may rely on Supplemental Security Income (SSI), which is often insufficient to afford market rate housing. Persons with severe physical or mental disabilities may also require supportive housing, nursing facilities, or care facilities.

Persons with Alcohol/Drug Addiction

Organizations that provide supportive housing and services for addicts indicate that these persons require a significant amount of intervention, treatment, complementary services, and case management. Resident group quarters facilities typically provide the most appropriate settings for these activities. Gospel Center Rescue Mission's (GCRM) New Life Program (NLP) provides residential addiction treatment for men, women, and families, with a capacity for 100 beds. New Directions Alcohol and Drug Awareness program also provides group quarters residential alcohol and drug treatment, with a capacity of 30 inpatient beds and 45 patients via outpatient therapy. Lack of available affordable housing is the most important housing related issue participants face, as many participants have difficulty securing adequate housing following completion of their program, in some cases resulting in their return to unsafe and/or unhealthy living environments.

Victims of Domestic Violence

According to WCYFS staff, there is no "typical client" as it pertains to the provision of services to persons experiencing domestic violence, sexual assault, and/or stalking. Victims can require a wide array of housing assistance and social services. Housing needs can range from simple emergency shelter and transitional housing, to the need for protective shelter. Social service needs can range from crisis counseling, group therapy, and educational programs to hospital response, accompaniment to law enforcement agencies and court proceedings, and legal assistance. Other important services for persons experiencing, or recovering from, domestic violence can include mental healthcare, childcare, employment counseling and training, and transportation, though housing remains the most prevalent need. Victims of domestic violence, and related issues, can have a wide variety of housing needs.

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

Not applicable.

Discussion:

Regardless of special needs status, consultations with public and private service sector providers indicate that the most immediate issue facing those who are not homeless but require supportive housing is the ability to find landlords willing to accept HCVs. Data provided by the HACSI indicate that of the 5,174 HCV's available countywide, only 78 percent were utilized as of October 2019, indicating that 1,150 HCV recipients are unable to secure housing despite having a HCV. This is due to a confluence of factors including the stigma associated with HVC recipients and the difficulty of finding a willing landlord who has a vacant unit that also meets quality standards and rent limits set by HUD.

Stakeholders report that in many cases, landlords are discouraged from accepting HCVs because the per unit operating costs and restricted rental rates exceed the Fair Market Rents set by HUD, which would result in a net deficit to the landlord. As an incentive for landlords to accept HCVs, in 2018 the CVLIHC began offering one-time up-front cash payment of \$1,500 for units rented below FMR, and \$500 for units rented above FMR. Additionally, the CVLIHC hired a staff person whose sole job is to build relationships with landlords and encourage them to rent to HVC holders. While CVLIHC staff indicate the housing locator and cash incentives have expanded the pool of landlords willing to accept HCVs, demand for HCVs still dramatically exceeds supply. For more information regarding the potential revenue deficit landlords who accept HCVs face, see MA-15: Housing Market Analysis: Cost of Housing.

Additionally, stakeholders identified pro-active and sustained code enforcement for single-family housing, as well as market rate multi-family housing, and stronger renter protections as a serious housing need. For example, numerous stakeholders indicate that lower income residents who live in poorly maintained rental units are hesitant to file code enforcement complaints out of fear of retaliatory actions, such as eviction. Fred Shiel of STAND Affordable Housing indicates that this is especially true of the city's undocumented migrant population, who fear deportation in addition to eviction. However, one important caveat noted by stakeholders representing the city's elderly population is that code enforcement efforts must take into account the limited ability of many elderly residents, both physical and financial, to maintain their homes in accordance with adopted codes, and that punitive actions, such as fines, should not cause an undue burden.

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

Describe the jurisdiction's need for Public Facilities:

The CDBG program regulations identify a broad range of eligible activities, including but not limited to acquisition and disposition of real property, construction of public facilities and improvements, and the provision of public services, among a wide variety of other categories of eligible activities. However, the regulations also identify certain ineligible activities, including buildings (or portions thereof) used for general government activities, general government expenses, political activities, purchases of equipment, and operating and maintenance expenses.

The last exclusion identified above pertaining to operating and maintenance expenses is particularly important in Stockton, which faces a significant deferred maintenance burden. According to the 2019-2024 Capital Improvement Program (CIP), the Facilities Conditions Assessment completed by the City in fiscal year 2017/2018 identified more than \$700 million in deferred maintenance costs for City facilities, without accounting for maintenance and repair needs of City Hall. Nonetheless, the CIP identifies a variety of other capital improvement needs that are eligible for CDBG funding, including construction and reconstruction of various public facilities, including police and fire facilities, parks, golf courses, libraries, and other City buildings and infrastructure. The CIP includes public facility projects totaling \$382 million over the current five-year planning period, which accounts for around 35 percent of the \$1.1 billion long-term CIP.

This section of the Consolidated Plan does not specifically identify the portion of the CIP that is anticipated to be funded using CDBG dollars, as the City evaluates and priorities projects under the CIP on an annual basis based on the availability of funding from a wide variety of sources, including CDBG. Nonetheless, the first four years of the CIP are financially constrained, but does reflect some projects where funding has been identified. The fifth year of the CIP reflects the City's unfunded needs in addition to projects with identified funding. For example, the CIP budgets approximately \$39.7 million, or roughly ten percent, of the CIP budget for public facility improvements in the first four years of the program, while the remaining \$342 million, or 90 percent, of the CIP public facilities budget is planned for the fifth year. Projects budgeted for the first four years of the CIP, some of which have identified funding sources, tend to include maintenance and minor renovation projects, such as ADA compliance, repaving, HVAC repairs, roof replacement and construction, and recreation center renovations, only some of which are eligible for CDBG funding. More costly unfunded projects budgeted for the fifth year include a City facility assessment rehabilitation program, reconstruction of two fire stations, construction of a regional emergency services dispatch center, and construction of a new Police Department firing range, most of which would be eligible for CDBG funding.

How were these needs determined?

The jurisdiction's need for public facilities, as described above, was primarily identified through an evaluation of the City of Stockton CIP, as well as various Stockton General Plan elements. Additional needs were identified through consultations with a variety of affordable housing stakeholders, homeless service providers, the Mayor's Office (broadband needs), and other social service organizations in

Stockton. Additional information was added based on consultations conducted during the recent General Plan update process.

The CIP represents a five-year plan for the implementation of public projects necessary to maintain and improve the public works of the City and to implement the Stockton General Plan. This includes the development and maintenance of buildings, parks, golf courses, utilities, and the transportation system, among other components. To identify needs to be incorporated into the CIP, Public Works staff consulted with other City departments, as well as a variety of external agencies, including the Council of Governments and the Regional Transit District. A public participation process was also utilized to solicit input from the community at large. Based on this input, staff from Public Works and the Department of Municipal Utilities developed a list of proposed projects, which was then coupled with available revenue projections in order to identify potential funding sources including, but not limited to, the General Fund, Public Facilities Fees, Enterprise Funds, and various State and federal grants. Upon approval of the 2019-2024 CIP, the City estimated that implementation of the complete CIP would cost roughly \$1.1 billion. Of that amount, funding sources have been identified for only \$592.3 million.

Describe the jurisdiction's need for Public Improvements:

The City's 2019-2024 CIP identifies improvements to the transportation system necessary to improve traffic flow, safety, and personal mobility, many of which are eligible for CDBG funding. They are similarly intended to accommodate growth, foster economic development, promote diverse transit modes, reduce air pollution, and to preserve and expand the existing transportation network. Projects associated with the transportation component of the CIP are primarily focused on new bicycle and pedestrian paths, road diets, street resurfacing, neighborhood traffic calming initiatives, projects that enhance safe routes to school, bridge repairs and replacements, and curb and gutter repairs. The need for improved pedestrian facilities was seconded by residents of the Conway Homes affordable housing development in South Stockton. According to Pandora Crowder, President of Conway Homes Resident Council, the neighborhood around Conway Homes lacks sidewalks and sufficient pedestrian infrastructure to facilitate safe travel.

The Public Works Department has been successful in securing grant funding for transportation related projects. As a result, the CIP includes a significant list of transportation projects that have either already secured grant funding, or will be included in applications for grant funding in the near future. However, the CIP also indicates that an annual budget of approximately \$10 million would be necessary to adequately resurface pavement in such a way as to simply maintain the roadway network in its existing condition. The potential cost could increase significantly if streets warrant reconstruction due to severe stress, among other factors, which may also make those improvements eligible for CDBG funding. Despite this, the existing CIP allocates only \$2.5 million annual for roadway maintenance, with an additional \$2.6 million in additional federal funds anticipated in the later three years of the plan.

Improvement and expansion of the existing water, wastewater, and storm water utilities are primarily funded through utility user fees, connection fees, and Public Facilities Fees. According to the CIP, the Wastewater Enterprise is currently planning for Phase II of its Capital Improvement and Energy

Management Plan (CIEMP), which represents a \$190 million project intended to repair, replace, and upgrade the Regional Wastewater Treatment Facility, some components of which are over 60 years old and are running past their effective operating lifespans. To complement the CIEMP, Wastewater Enterprise also proposes the use of funds for pump station and pipeline repair and replacement in areas with undersized and/or aged infrastructure. The CIP also includes an update to the Sewer Master Plan in the fiscal year 2019/2020 budget. Under CDBG regulations, many of these improvements may be eligible for CDBG funding so long as they pertain to construction or reconstruction of facilities, versus ongoing maintenance or repairs.

The CIP also indicates that unless the Stormwater Enterprise is permitted to increase the user fee rate, which has remained unchanged since 1992, the utility will be insufficiently funded to conduct permit compliance activities and needed capital improvements. Without additional revenues, the utility is unlikely to be able to fund improvements necessary to correct existing pipeline and pump station deficiencies. To the extent that these facilities include construction, they may be eligible for funding.

How were these needs determined?

The jurisdiction's need for public improvements, as described above, was identified through an evaluation of the adopted CIP, as well as various other General Plan documents. Additional needs were identified through consultations with affordable housing stakeholders and developers, homeless service providers, and other agencies in Stockton.

Describe the jurisdiction's need for Public Services:

Under CDBG regulations, entitlement funds can be used to fund public services to the extent that those services are new or represent a quantifiable increase in the level of service.

Consultations with a variety of stakeholders, ranging from affordable housing developers to public and non-profit service providers, indicate the highest priority service needs are those that enable residents to secure and maintain quality affordable housing, as well as transportation improvements that provide better connectivity between employment opportunities and the existing and planned affordable housing inventory. Numerous public, private, and non-profit service providers indicate that the existing public transportation system is not robust enough (e.g., too few routes, infrequent headways) to get workers to and from their jobs in a timely manner, particularly for those who work in many of the industrial areas which are not well serviced by public transit. This has made it difficult for lower-income residents, particularly those attempting to exit homelessness or those who are nearing the end of Rapid Rehousing Assistance, to maintain steady employment and the earned income stream necessary to secure and maintain adequate housing. While some service providers provide transit to and from work as part of their programs, consultations indicate it is extremely costly to do so on an ad-hoc basis.

Other public services that would better enable lower-income residents to secure the earned income necessary to maintain stable housing include more affordable childcare options. While some programs like First 5 California or the Family Resource and Referral Center of San Joaquin County do offer childcare services for lower-income residents, stakeholders indicate they are heavily impacted. Ongoing

mental health care is another primary need for individuals at-risk of homelessness. There is a perceived pattern that homeless and at-risk persons facing mental health issues reach a point of crisis, receive assistance, only to repeat the cycle once they are determined to be “stabilized” and mental health services are reduced. Consultations also revealed there are a number of programs throughout the city and county for services such as vocational/life skills training, case management, and accesses to health care services which could be better coordinated and advertised to the public. Not only would this help to make services within the city and county more accessible, but it would also help to identify gaps in service provision.

While public services related to securing and maintaining housing were identified as one of the highest priorities, enhanced crime reduction is also a priority. With a long history of high crime rates, including violent crime, the City Council initiated a process in January 2012 to develop the Stockton Marshall Plan to reduce crime and improve public safety. Since initiation of the Marshall Plan, the City made significant strides in its fight against crime. Data obtained through the U.S. Federal Bureau of investigation’s (FBI) Uniform Crime Reporting (UCR) database shows that between 2012 and 2016 Stockton’s total Part I crime rate (i.e., the number of Part I crimes committed per 100,000 residents) fell 22 percent. Part I crimes consist of violent crimes (i.e., murder and non-negligent homicide, rape, robbery, and aggravated assault) and property crimes (i.e., burglary, motor vehicles theft, larceny-theft, and arson). During the same time-period, Stockton’s violent crime rate decreased eight percent, while the property crime rate decreased 26 percent. Due to changes in the City’s reporting practices, data collected after 2016 is not comparable to previous years, though the data indicate that between 2017 and 2018 Stockton’s total Part I crime rate increased four percent, primarily driven by a six percent increase in the rate of property crimes committed. During this time, the City’s violent crime rate decreased one percent. Despite these improvements, crime rates in the City of Stockton are well above the statewide average.

How were these needs determined?

The jurisdiction’s need for public services, as described above, was primarily identified through a review of applicable City planning documents, including the 2015-2020 Consolidated Plan and associated Consolidated Annual Performance Review (CAPER) documents, as well as applicable General Plan document. Additional needs were identified through consultations with a variety of affordable housing stakeholders, homeless service providers, social service providers, and City staff.