

**CITY OF MILWAUKEE,
WISCONSIN**

YEAR 2025

“DRAFT”

**CONSOLIDATED ANNUAL
PERFORMANCE
AND
EVALUATION REPORT
(CAPER)**

Submitted to the local HUD Milwaukee Office

**Mario Higgins, Director
Community Development Grants Administration
City Hall - 200 East Wells Street - Room 606
Milwaukee, Wisconsin**

Funds provided by the U.S. Department of Housing & Urban Development

GENERAL
GRANTEE: City of Milwaukee, Wisconsin
CON PLAN PERIOD: 2025 to 2029

Introduction

As a Participating Jurisdiction (PJ) and entitlement community, the City of Milwaukee-Community Development Grants Administration (CDGA), receives annual funding allocations from the Federal government to fund activities to address the following three (3) National Objectives of the U.S. Department of Housing and Urban Development (HUD):

- **Principally benefits low/moderate income persons**
- **Prevents or eliminates slum or blight**
- **Addresses an urgent need or problem in the community (e.g., natural disaster)**

As a recipient of these funds, the City of Milwaukee is required to submit to HUD each year, a final *Consolidated Annual Performance and Evaluation Report (CAPER)* which provides detailed information to the local public, HUD and members of Congress on activities undertaken with these entitlement funds. It is also used to track the grantee's performance in meeting the goals established in the **2025-2029 Five-Year Consolidated Plan** and subsequent *Annual Action Plans*. Most activities conducted in 2025 were under the direct control and supported by the following Federal entitlement funds which are administered by the Community Development Grants Administration: Community Development Block Grant (CDBG), HOME Investment Partnerships, Emergency Solutions Grants (ESG), and Housing Opportunities for Persons with AIDS (HOPWA).

In 2025, the City of Milwaukee submitted the *2025-2029 Five-Year Consolidated Plan* as required by the U.S. Department of Housing and Urban Development. The Consolidated Plan details broad strategies to address community development within the scope of the HUD National Objectives.

The statutes for the Federal formula grant programs set forth three basic goals against which the plan and the City's performance under the plan will be evaluated by HUD. The City must state how it will pursue these goals for all community development programs. The HUD statutory program goals are:

DECENT HOUSING - which includes:

- assisting homeless persons obtain affordable housing;
- assisting persons at risk of becoming homeless;
- retaining the affordable housing stock;
- increasing the availability of affordable permanent housing in standard condition to low-income and moderate-income families, particularly to members of disadvantaged minorities without

discrimination on the basis of race, color, religion, sex, national origin, familial status, or disability;

- increasing the supply of supportive housing which includes structural features and services to enable persons with special needs (including persons with HIV/AIDS) to live in dignity and independence; and
- providing affordable housing that is accessible to job opportunities.

A SUITABLE LIVING ENVIRONMENT - which includes:

improving the safety and livability of neighborhoods;

- eliminating blighting influences and the deterioration of property and facilities; increasing access to quality public and private facilities and services;
- reducing the isolation of income groups within areas through spatial deconcentration of housing opportunities for lower income persons and the revitalization of deteriorating neighborhoods;
- restoring and preserving properties of special historic, architectural, or aesthetic value; and
- conserving energy resources and use of renewable energy sources.

EXPANDED ECONOMIC OPPORTUNITIES- which includes:

job creation and retention;

- establishment, stabilization and expansion of small businesses (including micro-businesses);
- the provision of public services concerned with employment;
- the provision of jobs to low-income persons living in areas affected by those programs and activities, or jobs resulting from carrying out activities under programs covered by the plan;
- availability of mortgage financing for low-income persons at reasonable rates using non-discriminatory lending practices;
- access to capital and credit for development activities that promote the long-term economic and social viability of the community; and
- empowerment and self-sufficiency for low-income persons to reduce generational poverty in federally assisted housing and public housing.

The long-term outcomes linked to these goals are:

Availability/Accessibility – This outcome relates to programs that make services, housing, infrastructure, public services, or shelter accessible or available to low or moderate income persons, include those with special needs and/or disabilities.

Affordability – This outcome relates to programs that provide affordability to low or moderate income persons and can include affordable housing.

Sustainability – This outcome relates to programs that improve communities and promote viability such as removing slum and blight or other services that sustain communities

CR-05 - Goals and Outcomes

Progress the jurisdiction has made in carrying out its strategic plan and its action plan. 91.520(a)

Note: Data contained in this report is still being updated for the final report.

CR-05 - Goals and Outcomes

Progress the jurisdiction has made in carrying out its strategic plan and its action plan. 91.520(a)

This could be an overview that includes major initiatives and highlights that were proposed and executed throughout the program year.

In 2025, approximately \$11.2 million in Community Development Block Grant (CDBG) and HOME entitlement dollars was allocated for direct housing and housing-related activities, including owner-occupied housing rehabilitation, acquire/rehab/sell, vacant and blighted homes, new home construction, rental rehabilitation, lead abatement and other categories. This resulted in the completion of direct housing and/or rehab activities. Other housing-related activities resulted in the following: homebuyer counseling programs assisted first-time low-income homebuyers in closing home mortgage loans, property units received graffiti abatement, landlords received training on effective property management and various types of tenant assistance, including tenant training, were provided to community residents.

In 2025, CDBG funds were allocated to anti-crime community development and quality of life related activities including: community organizing and crime prevention, employment services, youth programming, health services, safe havens, driver's license recovery, infant mortality initiatives and community prosecution activities. The 2025 accomplishments related to anti-crime activities involved residents in: resident meetings and neighborhood improvement efforts such as cleanups, establishing new block clubs, and identifying hot spots, (drug houses or nuisance properties) which were referred to the appropriate authorities for action through the Community Prosecution program. In addition, thousands of youth benefited from a variety of youth employment, educational and recreation initiatives. These varied organizing efforts correlate with the five-year strategy of the Consolidated Plan of increasing resident participation to improve the overall quality of life for residents. CDBG-funded Job Training and Placement and Job Placement activities assisted low income persons in obtaining employment and the Special Economic Development initiatives led to the creation of new jobs. The Milwaukee Economic Development Corporation Revolving Loan fund continued servicing existing loans for continued job creation.

In 2025, CDBG and ESG funding was allocated for mandated and essential services such as homeless shelters and domestic violence prevention programs. Funds were also allocated to city-wide services including: fair housing, and landlord/tenant programs. In addition, community-based organizations received technical assistance to help strengthen their administrative capabilities and promote efficient services to the residents they serve. Enforcement services were provided to clients to resolve housing

and lending discrimination complaints.

Comparison of the proposed versus actual outcomes for each outcome measure submitted with the consolidated plan and explain, if applicable, why progress was not made toward meeting goals and objectives. 91.520(g)

Categories, priority levels, funding sources and amounts, outcomes/objectives, goal outcome indicators, units of measure, targets, actual outcomes/outputs, and percentage completed for each of the grantee’s program year goals.

Comparison of the proposed versus actual outcomes for each outcome measure submitted with the consolidated plan and explain, if applicable, why progress was not made toward meeting goals and objectives. 91.520(g)

Categories, priority levels, funding sources and amounts, outcomes/objectives, goal outcome indicators, units of measure, targets, actual outcomes/outputs, and percentage completed for each of the grantee’s program year goals.

Goal	Category	Source / Amount	Indicator	Unit of Measure	Expected – Strategic Plan	Actual – Strategic Plan	Per Co
Administration	Administration	CDBG: \$ / HOPWA: \$42000 / HOME: \$ / ESG: \$98000	Other	Other	0	0	
Affordable Housing: Owner- occupied & Rental Rehab	Affordable Housing	CDBG: \$ / HOME: \$	Rental units constructed	Household Housing Unit	35	15	42
Affordable Housing: Owner- occupied & Rental Rehab	Affordable Housing	CDBG: \$ / HOME: \$	Rental units rehabilitated	Household Housing Unit	50	72	14
Affordable Housing: Owner- occupied & Rental Rehab	Affordable Housing	CDBG: \$ / HOME: \$	Homeowner Housing Added	Household Housing Unit	100	69	69
Affordable Housing: Owner- occupied & Rental Rehab	Affordable Housing	CDBG: \$ / HOME: \$	Homeowner Housing Rehabilitated	Household Housing Unit	300	344	11

Code Enforcement	Housing-Code Enforcement	CDBG: \$	Housing Code Enforcement/Foreclosed Property Care	Household Housing Unit	12500	6391	51
Coronavirus Preparedness	Public Health	CDBG: \$	Other	Other	100	364	36
Demolition, Clearance & Remediation	Blight Elimination	CDBG: \$	Buildings Demolished	Buildings	0	0	
Employment Services	Non-Housing Community Development	CDBG: \$	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	400	1303	32
Employment Services	Non-Housing Community Development	CDBG: \$	Jobs created/retained	Jobs	0	0	
Fair Housing	Fair Housing	CDBG: \$	Public service activities for Low/Moderate Income Housing Benefit	Households Assisted	250	611	24
Fair Housing	Fair Housing	CDBG: \$	Other	Other	750	1970	26
Homebuyer Counseling/ Education	Affordable Housing	CDBG: \$	Public service activities for Low/Moderate Income Housing Benefit	Households Assisted	1000	4485	44
Homelessness	Homeless	CDBG: \$ / ESG: \$	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	0	17918	
Homelessness	Homeless	CDBG: \$ / ESG: \$	Homeless Person Overnight Shelter	Persons Assisted	4000	8632	21
Homelessness	Homeless	CDBG: \$ / ESG: \$	Overnight/Emergency Shelter/Transitional Housing Beds added	Beds	0	489	
Housing Accessibility / Modifications	Affordable Housing	CDBG: \$	Homeowner Housing Rehabilitated	Household Housing Unit	125	535	42
Housing Opportunities for Persons with Aids (HOPWA)	Affordable Housing Homeless Supportive Services	HOPWA: \$	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	0	522	

Housing Opportunities for Persons with Aids (HOPWA)	Affordable Housing Homeless Supportive Services	HOPWA: \$	Tenant-based rental assistance / Rapid Rehousing	Households Assisted	50	56	11
Housing Opportunities for Persons with Aids (HOPWA)	Affordable Housing Homeless Supportive Services	HOPWA: \$	Homelessness Prevention	Persons Assisted	0	545	
Housing Opportunities for Persons with Aids (HOPWA)	Affordable Housing Homeless Supportive Services	HOPWA: \$	HIV/AIDS Housing Operations	Household Housing Unit	20	52	26
Housing Opportunities for Persons with Aids (HOPWA)	Affordable Housing Homeless Supportive Services	HOPWA: \$	Other	Other	700	637	91
Housing-Neighborhood Improvement Program (NIP)	Affordable Housing	CDBG: \$ / HOME: \$	Homeowner Housing Rehabilitated	Household Housing Unit	350	185	52
Lead-Based Paint Prevention & Abatement	Affordable Housing	CDBG: \$	Homeowner Housing Rehabilitated	Household Housing Unit	0	0	
Lead-Based Paint Prevention & Abatement	Affordable Housing	CDBG: \$	Housing Code Enforcement/Foreclosed Property Care	Household Housing Unit	450	176	39
Neighborhood Strategic Planning/Comm Organization	Non-Housing Community Development	CDBG: \$	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	65000	53988	83
Neighborhood Strategic Planning/Comm Organization	Non-Housing Community Development	CDBG: \$	Other	Other	0	0	
Planning	Essential Services	CDBG: \$	Other	Other	40	537	1,3

Public Service - General	Non-Housing Community Development Public Service General	CDBG: \$	Public Facility or Infrastructure Activities for Low/Moderate Income Housing Benefit	Households Assisted	0	0	
Public Service - General	Non-Housing Community Development Public Service General	CDBG: \$	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	110	464	42
Public Service - General	Non-Housing Community Development Public Service General	CDBG: \$	Housing Code Enforcement/Foreclosed Property Care	Household Housing Unit	100	1092	1,0
Public Service - General	Non-Housing Community Development Public Service General	CDBG: \$	Other	Other	100	623	62
Special Economic Development/Business Assistance	Non-Housing Community Development	CDBG: \$	Jobs created/retained	Jobs	310	298	96
Technical Assistance/Capacity Building	Technical Assistance to Non-Profits	CDBG: \$	Other	Other	100	33	33
Tenant Based Rental Assistance	Affordable Housing	HOME: \$	Tenant-based rental assistance / Rapid Rehousing	Households Assisted	100	393	39
Vacant/Blighted Real Estate	Non-Housing Community Development	CDBG: \$	Other	Other	0	0	
Youth Services	Non-Housing Community Development	CDBG: \$	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	45000	36409	80

Table 1 - Accomplishments – Program Year & Strategic Plan to Date

Assess how the jurisdiction’s use of funds, particularly CDBG, addresses the priorities and specific objectives identified in the plan, giving special attention to the highest priority activities identified.

The Community Development Grants Administration continued to promote policies and employed strategies with the goal of increasing jobs and household income. To this end, the City approached planning and program development efforts in a comprehensive manner. The City also continued to investigate programs and supported initiatives which assist in removing barriers to employment for low income households, i.e., walk-to-work programs and access to programs that provide wrap around social, educational, employment and life skills services. Funding allocations in 2025 were designed to use a comprehensive approach to reduction of barriers by increased funding to a number of agencies that target increased employment opportunities, expanded homeownership and quality, affordable rental housing in Milwaukee.

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CR-10 - Racial and Ethnic composition of families assisted

Describe the families assisted (including the racial and ethnic status of families assisted).

91.520(a)

	CDBG	HOME	
Race:			
White	3918	8	0
Black or African American	13364	168	0
Asian	894	18	0
American Indian or American Native	80	1	0
Native Hawaiian or Other Pacific Islander	17	0	0
Total	18273	195	0
Ethnicity:			
Hispanic	2734	3	0
Not Hispanic	15539	192	0

Table 2 – Table of assistance to racial and ethnic populations by source of funds

Narrative

As the data shows, the overwhelmingly majority of persons served were Black, followed by White, Hispanic, Asian and American Indian or American Native. U.S. census data shows that the poverty rate among Milwaukee's Black population far exceeds any other race category. As such the City of Milwaukee has consistently targeted resources to the most impoverished populations.

CR-15 - Resources and Investments 91.520(a)

Identify the resources made available

Source of Funds	Source	Resources Made Available	Amount Expended During Program Year
CDBG	public - federal	15,609,216	16,196,576
HOME	public - federal	4,879,285	1,510,595
HOPWA	public - federal	1,466,014	889,371
ESG	public - federal	1,400,251	1,322,352

Table 3 - Resources Made Available

Narrative

Many activities identified in the Consolidated and Annual Action Plan are under the direct control and supported by the following Federal entitlement funds which are administered by the **Community Development Grants Administration: Community Development Block Grant (CDBG), HOME Investment Partnerships, Emergency Solutions Grants (ESG) and Housing Opportunities for Persons with AIDS (HOPWA)**. Other Federal and State funds were also used for proposed activities.

Identify the geographic distribution and location of investments

Target Area	Planned Percentage of Allocation	Actual Percentage of Allocation	Narrative Description
4-County Metro Milwaukee area	6	6	HOPWA target areas
City of Milwaukee	52	53	Local jurisdiction boundaries
NRSA AREA #1	30	29	
NRSA AREA #2	12	12	

Table 4 – Identify the geographic distribution and location of investments

Narrative

Geographic Distribution: The geographic distribution for these entitlement funds, with the exception of HOPWA funds, is the Neighborhood Revitalization Strategy Areas (NRSAs). Services were also provided to low income residents in non-NRSA census tracts within the City of Milwaukee. The HOPWA funds cover the four-County Milwaukee Metropolitan Statistical Area comprised of: Milwaukee, Waukesha, Ozaukee and Washington counties.

There continues to be racial and ethnic concentrations both within the City of Milwaukee and in the Milwaukee Metropolitan Statistical Area(MMSA). The concentration still remains greatest for African Americans and has been noted by several local and national research studies. Most marked is the concentration of African Americans within the city limits and the fact that less than 3% of the suburban

population of the four-County Milwaukee Metropolitan Area is Black.

Milwaukee's residential segregation has been studied for decades by local and national researchers and policymakers. The tremendous impact on the gaps between Blacks and Whites as it relates to income, mortgage loan disparity rates and educational attainment, has been cited in numerous national studies. It is important to note the overlay of economic segregation as this impacts employment and other opportunities for Blacks. CDGA-funded programs providing "seed capital" for new economic development activities continues to be a high priority as a means of stimulating economic opportunities including job creation for Milwaukee residents in the identified Neighborhood Revitalization Strategy Areas (NRSAs).

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Leveraging

Explain how federal funds leveraged additional resources (private, state and local funds), including a description of how matching requirements were satisfied, as well as how any publicly owned land or property located within the jurisdiction that were used to address the needs identified in the plan.

The City of Milwaukee is committed to leveraging funding resources from other types of public and private sources for community development projects funded through CDGA. The projects receiving Emergency Shelter Grant (ESG) funds utilized CDBG funds to match the use of the ESG funds. In addition to CDBG funds, other State funds and non-governmental funds were used in conjunction with shelter related activities.

The housing rehabilitation projects leveraged funds from the private sector mostly in the form of funds borrowed from lenders providing construction financing and permanent financing. State of Wisconsin Low Income Housing Tax Credits directly provided a needed subsidy in low-income rental projects by selling the credits to investors. HOME funds were sometimes combined with CDBG funds and/or private funds. Economic development funds have complimented projects from the Department of Justice, which directly impacts community security and safety issues.

Fiscal Year Summary – HOME Match	
1. Excess match from prior Federal fiscal year	0
2. Match contributed during current Federal fiscal year	0
3. Total match available for current Federal fiscal year (Line 1 plus Line 2)	0
4. Match liability for current Federal fiscal year	0
5. Excess match carried over to next Federal fiscal year (Line 3 minus Line 4)	0

Table 5 – Fiscal Year Summary - HOME Match Report

Match Contribution for the Federal Fiscal Year								
Project No. or Other ID	Date of Contribution	Cash (non-Federal sources)	Foregone Taxes, Fees, Charges	Appraised Land/Real Property	Required Infrastructure	Site Preparation, Construction Materials, Donated labor	Bond Financing	Total Match

Table 6 – Match Contribution for the Federal Fiscal Year

HOME MBE/WBE report

Program Income – Enter the program amounts for the reporting period				
Balance on hand at begin-ning of reporting period \$	Amount received during reporting period \$	Total amount expended during reporting period \$	Amount expended for TBRA \$	Balance on hand at end of reporting period \$
0	474,873	439,816	0	35,057

Table 7 – Program Income

Minority Business Enterprises and Women Business Enterprises – Indicate the number and dollar value of contracts for HOME projects completed during the reporting period						
	Total	Minority Business Enterprises				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Contracts						
Dollar Amount	1,839,898	0	0	102,250	0	1,737,648
Number	5	0	0	1	0	4
Sub-Contracts						
Number	0	0	0	0	0	0
Dollar Amount	0	0	0	0	0	0
	Total	Women Business Enterprises	Male			
Contracts						
Dollar Amount	28,473,580	1,951,686	26,521,894			
Number	232	11	221			
Sub-Contracts						
Number	0	0	0			
Dollar Amount	0	0	0			

Table 8 - Minority Business and Women Business Enterprises

Minority Owners of Rental Property – Indicate the number of HOME assisted rental property owners and the total amount of HOME funds in these rental properties assisted						
	Total	Minority Property Owners				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Number	0	0	0	0	0	0
Dollar Amount	0	0	0	0	0	0

Table 9 – Minority Owners of Rental Property

Relocation and Real Property Acquisition – Indicate the number of persons displaced, the cost of relocation payments, the number of parcels acquired, and the cost of acquisition						
Parcels Acquired		0	0			
Businesses Displaced		0	0			
Nonprofit Organizations Displaced		0	0			
Households Temporarily Relocated, not Displaced		0	0			
Households Displaced	Total	Minority Property Enterprises				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Number	0	0	0	0	0	0
Cost	0	0	0	0	0	0

Table 10 – Relocation and Real Property Acquisition

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CR-20 - Affordable Housing 91.520(b)

Evaluation of the jurisdiction's progress in providing affordable housing, including the number and types of families served, the number of extremely low-income, low-income, moderate-income, and middle-income persons served.

	One-Year Goal	Actual
Number of Homeless households to be provided affordable housing units	0	28
Number of Non-Homeless households to be provided affordable housing units	232	240
Number of Special-Needs households to be provided affordable housing units	0	0
Total	232	268

Table 11 – Number of Households

	One-Year Goal	Actual
Number of households supported through Rental Assistance	0	28
Number of households supported through The Production of New Units	27	9
Number of households supported through Rehab of Existing Units	205	231
Number of households supported through Acquisition of Existing Units	0	0
Total	232	268

Table 12 – Number of Households Supported

Discuss the difference between goals and outcomes and problems encountered in meeting these goals.

Additional resources issued for TBRA due to increased Homelessness. Goals for owner-occupied properties down due to increased costs for construction material and labor.

Discuss how these outcomes will impact future annual action plans.

The City will continue to implement its' housing strategy which focuses on the preservation and creation of affordable owner-occupied and rental housing units. The City will continue to seek additional resources and leverage to compliment its' housing production strategy.

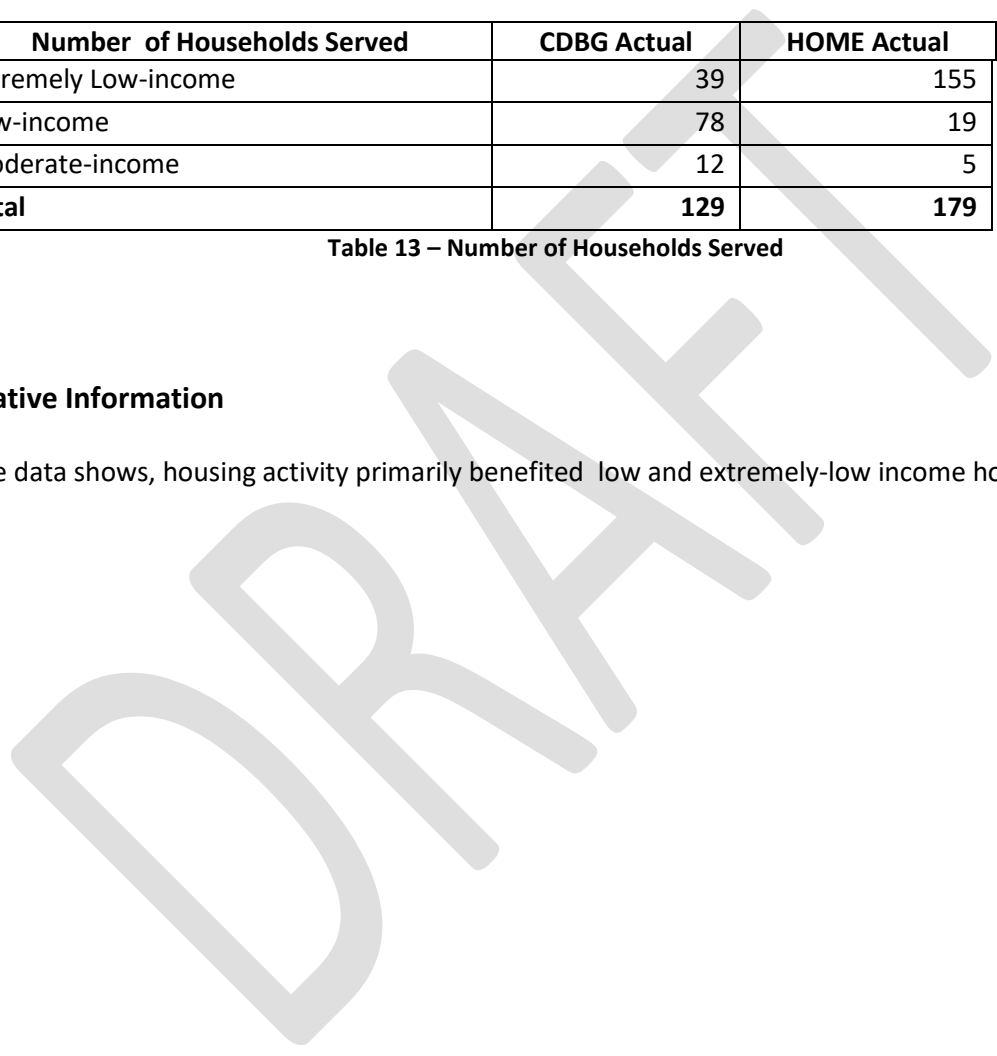
Include the number of extremely low-income, low-income, and moderate-income persons served by each activity where information on income by family size is required to determine the eligibility of the activity.

Number of Households Served	CDBG Actual	HOME Actual
Extremely Low-income	39	155
Low-income	78	19
Moderate-income	12	5
Total	129	179

Table 13 – Number of Households Served

Narrative Information

As the data shows, housing activity primarily benefited low and extremely-low income households.



CR-25 - Homeless and Other Special Needs 91.220(d, e); 91.320(d, e); 91.520(c) – Evaluate the jurisdiction’s progress in meeting its specific objectives for reducing and ending homelessness through:

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

The most robust outreach initiative to people who are homeless or who are at risk of homeless is conducted via the Milwaukee Continuum of Care’s Coordinated Entry system operated by 211/IMPACT. Coordinated Entry was established in September 2013 after two years of intensive planning by a CoC work group. Milwaukee’s Coordinated Entry system is a call-, web-, text-, street outreach- and community in reach-based system that receives individual assessment information from people seeking assistance and assesses their needs using a Vulnerability Index (VI). The VI assesses current homeless status, income, health, mental health, substance abuse and other factors critical to establishing priority for shelter. The overall goal of Coordinated Entry is to assure that those most in need are prioritized for services.

Coordinated Entry is widely publicized in the Milwaukee community via 211 cards and posters at emergency shelters, police substations, meal sites, day shelter, nonprofit entities, hospital emergency departments, and behavioral health providers. Coordinated Entry information is also posted on the websites of IMPACT, United Way and the Continuum of Care. All materials are in Spanish and English.

IMPACT 2-1-1 began serving as the entry point for those seeking emergency shelter in Milwaukee County on October 1, 2013. The planning for this “Coordinated Entry” project began in 2011 as an outcome of the Milwaukee County Continuum of Care 2010 Ten-Year Plan to End Homelessness in Milwaukee County. Beginning on October 1, 2013 all families seeking emergency shelter in Milwaukee County must contact IMPACT 2-1-1 in order to be placed in emergency shelter. After January 1, 2014 all single women and after April 2015 all single men would have to contact IMPACT 2-1-1 in order to be placed in emergency shelter. An intensive assessment is completed that addresses any possible remedies or alternatives to a family or single woman that would avoid placement into an emergency shelter. Families and single women are assessed and referred on to available emergency shelter beds based on a “vulnerability index.”

Cont'

Coordinated Entry’s outreach and capacity to meet individual needs has increased in recent years with increased community awareness. From 2019 to 2022, Coordinated Entry expanded service offerings to include more direct prevention and diversion support, assisting with Milwaukee’s goals to reduce the number of folks entering emergency shelters or experiencing unsheltered homelessness. In 2025, 211 began triaging clients and sending referrals via a form, giving the intake specialist more time for live calls and callbacks. This process saved hours previously spent logging voicemails from 211

referrals, enabling the intake specialist to focus on taking calls. In addition to the initial assessments, through ESG, Coordinated Entry continued to coordinate with health care systems, school social workers, Behavioral Health Services, ADRC, street outreach teams, and the shelters to case conference the most appropriate emergency placement for those in need. In 2025, Coordinated Entry reported assessing housing and service needs for a total of 886 individual clients with the support of ESG program funding. Further demand for assistance is observed in total 2-1-1 caller needs data in the City of Milwaukee and Milwaukee County compared between 2023 and 2025: 2,328 total calls requesting eviction prevention assistance were made in 2025, versus 2,369 total calls requesting eviction prevention made in 2023 8,938 total calls requesting financial assistance were made in 2025, versus 8,483 total calls requesting financial assistance made in 2023 11,854 total calls requesting housing (non-shelter assistance) were made in 2025, versus 8,590 total calls requesting housing assistance made in 2023 16,873 total calls requesting emergency shelter services were made in 2025, versus 17,608 total calls requesting shelter assistance made in 2023 In total, 19,025 of 45% of all calls were made to 2-1-1 in 2025 to request access/intake to shelter and homeless services.

Addressing the emergency shelter and transitional housing needs of homeless persons –

Emergency shelter and transitional housing providers serving Milwaukee's Continuum of Care include Hope House of Milwaukee, Guest House of Milwaukee, Cathedral Center, the Salvation Army of Milwaukee, Community Advocates, Pathfinders, Walker's Point, La Causa, Sojourner Family Peace Center, Milwaukee Rescue Mission and Joy House.

Families experiencing homelessness were provided with shelter services through Hope House of Milwaukee, Cathedral Center, Community Advocates, Sojourner Family Peace Center, Salvation Army of Milwaukee and Joy House. Single men experiencing homelessness were served with shelter services by Guest House of Milwaukee, the Salvation Army of Milwaukee and Milwaukee Rescue Mission. The Milwaukee Rescue Mission does not have time restricted shelter stays. Single women experiencing homelessness were served with shelter services through Cathedral Center and the Salvation Army of Milwaukee. Unaccompanied youth experiencing homelessness were served with shelter services through Pathfinders, Walker's Point, and La Causa. Those fleeing or experiencing domestic violence were served by Community Advocates emergency shelter and Sojourner Family Peace Center emergency shelter.

The City of Milwaukee works with the Milwaukee Health Department and Milwaukee County Housing Division to ensure that local shelters and new shelter locations created to complement ESG-funded emergency shelters are guidance and resources to prevent the spread of coronavirus and best respond when coronavirus outbreaks occur, as well as support new shelter sites for seasonal sheltering during the wintertime. Seasonal shelter referrals were targeted to serve those with the most acute needs following established Coordinated Entry policy, with projects and participants served by them entered into HMIS for comprehensive inventory of Milwaukee's shelter projects and tracking the homeless history and outcomes of those served by seasonal shelter. As homeless services leadership understands similar public health crises can disrupt safe sheltering, longstanding partnerships between the City of Milwaukee, multiple Milwaukee County departments, street outreach teams, philanthropic organizations, the local Coordinated Entry administering agency, the HMIS Lead Agency, and the Shelter

and Transitional Housing Task Force members fostered a collaborative approach to homeless prevention, shelter, and housing exit planning.

In 2025, Milwaukee's ESG-funded emergency shelter providers reported on exit destination for 1,766 persons. Providers reporting destination include: Hope House of Milwaukee, Guest House of Milwaukee, Cathedral Center, the Salvation Army of Milwaukee, Community Advocates, Pathfinders, Walker's Point, Sojourner Family Peace Center and La Causa. An overall total of 3,215 exit destinations were reported for all ESG-funded project types (street outreach, emergency shelter, homeless prevention and rapid rehousing).

Outcomes –

In 2025, the Milwaukee Continuum of Care provided emergency shelter services to 2,066 homeless people including 1,044 adults and 1,022 children. This data does not include data reflecting single adults and children who resided in Milwaukee Rescue Mission Safe Harbor and Joy House emergency shelters. In 2025, the Milwaukee Continuum of Care provided emergency shelter to 1,329 people that reported a history of domestic violence, sexual assault, dating violence, stalking or human trafficking, and 605 people were served by 2 domestic violence shelters. All emergency shelter providers have aggregate data available for the racial categories defined by the FY 2025 HMIS Data Standards that took effect October 1, 2023. Of the 2,066 people reported, 1,481 were Black/African American, 246 were White, 57 were Hispanic/Latina/e/o & Black, African American, or African; 45 were White & Black, African American, or African; 24 were Black, African American, of African & American Indian, Alaska Native, or Indigenous; 21 were Hispanic/Latina/e/o, 17 were American Indian, Alaska Native, or Indigenous; 17 were Asian or Asian American, and 10 were multiracial & more than 2 races/ethnicity, with one being Hispanic/Latina/e/o. Since the establishment of Coordinated Entry, callers reporting need for shelter services to 211 are prioritized based on a Vulnerability Index, a brief assessment instrument that looks at street homelessness, mental health, substance abuse, physical health problems, domestic violence, family size and other factors in order to prioritize need and place the most in need into shelter. Families and single adults who are not referred to shelter are connected to prevention services with the goal of helping them avoid an episode of homelessness and regain housing stability. Emergency shelter providers were called upon to respond to significant needs evidenced by the reported data on physical and mental health conditions of leavers: 366 reported mental health disorder, 36 reported alcohol use disorder, 71 reported drug use disorder, 34 reported both alcohol and drug use disorder, 246 reported chronic health conditions, 12 reported HIV/AIDS, 158 reported developmental disability, and 219 reported physical disabilities. Emergency shelters addressed these needs through on-site case management services aimed primarily at addressing each individual's unique needs and barriers to obtaining and maintaining permanent housing, and external referral to healthcare and behavioral health care providers. The City of Milwaukee and Milwaukee Continuum of Care prioritize offering training for assessment and case management best practices knowing disclosure of conditions is only made when a project participant trusts their case manager or intake worker and is asked about them in an appropriate way.

Helping low-income individuals and families avoid becoming homeless, especially extremely

low-income individuals and families and those who are: likely to become homeless after being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); and, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs –

Length of time homeless: The prioritization of those most vulnerable by the Coordinated Entry system has resulted in people with the most serious needs being admitted to shelter, and longer shelter stays to ensure clients' needs are met before shelter exit. This outcome has also been impacted by limitations in available housing that is accessible and affordable to someone working to resolve financial difficulties on a short-term basis in an emergency shelter. 475 people, roughly half of the total adults with income information recorded at the start of their stay in shelter, entered emergency shelter without any source of income in 2025. 231 people exited emergency shelter in 2025 with reported income greater than \$1,000 per month, or within a threshold enabling Milwaukee County fair market rate, unsubsidized housing accessible. All shelter providers work diligently to connect project participants to employment and non-cash benefits by different means including: workforce development board in-reach, job fair hosting, benefits resource fair hosting, interview clothing resources on-site, transportation assistance, and Social Security application assistance. Considering the acuity of supportive service needs of clients in emergency shelters, discharging clients without a certain destination is not desirable or conducive to permanently ending someone's homeless experience. From its position as a facilitator for local homeless service system strategic planning, City of Milwaukee and local Continuum of Care leadership are optimistic about the positive impact HOME-ARP supported resources will have on outflow from shelter to positive housing destinations and the length of time people will experience homelessness in Milwaukee in future years.

In the CoC, 2,066 people were reported as participating in emergency shelters funded by ESG in 2025. Though people with more serious needs are being admitted to shelter, the majority of those people who are reported to enter shelter have stays of 0-7 days (505 persons or 24%). 159 persons, or 11% of those reported, had 8 to 14 day shelter stays. Another 114 persons, or 5% of those reported, had 15 to 21 day shelter stays. 135 persons, or 6% of those reported, had 22-30 day shelter stays. 383 persons, or 18% of those reported, had 31-60 day shelter stays. 329 persons, or 16% of those reported, had 61-90 day shelter stays. 287 persons, or 14% of those reported, had 91-180 day shelter stays. 69 persons, or 3% of those reported, had 181-365 day shelter stays.

The CoC is working to reduce the length of time homeless by increasing the inventory of permanent housing options for single adults, families, unaccompanied youth, and adults fleeing domestic violence which will enable people experiencing homelessness to leave shelter more quickly or to avoid shelter altogether by being permanently housed. The CoC had capacity to offer up to 683 people RRH services at any given time in 2025 as recorded in the 2025 Housing Inventory Count report, an increase from 491 in 2023. Capacity in 2025 was expanded locally through CoC bonus project opportunities, City of Milwaukee HOME supported TBRA RRH model projects, and State of Wisconsin ARPA funds. While the

State of Wisconsin ARPA support was depleted by 2025, it will be replaced and increased by the City of Milwaukee's HOME ARP TBRA projects in future years. Though not captured in the 2025 HIC report, the City of Milwaukee used 2022 ESG program funding in a reprogramming opportunity to serve 57 additional people in an additional Rapid Rehousing project operating September 2025 through February 2025.

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The CoC also has 2,024 permanent housing beds (in permanent supportive housing and other permanent housing projects) additional to community RRH capacity of 683 beds in 2025. The CoC continued efforts to have programming follow Housing First best practices in support of offering high quality services accompanying housing to those experiencing homelessness identified as the most vulnerable. Providers are supported in peer-sharing and permanent supportive housing staffing meetings organized by the Coordinated Entry administering agency, IMPACT, Inc. In 2025, staffing was arranged for different special populations, emergency shelter, and permanent supportive housing, and rapid rehousing. These meetings enable the CoC to identify best housing strategies for individuals or families, shorten lengths of time homeless as best possible, have equal access to housing resource information, and case conference to further housing stability for those experiencing homelessness. Access to Affordable Housing In 2025, 3,215 people had a destination reported as they exited the CoC homeless services system from all ESG-funded projects from the following providers: Hope House of Milwaukee, Guest House of Milwaukee, Cathedral Center, the Salvation Army of Milwaukee, Community Advocates, Pathfinders, Sojourner Family Peace Center, Walkers Point and La Causa. Of those 3,215 reported 1,015 or 31%, went to a positive housing destination, an increase from 16% exiting to a positive housing destination in 2023. Affordable housing destinations reported include rental by client with no subsidy, rental by client with VASH subsidy, rental by client with GPD subsidy, rental by client with other subsidy, and permanent housing for formerly homeless. 472 persons went to a rental by client with no subsidy, or 46% of those reported who went to a permanent housing destination. 326 people went to live in rental housing with a subsidy. The City of Milwaukee and Milwaukee Continuum of Care continue to collaborate with 3 local public housing authorities, which has led to recent increase in homeless-dedicated public housing and housing choice voucher availability. Accessing high quality affordable housing units is an area of major challenge for the CoC since there is a critical shortage of affordable housing units in the Milwaukee area that will accept tenants with the severity of housing barriers common among those experiencing homelessness. The 2021 adoption of a homeless preference in public housing and Emergency Housing Voucher programs operated by Milwaukee County's largest public housing authority, the Housing Authority of the City of Milwaukee, is expected to lead to decreasing returns to homelessness in future years as waiting lists for vouchers open and opportunities to apply for Housing Choice Vouchers occur. Milwaukee homeless service providers otherwise continue to grapple with a lack of access to permanent, supportive employment opportunities offering income compatible with housing costs, as well as expeditious processing of Social Security applications for people with disabilities. Milwaukee County Public Housing Authority not only maintains a homeless preference, but continues to maintain a "move on" preference for Section 8 Housing Choice vouchers, allowing those who have been in permanent

supportive housing for several years to have the opportunity to continue to have a voucher in a new unit, and enabling new clients to be admitted into finite slots for CoC-funded permanent supportive housing.

Addl Participation

City of Milwaukee staff participates in a statewide coordinating body with County and State supportive employment advocates to improve access to supportive employment for those with mental health or substance use disorders, but expansion of local supportive employment programs remains a long-term goal. Unsubsidized affordable rental units are in short supply and this is a major challenge for the system. Local strategies put in place to address length of time homeless include increasing Rapid Re-Housing capacity and enhancing service offerings to assure Housing First fidelity in supportive housing projects, by leveraging different funding opportunities and coordinating funding locally to complement and deduplicate efforts. The Milwaukee Continuum of Care was awarded Youth Homeless Demonstration Project funding through the CoC program, which will allow for more customized housing and service solutions to youth homelessness to be implemented and assessed based on a youth governing board's recommendations and leadership in the CoC. The Shelter and Transitional Housing Task Force and a case management collaborative group continue to work with the Milwaukee County Behavioral Health Division to improve access to crisis mental health services and facilitate enrollment of eligible people into available long-term care programs. This has a positive effect on the housing stability and recovery of some individuals with serious mental illness who are served by both behavioral health and homeless service systems. The City of Milwaukee HOME-ARP planning and community input reiterates all of these longstanding community housing and homeless service needs, and investments will be made in improvements to supportive service infrastructure, affordable housing prioritized for lower-income community members, additional behavioral health support programs among other needs expressed with input from Milwaukee community members and homeless service system partners.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again

Discharge planning: The Milwaukee Continuum of Care has made efforts to improve discharge planning from major institutions with the goal of preventing discharges to homelessness. Most successful has been Milwaukee County's establishment of dedicated staff to intervene in the discharge process of people with special needs who are being discharged from the Milwaukee County House of Corrections, Milwaukee County Behavioral Health Division and local hospitals. Staff work with available system and private resources to transition vulnerable individuals to safe and permanent housing situations. This hands-on approach has been very successful in preventing discharges to homelessness, especially for

people with mental illness. Also key to the discharge issue is the role played by Coordinated Entry as an increasing number of institutions access this resource to connect with services to prevent homelessness. Discharges from institutions are monitored via Annual Performance Reports (APR) generated by HMIS. At this point in time, each of these institutions have discharge protocols that are intended to prevent discharges to homelessness either as a result of state or federal statute (mental health facilities, hospitals and foster care) or policy (corrections).

Collaboration with other services: The CoC has worked in partnership with the Milwaukee County Behavioral Health Division to address barriers to service delivery for homeless people with mental illness and substance use disorders in working meetings in its Leadership Committee and coordinated staffing. The CoC anticipates that the Wisconsin Medicaid waiver and additional investment in direct behavioral health services targeted to meet the needs of those experiencing homelessness and unstable housing will support expansion of service delivery and diversion from homelessness for those that are high utilizers of crisis services. Local homeless service leaders are encouraged by a reliable commitment and investment in community-integrated mental health recovery at the local level, and see anecdotal evidence this approach support maintenance of housing stability. This work is expected to result in increased numbers of homeless people being enrolled in mental health and AODA treatment, ongoing case management and supportive services.

DRAFT

CR-30 - Public Housing 91.220(h); 91.320(j)

Actions taken to address the needs of public housing

In 2025, the Housing Authority of the City of Milwaukee (HACM) continued to undertake activities to increase the availability of decent, safe, and affordable housing in Milwaukee. Rental Assistance Demonstration: Due to declining federal funding for public housing, the Housing Authority of the City of Milwaukee (HACM) continued its redevelopment efforts, including using tools to reposition public housing such as the HUD's Rental Assistance Demonstration (RAD) program, as well as looking at the potential of other repositioning tools such as the Section 18 disposition program and Section 32 homeownership program. Through the RAD program between 2017 and 2025, HACM transformed public housing units in 14 housing developments into project-based voucher units on a 1-for-1 basis, thus sustaining subsidized housing for the future. These developments include: Cherry Court, Highland Gardens, Convent Hill, Lapham Park, Olga Village, Westlawn Gardens, Scattered Sites Tax Credit I, Scattered Sites Tax Credit II, Westlawn Gardens Scattered Sites, Victory Manor, Holton Terrace, Merrill Park, Becher Court, Westlawn Renaissance III, Westlawn Renaissance IV, Westlawn Renaissance V, Westlawn Renaissance VI, and Westlawn Renaissance VII. This transformation has allowed redevelopment and physical improvements at various housing developments, while retaining the housing subsidy through the project-based voucher program and retaining rights for existing residents such as the right to remain or return after redevelopment. Choice Neighborhoods Initiative: On 9-28-15, the City of Milwaukee and HACM were awarded a \$30 million HUD Choice Neighborhoods Implementation (CNI) grant to support a locally-driven, comprehensive strategy to transform Westlawn, once Wisconsin's largest public housing development, and the surrounding neighborhood via strategies in four areas: (1) Housing - Develop quality sustainable mixed-income housing; (2) People - Through case management, develop positive employment, health, and educational outcomes for Westlawn families to increase self-sufficiency; (3) Education - Provide neighborhood families with a high quality educational pathway from cradle to college/career; (4) Neighborhood - Build upon existing partnerships to develop a vibrant, well-connected community.

Cont' Actions taken to address the needs of public housing.

HACM is the Housing Implementation Entity and the People Implementation Entity. The Department of City Development is the Neighborhood Implementation Entity for the Choice Neighborhoods grant and the City has provided Community Development Block Grant Funds to support eligible activities in the Westlawn Transformation Plan. Between 2019 and 2025, HACM constructed 523 housing units, including 394 replacement units (units that replaced the previous 394 public housing units, with new project-based voucher units); 123 other affordable units; and 6 market rate rental units. HACM is currently completing 11 additional market-rate rental units. Other: Even with the completion of a number of RAD developments, there are still a number of older public housing developments that were built from 1937 to the early 1970s that still need resources or repositioning efforts such as RAD or Section 18 repositioning. HACM continues to look for additional resources and tools to sustain subsidized housing for the next 30 to 50 years. In 2023, HACM's voucher program was identified

by the U.S. Department of Housing and Urban Development as troubled and the housing authority's voucher program is working on two Corrective Action Plans with HUD to improve performance, including contracting out the management and operation of the Housing Choice Voucher program. In 2025, public housing was also labeled as troubled and on 1/31/2025, HACM signed a Recovery Agreement with HUD to improve performance in its governance, financial, management/physical, and capital funds program by the end of 2026.

Actions taken to encourage public housing residents to become more involved in management and participate in homeownership

Board of Commissioners: HACM is governed by seven Commissioners who are nominated by the Mayor and approved by the Common Council; two of whom are public housing residents. It is their responsibility to determine HACM policy and assure agency compliance with all applicable state laws and federal regulations. As of January 2025, the Board consists of five Commissioners (including one resident commissioner). Two additional Commissioners (including the second resident Commissioner) resigned in November/December and the Mayor is working to identify new nominees to the position to replace two recent nominees that requested to drop out of the process. **Resident Advisory Board:** Like all public housing authorities, HACM has a Resident Advisory Board (RAB), which is the organization that represents the residents of the entire Housing Authority of the City of Milwaukee in providing input to the annual and Five-Year Agency Plan and also offers feedback on other changes to policies or programs. The RAB includes representatives, both from public housing and other housing developments as well as the rent assistance program. HACM meets with the RAB on a monthly basis. **Resident Organizations/Councils:** In addition to the RAB, many of HACM's developments has a Resident Council/Resident Organization that meets on a monthly basis to discuss issues that impact the residents of their housing development, including programs and activities that affect their housing development. Each Resident Organization is governed by an elected Board. **Other Homeownership and Self-Sufficiency Opportunities:** Homeownership opportunities are promoted and encouraged through HACM's two homeownership programs: Section 32 program for those eligible families for public housing, and the Section 8(y) program for households with a Housing Choice Voucher that wishes to convert their voucher from rental assistance to mortgage assistance. In addition, HACM assists families and individuals in increasing household assets available for homeownership in two ways: (1) through a partnership with Wisconsin Women's Business Initiative Corporation (WWBIC) to provide financial education matched with a matched savings individual development account (IDA); and (2) through the Family Self-Sufficiency (FSS) program where increased earned income can result in escrowed savings for a household.

Actions taken to provide assistance to troubled PHAs

CDGA has continually worked with the Housing Authority of the City of Milwaukee (HACM), especially in the area of identifying vouchers for persons at risk of homelessness, and coordinating effort around projects with place-based vouchers. The City will continue to look for additional actions or linkages to additional partners that can assist the housing authority in its recovery from troubled status.

CR-35 - Other Actions 91.220(j)-(k); 91.320(i)-(j)

Actions taken to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment. 91.220 (j); 91.320 (i)

Estimate of number of housing units containing lead-based paint

The number of housing units in Milwaukee that contain lead-based paint hazards as defined by Section 1004 of the Residential Lead-Based Paint Hazard Reduction Act of 1992 is estimated at approximately 194,881 housing units pre-1978 in the City of Milwaukee.

The Milwaukee Health Department (MHD) Home Environmental Health (HEH) continued efforts to prioritize the approximately 83,465 housing units as representing the epicenter of the childhood lead poisoning prevention problem in Milwaukee, with 62% listed as rental properties.

2025 data analysis by the Wisconsin Department of Health Services shows the City of Milwaukee continues to experience significantly higher rates of lead exposure than the rest of the state. At the 2014 CDC level of concern of 5 µg/dL, 6.0% of children under the age of 6 in the City of Milwaukee tested for lead exposure were identified as lead poisoned; significantly higher than the statewide rate of 2.5%. At the 2021 CDC level of concern of 3.5 µg/dL, 11.2% of children under the age of 6 in the City of Milwaukee tested for lead exposure were identified as elevated; significantly higher than the statewide rate of 4.9%. While Milwaukee remains an outlier in the state with both the highest number of children tested and the highest number of children identified with blood lead poisoning per year, the ongoing COVID-19 pandemic and recall of the only FDA-approved POC testing device have severely affected blood lead testing at the local, state, and national level.

Actions taken to address obstacles to meeting underserved needs. 91.220(k); 91.320(j) –

Priority Program Goals/Objectives

- 1) To eradicate childhood lead poisoning by removing lead-based paint hazards.
- 2) To produce lead safe housing units in the City of Milwaukee with a focus in high-risk target areas.
- 3) To diversify and increase funding to make homes lead-safe before a child is poisoned.
- 4) To increase lead testing of children.
- 5) To educate residents of the City of Milwaukee regarding lead poisoning prevention

Actions taken to reduce lead-based paint hazards. 91.220(k); 91.320(j)

of Lead Inspections completed 344
of Risk Assessments Reports Completed 246
of Lead permits issued 315
of MHD final clearances 198
of families provided relocation services 79
of orders to correct issued on properties 383

Strategies to evaluate and reduce lead-based paint hazards and effects

In response to this problem, the City's Health Department has developed a comprehensive program which includes both secondary interventions (services to lead poisoned children and their families) and when possible, provides lead hazard reduction activities in units before a blood lead poisoned child has been identified. The City of Milwaukee Health Department Home Environmental Health Division (MHD HEH) addresses the problem of housing units containing lead-based paint hazards in two distinct ways: (1) Investigations and abatement of housing units where lead poisoned children are identified; and (2) A historic listing of homes abated and or made lead-safe is maintained by the Health Department. Additionally, a voluntary lead safe housing registry application, inspection, and certification process was introduced in 2025, as well as a lead safe registry dashboard for public transparency. An estimated 19,000 units have been abated through the program since 1997. In 2025, 27 units were CDBG (Prevention) funded. 65 units received HUD Lead Hazard Reduction Demonstration (LHRD) Grant Funding while 64 units of those units also received CDBG (Abatement) funding in 2025 with the Lead Based Paint Prevention and Abatement Program. The funding from those 64 units was counted as match funding for the HUD LHR grant. The MHD HEH continued to facilitate implementation and oversight of lead hazard reduction in the City of Milwaukee.

Key accomplishments and obstacles in 2025 include:

- The City of Milwaukee Lead Program ended 2025 in the eighth quarter of its \$5.7 million-dollar 2023 HUD grant to continue lead hazard reduction activities throughout the City of Milwaukee. The period of performance extends to December 1, 2027. The HEH program has continued to make improvements in terms of robust internal policy and procedure, training and increased partnership with several community partners including the Wisconsin Department of Health Services (DHS). The city of Milwaukee was awarded an additional 7.7 million for lead abatement with Habitat for Humanity doing both rental and property owners along side with COLE for community outreach workers to engage families in lead abatement services.

The City of Milwaukee has received a green designation, 100/100 score from HUD for six consecutive quarters of its current grant, indicating excellent compliance to HUD benchmarks and outputs. To date, program staff have overseen the completion of 164 residential units with another 110 units needed to reach our goal of 274 residential units. Our LOCCS draws are also on pace with \$2.8 million of the grants 5.7 million funding used for lead hazard reduction and healthy homes rehab. Lead Inspection/Risk

Assessments are also ahead of schedule with 234/280 units inspected thus far with almost two years left in the grant period of performance.

- MHD completed a Request for Proposals (RFP) resulted in additional contractors to increase contractor capacity in lead abatement. The proposal identified new contractors, some outside of the city, to work on lead abatement projects within the city. Additionally, the RFP allowed other lead abatement contractors to grow their crew sizes to handle more lead abatement projects. The city of Milwaukee has also created quarterly contractor meeting to hear from lead abatement contractors and to provide strategic alignment towards increasing lead abatement units, problem solve on contractor issues and provide a forum to discuss new regulations or changes to city, state, or federal rules and requirements.
- MHD has simultaneously improved the multiple systems within the lead abatement. Smart goal metrics have been added to PowerBI and Accela to define timelines and unit outputs per case, property, and lead risk accessor. Managers are leading team meeting to discuss PowerBI dashboards and holding meetings with lead risk assessors to discuss results. Appointment letters and Right of Entry orders have been created on Accela to enhance entry for better timeline. HD now has a legal electronic health record with EPIC OCHIN which facilitates clinical care coordination with clinical care providers and supporting communication within the health record for referrals and follow up results that can be shared in real time. In addition, our Public Health Social Worker documentation within this same platform for efficient communication with both internal and external partners using EPIC OCHIN.
- MHD finalized the hiring of the last of 2 lead project inspector positions. This position resulted in internal efficiencies in shorter turn-around times to conduct and write lead abatement scopes per local, state, and federal requirements as opposed to external reliance from other departments. This position was a recommendation from the Public Health Foundation Audit in 2019 to provide better services, better communication, and less fracturing of processes involving lead renovation activities by internalizing the scope writing to within MHD.
- The MHD works with the State of Wisconsin on the lead poisoning application link to the Wisconsin Immunization Registry (WIR). Data from the previous database STELLAR and now the CDC Web-based program, HHPSS, is transferred and uploaded to the WIR weekly. This companion database is referred to as the WI Blood Lead Registry. Organizations such as schools are given the rights to assess both child immunization status but also reported blood lead tests to inform individualized education plans.
- MHD has executed a new grant award with the Centers for Disease Control (CDC) to assist in lead screening of children at Milwaukee Public School (MPS). The need was in response to the lead crisis affecting MPS schools and the extensive amount of lead hazards found in schools pre-1978. The screenings will start in 2026 and in collaboration with COLE (Coalition on Lead Emergency), MHD, MPS, CDC, and Novir (a private screening and clinical company). MHD will provide abatement services and clinical monitoring to affected children and their homes.

- MHD also finalized the contract for a consultant to assist in fund development, feasibility, and interviewing of philanthropies, foundations, and health systems. The report will guide MHD in how to acquire, invest, purpose, and align investment to expand lead hazard reduction and abatement in the City of Milwaukee. MHD has also budgeted emergency funding for the most challenging cases of high-cost scopes and children with high elevated blood levels that cannot be funded through traditional grant funding
- MHD created a combination Risk Assessment/ Lead-Based paint inspection report template (LIRA). The new template expedites report writing with field devices and shortens times by using technology to populate data fields while reducing entry errors and LIRA report errors.
- MHD HEH now provides lead inspections to non-statutory elevated blood levels of only one venous result of $\geq 15\mu\text{dL}$, instead of two within 90 days or more. This facilitates early intervention with families for education, for both home hazard inspections, but also Public for Nurse Case Management which includes education, clinical care coordination, developmental screening, nutrition support and referral to the programs Public Health Social Worker or other resource as needed. MHD piloted a 6-month outreach strategy of telephone outreach to all children with lower blood lead test results which successfully reached 241 families for education with 36 home visits with referral to programming for home inspection and hazard remediation.
- MHD also retooled multiple interfaces for the public for lead education and awareness. The MHD's lead landing page was redone for simplicity and ease for the public. MHD also surveys clients on the needs for a lead safe kit and based on the survey rebranded the kit as a healthy homes kit to focus on better lead cleaning supplies and hygiene while also recognizing behavior change and providing a second healthy homes kit for education materials.
- MHD in collaboration with MWW has provided lead in water testing to families of children affected by lead poisoning that are being case managed by Public Health Nurses. Families are provided education and testing protocol with follow up results shared by MWW. This collaboration reinforces preventative practices to inform families of potential hazards they can mitigate by using a certified lead water filter.

Actions taken to reduce the number of poverty-level families. 91.220(k); 91.320(j)

- MHD has worked extensively with the Milwaukee Health Care Partnership which member health systems and Federally Qualified Health Centers partnered with MHD to collectively increase, expand, and track community-wide childhood lead testing in Milwaukee County, with a focus on high-need children living in the City of Milwaukee. A priority report is being compiled for "2025 Childhood Lead Testing Policy and Practice: Assessment and Recommendations".
- Screening continues to be low due to the COVID pandemic. The Milwaukee Health Department has convened a wide group of community stakeholders with the goal to increase, expand and track community wide childhood lead testing in Milwaukee. Specific Objectives include Policy and Evaluation, Clinical Care delivery, Systems (insurance) and Community Outreach. This Collective Impact Approach

will lead to sustainable action and long-term infrastructure ensuring all children are tested at recommended ages. A practice workflow survey has been distributed and will inform provider networks on best practices along with identification of gaps and opportunities for improvement. In 2025, Public Health Nursing case management was provided to 106 new children with one venous blood lead levels of $\geq 15 \mu\text{g}/\text{dL}$. Children are case managed on average of 2 years to assure blood lead levels reduce and lead hazards in the home environment are reduced. From 2022 to 2025, after lowering the intervention level to $\geq 10 \mu\text{g}/\text{dL}$ - $14.9 \mu\text{g}/\text{dL}$, 164 families were provided a Public Health Nurse home visit for education, developmental screening, referral to community resources, along with a referral to community partners for lead hazard inspection and lead hazard reduction. From 2025 to 2025, the families of 311 children received an offer of a home visit from a Public Health Nurse for lead education and referral to community resources with 57 families accepting the offer of services. Community partners supported an additional 42 families with children at one venous blood lead level of $\geq 15 \mu\text{dL}$. Provided "Healthy Home Kits" to approximately 921 families which includes education materials and samples of ordinary home products used for lead dust and paint chip clean up along with a water filter pitcher. Kits were provided in partnership with community organizations and Public Health Nurse home visits.

The Milwaukee Health Department continues to expand health–housing partnerships and healthcare partnerships aimed at eliminating childhood lead poisoning. Through monitoring lead-safe practices and funding lead hazard reduction, MHD helps prevent new cases of exposure. The department also collaborates with Community Advocates to provide temporary relocation services during rehabilitation, ensuring occupants and their belongings are safely removed while lead abatement is underway. This approach improves project safety and efficiency. Families return once interior work is completed and the unit passes clearance. These rehabilitated homes reduce childhood lead poisoning and contribute to stronger property values and improved quality of life across Milwaukee.

Actions taken to develop institutional structure. 91.220(k); 91.320(j)

Institutional Structure to Carry Out the Plan: The City of Milwaukee views the system of implementation of housing and community development strategies from the vantage point of the neighborhood level. The establishment of contiguous NRSA's, has been a bold move towards defining neighborhoods and involving stakeholders in activities that address identified neighborhood issues. The Neighborhood Revitalization Strategy Areas were developed to more efficiently target resources to identified areas in need. NRSA is a formal designation from HUD concerning a distressed area of a community that allows more effective targeting of community development resources. This allows the City of Milwaukee an opportunity to formally recognize a distressed community area as the target for a coordinated effort to leverage funding and partnerships to spur reinvestment into local human and economic capital. The long-term goal of a NRSA is greater self-sufficiency for neighborhood residents and other stakeholders. The City utilized NRSAs in 2023 as a tool for community reinvestment in response to the community's distress. In addition to the NRSA structure, there are several other components that were utilized to carry out the activities that benefit stakeholders of these areas, of which the City and CDGA play a major role.

Actions taken to enhance coordination between public and private housing and social service agencies. 91.220(k); 91.320(j)

The City of Milwaukee is committed to the continued coordination of all community development initiatives. In 2023, the City continued to facilitate partnerships between City Departments and community-based organizations, State and County government, other jurisdictions, neighborhood residents, businesses, faith-based entities and others in the private sector to efficiently link resources and carry out joint planning and program activities. These linkages included the following City departments: Mayor's Office, Dept. of City Development, City Health Department, Dept. of Neighborhood Services, Milwaukee Police Department, Milwaukee Fire Department, Housing Authority, Milwaukee Public Library, Redevelopment Authority, Department of Public Works, Common Council/City Clerk, Comptroller's Office and City Attorney. This spirit of cooperation is further supported by the City's cabinet form of government and is carried out on a daily basis through many channels of communication including meetings, phone conversations, e-mail, and other correspondence. In addition, the City:

- Strong Neighborhoods Plan places a high priority on Interdepartmental coordination including collaboration between the Dept. of Neighborhood Services, the Dept. of City Development, the City Attorney's Office, the Health Dept. and the Milwaukee Police Department to reduce the negative impacts of nuisance/blighted properties through the Receivership Program.
- Continued collaborative neighborhood improvement programs involving City departments and community-based agencies such as Neighborhood Clean-ups, City-Wide Housing Coalition, Landlord/Tenant/Training, the Health Department Lead Abatement/Prevention Program and the Community Prosecution Program.
- Coordinated City databases with those of community and other governmental entities to allow citizens and community groups to access the City's database to complete housing condition surveys, obtain information on property ownership, tax delinquency, outstanding building code violations and past rehab activity.
- Provided public access to data for the public and community-based agencies; technical assistance to community-based agencies in gathering and researching data, internet mapping and data analysis of CDGA-funded activities.
- Continued updates and improvements to CDGA's web site to include pertinent information for community-based agencies and the public at-large.
- Continued collaborations and partnerships with non-City organizations for planning and program implementation purposes.
- Continued to advocate for additional resources for a coordinated approach to community development and planning to address poverty issues and community renewal initiatives.
- Collaborated with Milwaukee County government and other jurisdictions on Continuum of Care and other initiatives to help homeless persons and veterans in our community.

Identify actions taken to overcome the effects of any impediments identified in the jurisdictions analysis of impediments to fair housing choice. 91.520(a)

The City of Milwaukee funds multiple housing and other programs designed to affirmatively market Milwaukee neighborhoods and reduce barriers to affordable housing. These programs support the administration and enforcement of federal, state and local fair housing ordinances, provide homebuyer counseling services and collaboratively work with financial lenders to enable low and moderate-income families to purchase homes anywhere they choose. Viewed holistically, these programs accomplish several purposes at once: they affirmatively promote neighborhoods; enforce and further fair housing; expand on housing opportunities available to minorities and the poor within and outside of areas of minority concentration and help to strengthen neighborhoods by increasing homeownership and eliminating blight.

Equal Rights Commission

The City of Milwaukee ERC was established by ordinance with the broad objective of providing oversight and establishing collaborative working relationships with other organizations in Milwaukee, academia, and the business community to improve the equal rights climate in the City of Milwaukee. The goals are to maintain the City's oversight, investigative and enforcement capabilities over discriminatory practices not addressed and protected by federal and state laws. The City of Milwaukee's Equal Rights Commission (ERC) is guided by Chapter 109 of the Milwaukee Code of Ordinances. This Ordinance allows the ERC to monitor the employment, contracting and program activities of the city; prepare reports to the Mayor and Common Council on efforts to promote equal rights and opportunities; promote positive community relations; and work toward eliminating discrimination and inequities in city government and the city as a whole. The mission of the ERC is to promote and protect equality, equity, and human rights through education, enforcement, and community engagement. Oversight/Accountability The Equal Rights Commission is housed under the Department of Administration and the current eight Commissioners hold themselves accountable to all under-represented communities in the City of Milwaukee. Currently the ERC limits its investigative and enforcement activities to discriminatory practices not addressed within the jurisdiction of federal and state agencies. In instances that a complaint is received regarding an unprotected class, the ERC can investigate and mediate the issue. The ERC can also request reports from city departments regarding their programs or activities that relate to equal rights and equal opportunity.

CR-40 - Monitoring 91.220 and 91.230

Describe the standards and procedures used to monitor activities carried out in furtherance of the plan and used to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements

Citizen Participation Plan 91.105(d); 91.115(d)

Describe the efforts to provide citizens with reasonable notice and an opportunity to comment on performance reports.

To ensure adequate and accessible citizen participation, the City of Milwaukee adopted a Citizen Participation Plan, which was reviewed and approved by the Common Council of the City of Milwaukee on April 23, 1991, (Common Council File Number 902098). The plan outlines the procedures and processes used by the City and has since been updated and revised. The document was subsequently submitted to HUD.

The City of Milwaukee – Community Development Grants Administration (CDGA) solicited public comments on proposed funding categories for the Year 2026 Community Development Funding Allocation Plan (FAP). The FAP incorporates strategic direction for the following grants: Community Development Block Grant, HOME Investment Partnerships, Emergency Solutions Grants (ESG) and Housing Opportunities for Persons with AIDS (HOPWA).

CDGA in collaboration with the City of Milwaukee – Community and Economic Development Committee hosted two (2) Public hearings (demographics northside and southside) to obtain citizen comments on the proposed funding categories for the Year 2026 Community Development funding Allocation Plan (FAP).

Citizen input into the 2025 CAPER. In accordance with the regulations of the U.S. Department of Housing and Urban Development, the City of Milwaukee will prepare a “draft” of the 2025 CAPER Report covering the City’s Community Development Program from January 1, 2025 through December 31, 2025, and post for public comment period for review of the Report. The public comment period for review of the Report was March 13, 2026 through March 30, 2026. CDGA published the availability of this report on the City’s website and local publications on the dates listed and has copies for public review at CDGA office and the City Legislative Reference Bureau

CDGA welcomes the views and input of citizens and other stakeholders as it pertains to the CAPER and other reports disseminated to the public. Any comments, letters or other correspondence received are considered and are included in reports submitted to HUD. No Comments were received.

CR-45 - CDBG 91.520(c)

Specify the nature of, and reasons for, any changes in the jurisdiction’s program objectives and indications of how the jurisdiction would change its programs as a result of its experiences.

The Community and Economic Development Committee, which is the official oversight body governing Federal Block Grant funds, adopted the 2025 Funding Allocation Plan , which determined the various 2025 funding categories. Funding recommendations were subsequently approved by the Community and Economic Development Committee and ratified by the Milwaukee Common Council and Mayor. In addition, the following priorities were adopted:

- Prioritize Economic Development, Job Creation and Job Training programs
- Streamline the process, making it more “customer friendly.”
- The City will consider the goals and objectives established in the Consolidated Strategy and Five Year Plan and the City of Milwaukee’s Citywide Strategic Plan in setting the priorities and goals for 2025 funding.
- The Community and Economic Development Committee and the Milwaukee Common Council will approve the strategic issues and goals corresponding to the allocation of federal grant funding.
- Establish a balanced decision-making process including neighborhood residents, business entities and other stakeholders, subrecipients, community-based organizations and elected officials.
- Maintain the creation of new and vibrant economic engines such as assistance to small businesses, special economic development projects to create jobs and Large Impact Development economic development initiatives.
- In the Job Training & Placement categories, place a high emphasis on skilled trades training.
- Continue the policy to provide technical assistance to CHDOs, allow CHDOs to use CHDO operating proceeds to increase capacity and help provide agency operating capital.

Does this Jurisdiction have any open Brownfields Economic Development Initiative (BEDI) grants?

No

[BEDI grantees] Describe accomplishments and program outcomes during the last year.

CR-50 - HOME 24 CFR 91.520(d)

Include the results of on-site inspections of affordable rental housing assisted under the program to determine compliance with housing codes and other applicable regulations

Please list those projects that should have been inspected on-site this program year based upon the schedule in §92.504(d). Indicate which of these were inspected and a summary of issues that were detected during the inspection. For those that were not inspected, please indicate the reason and how you will remedy the situation.

Inspections - The inspections of HOME assisted projects is an ongoing process. In 2025, the City's Department of Neighborhood Services inspected 55 properties with a total of 150 units and verified tenant income levels in 166 HOME-assisted units and documented the results, in compliance with the Federal regulations and during the applicable period of affordability. Additionally:

201 notification letters were sent to property owners (124 First Notice letters & 77 Second Notice letters)

55 property inspections were due for 2025; 55 property inspections were completed

Provide an assessment of the jurisdiction's affirmative marketing actions for HOME units. 24 CFR 91.520(e) and 24 CFR 92.351(a)

The City has multiple housing and other programs designed to affirmatively market Milwaukee neighborhoods. These programs support the administration and enforcement of federal, state and local fair housing ordinances, provide homebuyer counseling services and collaboratively work with financial lenders to enable low and moderate-income families to purchase homes anywhere they choose. Viewed holistically, these programs accomplish several purposes at once: they affirmatively promote neighborhoods; enforce and further fair housing; expand on housing opportunities available to minorities and the poor within and outside of areas of minority concentration and help to strengthen neighborhoods by increasing homeownership and eliminating blight.

The City of Milwaukee has an Affirmative Marketing Plan which is used to assist the City and its funded agencies on affirmative marketing procedures as required by federal regulations of the U.S. Department of Housing and Urban Development.

In addition, all CDGA-funded units are developed as turnkey style developments and must be affirmatively marketed by the agency to ensure that they are available to the general public. Affirmative marketing steps consist of actions to provide information and otherwise attract eligible persons in the housing market area to the available housing without regard to race, color, national origin, sex, religion, familial status or disability.

Refer to IDIS reports to describe the amount and use of program income for projects, including the number of projects and owner and tenant characteristics

In 2025, a total of \$474,872.70 in program income was used for eligible affordable housing activities involving the housing rehab of 26 units. The characteristics of the household beneficiaries are as follows: 14 were extremely low, 5 very low, 2 low, 5 non low moderate income and 1 vacant. Pertaining to race and ethnicity, 22 are Black, 2 are White, 1 Asian and 1 Other Race. Of the 25 households 1 identified as Hispanic.

Describe other actions taken to foster and maintain affordable housing. 24 CFR 91.220(k) (STATES ONLY: Including the coordination of LIHTC with the development of affordable housing). 24 CFR 91.320(j)

Home Rehabilitation and Neighborhood Development

The City of Milwaukee's Department of City Development (DCD), through its Neighborhood Improvement Development Corporation (NIDC), focuses federally funded housing rehabilitation resources into geographically targeted areas, or Targeted Investment Neighborhoods (TINs). Additionally, the City of Milwaukee has continuously invested dollars annually, over the past 10 years, to supplement its federal resources by assisting existing homeowners and purchasers of city-owned tax foreclosures rehabilitate their properties, preserving and expanding homeownership.

The purpose of targeting resources is to enhance efforts using available funds to magnify outcomes. The overarching purpose of the TIN program is to improve quality of life for residents, stabilize and improve housing stock, maintain and increase homeownership, and provide quality housing opportunities throughout city neighborhoods. Within the TIN program, owner occupants may apply for the Home Rehabilitation Program.

In 2025, staff received, reviewed, and scored a total of seven applications containing new proposed geographic targeted areas. Mid-February 2025 DCD selected the newly proposed TIN areas and partnerships within the Community Development Block Grant (CDBG) area. Applications for TIN designation are reviewed and awarded based on several criteria including organizational capacity and owner occupancy rates. Selected applicants were informed about decisions and were made aware that an active marketing campaign required Community Development Grants Administration (CDGA) confirmation of federal funds award for 2025. CDGA notified the DCD of federal funds award late June 2025.

The DCD relies on the neighborhood organizations to promote the TIN program as a component of their existing outreach efforts. Neighborhood organizations launched TIN public engagement meetings between the months of July and August. These engagement meetings were successful and allowed us to collect applications under the newly designated TIN areas.

2025 Outputs/Activity

#1: Review and process loan applications (loan officers and technical specialists)

#2: ARC approval and settlement

#3: Complete rehabilitation

Early 2025, efforts focused on identifying new, and growing existing, partner relationships to assist in achieving the three specified outputs; to receive and qualify applicants, approve and settle loans, and complete construction projects. Both management and non-management staff were involved in contacting and meeting with partner organizations to expand efforts around housing rehabilitation loan programs.

Staff purposefully created contractor training events to educate new contractors on the federal requirements for the Home Rehabilitation Program. Training events occurred during the months of April and May 2025. These efforts have improved relationships with contractors engaging in the current loan application processes.

First, staff met with existing TIN partners to ensure clear communication and explain the expiration of past TIN designated areas. This allowed staff to then initiate the new application process mentioned above. Since the launch of TIN public engagement meetings, staff have received and reviewed a total of 22 new loan applications.

Second, staff coordinated efforts to make direct referrals to credit counselors to assist applicants with outstanding credit issues. In some cases, applicants are not qualifying or receiving approval from NIDC programs due to credit

issues. With assistance from a credit counselor(s), owner's financial and credit situations may improve and, if interested, will be referred back to re-enter the Home Rehabilitation Program.

Finally, technical staff have dedicated a significant amount of time towards the completion of outstanding Home Rehabilitation projects during the 2025 calendar year.

Long-Term Outcomes

#1: Reduce Crime

#2: Increase Property Values

#3: Increase Economic Vitality

#4: Improve Neighborhood Quality of Life

Housing rehabilitation programs offered support larger city and community efforts to improve quality of life for residents, stabilize and improve housing stock, maintain and increase homeownership, and provide quality housing opportunities throughout city neighborhoods. Long-term reinvesting in properties using a targeted approach can lead to many positive outcomes. Blocks with well-maintained owner-occupied properties, can reduce crime and increase property values. In addition to housing rehabilitation loans, NIDC operates the Community Improvement Project (CIP) grant program and the Healing Spaces Initiative (HSI). Both programs engage residents at the block level, helping neighbors engage and beautify their blocks. Additionally, NIDC operates a minor home improvement grant program to provide resources to owners for exterior repairs. These efforts, along with the housing rehabilitation programs can have a positive impact on neighborhoods and can help achieve the proposed long-term outcomes.

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CR-55 - HOPWA 91.520(e)

Identify the number of individuals assisted and the types of assistance provided

Table for report on the one-year goals for the number of households provided housing through the use of HOPWA activities for: short-term rent, mortgage, and utility assistance payments to prevent homelessness of the individual or family; tenant-based rental assistance; and units provided in housing facilities developed, leased, or operated with HOPWA funds.

Number of Households Served Through:	One-year Goal	Actual
Short-term rent, mortgage, and utility assistance to prevent homelessness of the individual or family	140	0
Tenant-based rental assistance	20	0
Units provided in permanent housing facilities developed, leased, or operated with HOPWA funds	0	0
Units provided in transitional short-term housing facilities developed, leased, or operated with HOPWA funds	0	0
Total	160	0

Table 14 – HOPWA Number of Households Served

Narrative

In 2025, the City of Milwaukee received HOPWA entitlement funds for the four-County Milwaukee Metropolitan area which comprises Milwaukee, Ozaukee, Waukesha, and Washington counties. In Program Year 2025, there were no HOME funds used for HOPWA activities.

CDGA conducted an annual Request for Proposal process which was advertised in local newspapers covering the four County Metro Milwaukee area and shared online. Proposal(s) were reviewed and scored based on a set of scoring criteria, in the 2025 RFP process for HOPWA program funding awarded to the City of Milwaukee, Vivent Health was the only applicant. Recommendations of CDGA were voted on by the Community and Economic Development Committee, the official oversight body of the allocation and use of Federal funds. The actions of the Committee were ratified by the full Milwaukee Common Council and Mayor. A year 2025 HOPWA contract was awarded to Vivent Health, formerly known as AIDS Resource Center of Wisconsin.

Vivent

Since 1985, the AIDS Resource Center of Wisconsin dba Vivent Health has led the fight against HIV AIDS, providing critical prevention, care and treatment, and social services for people living with HIV. Initially founded as a statewide organization, Vivent Health has now expanded to include services in Denver, St. Louis, Kansas City and Austin. Through its nationally renowned health home model, Vivent Health has

provided medical, dental and mental health clinics along with its pharmacy and dedicated social services that include food pantries, short-term and long-term housing assistance, a legal program, and social work case management. Vivent Health's service area for this grant is the four-county Milwaukee MSA. Per the Wisconsin HIV Surveillance Annual report for 2023 (noting 2025 data is not yet available), there were 2,781 people living with HIV in Milwaukee by the end of year of 2023, a decrease from 2,901 at the end of 2022. According to the HIV Surveillance Annual report, 83 people living in Milwaukee were newly diagnosed with HIV in 2023. The majority of people living with HIV resided in the central part of Milwaukee in 2023, in zip codes 53209, 53212, 53208, 53204, 53215. In 2023, 104 new HIV diagnoses were made in Milwaukee County, 11 new diagnoses were made in Waukesha County, 3 new diagnoses were made in Washington County and 2 new diagnoses were made in Ozaukee County. Per Census Small Area Income and Poverty Estimates data gathered in 2023, the City of Milwaukee has the highest rate of poverty by school district in the 4-county region the City of Milwaukee supports with the HOPWA program, with an estimated 29.9% of households with children ages 5-17 impacted by poverty. Milwaukee County on the whole also has the highest rate of poverty of all 4 counties supported by HOPWA, with 22.9% of residents impacted. Waukesha County follows at a distant second, with a reported 4.2% poverty rate. Given relatively higher poverty rate and incidence of HIV diagnoses, the City of Milwaukee finds greatest demand for HOPWA program services in the greater Milwaukee area in its 4 county region. Some of the housing needs for people living with HIV with low to moderate household income include financial assistance, emergency and transitional housing, long-term housing services and housing education and information. In 2025, Vivent Health received funding through City HOPWA grant to address the housing instability for a projected 581 (does not account for multiple services to be offered to a Vivent Health project participant at one time) low income HIV positive persons/households in Milwaukee Counties through the provision of the following services:

Short Term Rent, Mortgage and Utility

Short Term Rent, Mortgage and Utility (STRMU) Assistance: In 2025, Vivent Health proposed to provide short-term rent assistance, mortgage and utility financial assistance, not to exceed five months, to 58 unduplicated individuals living with HIV disease who are at or below 80% of the County Median Income. Vivent Health exceeded their projection - 76 unduplicated individuals were served. Housing Information and Referral Services: Housing information services are meant to assist recipients maintain stable and affordable housing, gain access to income and housing benefits offered by local, state, and federal governments, budgeting, and securing other necessary household items. Vivent Health proposed to provide housing information, referral and education services to 260 unduplicated individuals in 2025. Vivent Health exceeded their projection - 285 were served. Tenant-Based Rental Assistance (TBRA): TBRA is meant to assist clients with more acute housing and support needs with longer lengths of supportive housing services. Vivent Health introduced TBRA in 2023 and proposed to provide TBRA to 34 unduplicated individuals in 2025. 28 individuals were served. Permanent Housing Placement (PHP): PHP is meant to provide one-time assistance for housing placement, with some financial assistance available for those that may not have other housing options or resources. Vivent Health proposed to provide PHP assistance to 28 unduplicated individuals in 2025 and exceeded their projection - 45 individuals were served.

Supportive Services

Vivent Health offers flexible case management, legal advocacy, care coordination, mainstream benefits, transportation assistance, AODA treatment and resource referral assistance to those with HIV disease and their families, complimenting their medical care, pharmacy, behavioral health, pharmacy, food pantry, community outreach and prevention services. These services are designed help clients attain and maintain stable housing and improve health and quality of life indicators. Vivent Health proposed to provide supportive services to 120 unduplicated individuals in 2025. Vivent Health exceeded their projection and 147 were served. In summary, 581 clients were assisted through HOPWA funding and Vivent Health's STRMU and supportive services projects had the strongest outcomes of the multiple activities Vivent Health offered with support from the City of Milwaukee's HOPWA program in 2025. As Ryan White funding has been reduced by \$1 million in the State of Wisconsin, the City of Milwaukee and Vivent Health expect HOPWA program resources to fill in a community needs gap for short term supportive housing in future years' allocations. While the City of Milwaukee and Vivent Health do not have a waiting list for HOPWA-funded projects at this time, there is certainly potential that a newly diagnosed person with HIV disease and their family may not be aware of HOPWA resources at a time when it is critical. The City of Milwaukee and Vivent Health are reviewing gaps in the Milwaukee, Waukesha, Washington and Ozaukee County area for service demand and new outreach opportunities, to ensure all those with HIV disease are aware of and offered access to HOPWA program resources when it is most critical for their health and housing stability.

CR-58 – Section 3

Identify the number of individuals assisted and the types of assistance provided

Total Labor Hours	CDBG	HOME	ESG	HOPWA	HTF
Total Number of Activities	0	2	0	0	0
Total Labor Hours		115,667			
Total Section 3 Worker Hours		72,447			
Total Targeted Section 3 Worker Hours		22,977			

Table 15 – Total Labor Hours

Qualitative Efforts - Number of Activities by Program	CDBG	HOME	ESG	HOPWA	HTF
Outreach efforts to generate job applicants who are Public Housing Targeted Workers					
Outreach efforts to generate job applicants who are Other Funding Targeted Workers.					
Direct, on-the job training (including apprenticeships).					
Indirect training such as arranging for, contracting for, or paying tuition for, off-site training.					
Technical assistance to help Section 3 workers compete for jobs (e.g., resume assistance, coaching).					
Outreach efforts to identify and secure bids from Section 3 business concerns.					
Technical assistance to help Section 3 business concerns understand and bid on contracts.					
Division of contracts into smaller jobs to facilitate participation by Section 3 business concerns.					
Provided or connected residents with assistance in seeking employment including: drafting resumes, preparing for interviews, finding job opportunities, connecting residents to job placement services.					
Held one or more job fairs.					
Provided or connected residents with supportive services that can provide direct services or referrals.					
Provided or connected residents with supportive services that provide one or more of the following: work readiness health screenings, interview clothing, uniforms, test fees, transportation.					
Assisted residents with finding child care.					
Assisted residents to apply for, or attend community college or a four year educational institution.					
Assisted residents to apply for, or attend vocational/technical training.					
Assisted residents to obtain financial literacy training and/or coaching.					
Bonding assistance, guaranties, or other efforts to support viable bids from Section 3 business concerns.					
Provided or connected residents with training on computer use or online technologies.					
Promoting the use of a business registry designed to create opportunities for disadvantaged and small businesses.					
Outreach, engagement, or referrals with the state one-stop system, as designed in Section 121(e)(2) of the Workforce Innovation and Opportunity Act.					
Other.					

Table 16 – Qualitative Efforts - Number of Activities by Program

Narrative

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