

**Purpose.** The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

**Applicability.** Form HUD-50075-5Y is to be completed once every 5 PHA fiscal years by all PHAs.

<b>A.</b>	<b>PHA Information.</b>																																
A.1	<p>PHA Name: <u>Howell County PHA</u> PHA Code: <u>MO217</u></p> <p>PHA Plan for Fiscal Year Beginning: <u>07/2020</u>          PHA Plan Submission Type: <input checked="" type="checkbox"/> 5-Year Plan Submission <input type="checkbox"/> Revised 5-Year Plan Submission</p> <p><b>Availability of Information.</b> In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information on the PHA policies contained in the standard Annual Plan, but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official websites. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><input type="checkbox"/> PHA Consortia: (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th rowspan="2" style="width: 20%;">Participating PHAs</th> <th rowspan="2" style="width: 10%;">PHA Code</th> <th rowspan="2" style="width: 20%;">Program(s) in the Consortia</th> <th rowspan="2" style="width: 20%;">Program(s) not in the Consortia</th> <th colspan="2" style="width: 30%;">No. of Units in Each Program</th> </tr> <tr> <th style="width: 15%;">PH</th> <th style="width: 15%;">HCV</th> </tr> </thead> <tbody> <tr> <td>Lead PHA:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program		PH	HCV	Lead PHA:																							
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<b>B.</b>	<b>5-Year Plan.</b> Required for <u>all</u> PHAs completing this form.
<b>B.1</b>	<p><b>Mission.</b> State the PHA’s mission for serving the needs of low- income, very low- income, and extremely low- income families in the PHA’s jurisdiction for the next five years.</p> <p><i>The</i> mission for the Howell County PHA is the same as the mission of the U.S. Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunities, and a suitable living environment free from discrimination for those in greatest need. The mission of Ozark Action, Inc. (PHA administrator) is to coordinate and provide a variety of services for people with needs to help improve their quality of life.</p>
<b>B.2</b>	<p><b>Goals and Objectives.</b> Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low- income, very low- income, and extremely low- income families for the next five years.</p> <p><i>Improve</i> recipient satisfaction and management functions; Increase the number and percentage of employed persons in assisted families; Help improve the employability of assistance recipients through programs; Further fair housing through equal opportunity; Continue to maximize utilization of the HCV program funding and apply for additional HCV, if available; Work with other agencies to improve outreach opportunities to low-income families; Maintain high-performer SEMAP status; Continue to access PHA operations; Evaluate current policies and procedures to ensure the agency is operating at an optimal level.</p>
<b>B.3</b>	<p><b>Progress Report.</b> Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p><i>The</i> Howell County PHA continues to carry out our mission of assisting low-income families in finding suitable, affordable housing to help them become more self-sufficient. We continue to efficiently use our available resources and continue to have a good-standing relationship with our partner social service agencies. The Howell County PHA has maintained high SEMAP scores for the past several years and maintained a near 100% utilization of funds. The PHA has implemented a number of strategies including competitive payment standards, increased landlord participation, and working with residents, landlords, and city, county, and civic leaders to solve problems.</p> <p>We are also expanding assistance services, with Howell County PHA receiving a total of 5 VASH vouchers for veterans in CY 2019. We hope to use those vouchers and expand that number in the future.</p>
<b>B.4</b>	<p><b>Violence Against Women Act (VAWA) Goals.</b> Provide a statement of the PHA’s goals, activities objectives, policies, or programs that will enable the PHA to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking.</p> <p><i>Our</i> goal at the Howell County PHA, as stated above, is to help those in greatest need. That sometimes includes people who are the victims of domestic and sexual violence. The Howell County PHA continues to have a great working relationship with our area domestic violence shelters to provide outreach and assistance opportunities for those who need them. Contact information for those shelters are available at the Howell County PHA office. Howell County PHA does not deny admission to applicants if that applicant is or has been a victim of domestic violence, dating violence, sexual violence, or stalking, provided the applicant otherwise qualifies for assistance or admission.</p>
<b>B.5</b>	<p><b>Significant Amendment or Modification.</b> Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.</p> <p>Significant amendments or modifications to the Howell County PHA’s 5-Year Plan will be brought to the PHA Board for approval.</p>
<b>B.6</b>	<p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) provide comments to the 5-Year PHA Plan?</p> <p>Y    N  <input type="checkbox"/>   <input type="checkbox"/></p> <p>(b) If yes, comments must be submitted by the PHA as an attachment to the 5-Year PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>
<b>B.7</b>	<p><b>Certification by State or Local Officials.</b></p> <p><a href="#">Form HUD 50077-SL</a>, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>