



Indiana Housing & Community Development Authority

## Healthy Homes Production Program



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EQUAL OPPORTUNITY EMPLOYER AND HOUSING AGENCY

State of Indiana  
Lieutenant Governor  
Suzanne Crouch



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# 1. Program Goal and Summary

At the Indiana Housing and Community Development Authority (IHCDA), we believe that growing Indiana's economy starts at home. IHCDA's charge is to help communities build upon their assets to create places with ready access to opportunities, goods, and services. We also promote, finance, and support a broad range of housing solutions, from temporary shelters to homeownership.

IHCDA will take the appropriate steps to ensure that its administrative and financial management system is compatible for the Healthy Homes Production Program (HHP) to promote integration with housing rehabilitation, property maintenance, energy efficiency, and weatherization. Periodically, written policies, procedures, and forms for the administrative and financial management for the program may be updated. These policies and procedures will be used for the Healthy Homes Production Program throughout the period of performance.

## **Units Assessed and Completed**

The goal for the Healthy Homes Partnership Program during the forty-two-month period of performance is to identify and re-mediate health and safety hazards in approximately 123 units with priority given to privately owned, low-income rental and/or owner-occupied housing, especially in units and/or buildings where families with children, older adults sixty-two (62) years and older, or families with persons with disabilities reside in the State of Indiana.

## **Radon Testing and Mitigation**

The EPA has rated 56 of the 92 counties in Indiana as "Zone 1" meaning units within those counties may have the highest prevalence of indoor radon levels (greater than 4pCi/L). The remaining 36 counties have all be rated as Zone 2, with moderate potential (average indoor radon levels between 2 and 4 pCi/L). Therefore, IHCDA will conduct a radon test in every unit enrolled into the HHP program. Those identified with levels of radon exposure above the referenced EPA threshold, will undergo radon mitigation measures. A secondary radon test will be conducted post-mitigation to verify the radon system maintains radon levels below the EPA action level.

## **Healthy Home Hazard Assessment and other testing**

A Healthy Homes assessment and Radon test will be conducted for each unit enrolled. The scope of work will be based upon the findings of the healthy home hazard assessment and radon test. A lead inspection/risk assessment (LIRA) is required for all pre-1978 units. If a child less than six years of age resides in the home, and lead hazards are found, lead remediation will be conducted.

**Eligibility Criteria**

- Family Income < 80% of Area Median Income

• Renter	1. At least 50% units must be less than 50% AMI and 2. Remaining units (<50%) must be less than 80% AMI
• Multifamily Renter (>5 unit in same property)	1. 20% of total number of units in same building may exceed 80% AMI 2. Remaining units must meet renter income requirements above
• Owner (primary residence)	100% of owner-occupied units must be occupied by families with less than 80% AMI

- Property Tax payments are current
- Homeowners’ insurance is current
- Unit not located in 100-year flood plain
- Manufactured or mobile homes are not eligible for this program

**Unit Priority**

IHCDA will prioritize units based on the following criteria (in no certain order):

- Units with children under the age of 18
- Adults 62 years of age and older
- Persons with disabilities
- Pre 1978 housing where a child less than 6 years old resides
- Households on the weatherization deferral list

**Resident Supplies**

Purchasing resident supplies at an average unit cost of \$250 for 75 units. Residents’ supplies may include environmentally safe or low-toxicity cleaning supplies, integrated pest management kits and/or household safety items as required with the identified housing related healthy home hazard and direct intervention activities. Supplies will not be purchased in bulk; supplies will be purchased to meet the hazard addressed in each household and will be unique to that household. IHCDA intends on evaluating and purchasing supplies quarterly for those enrolled in the program.

**Weatherization Deferrals**

The Community Action Program (CAP) network and the IHCDA Community Program Department will provide client referrals to IHCDA with a goal of combining both services into an eligible unit to increase its long-term viability, improve safety, and increase energy efficiency.

**Contractor Warranty**

A warranty for a period of one year of all materials and workmanship will be included in each project’s contract undertaken with HHP funding. The warranty period will begin on the date of the final inspection clearance letter, by IHCDA, to the contractor.

### **Construction Standards**

All construction work on HHP projects must meet the stricter of the Indiana State Building Code, local building codes, or manufacturer's instructions. The General Administrative Rules at 675 IAC 12 provides State of Indiana codes and standards for rehabilitation. The Rules can be accessed at <http://www.in.gov/dhs/2490.htm>.

### **Affirmatively Further Fair Housing**

The HHP will further fair housing by ensuring that all completed rental units will remain affordable and be marketed to vulnerable populations for a minimum of 36 months following program activities. This program shall be made available to residents residing within Indiana without discrimination.

## **2. Staffing and Partners**

IHCDA has considerable experience implementing complex programs which includes awarding and regulatory oversight of the Community Development Block Grant Owner Occupied Repair Program (CDBG OOR) and a Lead Hazard Reduction Demonstration grant awarded in 2017. Our related program experience in owner-occupied rehabilitation and lead hazard reduction enables us to administer the Healthy Homes Production Program effectively and efficiently. All primary positions within IHCDA are currently staffed.

The Indiana State Department of Health has the responsibility to implement and enforce the state and federal regulations concerning lead-based paint. The regulations are designed to eliminate environmental hazards by ensuring that trained lead professionals are available to conduct the safe and effective elimination of the primary sources of lead poisoning. The Indiana Lead and Healthy Homes Program (ILHHP) strives to reduce the incidence of lead poisoning within the population, especially among young children whose health and development are most susceptible to the harmful effects of lead.

The Indiana Community Action Agency (IN-CAA) works to strengthen the capacity of Indiana's Community Action Agencies to address community needs. INCAA will help promote the HHP grant.

Community Action Agencies (CAA) are local, private, and public non-profit organizations that promote self-sufficiency and work to reduce the causes and conditions of poverty in the communities they serve. IHCDA will work with the 21 CAA's across the State of Indiana. The 21 CAA's in Indiana will provide education to interested households on the program to assist those households in determining if they are eligible and how to apply for assistance. They will market the program to contractors and assist with inspections and/or assessments relative to the program.

The Indiana State Department of Health (ISDH) has the responsibility to implement and enforce the state and federal regulations concerning radon and lead-based paint. The regulations are designed to eliminate environmental hazards by ensuring that trained lead professionals are available to conduct the safe and effective elimination of the primary sources of lead poisoning. ISDH will assist by providing radon and lead enforcement, data on communities most impacted by both, promoting the HHP grant, and other data sharing that enables our success.

**HEALTHY HOMES PARTNERSHIP PRIMARY FUNCTION**

1. Administration of the HHP funds and associated matching funds to address health and safety hazards
2. Provision of a radon and lead prevention program
3. Conducting public and professional education and outreach
4. Enforcement of contracted professionals and property owners in accordance with State and Federal regulations
5. Serve as the primary leader for Indiana Radon and Lead Protection Program

**Samantha Spergel, Director of Real Estate Strategic Initiatives and Engagement:** will oversee the federal reporting and financial management of the grant, as well as oversee policy development and coordinate with Federal and State partners for the program.

**David Pugh (PD), Program Director:** will spend a minimum of 25% of his time on the Project, with the responsibility for contract administration, approvals of all scope of work, policy development, federal reporting and supervision of field monitoring, The PD will also work with IHCDA’s Director of Compliance to oversee supervision of field monitoring and to Coordinate with the Division of Compliance to monitor the recruitment of Section 3 workers for training and hire.

**Taria Edwards (PM), Healthy Homes Analyst:** will be a full-time position (working at least 75% of their time on this grant), housed at IHCDA and reporting to the PD. The PM will have the day-to-day responsibility for Project operations including application intake, technical assistance, coordination of the Environmental Review, Healthy Homes claims review and processing, and monitor quality of assessments, inspections, remediation activities and clearance examinations.

<b>IHCDA Staff &amp; Roles</b>		
Director of Strategic Initiatives	Samantha Spergel	Performs oversight and evaluation of the HHP, reporting, public presentations and will oversee the federal reporting and financial management of the grant, as well as oversee policy development and coordinate with Federal and State partners for the program.
Program Director	David Pugh	Responsible for contract administration, approvals of all scope of work, policy development, federal reporting and supervision of field monitoring, The PD will also work with IHCDA’s Director of Compliance to oversee supervision of field monitoring and to Coordinate with the Division of Compliance to monitor the recruitment of Section 3 workers for training and hire.
Program Manager/Healthy Homes Analyst	Taria Edwards	Assigned direct grant program activities that include management of the HHP, marketing, education, contractor procurement for testing and hazard control, contractor and sub-contractor classification, benchmarks, intake, final approval of invoices for contractors, reviewing project testing, inspections, and specifications (soft costs), evaluations of intervention outcomes, processes, monitoring, and quarterly reporting within HHGMS.
Financial Operations Manager	Lisa Ditchley	Manages the claims department staff to ensure that the pre-determined federal regulations and all IHCDA regulations are followed during the claims process, manages the claims inbox and provides customer service and support for the partner as well as is in charge of data that is entered into the data management system at IHCDA to maintain the integrity of the system.

ELOCCS	David Strickland	Will be responsible for the management of the HUD financial system, tracking and reporting recipient progress, and drawing of recipient funds for disbursement to the appropriate financial institution.
Director of Real Estate Compliance	Carol Farzetta	The Director is responsible for ensuring partners comply with State and Federal regulations for the HOME Investment Partnership Program, Community Development Block Grant Program, and Low-Income Tax Credit Program. Specific duties include submitting regulatory reports to HUD, updating, and maintaining program and compliance manuals with the most up-to-date guidance from HUD and the IRS, provide technical assistance and conduct compliance trainings.
Director of Energy and Utility Programs	Greg Glassley	Oversees the administration of several federal grants for the Weatherization Assistance Program, Low Income Home Energy Assistance Program, and Low-Income Home Water Assistance Program. Works with the Department of Energy (DOE) and US Department of Health and Human Services (HHS) to ensure the state of Indiana is properly administering these funds within the guidelines set by each Department. Also oversees additional funding, such as those from various utilities, to combine those funds effectively and efficiently with DOE funds to weatherize as many homes as possible.

**Other Essential Personnel-** IHCDA Real Estate and Production, Accounting, Marketing and Communications, and Community Programs departments have full-time staff that will assist with the implementation of the HHP. IHCDA staff have the responsibility to procure eligible contractors to conduct the healthy home hazard assessment, hazard remediation, radon testing and mitigation, to include lead inspection risk assessment, and clearance examination when applicable

### 3. Outreach

The HHP's focus is on enrolling eligible privately-owned housing units occupied by income qualified residents. The recruitment of these units requires collaboration, outreach, marketing, and referrals from several agencies including the Community Action Program network, state and local health departments, community-based organizations, and other public and private sources.

Marketing material will be developed for outreach efforts for the HHP to all IHCDA partners. Marketing material providing information about the healthy homes hazards is available for residents. Other material is marketed toward contractors to gain interest in the development of contractor pools by giving notice of the need for licensed professionals and how to apply. IHCDA will distribute program material to our network partners throughout the State of Indiana, list the material on a dedicated website to market the program, and conduct targeted outreach in designated communities.

## 4. Program Guidance and Review

The Program Director and Healthy Homes Analyst will annually conduct presentations to program partners regarding the HHP policies to include:

- Program updates and accomplishments
- Performance review and current progress
- Unit production
- Benchmarks, budget, goals
- Program policy and procedures
- Applications and evaluations
- Training and education
- Outreach, education, and referrals
- Quarterly reports
- Construction/scope of work
- Technical assistance

Events and materials will be provided in a reasonable format to reach individuals and groups of Limited English Proficiency (LEP). IHEDA will regularly travel and communicate through email and/or phone with our partners and too HUD. The IHCA PM and/or Program Director may conduct site visits of properties undergoing healthy homes repairs to verify program requirements are being followed.

## 5. Intake

The HHP funds and other matching/leveraged resources will be used in eligible privately-owned housing units where healthy home hazards are identified and where income eligible families reside and chose to participate in this voluntary program. The program complies with Section 1011 of the *Residential Lead-Based Paint Hazard Reduction Act of 1992* (Title X) in providing lead hazard control grant program services. The program will use an application process in determining eligibility for receiving assistance.

Households must be income eligible at the time of initial occupancy or at the time HHP funds are contracted, whichever is later, in accordance with the Part 5 method of verifying income. An income verification is good for six (6) months from the time of the verification. If more than six (6) months lapse, the household income must be re-verified. Electronic signatures by the applicant are acceptable on all program documents where a signature is required.

### **Eligible Units:**

#### **Owner Occupied units**

These units must be the principal residence of families with income at or below 80 percent of the area medium income level. Manufactured or mobile homes are not eligible for this program.



### **Rental Housing units**

At least 50 percent of the assisted rental units must be occupied or made available to families with incomes at or below 50 percent of the area median income level. The remaining units must be occupied or made available to families with incomes at or below 80 percent of the area median income level. In all cases, the landlord must give priority in renting units these units for not less than 3 years following the completion of lead abatement activities to families with a child under the age of six years. Buildings with five or more units may have 20 percent of the units occupied by families with incomes above 80 percent of the area median income level. Manufactured or mobile homes are not eligible for this program.

**Health Insurance Portability and Accountability Act of 1996** - In accordance with HIPAA guidelines, ILHHP has numerous safeguards in place to protect the medical information of a lead poisoned child. All medical information, including children's blood lead levels and protected health information, will be maintained by IHCDA. The information is not necessary for the purpose of this project. Follow up medical monitoring may be completed by the Local Health Department case managers along with the family's medical provider.

## 6. Education

IHCDA will provide all owners and/or occupants of pre-1978 housing the following information:

- EPA Protect Your Family from Lead in Your home pamphlet
- The Lead-Safe Certified Guide to Renovate Right brochure
- Lead Paint Safety- A Field Guide for Painting, Home Maintenance, and Renovation Work

For contractors, IHCDA will offer RRP certification training through the Indiana Builders Association. Training dates will be listed on the Healthy Homes Resource webpage once confirmed.

## 7. Healthy Home Hazard Assessment

A Healthy Homes Hazard Assessment and Radon Test of 123 eligible households will be conducted. The funds will be utilized to address the priorities based upon key issues that affect health and safety conditions in a home. There will be a cap of \$10,000 per home and it must meet the referenced criteria to be eligible for the use of these funds.

The Healthy Homes inspection process is a risk-based assessment and will consider the effect on the occupant health. This assessment will be incorporated into the initial lead hazard risk assessment to minimize disruption to the occupants. From the list of 29 hazards in the Healthy Homes rating chart, IHCDA has determined the following hazards, in order of priority, to be addressed based on funding:

1. Radon
2. Lead-based Paint
3. Moisture Intrusion
4. Electrical Hazards
5. Access Issues
6. Structural Issues
7. Carbon Monoxide and Fuel Combustion Products
8. Pests and Refuse

IHCDA will contract with a third-party firm to perform the assessment and to create the scope of work with cost estimates based on the findings. We will then review the scope of work and cost estimates and finalize it. If the scope of work exceeds the maximum subsidy, IHCDA will contact the program GTR for a high-cost unit request for approval or reduction of the scope of work. All projects rehabilitated must meet the stricter of the Indiana State Building Code, local building codes, or manufacturer’s instructions. The General Administrative Rules at 675 IAC 12 provides State of Indiana codes and standards for rehabilitation. The Rules can be accessed at the following address: <http://www.in.gov/dhs/2490.htm>

## 8. Radon Testing/Mitigation

IHCDA will procure for and conduct radon testing in all units that receive interventions under the 2021 HHP grant. Testing must be conducted by a professional who is currently credentialed by the National Radon Proficiency Program or the National Radon Safety Board (NRPP/NRSB) and licensed/certified in the State of Indiana. Based on a radon assessment, if radon mitigation is needed due to the radon level being at or above 4 picocuries per liter of air, interventions will be conducted by a professional who is credentialed by the NRPP or NRSB and licensed/certified in the State of Indiana. Radon testing and mitigation must be conducted according to the current ANSI/AARST consensus standards for the specific housing type: <https://standards.aarst.org/>.

## 9. Lead Inspection and Risk Assessment

A complete lead-based paint inspection and lead hazard risk assessment (LIRA), in a combined report is required for all pre-1978 units. Costs associated with lead hazard testing include the LIRA, and Clearance Testing. The LIRA must in be accordance with *Policy Guidance 2013-01 Lead Inspection-Risk Assessment Reporting and Documentation* at, [https://www.hud.gov/sites/documents/PGI\\_2013-01.PDF](https://www.hud.gov/sites/documents/PGI_2013-01.PDF).

***\*Handwritten XRF results are not acceptable***

***\*The LIRA report must identify rooms by name/type and not by a number as listed on the site map***

All Lead Inspectors, Risk Assessors, Clearance Examiners, Lead Abatement Project Supervisors and Contractors are required to be licensed in Indiana. Licenses, training, and certifications will be verified by the IHCDA Project Manager before entering a contract. Lead inspections and risk assessments must follow the procedures as defined in the *HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing* and as defined by the policies of the Lead Hazard Reduction Demonstration Grant Program.

***\*Presumption of the presence of lead-based paint or lead-based paint hazards is not permitted.***

Dust-Lead Action Levels	
Interior Floors	≥ 10 µg/sf
Windowsills	≥ 100 µg/sf

All testing, sampling and laboratory analysis for lead must comply with the Lead Safe Housing Rule and conform to the current HUD Guidelines, the EPA lead hazard standards at 40 CFR part 745, and federal, state, or tribal regulations developed as part of the appropriate contractor certification program, whichever is most protective of children. All laboratory analyses conducted on paint chips, soil and/or dust samples must be performed by an environmental laboratory recognized by EPA under the National Lead Laboratory Accreditation Program pursuant to the Toxic Substances Control Act (15 U.S.C. 2685).

A copy of each completed inspection/risk assessment reports will be provided to the resident and/or property owner in accordance with 24 CFR 35, subpart B. IHADA will ensure all LIRA's and clearance examinations are uploaded into the State of Indiana's I-LEAD system. Once uploaded, a certificate will be submitted with the LIRA report to IHADA.

Work Specifications will be developed by a third-party contractor based on the healthy home hazard assessment, radon test, and lead Inspection, and risk assessment report. Work specs will be written clearly and define the method of treatment, quantity, and quality of work and work materials used to address hazards identified in each assessment conducted and include line-item cost estimates. Work will focus on the control of lead hazards by limiting lead dust generation, proper containment, and ensuring daily clean-up and through a combination of interim controls and abatement techniques.

## 10. Lead Hazard Control

A person performing **interim controls** must be supervised by an individual licensed as a lead-based paint Project Supervisor or have successfully completed one of the following lead-safe work practices courses:

- A lead-based paint abatement supervisor course accredited in accordance with 40 CFR 745.225;
- A lead-based paint abatement worker course accredited in accordance with 40 CFR 745.225;
- *A renovator course accredited in accordance with 40 CFR 745.225.*
- “The Remodeler's and Renovator's Lead-Based Paint Training Program,” prepared by HUD and the National Association of the Remodeling Industry; or
- Another course approved by HUD for this purpose after consultation with EPA.

\* This supervision or lead-safe work practices training requirement does not apply to work that disturbs painted surfaces less than the *de minimis* limits of §35.1350(d) of the Lead Safe Housing Rule:

All **lead abatement** work conducted under this grant program requires an Indiana licensed abatement contractor, licensed abatement supervisor, and licensed abatement workers to perform lead hazard control activities. Each licensed person must work for an appropriately licensed and certified firm. *EPA RRP certification alone is NOT sufficient for work under this program* that includes measures designed to *permanently* eliminate lead-based paint hazards including but not limited to window and substrate remove and replacement activities.

The HHP will use a combination of interim controls and abatement activities as the approach for addressing owner-occupied, rental, and vacant units that are enrolled in the Program. Lead Hazard Control Activities must be in accordance with HUD Guidelines for the Evaluation and Control of Lead- Based Paint Hazards in Housing. Though the HHP program isn't an abatement program, abatement activities requiring minimal rehabilitation may be warranted. Only minimal housing intervention activities that are specifically required and documented in the Lead Hazard Control Plan which could not be completed, maintained, and sustained are authorized. The IHCD A PM must approve the scope of work and obtain HUD approval prior to requesting a contract.

IHCDA will conduct site visits at each project upon completion to ensure all work is in accordance with the contract and meets the State and Federal guidelines.

## 11. Scope Design

The proposed HHP work plan includes specific, measurable, and time-phased objectives for each of the major program tasks and activities and reflects benchmark performance standards for unit production, expenditures, match funds, community outreach, education, skills, training, and other program activities. All funds must be used in accordance with this Work Plan, the Policy and Procedures grant manual, and all Office of Lead Hazard Control and Healthy Homes (OLHCHH) policy guidance.

IHCDA is the responsible administrative agency for the HHP. Staff implementing the program will ensure compliance with all the administrative and financial management requirements of the program. The programs focus is the identification, selection, prioritization, and enrollment of eligible privately-owned housing occupied or to be occupied by program eligible households. From referrals and applications, the goal is to remediate healthy homes hazards in 123 units within the State of Indiana.

IHCDA and our partners will take all the appropriate steps to ensure that its administrative and financial management system is compatible for the HHP. Periodically, IHCDA may update written policies, procedures, and forms for the administrative and financial management of the program. After IHCDA receives HUD approval for the Request for Release of Funds, we will begin marketing and enrolling units.

IHCDA will contract to have the radon testing, healthy homes assessment, technical writing, LIRA, lead clearance, and final inspection by a qualified third-party firm. The PM will review these documents and ensure they meet all OLHCHH policy requirements and develop the scope of work based on the hazards found. Work exceeding the program subsidy amount require high-cost approval for the program GTR, the scope of work limited, or the unit referred to another program if costs are exceedingly high.

## 12. Environmental Review

**Environmental Review Tier 1 Broad-Level Review**– IHCDCA will complete a Tier 1 Environmental Review in compliance with and consistent with 24 CFR Part 58. Under NO CIRCUMSTANCES may any healthy homes intervention work start prior to receiving a signed Release of Funds from HUD.

### **Environmental Review Tier 2- Site Specific Reviews**

For each enrolled unit the preparation and implementation of the requirements of the Environmental Review process consistent with the regulations set forth in 24 CFR Part 58. Any remaining issues will be evaluated on the policies established in the broad-level review as individual sites are selected for review. Together, the broad-level review and all site-specific reviews comprise a complete environmental review record.

IHCDA's Environmental Review Record (ERR) and Section 106 Historic Review User's Guide and the ERR Workbook provides additional background information about the federally required processes including why the review is necessary, how to perform the review, and other resource information to help complete the ERR Workbook.

## 13. Procurement and Contracts

IHCDA's competitive procurement standards meet the requirements of 2 CFR 200. There are four (4) allowable methods of procurement, depending on the type of goods or services being procured and who is doing the procurement. These are: 1) competitive sealed bids, 2) competitive negotiation, 3) small purchases, and 4) non-competitive and sole source purchases.

Lead hazard control and healthy homes issues may be bid together and under one contract to minimize the amount of time for procurement and project completion. Radon testing and mitigation may be contracted separately due to the varying types of work and licenses required.

No contract award may be made to parties listed on the government-wide exclusions in the System for Award Management (SAM) in accordance with the OMB guidelines on debarment and suspension at 2 CFR part 180.2. Prompt Payments to Contractors must adhere to 2 CFR § 200.305. Contractors must have an active Unique Entity ID (UEI) with the SAM system to qualify for the HHP Program.

IHCDA will make payments within 30 calendar days after receipt of the billing, unless the OLHCHH believes the request to be improper (See 2 CFR § 200.53, Improper Payments). Note that, if non-federal laws or regulations applicable to a Non- Federal Entity specify a shorter prompt payment period, the Entity must comply with that shorter period.

Contractors must be approved by the IHCDCA Program Director and Executive Team prior to entering a contract. IHCDCA will set up an eligible pool of eligible contractors for testing, rehabilitation, and remediation. Program information will be sent at out regularly to State of Indiana licensed lead-based paint, radon, general contractors, and other professionals regarding the opportunity and requirements to be added to eligible contractor pools. Once a contract for services is signed by the contractor and IHCDCA, it will serve at the "notice to proceed" with the contracted work. IHCDCA and/or the contractor will notify the property owner the day work will begin.

### **IHCDA policy on services by a Contractor:**

A contractor may be a for-profit entity, a not-for profit, or a municipal employee. A contractor may perform administrative or professional services as a stand-alone or in conjunction with other activities. The competitive negotiation method is recommended for all procurement of professional services

## 14. XBE requirements

IHCDA has a goal of ten percent (10%) participation by XBE firms for the HHP. Therefore, efforts must be made and documented to attract proposals from minority-owned businesses and women's business enterprises. RFQ's and RFP's will be published and advertised for work discipline needed to complete the program requirements.

## 15. Temporary Relocation

Participation in the HHP is voluntary, so participants are not eligible for permanent relocation assistance. IHCDA may provide *temporary* relocation assistance if a rental unit becomes temporarily unlivable during hazard control work and the property owner cannot provide a vacant unit and the occupant has no other option. *Owner-occupants temporarily relocating while lead hazard reduction measures are conducted are not entitled to URA relocation assistance.*

During the initial eligibility review for the program, IHCDA will inform applicants that relocation may be required. IHCDA may provide *reasonable* relocation expenses for households in the form of paying for hotels, housing participants in another unit, paying for meals, etc. A HUD-40030 form must be completed prior to relocation.

Hazard control work and temporary relocation should take no longer than 10 days but may take longer based on supply chain and other unforeseen factors. Assisting with reasonable costs of temporary relocation for those persons required to vacate housing while participating in this voluntary maintenance program for lead hazard reduction is an eligible activity of the program. Occupants who enroll in the program must be treated fairly and equitably regarding removing participation barriers created by relocation requirements if housing must be vacated while hazard reduction measures are being conducted.

Occupants are entitled to receive temporary relocation assistance where applicable pursuant to the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA), 42 U.S.C. §§ 4601-4655, as described in regulations at 49 CFR 24.2(a)(9)(ii)(D) and the corresponding Appendix A to Part 24. (These regulations can be accessed from the Government Publishing Office website at <http://www.gpoaccess.gov/cfr/index.html>.)

Temporary relocation expenses are for tenants while lead hazard reduction measures are being conducted where there are no other options for the families to relocate on their own. When feasible, rental properties owners should provide temporary housing for occupants required to vacate their unit during lead hazard control activities. However, in the event the property owner doesn't have any vacant units to assist with the temporary relocation, the HHP will temporarily relocate (10 days or less) the family to a nearby hotel at an average cost of \$599 or less per stay.

When tenant occupants with physical disabilities are temporarily relocated, they must be offered housing that can be approached, entered, and used by persons with physical disabilities. For additional information on relocation requirements, see the HUD Handbook 1378 (Real Estate Acquisition and Relocation Policy and Guidance).

Lead contractors are required to fill out an Occupant Protection Plan form. A licensed lead supervisor will be on site, available to workers and responsible for direct supervision of all workers during all work site preparation, abatement activities and post abatement cleanup of work areas. The onsite supervisor will always maintain the following documents at the abatement site: Indiana notification; Occupant Protection Plan; Employee licenses; and required OSHA documentation.

Occupants shall be temporarily relocated before and during hazard reduction activities to a suitable, decent, safe, and similarly accessible dwelling unit that does not have lead-based paint hazards, except if:

1. Treatment will not disturb lead-based paint, dust-lead hazards, or soil-lead hazards
2. Only the exterior of the dwelling unit is treated, and windows, doors, ventilation intakes and other openings in or near the worksite are sealed during hazard control work and cleaned afterward, and entry free of dust-lead hazards, soil-lead hazards, and debris is provided
3. Treatment of the interior will be completed within one period of 8-daytime hours, the worksite is contained to prevent the release of leaded dust and debris into other areas, and treatment does not create other safety, health, or environmental hazards (e.g., exposed live electrical wiring, release of toxic fumes, or on-site disposal of hazardous waste); or
4. Treatment of the interior will be completed within 5 calendar days, the worksite is contained so as to prevent the release of leaded dust and debris into other areas, treatment does not create other safety, health or environmental hazards; and, at the end of work on each day, the worksite and the area within at least 10 feet (3 meters) of the containment area is cleaned to remove any visible dust or debris, and occupants have safe access to sleeping areas, bathroom, and kitchen facilities
5. The dwelling unit and the worksite shall be secured against unauthorized entry, and occupants' belongings protected from contamination by dust-lead hazards and debris during hazard reduction activities. Occupants' belongings in the containment area shall be relocated to a safe and secure area outside the containment area or covered with an impermeable covering with all seams and edges taped or otherwise sealed

## 16. Unit Monitoring

Intake eligibility and contractor procurement will be conducted by the IHCDA PM and reviewed by the IHCDA Program Director before entering into any contracts or agreements. All contractors and their applicable licenses and insurance must be submitted to the IHCDA PM for review and approval.

On-going desk monitoring will occur using established project, payment, and completion forms. Each unit assisted with HHP funds will be set up electronically through HHGMS and all project specific documents maintained in a client file accessible by designated staff and maintained by the Healthy Homes Analyst. Contractors will be required to setup an ACH account so that payments can be made through direct deposit upon verification of the contracted scope of work.

IHCDA will submit project status and completion data using the Quarterly Report (Exhibit I) via HHGMS within 30 days of each quarter.

2022	2023	2024	2025
July 30, 2022	January 31, 2023	January 31, 2024	January 30, 2025
Oct 28, 2022	April 28, 2023	April 30, 2024	April 30, 2025
	July 28, 2023	July 30, 2024	July 30, 2025
	October 27, 2023	October 30, 2024	October 30, 2025

IHCDA will document activities, progress, and program effectiveness by collecting, reviewing, and analyzing data from: (1) monthly and quarterly progress reports (2) quarterly meetings (3) project data related to units including contractor certification/licensure, project costs, adherence to work specifications, and other related activities.

IHCDA staff will write and submit the Final Progress Report and other required closeout documentation for the grant to HUD after the award end date of November 16, 2025, A file review will be conducted by IHCDA and consist of reviewing completed files including income eligibility and documentation, hazard remediation, work specifications, contractor procurement, contract payments, administrative, and program delivery expenses. Inspection reports will be electronically filed and submitted via HHGMS unit work by the Healthy Homes Analyst upon clearance of an assisted unit.

## 17. Lead Clearance

Lead-based paint is defined by the EPA as paint or other surface coatings that contain lead equal to or more than 1.0 mg/cm<sup>2</sup> by XRF or more than 0.5% by weight (AAS). Clearance standards are set by the OLVCHH Policy Guidance 2017-01.

Floors	< 10 ug/ft <sup>2</sup>
Interior windowsills	< 100 ug/ft <sup>2</sup>
Window troughs	< 100 ug/ft <sup>2</sup>
Porches	< 40 ug/ft <sup>2</sup>

All combined lead inspections and risk assessments are performed by licensed individuals and follow the above listed procedures as well as XRF manufacturing training and performance characteristic standards. All soil, paint, dust, and clearance samples are submitted to a laboratory recognized by EPA's National Lead Laboratory Accredited Program (NLLAP). Clearance testing must be conducted on all units where a lead inspection and risk assessment has identified lead-based paint hazards. Hazards below de minimis levels do not exempt the unit from a clearance test.



Clearance examinations shall include a visual assessment, dust sampling, submission of samples for analysis for lead in dust, interpretation of sampling results, and preparation of a report. Soil sampling is not required. Clearance examinations shall be performed in dwelling units, common areas, and exterior areas in accordance with this section and the steps set forth at 40 CFR 745.227(e)(8). If clearance is being performed after lead-based paint hazard reduction, paint stabilization, maintenance, or rehabilitation that affected exterior surfaces but did not disturb interior painted surfaces or involves the elimination of an interior dust-lead hazard, interior clearance is not required if window, door, ventilation, and other openings are sealed during the exterior work.

Final cleaning and clearance samples are not performed until all lead hazard control work and rehabilitation work is completed. The contractor then submits an invoice for the total cost of the project and after reviewing and verifying for accuracy, the IHCDA PM will schedule an inspection prior to submitting for the contractor payment. Once the IHCDA inspection is complete and all work determined to be in accordance with the contract, payment is then requested by the PM and released to the contractor by the IHCDA accounting department.

## 18. Funds Management

IHCDA is the responsible agency for overseeing the financing of hazard remediation in units and for approving payments to the contractors doing the work. Administrative costs may not exceed 10 percent of the grant award. Administrative costs are determined based on the nature of the activity being performed and, therefore, may be found in both the direct and indirect cost categories. OLHCHH considers all costs included in your negotiated indirect cost rate as “administrative costs”.

### **LOCCS Access**

IHCDA will serve as the Grant Fiscal Agent. The Grant Fiscal Agent will obtain and maintain access to the LOCCS system and perform Grant Drawdowns through the Healthy Homes Grant Management System (HHGMS). IHCDA will be responsible for submitting grant drawdown requests, including back-up documentation on a schedule defined in the Policy and Procedure Manual (at least once per quarter). The Healthy Homes Analyst will provide the Grant Technical Representative with all documentation, including invoices, receipts, contracts, and any other necessary reimbursement information.

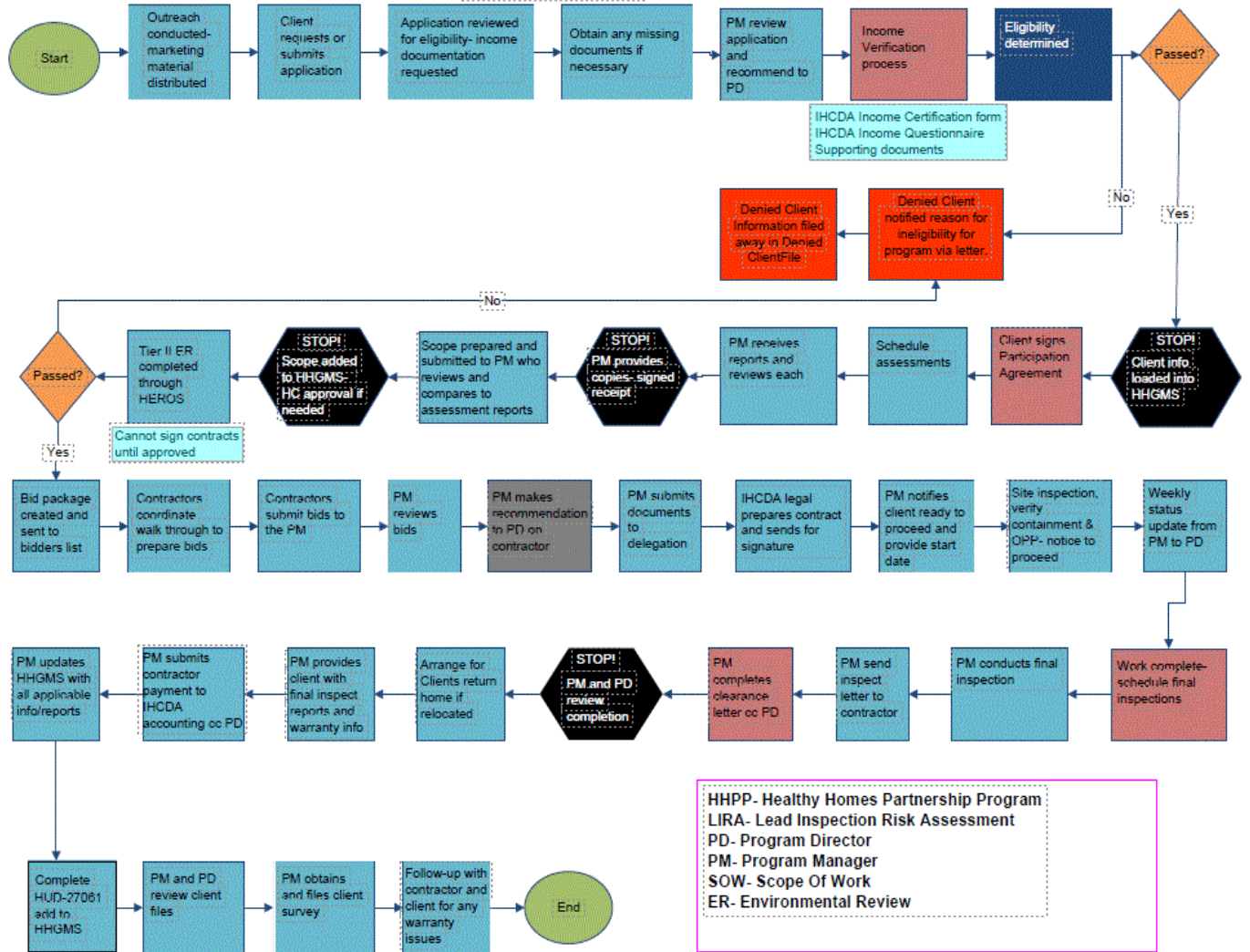
### **Cost Reimbursement to Contractors**

Contractors performing hazard remediation will be reimbursed for their work at project completion and in accordance with IHCDA’s accounting policy and procedures. All work must be approved by the IHCDA PM before any payment is made. No down payments or cash advances of grant funds for materials, labor or other contract-incurred costs will be made to the Contractor.

### **Allowable Costs**

A cost may be charged to a federal grant only if it is allowable. To be allowable, a cost must be reasonable; necessary to perform the program; allocable to grant as either a direct or indirect cost; consistently treated in like circumstances; adequately documented; and otherwise, consistent with the applicable 2021 Healthy Homes Production Grant Program Notice of Funding Opportunity (NOFO) terms and conditions.

# Process Map



## 19. Post Clearance Monitoring/Final Inspection

All radon mitigation systems installed will be tested by a licensed contractor to verify the system is properly functioning maintaining radon exposure below the EPA allowable threshold. The contractor will provide a report to the IHCD PM who will review and verify the results. A final inspection by IHCD staff or third-party contractor will be conducted following the completion of each project to verify the work is in accordance with the contract, local, State, and Federal requirements. All issues noted in testing, or the final inspection will be reported to the applicable contractor for corrective action.

All remediation work must pass a clearance examination and/or final inspection before the job is considered complete and payment is made. Post abatement lead clearance sampling will only be conducted by an Indiana licensed inspector, risk assessor, or clearance examiner. Prior to the removal of warning signs and other demarcation, a visual inspection will be conducted to determine if deteriorated paint, dust, or debris are still present. The contractor will remediate deteriorated paint and properly clean visible dust and found during the visual inspection. Clearance sampling will be conducted no sooner than 1-hour after the completion of the project, using documented methodologies and procedures outlined in 410 IAC 32-4-9.

The analytical results will be compared to the applicable clearance level to determine whether clearance has been achieved. If clearance has been achieved, the demarcation will be removed, and the lead abatement project will be considered complete. If clearance levels exceed the applicable levels, the contractor will re-clean and have retested all failed areas. Upon completion of the project, the Indiana licensed inspector or risk assessor will submit all analytical results to IHCD.

## 20. Economic Opportunities for low and very low-income persons

Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. § 1701u) is applicable to grants funded under this lead hazard control and healthy homes grant program NOFO (see 24 CFR 5.3(a)(2)(i)). All grantees under this NOFO that conduct any project exceeding \$100,000 are required to comply with Section 3 for those projects. The project is the site or sites together with any building(s) and improvements located on the site(s) that are under common ownership, management, and financing.

If there are any new employees or award contracts to carry out the project(s), IHCD will comply with the Section 3 requirements found at 24 CFR part 75, subpart C. If a project will also have housing and community development financial assistance or public housing assistance, we will comply with 24 CFR part 75, subpart D. Any contractor, subcontractor or sub-grantee must also comply with the Section 3 requirements for any new training, hiring or sub-Page 17 of 47 contracting opportunities provided under those contracts. Section 3 (HUD Form 60002) reporting will be input into the Healthy Homes Grant Management System (HHGMS) Quarterly Report. Values will be entered in the unit work tab in HHGMS, and the Quarterly Report will show a sum of these fields for all unit work records associated with each Quarterly Report. HUD form 60002 shall be submitted by January 10<sup>th</sup> each year.

## 21. Program Performance Evaluation

IHCDA is responsible for benchmarks being updated weekly, expenditures, number of units with completed ERRs, units inspected, and units completed. The PM will also track the numbers of days from the time a unit is enrolled to completion to ensure timeliness of clearance. The Team’s monthly meetings will keep track of performance benchmarks to ensure the number of units tested and cleared and the funds expenditure rate remain consistent.

	Q1 Apr- June 2022	Q2 Jul- Sept 2022	Q3 Oct- Dec 2022	Q4 Jan- Mar 2023	Q5 Apr- June 2023	Q6 Jul- Sept 2023	Q7 Oct- Dec 2023
Assessed Units	0	0	5	15	27	42	57
Completed Units	0	0	0	4	12	23	37

	Q8 Jan- Mar 2024	Q9 Apr- June 2024	Q10 July- Sept 2024	Q11 Oct- Dec 2024	Q12 Jan- Mar 2025	Q13 Apr- June 2025	Q14 July- Sept
Assessed Units	72	87	102	114	120	123	123
Completed Units	51	65	79	93	104	115	123

The Healthy Homes Analyst will maintain a database of potential enrolled units by address, start date, cost estimates, match source, and status. Each address will be regularly updated in HHGMS and our own internal tracking methods. The Program Director will evaluate performance and track budgetary spending. Weekly meetings among IHCDA staff will be coordinated by the Healthy Homes Analyst and Director to discuss performance, efforts to increase levels of participation, and benchmark goals.

The table below highlights the major tasks:

<b>PROGRAM TASKS/ACTIVITY-DELIVERABLES</b>	<b>NUMBER</b>
Number of families contacted and/or referred	250
Applications received	150
Number of units to receive hazard control work	123
Outreach events scheduled	12

## 20. Definitions

**Abatement**- any measure or set of measures designed to permanently eliminate lead-based paint hazards. The four types of abatement methods are removal, enclosure, encapsulation, and replacement. Abatement can only be conducted by a licensed abatement contractor.

**CAA**- Community Action Agency

**CEST**- Categorically Excluded Subject To

**Clearance**- an activity conducted for the purpose of establishing proper completion of interim controls of lead hazards. A clearance examination can be conducted by a licensed risk assessor, lead inspector or clearance examiner. The clearance examination includes a visual examination of the completed work and additional dust samples to be tested for lead

**CFR**- Code of Federal Regulations

**Composite Sampling**- a collection of more than one sample of the same medium (dust, soil, paint) from the same type of surface (floor, windowsill, window trough), such that samples can be analyzed as a single sample

**De Minimis Levels**- the following levels which are used to determine whether deteriorated paint is a hazard that must be addressed:

- 20 square feet (2 square meters) on exterior surfaces
- 2 square feet (0.2 square meters) in any one interior room or space; or
- 10 percent of the total surface area on an interior or exterior type of component with a small surface area. e.g. window sills, baseboards, and trim

**DMS**- Data Management System

**EBLL**- Elevated Blood Lead Level

**EPA**- Environmental Protection Agency

**LOCCS**- Line of Credit Control System

**ERR**- Environmental Record Review

**HEPA filter**- a filter that can remove very small lead particles and prevent them from being redistributed into the air. HEPA filters are used on respirators and vacuum cleaners to prevent lead exposure. The filter can filter out particles of three-tenths (0.3) micron or greater from a body of air at ninety-nine and ninety-seven hundredths' percent (99.97%) efficiency or greater.

**HEROS**- HUD Environmental Review Online System

**HHGMS**- Healthy Homes Grant Management System

**HHP**- Healthy Homes Partnership Program

**HIPPA**- Health Insurance Portability & Accountability Act

**IHCDA**- Indiana Housing & Community Development Authority

**I-Lead**- acronym for the Indiana Lead Environmental Assessment Database which is used by risk assessors to issue standard reports on lead hazards and remediation options

**ILHHP**- Indiana Lead & Healthy Homes Program

**Interim Controls**- a set of measures that temporarily reduce lead hazards. Such measures include specialized cleaning, repairs, maintenance, painting, and temporary containment. Interim controls must be periodically monitored to ensure they are still effective

**Lead Abatement Contractor**- contractors perform to which the State of Indiana has issued a license to perform lead-based paint abatement activities conducted for compensation. The applicant must have a Lead Designated Representative from the company

**Lead Abatement Supervisor**- a Lead Supervisor oversees abatement activities, prepares occupant protection plans, and reports on abatement activities

**Lead Based Paint**- paint or other surface coatings that contain lead equal to or more than 1.0 milligram per square centimeter or 0.5 percent by weight.

**Lead Based Paint Hazard**- any condition that causes exposure to lead from lead-contaminated dust, lead-contaminated soil, or lead-contaminated paint that is deteriorated or present in accessible surfaces, friction surfaces, or impact surfaces that would result in adverse human health effects as established by

the appropriate Federal agency

**Lead Hazard Control-** activities to control or eliminate environmental lead hazards

**Lead Inspection-** surface-by-surface investigation to determine whether there is lead-based paint in a home or child-occupied facility, and where it is located

**Lead Project Designer-** prepares abatement project designs, occupant protection plans, and abatement reports

**Lead Safe Work Practices-** a collection of “best practices” techniques, methods and processes which minimize the amount of dust and debris created during remodeling and renovation, rehabilitation, or repair of pre-1978 housing. LSWP help prevent the creation or exacerbation of lead-based paint hazards. (CDC). See 410 IAC 32-5-2. LSWP are required in Indiana for any work that is going to disturb more than the *de minimis levels* of lead-based paint on interior or exterior surfaces

**LSHR-** Lead Safe Housing Rule

**MBE/WBE-** Minority Business Enterprise/Women Business Enterprise

**Minimal Rehabilitation-** Undertaking minimal housing intervention activities that are specifically required to carry out effective hazard control, and without which the hazard control could not be completed, maintained, and sustained.

**µg/dL-** Micrograms per Deciliter

**NOFO-** Notice of Funding Opportunity

**OLHCHH-** Office of Lead Hazard Control & Healthy Homes

**OOR-** Owner Occupied Rehabilitation

**OSHA-** Occupational Health & Safety Administration

**Paint Stabilization-** repairing any physical defect in the substrate of a painted surface that is causing paint deterioration, removing loose paint and other material from the surface to be treated and applying a new protective coating or paint

**PD-** Project Director

**PM-** Project Manager

**Procurement-** the process of finding, agreeing terms and acquiring goods, services or works from an external source, often via a tendering or competitive bidding process.

**Risk Assessment-** an on-site investigation to determine and report the existence, nature, severity, and location of lead-based paint hazards in residential dwellings

**Substrate-** the surface on which paint, varnish, or other coating has been applied or may be applied. *i.e.* wood, plaster, metal, and drywall

**Target Housing-** any housing constructed prior to 1978, except housing for the elderly or persons with disabilities (unless any child who is less than 6 years of age resides or is expected to reside in such housing) or any 0-bedroom dwelling.

**XRF-** X-ray Fluorescence is the emission of characteristic "secondary" (or fluorescent) X-rays from a material that has been excited by bombarding with high-energy X-rays or gamma rays

**Zero Bedroom Unit-** any residential dwelling in which the living area is not separated from the sleeping area. The term includes efficiencies, studio apartments, dormitory housing, military barracks, and rentals of individual rooms in residential dwellings