

Lead Hazard Reduction Demonstration Grant Program

March 1, 2018 to February 28, 2021
South Bend, Evansville, Fort Wayne, and Indianapolis

Work Plan



Drafted by: Samantha Spergel, IHCD Director of Real Estate Production
Dave Pugh, IHCD Lead Grant Manager



ADDRESS 30 South Meridian Street, Suite 1000, Indianapolis, IN 46204
PHONE 317 232 7777 **TOLL FREE** 800 872 0371 **WEB** www.ihcda.IN.gov

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 Lead Hazard Reduction Demonstration grant program. 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 LHRD grant program throughout the 36-month period of performance.

Units Assessed and Completed

The goal for the Lead Hazard Reduction Demonstration (LHRD) grant is to identify and remediate lead-based paint hazards in 240 units with priority given to units occupied by a child under the age of 6 with an Elevated Blood Lead Level (EBLL) within the six cities of South Bend, Fort Wayne, Indianapolis, and Evansville. These cities were selected due to their counties pre-1970 housing stock and percentage of low-to-moderate income families. Not-for-profit organizations, Local Units of Government, and Local Health Departments will be procured to serve as the administrators of the Lead Hazard Reduction Demonstration grant within their communities.

Reaching High Risk Groups and Communities/Target Area Selection

The 2015 Childhood Lead Surveillance Report by the Indiana State Department of Health (ISDH) provides data on pre-1978 housing, the number of children tested for an EBLL, and the number of confirmed cases of children under the age of six diagnosed with an EBLL. IHCDA has assessed this and other data provided through various sources to determine the highest risk areas for inclusion in the LHRD grant program. The six cities identified to receive LHRD grant funds were determined to be of high priority. Furthermore, the LHRD grant program application is designed to ensure prioritization to families in highest need.

Healthy Home Hazard Assessment

Each Sub-Recipient will have a portion of the Healthy Homes Supplemental (HHS) funding. There will be no administrative costs allowed per program regulations. The funds will be utilized to address priorities based upon key issues that affect health and safety conditions in a home. A Healthy Homes assessment will be incorporated in the Lead Inspection/Risk Assessment of approximately 80 homes combined with LHRD funds. Only units receiving LHRD funds are eligible to receive Healthy Homes Supplemental funding. Sub-recipients, with the approval of the IHCDA Project Manager (PM), will use the funds to address prioritized hazards. These will be direct costs only.

Eligibility Criteria

- Family Income < 80% of Area Median Income
- Unit where a child under six years of age resides or spends a significant amount of time or pregnant female resides
- Pre-1978 Eligible Housing Unit
- Property Tax payments & homeowners insurance are current
- Unit not located in 100 year flood plain

Unit Prioritization

- Household with a child under the age of six diagnosed with an EBLL greater than 5 µg/dL
- Child under six years of age and/or pregnant female living in target housing
- Units where a child under the age of six years spends a *significant amount of time visiting*

- Households on the Weatherization or OOR rehab list with a child diagnosed with an EBLL

**A “significant amount of time visiting” is defined as three hours a day on two separate days a week and a total of 60 hours per year*

Blood Lead Testing

Each child under the age of six years who resides in a housing unit receiving lead hazard control work will be tested for an EBLL, at no cost to the family, preceding the lead hazard control work unless the child’s parent or legal guardian chooses not to have the child tested. Sub-Recipients will refer any child with an elevated blood lead level for appropriate medical follow-up to the local health department and notify the IHCD PM. The standards for blood lead testing are described in the U.S. Centers for Disease Control and Prevention (CDC).

Lead Safe Housing Registry

The Indiana Lead Protection Program will maintain a web-based Lead Safe Housing Registry that is designed to enhance program effectiveness by listing units made lead safe. These units will be made available to income qualified families for no less than three years after receiving lead hazard control assistance through the LHRD grant program.

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 LHRD and/or HHS funding. The warranty period will begin once the notice of completion has been reviewed and approved by the IHCD Project Manager.

Lien and Participation Agreement

A lien and restrictive covenant will be executed against every multi-family or rental property receiving LHRD grant funds. Upon occurrence of any of the following events during the three year Affordability Period, the entire sum secured by the lien, without interest, shall be due and payable by the property owner upon demand. Repayment may be demanded upon: (1) Transfer or conveyance of the real estate by deed, land contract, lease, or otherwise, during the Affordability Period; (2) Commencement of foreclosure proceedings by any mortgagee (or deed in lieu of foreclosure), within the Affordability Period; (3) Units not being used as a residence by a qualifying tenant or not leased according to the LHRD Participation Agreement. The award recipient must execute and record a lien and restrictive covenant prepared by IHCD.

Affirmatively Further Fair Housing

The LHRD grant program will affirmatively 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. In addition, the LHRD program shall be made available to residents within the designated target areas without discrimination, specifically targeting low-income families with children under six years.

2. Staffing and Partners

IHCD has considerable experience implementing complex programs which includes awarding and regulatory oversight of the Community Development Block Grant Owner Occupied Repair Program (CDBG OOR). Our related programs in owner-occupied rehabilitation enables us to effectively and efficiently administer the Lead Hazard Reduction Demonstration grant. All primary positions within IHCD 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.

IHCDA and ISDH are proposing to expand and enhance its lead hazard control activities by further implementing the Indiana Lead Protection Program (ILPP) through the use of LHRD and Healthy Homes Supplemental funding. The LHRD grant program provides six primary functions to address lead poisoning and healthy housing:

LHRD GRANT PROGRAM PRIMARY FUNCTION
<ol style="list-style-type: none"> 1. Administration of HUD Lead-Based Paint Hazard Control grant funds, Healthy Homes Supplemental funding, and associated matching funds to address lead-based paint hazards and other housing needs to make units lead-safe; 2. Provision of a lead poisoning prevention program; 3. Conducting public and professional education and outreach; 4. Administration of EPA-authorized training, certification, and licensing program for lead professionals; 5. Enforcement of lead professionals and property owners in accordance with State and Federal regulations; 6. Serve as the primary leader for Indiana Lead Protection Program.

Program Director (PD) - Samantha Spergel, Director of Real Estate Production: The PD is a staff position located within the IHCDA who will be responsible for overall administration at the applicant level: contracts, budgets, federal reporting, and policy development. The PD’s salary is the incumbent’s actual salary budgeted in the grant based on the projected 25% percent of time to be spent on the project with the remaining percentage spent in other programs.

The PD will be responsible for providing local officials and citizens with information about the program and leading Lead Affinity discussions across the targeted cities. The PD will take on the primary role of overseeing all outreach activities. The PD will further also be responsible for preparing the program budget, schedules, and amendments. In partnership with the PM, the PD will also development and implement monitoring of all sub-recipients and contractors. The PD will work with the PM to prepare all the required reports and will work directly with Program Accounting staff on the processing of claims from both the program contractors and sub-recipients. Lastly, the PD will directly supervise the PM.

Program Manager (PM) - David Pugh, Lead Grant Manager: The PM will dedicate 75% of his time to the Program and will perform the following: The PM will work with the Indiana State Department of Health – Indiana Lead and Healthy Homes Program, Community Action Programs and other sub-recipients to refer eligible families and participants to the LHRD program. The PM will also be primarily responsible for the quarterly reporting within HHGMS (Healthy Homes Grant Management System).

The PM will work with the PD on developing SOPs, Policy Guidance, and monitor compliance with all applicable regulations, and ensure compliance with eligibility determination, risk assessments, inspections, remediation, worker licensing, training, and clearance requirements. As part of the monitoring of the sub-recipients, the PM will also monitor quality of risk assessments, inspections, scope of work, remediation activities and clearance exams conducted and/or performed by each sub-recipient. Each sub-recipient will be required to submit the documentation to the PM for approval. The PM will ensure sub-recipient conducts Healthy Home assessments and final inspections; the inspections will be overseen by the sub-recipient PM and/or licensed LI/RA inspector.

The IHCD A PM may conduct quality control inspections to ensure they meet the HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards and the Grant Program Policy Guidance and health and safety. The PM will coordinate with Local Health Departments, IDSH and other sub-recipient personnel for timely clearance exams and work with the sub-recipient to prepare a summary of findings following each inspection, and review the accuracy of reports. The sub-recipient PM will also be responsible for ensuring a copy of each inspection report is provided to each household. As part of this process, the sub-recipient PM will also ensure all risk assessments and clearance exams are recorded in I-LEAD (the State of Indiana system which tracks all lead exams).

IHCDA Staff & Roles		
Project Director	Samantha Spergel	Performs oversight and evaluation of the Lead Grant, reporting, public presentations and final approval of all sub-recipients, contractors and payments (soft costs) that are contracted by the grant. She ensures that all grant activities comply with HUD’s Lead Safe Housing Rule, program guidance, and all state lead hazard control requirements.
Project Manager	David Pugh	Assigned direct grant program activities that include management of the Lead Grant program, sub-recipients, contractor and sub-contractor classification, benchmarks and deliverables, reviewing applications, final approval of invoices for contractors, reviewing project Inspection and Risk Assessment reports and specifications (soft costs), evaluations of intervention outcomes, processes, monitoring, and quarterly reporting within HHGMS.
Funds Management	Debra Swinson	Will be the primary manager over the financial management of the grant. She will assist in tracking recipient progress and entering budgets and beneficiary information.
ELOCCS	Omid Ranjbar	He 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	Devyn Smith	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.

Other Essential Personnel- IHCDA Real Estate and Production, Accounting, Marketing and Communications, and Community Programs departments have full-time staff that will assist will the implementation of the LHRD grant program. IHCDA staff have the responsibility to ensure the Program’s success and completion. Staff are experienced and will ensure all program policies and requirements are followed.

3. Outreach

The LHRD grant programs focus is on enrolling eligible privately-owned pre-1978 housing units occupied by income qualified families with children less than 6 years of age. The recruitment of these units requires collaboration, outreach, marketing, and referrals from a number of agencies including the Indiana Lead and Healthy Homes Program, sub-recipients, state and local health departments, community-based organizations, and other public and private sources.

From a list maintained by the Indiana Lead and Healthy Homes Program (ILHHP) of children diagnosed with an EBLL of 5 µg/dL or greater, households in each of the six cities will be notified through the local health department of the LHRD grant program opportunity.

IHCDA will conduct approximately three trainings/presentations per year in each of the selected cities with the goal of reaching 1,350 persons. Each sub-recipient will be required to attend. Community organizations such as the Lead Affinity Group and Indiana Healthy Homes Alliance in each city will be invited to attend to provide technical guidance in the areas of healthcare, rehabilitation, and public support.

Two one-page flyers have been developed for outreach efforts and marketing of the LHRD program to all IHCDA partners. One flyer is marketed toward families and provides information about the health effects of lead and available resources of the Indiana Lead Protection Program (ILPP). The second flyer will be marketed to contractors to gain interest in the development of contractor pools by giving notice of the need for lead hazard control professionals and how to apply. IHCDA anticipates distributing these flyers to approximately 1,000 households within the six cities.

Sub-recipients and partners will design and lead targeted outreach, affirmative marketing and education on lead hazard control and lead poisoning prevention. They will be responsible for educating the owners of rental properties, tenants, and community on the various regulations pertaining to lead hazards and will provide additional training on lead safe maintenance and renovation practices. *All outreach efforts must be documented and reported to the IHCDA PM in the required Quarterly Report.*

Local Lead Affinity Groups and Task Forces will be key in the marketing of the program and provide outreach at the grass roots level. Sub-recipient contracts include a provision requesting that community and faith based organizations be actively recruited to participate in all aspects of the program to assist with education, outreach, marketing, information dissemination, and lead hazard control.

4. Program Guidance and Review

The Project Director and Project Manager will conduct at least three presentations annually in each of the targeted cities to the sub-recipient and partners to the grant term progress and all topics but not limited to:

- Program updates and accomplishments
- Performance review and current progress by Sub-Recipients
- 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). A task force, consisting of multiple members of each Partner agency, will meet initially in October, 2017 and throughout the grant to develop a Marketing plan consisting of educational materials and events, perform outreach within the Community, and collaborate on overall marketing and promotion of the Grant Program.

IHCDA and Sub-Recipients' will communicate regularly through email and/or phone. The IHCA PM and/or Project Director may conduct site visits of properties undergoing lead hazard control activities to verify program requirements are being followed.

5. Intake

The LHRD grant funds and other matching/leveraged resources will be used in eligible privately-owned pre-1978 housing units where lead-based paint 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 LHRD/HHS funds are invested, 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.

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, and not less than 90 percent of the units assisted with LHRD grant funds must be occupied by a child under the age of six years old or must be units where a child under the age of six years spends a *significant amount of time visiting*.

**A "significant amount of time visiting" is defined as three hours a day on two separate days a week and a total of 60 hours per year*

Rental Housing units

At least 50 percent of the 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.

Zero Bedroom Units

Based on the amendment to Title X, if a child under age 6 resides or is *expected to reside* in a 0-bedroom pre-1978 unit, the unit and the common areas servicing the unit may be enrolled under the LHRD program and have lead-based paint and lead-based paint hazards evaluated and controlled, if the unit is otherwise eligible for enrollment.

“Expected to reside means there is actual knowledge that a child will reside in a dwelling unit reserved for the elderly or designated exclusively for persons with disabilities. If a resident woman is known to be pregnant, there is actual knowledge that a child will reside in the dwelling unit.”

Vacant Rental units

Vacant units are eligible for lead hazard control work providing the rental property owner signs a participation agreement agreeing to give priority to families with children under the age of six for not less than three years following the completion of work. The *Participation Agreement* mandates that rental property owners will adhere to Fair Market Rent values and market units to low-income families with children under the age of six and prohibits discrimination and retaliatory eviction. Rental property owners are required to pay back the total amount of grant funds expended if they fail to meet program requirements for at least 3 years following completion of lead hazard control work (e.g. fair market rent values, renting to very-low or low-income families, and giving priority to families with children under six years of age.

While remediating lead-based paint hazards in vacant units is permissible, grantees must ensure that they are not forgoing units where children are currently residing in preference of vacant units. Sub-recipients must establish policies to ensure assisted units are prioritized for families with children under the age of six years, such as, but not limited to:

- Requiring compliance in the terms of your assistance agreement with owners;
- Registering assisted units in a publicly accessible lead–safe housing registry and/or;
- Annually reviewing and documenting the owners efforts to comply with the Participation Agreement

Each Sub-Recipient will submit enrollment information to the IHCD Program Manager prior to committing LHRD funds to a project. The Program Manager will be responsible for maintaining a database of enrolled units to ensure LHRD grant program compliance.

Priority Ranking Factors

- Household with a child under the age of six diagnosed with an EBLL greater than 5 µg/dL
- Child under six years of age and/or pregnant female living in target housing
- Households on the Weatherization or OOR rehab list with a child diagnosed with an EBLL

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 HIPAA trained ISDH Lead and Healthy Homes Program Staff and Local Health Department staff in the jurisdiction where the child resides. ILHHP will not provide, nor will the sub-recipient or other partners request any medical information in regard to a lead poisoned child in the household. The information is not necessary for the purpose of this project. Follow up medical monitoring will all be completed by ILHHP and the Local Health Department case managers, along with the family’s medical provider.

6. Lead Inspection and Risk Assessment

A complete lead-based paint inspection and lead hazard risk assessment, including either separate reports or a combined report are required for all units enrolled under this program. Costs associated with lead hazard testing include Lead Inspection, Lead Risk Assessment, and Clearance Testing. The limit total for this line item is \$1,185 per unit. Lead inspections, risk assessments, reporting and documentation 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.

**Handwritten XRF results are not acceptable*

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 sub-recipient and IHEDA Project Manager before entering into 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	
Floors	$\geq 10 \mu\text{g/sf}$
Window Sills	$\geq 100 \mu\text{g/sf}$

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 must be given to a homeowner, rental property owner and tenant in accordance with 24 CFR 35, subpart B. The sub-recipient will ensure all risk assessments and clearance examinations are uploaded into the State of Indiana's I-LEAD system. Once uploaded, a certificate will be available and must be maintained in the client file and a copy sent to the PM.

Work Specifications will be developed by the sub-recipients LIRA inspector and/or Project Manager based on the Lead Inspection, Risk Assessment Report, and Healthy Home hazard assessment. The sub-recipient will perform their own inspection of the property either coordinated at the time of risk lead inspection and risk assessment, if feasible, or following receipt of the LIRA. Work specs will be written clearly and define the method of treatment, quantity, and quality of work and work materials used to address lead hazards identified in the risk assessment. 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.

Specifications and bids will be submitted electronically to the IHEDA Program Manager prior to commitment of funds for review and approval. The Program Manager will make every effort to review/approve specifications and bids within 3 working days of receipt.

7. 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 LHRD program 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 LHRD 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 approval all proposed Lead Hazard Control Plans prior to the start of work.

The Sub-Recipient shall conduct and document no less than two site visits per project to ensure lead hazard control work and Healthy Home Supplemental work are in accordance with the contract and meet Federal and State guidelines.

8. Healthy Home Hazard Assessment

Each sub-recipient will have a portion of the Healthy Homes Supplemental funding. There will be no administrative costs allowed per program regulations. A complete 29 Healthy Homes Hazard Assessment will be incorporated in the Lead Inspection/Risk Assessment of approximately 80 homes combined with LHRD funds. The funds will be utilized to address the five priorities based upon key issues that affect health and safety conditions in a home

Only units receiving LHRD funds are eligible to receive Healthy Homes Supplemental funding. Sub-recipients, with the approval of the IHCD A PM, will use the funds to address prioritized hazards. These will be direct costs only. There will be a cap of \$5,000 per home and it must meet the referenced criteria to be eligible for the use of these funds. A maximum of \$350 for each assessment which must include a report and a re-evaluation is allowed.

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, IHCD A has determined the following hazards, in order of priority, to be addressed based on funding:

1. Carbon Monoxide and fuel combustion products
2. Electrical Hazards
3. Damp and Mold Growth
4. Falling on Stairs
5. Pests and Refuse

The inspection and work specifications, based on the five priorities, will be conducted by the LIRA inspector or by a qualified contractor sequenced both concurrently with LIRA inspection and lead hazard control work and in a timely cost efficient manner with the least interruption to the occupant. The project scope of work must be approved by the IHCDA PM.

9. Scope Design

The proposed LHRD grant 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, obtaining match funds, community outreach, education, skills, training, and other program activities.

The programs focus is the identification, selection, prioritization, and enrollment of eligible privately-owned housing occupied or to be occupied by low-income families with children less than 6 years of age and children with an EBLL according to the process described above. The prioritization hierarchy places children with an EBLL as the highest priority for receiving lead hazard control intervention work. The program will ensure, through referrals by the Indiana State Health Department, the enrollment of eligible units of families with children diagnosed with an EBLL residing within the selected cities.

A maximum of \$10,000 is available per unit in LHRD grant funds and \$5,000 for Healthy Homes Supplemental funding of approximately 80 units (only available for units where LHRD funds are used). 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.

From referrals in the six cities, the goal is to receive approximately 280 referrals of owner-occupied units and 180 referrals for eligible rental units. With an overall goal of conducting 275 lead inspections/risk assessments split amongst the six cities, 240 units total are projected to be remediated. The focus of the program is the elimination of lead hazards where a child aged 6 or under resides. Demographic information will be reviewed to ensure an accurate representation of each community's population.

HAZARD ABATEMENT AND INTERIM CONTROL MEASURES	
Abatement	
<u>Exterior interventions:</u>	
<ul style="list-style-type: none"> • Window replacement • Encapsulation or vinyl siding for exterior surfaces including soffit areas • Exterior door replacement or encapsulation depending on condition and comparable costs along with framing materials • Exterior porch component scrape and encapsulation or replacement based on condition and comparable costs • Garage and out buildings that require encapsulation or siding 	
<u>Interior interventions:</u>	
<ul style="list-style-type: none"> • Encapsulation of trim or replacement • Drywall or encapsulation over walled surfaces • Encapsulation or removal of kitchen cabinet; Encapsulate or cover interior window components • Stairway components are encapsulated or covered • Carpet removal from contaminated areas (see Policy Guidance 2013-04) • Floors cleaned. Cement or wood floors, if previously painted, are encapsulated 	
<i>Note: All substrate materials on both exterior and interior surfaces will be replaced if found defective and the underlying causes of paint failure must be repaired prior to any intervention.</i>	

Interim Controls

- Paint Stabilization
- Window jamb liners and aluminum trough enclosures
- Repairing rotted or defective substrate that could lead to rapid paint deterioration
- Friction and impact surfaces treatment
- Dust removal and control (technical cleaning)
- Education

IHCDA is the responsible administrative agency for the LHRD grant. Staff, in implementing the program in each city, ensures compliance with all the administrative and financial management requirements of the program. David Pugh, under the direction of the Project Director, Samantha Spergel, provides the day-to-day management and oversight of the LHRD program tasks and activities including Sub-recipients and contractor performance. Sub-recipients, with the assistance of partner organizations, are responsible for implementing the program strategy in each designated city. They are also responsible for local project administration, monitoring, oversight of the abatement contractor's performance, and serve as the day-to-day project manager at the local level.

IHCDA and our partners will take all the appropriate steps to ensure that its administrative and financial management system is compatible for the LHRD grant. Periodically, IHCDA and its partners may update written policies, procedures, and forms for the administrative and financial management of the program. After the LHRD grant receives HUD approval for the Request for Release of Funds, sub-recipients will begin initiating lead hazard control work.

10. Environmental Review

Environmental Review Tier 1 Broad-Level Review– IHCDA will complete a Tier 1 Environmental Review in compliance with and consistent with 24 CFR Part 58. Under NO CIRCUMSTANCES, may a sub-recipient conduct any lead hazard control or healthy homes intervention work (construction) prior to receiving a signed Release of Funds from HUD and IHCDA PM's approval.

Environmental Review Tier 2- Site Specific Reviews

For each enrolled unit, the sub-recipient will bear responsibility, in their respective cities for 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 you complete the ERR Workbook.

The ERR Workbook is the document where applicants will answer questions and submit supporting documentation regarding the project to satisfy the federal requirements for both the ERR and the Section 106 reviews. Applicants filling out the ERR Workbook will need to follow the User's Guide and all appendices in order to fill out the ERR Workbook. Specifically, the User's Guide and Appendix 3 Resources Document, will provide the information necessary to fill out the ERR Workbook.

The User's Guide, all appendices, and fillable versions of the ERR Workbooks are available at: <http://www.in.gov/myihcda/2650.htm>

11. Procurement and Contracts

The non-profit Sub-Recipients will be required to follow IHCDA's competitive procurement standards. 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 HHS funding repairs should be bid together and under one contract to minimize the amount of time for procurement and project completion.

No contract award may be made to parties listed on the government-wide exclusions in the System for Award Management (SAM) or Federal Awardee Performance and Integrity Information System (FAPIIS), 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, Payment: The Sub-Recipient must submit timely invoices to IHCDA in accordance with the contract provisions.

When the reimbursement method is used, IHCDA will make payments within 30 calendar days after receipt of the billing, unless the OLHCHH or sub-recipient 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 IHCDA Project Manager prior to entering into a contract with the Sub-Recipient. Sub-recipients and partners in conjunction with IHCDA will set up an eligible pool of contractors. Program information will be sent annually to all State of Indiana licensed lead-based paint professionals regarding the opportunity and requirements to be added to eligible contractor pools.

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

Procurement Policy by Sub-Recipient for Hazard Control contractors:

All construction contracts must be through the competitive sealed bid method, and thus, the pool of eligible lead hazard contractors must be determined through this method. Risk Assessors and Clearance Inspectors may be chosen through a RFP process (outlined later in this narrative).

Competitive sealed bids are solicited through formal advertising, such as in the newspaper legal section. Sub-recipients will be required to prepare a bidder's list (i.e. contractors' pool), to alleviate the publication requirement each time projects go out to bid. To create a bidders list, the sub-recipient must publish at least twice in a newspaper of general local circulation. The advertisements must be at least seven (7) days apart, with the second public and made at least seven (7) days before the deadline for submitting request to be placed on the bidder's list (public advertisement requirements are detailed under Indian Law I.C. 5-3-1-2(e)).

12. Minority Business Enterprise/Women Business Enterprise Requirements

IHCDA has a goal of ten percent (10%) participation by MBE/WBE firms for the LHRD grant program. Therefore efforts must be made and documented to attract proposals from minority-owned businesses and women's business enterprises. The preferred method is to send a certified letter inviting the firm to bid. Such letters should be sent to at least two (2) such firms for each procurement action. Other acceptable forms of solicitation include: 1) E-mail with return/read receipt; and 2) Hand delivery and signed receipt.

13. Temporary Relocation

Participation in the LHRD program is voluntary, so participants are not eligible for permanent relocation assistance. Sub-Recipients are required to provide *temporary* relocation assistance in the event that a rental unit becomes temporarily unlivable during lead 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, Sub-Recipients should inform applicants that relocation may be required. Sub-Recipients can 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 by the sub-recipient and approved by the IHCDA PM prior to relocation.

Lead hazard control work and temporary relocation should take no longer than 10 days. If planned work or relocation is longer than 10 days the sub-recipient must receive prior approval from the IHCDA PM. 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, in particular, regarding removing participation barriers created by relocation requirements if housing must be vacated while lead 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 LHRD program 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).

Contractors are required to fill out an Occupant Protection Plan form. A licensed 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 maintain the following documents at the abatement site at all times: 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 so as 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.

14. Unit Monitoring

Each sub-recipient serves as the day-to-day project manager at the local level and are responsible for local project administration, compliance, monitoring, and the oversight of lead abatement contractor's performance.

Intake eligibility and contractor procurement will be submitted to the IHCD PM, as each unit is set-up, and reviewed by the IHCD Compliance Division before entering into any contracts or agreements. All contractors and their applicable licenses and insurance must be submitted to the IHCD PM for review and approval.

On-going desk monitoring will occur through the use of project set-up forms, drawdown request forms and project completion forms. Each unit to be assisted with LHRD/HHI funds will be set up through an approved form, requesting property address, unit type, household composition/income, match source and anticipated funding level, accompanied by a lead paint inspection and risk assessment, to be submitted to the Program Manager prior to commitment of funds. Set up forms will be revised at commitment of funds if the actual funding committed varies from the Set-Up amount.

Sub-Recipients will submit, via email, project completion data through the Quarterly Report (Exhibit I) to the IHCD PM. To be considered in the HUD quarterly report, the Set-up and Quarterly Report Status form must be received by the following dates:

July 16, 2018	January 14, 2019	January 13, 2020	January 11, 2021
October 15, 2018	April 15, 2019	April 13, 2020	Final Draw TBD
	July 15, 2019	July 13, 2020	
	October 14, 2019	October 12, 2020	

Besides submitting the Quarterly Progress Report, Sub-Recipients 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 abatement contractor certification, 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 February 28, 2021.

Each sub-recipient will be subject to an annual file review. The annual file review will be conducted by the IHCDA Compliance Division on-site of each sub-recipients office to be monitored and will consist of reviewing completed files including: income eligibility and documentation, lead paint inspection and risk assessment documentation, work specifications, contractor procurement, contract payments, administrative expenses.

Completion Reports will be submitted to the Program Manager upon clearance of an assisted unit on an approved form. The completion report must be accompanied by a copy of the clearance report.

15. Clearances

Lead-based paint is defined by the EPA as paint or other surface coatings that contain lead equal to or in excess of 1.0 mg/cm² by XRF or more than 0.5% by weight (AAS). Clearance standards are set by the OLHCHH Policy Guidance 2017-01.

Floors	< 10 ug/ft ²
Interior window sills	< 100 ug/ft ²
Window troughs	< 100 ug/ft ²
Porches	< 40 ug/ft ²

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, thereby ensuring a safe unit for occupancy Sub-recipient staff perform a minimum of 25% oversight time on each project to ensure that the contractors are following all

requirements. Once the project begins, it is only under rare circumstances that a change order may be approved. Upon completion of the project, clearance samples are taken. A visual inspection is also completed and signed off on by the occupant, contractor, and sub-recipient.

The contractor then submits an invoice for the total cost of the project and after reviewing and verifying for accuracy, the sub-recipient PM approves the invoice for payment by generating an authorization for payment letter. The contractor invoice, letter authorizing payment and certification of visual inspection are forwarded on to the IHCD PM where payment is verified and authorized. Payment is then released to the contractor by the IHCD accounting department.

16. Funds Management

IHCD is the responsible agency for overseeing the financing of lead hazard control intervention work in units and for approving payments to the contractors doing the work. Each sub-recipient will directly administer and monitor the financing of work through contracts with the licensed abatement contractors.

Administrative costs may not exceed 10 percent of the grant award, excluding the Healthy Homes Supplemental funds. 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

IHCD 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) Each sub-recipient will be responsible for submitting grant reimbursement/drawdown requests, including back-up documentation to the Program Manager on a schedule defined in the Policy and Procedure Manual (at least once per quarter). The Program Manager will provide the Grant Fiscal Agent with all drawdown back-up documentation, including: invoices, receipts, contracts and any other necessary reimbursement information.

Cost Reimbursement to Partner Members

Each sub-recipient will be reimbursed for the costs of administering the LHRD program on a schedule defined in the Policy and Procedure Manual at least once per quarter. Reimbursement will be requested by the sub-recipient electronically to the Program Manager. The Program Manager will submit a request to financial operations for reimbursement to the sub-recipient. Each request must be submitted in writing on an approved form and contain back-up documentation including: invoices, contracts, payroll statements and match documentation. The Program Manager will maintain a master electronic file of each request. All original reimbursement documentation submitted to the Program Manager will be transferred to the Grant Fiscal Agent. The Grant Fiscal Agent will maintain all original reimbursement files.

Cost Reimbursement to Contractors

Contractors performing lead hazard control will be reimbursed for their work at project completion and in accordance with the sub-recipients jurisdictions internal accounting policy and procedures. Progress payments may be approved by the Construction Manager upon approval of respective Department Director. All work must be approved by the IHCD 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.

Supporting Documentation Requirements

The following outline the supporting documentation requirements for the claims process.

1. Include a detailed summary list of each expenditure being requested for reimbursement by line item.
2. Include a copy of all invoices.
3. Supporting documentation for claims for the Administration, Environmental Review, Program Delivery budget line items requesting reimbursement for time spent on the undertaking by staff of a local unit of government, sub-recipient, or not-for-profit organization must include: name of the employee, dates worked, number of hours worked, the chargeable rate, and the total wage computation.

****DO NOT include actual time sheets with the drawdown submission; however, the recipient must keep this documentation on file for IHCDAs monitoring purposes. Additionally, at monitoring, IHCDAs staff will be documenting that the proper hourly rate and fringe benefits is being billed to the LHRD program***

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 Notice of Funding Availability, the terms and conditions of the award, and the regulations in Policy Guidance 2015-01 at

17. Post Clearance Monitoring

Completion Reports will be submitted to the Program Manager upon clearance of an assisted unit on an approved form. The completion report must be accompanied by a copy of the clearance report.

All remediation work must pass a clearance examination before the job is considered complete and payment is made. The owner's agreement will include stipulations for follow-up testing of hazards that have had interim controls.

Post abatement 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 remove remediate deteriorated paint or properly clean visible dust and remove debris or residue 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 or not 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 the sub-recipient PM to be included in the final lead abatement report submitted to the IHCDAs PM.

18. Training

IHCDAs intends to provide economic opportunities to residents and businesses, including minority-owned businesses in each of the six cities in compliance with Section 3. As part of the LHRD grant, IHCDAs in collaboration with the Indiana State Department of Health will provide Lead Project Supervisor, Lead Abatement Work, and other types of lead related training as needed to Section 3 persons, individuals and

community members within designated target areas. These trainings are provided at no cost to local contractors through funding provided by LHRD grant program. This partnership shall generate an increased number local contractors becoming lead certified and more contractors applying to work for the LHRD program.

IHCDA will work with each sub-recipient to promote these trainings each year and will notify targeted trades of training opportunities and locations as well as post related information on IHCDA Lead Protection Program website. You must comply with reporting requirements of subpart E (Section 3 of the Housing and Urban Development Act of 1968, 12 U.S.C. § 1701u (Economic Opportunities for Low- and Very Low-Income Persons in Connection with Assisted Projects)) and the HUD regulations at 24 CFR 135.

Economic Opportunities for Low- and Very Low-Income Persons (Section 3). Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. § 1701u) is applicable to grants funded under this program. All grantees that receive awards exceeding \$200,000 are required to comply with Section 3. If you plan to hire any new employees or award contracts to carry out the grant, you must comply with the Section 3 requirements found at 24 CFR 135.32. Additionally, any contractor, subcontractor or sub-grantee receiving contracts under the grant totaling more than \$100,000 must comply with the Section 3 requirements for any new training, hiring or sub-contracting opportunities provided under those contracts.

Each sub-recipient, if not on staff, will contract licensed lead inspectors and risk assessors to conduct testing, write reports, and write work specifications. IHCDA will seek to procure a training provider for the purpose of providing training based on the Healthy Homes Rating priorities listed in this work plan and lead-based paint disciplines deemed vital to improve the capacity needs in each of the six cities. This training is anticipated to begin by the end of the second quarter of the grant and annually as needed. The Program Manager and other Key Staff will attend all required HUD trainings.

	Type of Training offered by LSHP	Number of Courses	Number of Individuals to be reached
Target Area	Lead Worker	1-2	20
Target Area	Abatement Supervisor	1-2	10
Target Area	Lead Inspector/Risk Assessor	1-2	20
Target Area	Code Inspection/ Healthier Homes	1-2	20
Total			70

These courses shall be offered over the term of the grant and are reflected within the attached benchmark standards. After certification and licensing is achieved, these individuals will be invited to participate as a contractor for lead grant and provided with the sub-recipient contractor application to bid on projects within the designated target areas. All projects will be marketed for contract to firms employing Section 3 individuals. The goal for IHCDA and each sub-recipient is that 10% of the total dollar amount of construction contracts be awarded to businesses owned by or employing Section 3 individuals.

19. Program Performance Evaluation

IHCDA is responsible for benchmarks being updated weekly by staff to include the expenditure rates of sub-recipients, 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. IHCDA will also track units receiving OOR that may be eligible for use of the Lead Grant funding. 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.

LHRD PROGRAM BENCHMARKS											
	Q3 Jul-Sep 2018	Q4 Oct- Dec 2018	Q5 Jan- Mar 2019	Q6 Apr- June 2019	Q7 Jul-Sep 2019	Q8 Oct- Dec 2019	Q9 Jan- Mar 2020	Q10 Apr- Jun 2020	Q11 Jul-Sep 2020	Q12 Oct- Dec 2020	Q13 Jan-Mar 2021
ASSESSED UNITS	14	41	69	96	137	178	206	233	260	274	CLOSEOUT
COMPLETED UNITS	5	12	24	55	88	125	144	180	228	240	

The Program Manager will maintain a database of potential enrolled units organized by sub-recipients to include property address, start date, anticipated LHC/HHI funding level, match source, and status. The data will be requested initially on a monthly basis from each sub-recipient. Based upon performance, data may be requested bi-monthly. The Program Manager will evaluate performance of each Partner agency and track budgetary spending. Quarterly meetings with all Partners will be coordinated by the Program Manager and Director to discuss performance, efforts to increase levels of participation, and benchmark goals.

A Lead-Safe Rental Unit Directory will be established by the Program Manager and each sub-recipient. The Directory will include the location (address) of the lead-safe rental unit and made available to each partner and inter-agency department for publication in their respective websites, newsletters or office postings for the purpose of further promoting and marketing lead-safe units to low income households they serve through other Programs, including but not limited to: Section 8 Housing Choice Voucher Program.

The table below highlights the major tasks:

PROGRAM TASKS/ACTIVITY-DELIVERABLES	NUMBER
Number of families contacted and/or referred	420
Applications received	310
Eligible applicants to receive LIRA	274
Number of units to receive lead hazard control work	240
Number of units to receive Healthy Homes Supplemental funding	80
Outreach events scheduled	54
Number of persons to be served by Outreach activities	1,350

Each sub-recipient will be subject to a bi-annual file review – it is at IHCDA and HUD's discretion to do more frequent file reviews. The annual file review will be conducted by the IHCDA Compliance Division and PM in the office of the sub-recipient to be monitored and will consist of reviewing completed files including: income eligibility and documentation, benchmarks, lead paint inspection and risk assessment documentation, work specifications, contractor procurement, contract payments, and administrative expenses.

Each sub-recipient is responsible for processing client applications, including those referred to IHCDA for eligibility within their respective jurisdictions. For purposes of the Grant Program, to the greatest extent feasible, each sub-recipient will maintain file consistency in order to meet the requirements of the Grant Program and for ease of monitoring. Each project will be maintained in a separate client file. At a minimum, each client file will consist of a 6-partition, with fasteners, card-stock grade folder and contain the following documents or documentation of effort listed in the client file checklist.

At the time of final monitoring, the recipient must provide the IHCDA compliance auditor a disc containing electronic copies of all beneficiary files. These files must contain the income certification and verification documents for all beneficiaries (i.e. tenants or homeowners assisted).

At the discretion of the IHCDA PD and/or PM compliance staff may conduct one (1) or more monitoring visits of a sub-recipient during the grant period. There are two possible types of special monitoring:

1. Initial monitoring- monitoring early in the grants term to ensure contract requirements and procurement procedures have been properly followed.

2. Interim monitoring- monitoring halfway through the grants term or award amount.

A final monitoring will be conducted prior to close-out of each sub-recipients award. The IHCDA Compliance Division will contact the sub-recipient upon notice from the IHCDA PM that all units are complete and ready for the final monitoring. After final monitoring and closeout, all project files, records, and materials will be obtained by IHCDA and securely stored and be accessible to HUD, auditors, and other government officials for a period of at least 3 years from the end of the award's period of performance. This requirement extends to all sub-grants/sub-wards and subcontracts over \$10,000.

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

CDBG- Community Development Block Grant

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, window sill, 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 is capable of filtering 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.

HHGMS- Healthy Homes Grant Management System

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 in excess of 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

LHRD- Lead Hazard Reduction Demonstration

LSHR- Lead Safe Housing Rule

MBE/WBE- Minority Business Enterprise/Women Business Enterprise

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

µg/dL- Micrograms per Deciliter

NOFA- Notice of Funding Availability

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