Executive Summary

ES-05 Executive Summary - 91.300(c), 91.320(b)

1.   Introduction

2.   Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview

3.   Evaluation of past performance

4.   Summary of citizen participation process and consultation process

5.   Summary of public comments

6.   Summary of comments or views not accepted and the reasons for not accepting them

7.   Summary

The Process

PR-05 Lead & Responsible Agencies 24 CFR 91.300(b)

1.   Describe agency/entity responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source

The following are the agencies/entities responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source.

Agency Role	Name	Department/Agency
Lead Agency	INDIANA	
CDBG Administrator	INDIANA	Indiana Office of Community and Rural Affairs
HOPWA Administrator	INDIANA	Indiana Housing & Community Development Authority
HOME Administrator	INDIANA	Indiana Housing & Community Development Authority
ESG Administrator	INDIANA	Indiana Housing & Community Development Authority
HOPWA-C Administrator	INDIANA	
	INDIANA	Indiana Housing & Community Development Authority

Table 1 – Responsible Agencies

Narrative

The following are the agencies/entities responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source.

Consolidated Plan Public Contact Information

Eric Ogle, CDBG Program Director
OCRA
One North Capitol Suite 600
Indianapolis, IN 46204
317.775.4667 | ocra.IN.gov | eogle1@ocra.IN.gov

PR-10 Consultation – 91.100, 91.110, 91.200(b), 91.300(b), 91.200(I) and 91.315(I)

1.   Introduction

Provide a concise summary of the state's activities to enhance coordination between public and assisted housing providers and private and governmental health, mental health and service agencies (91.215(I))

Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness

Describe consultation with the Continuum(s) of Care that serves the state in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS

2.   Describe Agencies, groups, organizations and others who participated in the process and describe the jurisdictions consultations with housing, social service agencies and other entities

Table 2 – Agencies, groups, organizations who participated

Identify any Agency Types not consulted and provide rationale for not consulting

None; all relevant organizations and agencies were invited to participate in the process. OCRA and IHCDA utilized electronic listserv notifications that reach more than 4,000 stakeholders and residents to encourage participation in the survey, webinars, and public hearings.

Other local/regional/state/federal planning efforts considered when preparing the Plan

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Continuum of Care		ESG goals are developed in collaboration with CoC planning.
IHCDA Strategic Plan		Both housing and community development goals support self-sufficiency initiative and improve resident quality of life and strengthen communities in rural areas.
2020 Next Level Agenda		CDBG goals and priorities support many aspects of the plan including supporting recovery from substance abuse addiction and enhancing educational attainment and broadband access.
IN Statewide Broadband Strategic Plan	Office of the Lt. Governor	OCRA's public facilities program will support expansion of broadband access in underserved communities.

Table 3 – Other local / regional / federal planning efforts

Describe cooperation and coordination among the State and any units of general local government, in the implementation of the Consolidated Plan (91.315(l))

Narrative (optional):

Consultation with organizations involved in broadband/digital divide and natural hazard mitigations:

Increasing broadband access has been a priority for OCRA for many years. During 2019, Lt. Governor Crouch, along with the Office of Broadband Opportunities (OBBO), convened a Rural Broadband Stakeholder Group. Participants included providers, business leaders and both the public and private sectors. Over several meetings, these stakeholders engaged in discussions covering a wide range of broadband related topics. Rather than replicate this outreach for the Consolidated Plan, OCRA reviewed the input from that consultation in setting five-year priority goals. The state staff who led the effort were also contacted as part of stakeholder consultation; yet interviews were unsuccessful.

Similarly, for natural hazards, the state drew upon the work that had already been completed as part of Disaster Recovery programs. In addition, all stakeholders, through surveys and focus groups, were asked about residents' and community needs in these two areas. Broadband was identified as a top need.

PR-15 Citizen Participation – 91.105, 91.115, 91.200(c) and 91.300(c)

1.   Summary of citizen participation process/Efforts made to broaden citizen participation
Summarize citizen participation process and how it impacted goal-setting

Residents and stakeholders had many opportunities to participate in the development of the Consolidated Plan. These are summarized below and in the following table.

- More than 200 stakeholders participated in an online survey about housing and community development needs in the areas they work and live.Additional stakeholder interviews were conducted with specialists in housing, community development, and local government affairs. These interviews were conducted during the 30-day public comment period to encourage feedback on the draft Consolidated Plan.Three focus groups with elected officials and economic development officials in nonentitlement areas were conducted on February 25 and 26, 2020.The draft Consolidated and 2020 Action Plan was available for public review and comment beginning on February 18, 2020. The comment period extended through April 10, 2020.The COVID-19 outbreak occurred during the public comment period for the Consolidated Plan. At that time, one public hearing had been conducted, on March 17. As part of the State's response, OCRA and IHCDA held one additional hearing, on April 9, before the draft plan was submitted to HUD to discuss how the State proposed to reallocate CDBG funds to respond to the pandemic.

These efforts were supplemented with regional meetings with local officials, nonprofits, businesses and other stakeholders, conducted by OCRA and IHCDA.

Information was collected from stakeholders and residents throughout the development of the Consolidated Plan for both goal-setting and development of the Method of Distribution and program and policy documents. A special effort was made to collect information from economic development officials and local government leaders on the proposed changes for some CDBG programs, especially as the effects from the COVID-19 pandemic became evident. Open ended survey responses and feedback from stakeholders who were interviewed during the public comment period were also considered in program design and implementation.

The top housing and community development needs identified in the citizen participation process were evaluated against the State's past five-year goals and allocation plans to ensure that the State is funding the greatest eligible needs. This led to development of new five-year goals that

better reflect current needs.(It is important to note that development of public transportation systems, identified as one of the top community development needs in rural areas, is not a CDBG eligible activity).

Citizen Participation Outreach

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
1	Online survey	Housing and community development professionals representing nonentitlement areas	Units of local, economic development, business owners and managers, social service providers, education regional planners, advocates, housing providers. More than 200 stakeholders participated in the online survey.	The top housing needs include: 1) homeownership opportunities for low income and moderate income households; 2) housing repair for low income households. Housing for extremely low income, very low income and low income persons is a concern across the board.	N/A; all comments are accepted.	https://www.research.net/r/2020Indiana

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
2	Online survey	Housing and community development professionals representing nonentitlement areas	12 stakeholders participated in in-depth interviews.It is becoming more difficult for nonprofit developers to develop new and rehab existing housing stock, due to the growing construction costs.	A lack of housing stock in general, including affordable and quality housing stock, particularly in rural communities and for specialpopulations.Demand for, yet lack of, quality Internet access in some areas. A focus on social determinants to health when making housing decisions, such as hiring a community navigator or developing near a health clinic, are becoming more top-of-mind.State-led support, with a focus on building local capacity, for example, by generating financial opportunities and hosting collaborative events across the State, is highly valued by stakeholders.	N/A; all comments are accepted.	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
3	Online survey	Elected officials and economic development officials	A total of nine grant administrators, one engineer, and one representative of a LEDO participated.	Feedback was received on: Ã¯Â¿Â¾ Proposed changes to the Public Facilities Program (PFP), Water Improvement Programs, and Main Street Revitalization Program (MSRP);Ã¯Â¿Â¾ Development of a new program, the Needs Responsive Fund; andÃ¯Â¿Â¾ Use of bonus points and incentives in proposal scoring.	N/A	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
4	Public Hearing	All interested stakeholders and residents/broad community	Two webinars accessible to all Indiana stakeholders and residents.	Primary themes of the comments included:1) Stakeholders working with persons with disabilities recommend prioritizing housing investments that produce integrated housing choices and accessible and affordable housing choices for persons with disabilities, as well as home modifications for persons with disabilities who rent;2) Many stakeholders opposed the proposed funding allocations that would reduce investments in water and sewer infrastructure programs;3) Stakeholders expressed very mixed opinions on the	N/A	

Table 4 – Citizen Participation Outreach

Needs Assessment

NA-05 Overview

Needs Assessment Overview

This section uses HUD pre-populated tables, supplemental data on the needs of nonhomeless special needs populations and persons who are homeless, and contributions from stakeholder consultation to summarize the top housing and community development needs statewide and, where available, in nonentitlement areas of Indiana.

- Indiana has 1.2 million residents age 62 and older, of which 100,00 have a self-care disability. Households with seniors total 778,000 and those with housing needs are expected to grow by 2,500 households by 2025.
- Indiana residents with mental, physical, and/or developmental disabilities total 900,000 and occupy 680,000 households. By 2025, these households with needs will grow by 7,000.
- More than 360,000 persons in Indiana struggle with substance abuse challenges.
- 271,076 residents 18 and older in Indiana have experienced some type of domestic violence, dating violence, sexual assault and/or stalking by an intimate partner in the previous year. In the most severe cases, these victims must leave their homes: 4,850 women and 1,280 men who are victims of domestic violence in Indiana require housing services each year.
- Extremely low income households—those earning incomes below the poverty level—total 310,000 in Indiana. Those with housing needs will grow by 7,000 in five years.
- Low income households—those earning incomes between the poverty level and the median income—total 300,000 in Indiana. Their needs will grow by 5,000 in five years.

Stakeholders were asked their opinions about top housing and community development needs in Indiana via an online survey for this Consolidated Plan. Housing for extremely low income, very low income and low income persons was a concern across the board. The needs prioritized by stakeholders include: affordable rentals for very low income households; homeownership opportunities for low income residents (earning less than 80% AMI or about $45,000/year) and also homeownership opportunities for moderate income residents (earning 80-120% AMI or generally between $50,000 and $75,000/year). Additionally, housing repair for low income residents is a high priority.

A lack of housing stock in general, including affordable and quality housing stock, particularly in rural communities, are very common concerns shared by both survey respondents and interviewees. It is becoming more difficult for nonprofit developers to take build new and rehab existing housing stock, due to the growing construction costs.

Low wages in general and low minimum wage is the single most important issue continuing to affordability of quality housing.

Infrastructure for Internet access and public transportation for all are the top two community needs—the top barrier to Internet being that wiring/connections are not available in rural areas.

NA-10 Housing Needs Assessment - 24 CFR 91.305 (a,b,c)

Summary of Housing Needs

Although median income has risen for households overall in Indiana since 2012, many households still struggle with housing costs due to their very low income levels and increasing rents.

Severe cost burden and severe housing problems, for extremely low income renter and owner households, are the most common housing problems in the State of Indiana. According to the 2011-2015 CHAS data, nearly 124,000 extremely low income rental households in the State of Indiana experience severe cost burden (54% of all extremely low income households). Among extremely low income owner households, a lower number but comparable proportion (55,245 or 46%) are severely cost burdened.

A severe housing problem is defined by households with one or more severe housing problems that include lack of kitchen or incomplete plumbing, severe overcrowding and/or severe cost burden.

CHAS data suggest that nearly 140,000 extremely low income rental householders experience one or more severe housing problems (65% of all low income rental households). Among extremely low income owner households, 58,800 (58%) have one or more severe housing problems.

Overall, households living in nonentitlement areas with the greatest needs represent about 7 percent of all households in Indiana.

These findings are based on the HUD-provided table, shown below.

For the purposes of this plan, these definitions will be used consistently throughout the NA and MA sections.

- 0-30% AMI (Area Median Income) = extremely low income
- 30-50% AMI = very low income
- 50-80% AMI = low income
- 80-100% AMI = low to moderate income

Demographics	Base Year: 2012	Most Recent Year: 2018	% Change
Population	6,485,530	6,637,426	2%
Households	2,478,846	2,553,818	3%
Median Income	$48,374.00	$54,325.00	12%

Table 5 - Housing Needs Assessment Demographics

Alternate Data Source Name:
2012 5-Year ACS
Data Source Comments:

Number of Households Table

	0-30% HAMFI	>30-50% HAMFI	>50-80% HAMFI	>80-100% HAMFI	>100% HAMFI
Total Households	310,150	301,755	454,540	273,200	1,162,295
Small Family Households	103,050	91,670	158,285	107,230	631,975
Large Family Households	20,735	21,670	37,910	23,230	100,500
Household contains at least one person 62-74 years of age	44,340	60,360	97,360	62,270	239,285
Household contains at least one person age 75 or older	34,190	63,805	72,705	30,840	73,195
Households with one or more children 6 years old or younger	62,405	49,540	74,070	43,485	125,910

Table 6 - Total Households Table

Data Source: 2011-2015 CHAS

Housing Needs Summary Tables

1. Housing Problems (Households with one of the listed needs)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Substandard Housing - Lacking complete plumbing or kitchen facilities	3,845	3,090	3,310	970	11,215	1,595	1,550	1,705	785	5,635
Severely Overcrowded - With >1.51 people per room (and complete kitchen and plumbing)	2,610	1,480	1,480	605	6,175	255	430	700	315	1,700
Overcrowded - With 1.01-1.5 people per room (and none of the above problems)	5,715	4,025	4,670	1,560	15,970	1,705	2,075	3,965	2,205	9,950
Housing cost burden greater than 50% of income (and none of the above problems)	123,995	34,825	4,405	535	163,760	55,245	33,050	17,720	3,710	109,725
Housing cost burden greater than 30% of income (and none of the above problems)	23,115	72,645	51,270	5,540	152,570	17,690	43,150	70,475	27,030	158,345

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
Zero/negative Income (and none of the above problems)	23,66 0	0	0	0	23,66 0	11,28 5	0	0	0	11,28 5

Table 7 – Housing Problems Table

2. Housing Problems 2 (Households with one or more Severe Housing Problems: Lacks kitchen or complete plumbing, severe overcrowding, severe cost burden)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Having 1 or more of four housing problems	136,165	43,415	13,870	3,670	197,120	58,800	37,105	24,090	7,015	127,010
Having none of four housing problems	48,780	108,025	156,360	73,355	386,520	31,455	113,210	260,220	189,155	594,040
Household has negative income, but none of the other housing problems	23,660	0	0	0	23,660	11,285	0	0	0	11,285

Table 8 – Housing Problems 2

3. Cost Burden > 30%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
NUMBER OF HOUSEHOLDS								
Small Related	59,675	41,130	20,490	121,295	22,815	23,950	34,070	80,835
Large Related	11,975	7,820	2,975	22,770	5,080	6,710	7,595	19,385
Elderly	22,615	23,630	12,710	58,955	29,480	33,885	29,550	92,915
Other	62,665	40,170	21,835	124,670	17,955	13,595	17,960	49,510
Total need by income	156,930	112,750	58,010	327,690	75,330	78,140	89,175	242,645

Table 9 – Cost Burden > 30%

Data Source: 2011-2015 CHAS

4. Cost Burden > 50%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
NUMBER OF HOUSEHOLDS								
Small Related	51,550	11,375	740	63,665	18,555	10,815	6,140	35,510
Large Related	10,060	1,500	105	11,665	3,900	2,180	1,150	7,230
Elderly	16,105	9,160	2,600	27,865	19,860	13,445	6,720	40,025
Other	54,245	14,345	1,910	70,500	14,695	7,030	3,910	25,635
Total need by income	131,960	36,380	5,355	173,695	57,010	33,470	17,920	108,400

Table 10 – Cost Burden > 50%

Data Source: 2011-2015 CHAS

5. Crowding (More than one person per room)

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Single family households	7,255	4,840	4,800	1,555	18,450	1,600	2,125	3,620	1,910	9,255
Multiple, unrelated family households	755	520	1,020	335	2,630	415	540	1,180	660	2,795
Other, non-family households	535	260	435	340	1,570	50	35	40	35	160
Total need by income	8,545	5,620	6,255	2,230	22,650	2,065	2,700	4,840	2,605	12,210

Table 11 – Crowding Information – 1/2

Data Source: 2011-2015 CHAS

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
Households with Children Present	0	0	0	0	0	0	0	0

Table 12 – Crowding Information – 2/2

Data Source Comments:

Describe the number and type of single person households in need of housing assistance.

The number of single person households for the State of Indiana is 727,838. Of these single person households, 89,725 (or 12%) need housing assistance. This is based on the number of single person households living below the poverty level. In the next five years, the number of single person households in need of housing assistance is projected to grow to 92,106 households.

Estimate the number and type of families in need of housing assistance who are disabled or victims of domestic violence, dating violence, sexual assault and stalking.

Hosueholds with disabilities.

More than 678,645 households in Indiana's nonentitlement areas have a disability (hearing or vision impairment, ambulatory limitation, cognitive limitation or self-care or independent living limitation). An estimated 35 percent of households living with a disability have a housing need—equal to 238,724 households—based on the housing problems (CHAS) data provided by HUD. In the next five years, households with disabilities in need of housing assistance is projected to grow by 245,057 households.

Victims of domestic violence.

According to the Centers for Disease Control (CDC), 37 percent of women and 34 percent of men aged 18 or older have experienced contact sexual violence, physical violence, or stalking by an intimate partner in their lifetime. Annual incidence rates—meaning the proportion of people who have experienced contact sexual violence, physical violence, or stalking by an intimate partner in the previous year—are 5.5 percent for women and 5.2 percent for men.

Applying these rates to the State of Indiana's women and men over 18 indicates that 271,076 residents 18 and older are likely to have experienced some type of domestic violence, dating violence, sexual assault and/or stalking by an intimate partner in the previous year. National statistics show that 3.6 percent of women and 1.0 percent of men experiencing intimate partner violence need housing services. In the State of Indiana, these statistics suggest that 4,850 women and 1,280 men who are victims of domestic violence require housing services each year.

Although the supportive and housing services needed by intimate partner violence (IPV) victims vary, generally, all need health care and counseling immediately following the event and continued mental health support to assist with the traumatic stress disorder related to the event. Victims may also require assistance with substance abuse and mental health services, both of which are common among IPV victims.

Affordable housing is also critical: The National Alliance to End Homelessness argues that a "strong investment in housing is crucial [to victims of domestic violence] …so that the family or woman is able to leave the shelter system as quickly as possible without returning to the abuse." The Alliance also reports that studies on homelessness have shown a correlation between domestic violence and homelessness. (http://www.endhomelessness.org/pages/domestic_violence)

What are the most common housing problems?

Severe cost burden and severe housing problems, for extremely low income renter and owner households, are the most common housing problem in the State of Indiana.

HUD's CHAS data suggest that nearly 140,000 extremely low income rental householders experience one or more severe housing problems (65% of all low income rental households). Among extremely low income owner households, 58,800 (58%) have one or more severe housing problems.

Are any populations/household types more affected than others by these problems?

Yes. Those households who are most affected by housing problems, especially extreme cost burden, include:

- Extremely low income renters earning 0-30 percent AMI (123,995 households)—54 percent experience severe cost burden.
- Extremely low income homeowners earning 0-30 percent AMI (55,245 households)—46 percent experience severe cost burden.
- Both renter households and homeownership households are susceptible to living in overcrowded conditions. Crowding is particularly prevalent in single person households. 18,450 (or 81%) of single person, low income renters face crowding problems. Likewise,
- 9,255 single person homeowners (or 76%) experience overcrowding.

Describe the characteristics and needs of Low-income individuals and families with children (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered 91.205(c)/91.305(c)). Also discuss the needs of formerly homeless families and individuals who are receiving rapid re-housing assistance and are nearing the termination of that assistance

The 2019 Point in Time count conducted in January of 2019 showed an increase of individuals experiencing homelessness from 3,576 in 2018 to 3,904 in 2019. Of those individuals counted in 2019, 817 were under 18, 250 were 18-24, and 2837 were over 24. All age ranges saw an increase from one year to the next.

Households counted who included at least one adult and one child totaled 1,276 individuals or 423 households. Of those counted in this subcategory, 780 were female, 495 were male, 1 was transgender. Other demographics collected included ethnicity, race, and chronic homelessness. In the family category 1,173 were non-Hispanic/non-Latino and 103 were Hispanic/Latino; 771 were white, 414 were black or African American, 5 were Asian, 12 were American Indiana or Alaska Natives, 2 were Native Hawaiian or Other Pacific Islander, and 72 were multiple races. Although these demographics represent residents who are currently homeless, it is reasonable to assume that households at-risk of homelessness share similar characteristics. With the economic downtown related to the COVID-19 pandemic, the number of residents at-risk of homelessness has undoubtedly increased, although the magnitude is currently unknown. Workers in the most affected industries—service, food and beverage, retail, and tourism—are the most at risk of homelessness due to evictions, once eviction moratoriums end. Factors such as domestic violence situations, mental health or substance use disorders, past conviction or evictions, and lack of family support can all exacerbate challenges with an individual's ability to remain housed.

The Point in Time count is collected once per year but IHCDA also provides System Performance Measures (SPM) to HUD around the performance of the clients collected in the HMIS system. In the 2018 SPM submission, 87 percent of individuals counted were in emergency shelter and 38.7 percent of individuals in emergency shelter, safe havens, transitional housing, and other rapid rehousing successfully exited to permanent supportive housing in the 2018 calendar year. Of the 2049 who made the transition from emergency shelter to permanent supportive housing, 222 returned to homelessness less than 6 months (11%), 5 percent returned after 13-24 months, and 22 percent returned after more than 2 years.

The Balance of State Continuum of Care (CoC)works to prevent and end homelessness for families and all populations through a continuum approach. The CoC evaluates the vulnerability of individuals at risk of homelessness or experiencing homelessness through its Coordinated Entry assessment tool. This evaluation helps organizations understand what program with which to match up the individual or family. Rapid rehousing ESG funds allow for rental and utility assistance to avoid an individual/family from going into homelessness. To supplement this funding, IHCDA also administers TANF block grant dollars for families at risk of homelessness as well. If the individual or family is near the end of its RRH assistance, they are connected to other assistance including the possibility of CoC permanent supportive housing, diversion tactics, or CoC RRH dollars.

If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates:

IHCDA follows the operational definition provided by HUD for those who are an at-risk group.

For individuals and families that includes An individual or family who: (i) Has an annual income below 30% of median family income for the area; AND (ii) Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the "homeless" definition; AND (iii) Meets one of the following conditions: (A) Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR (B)Is living in the home of another because of economic hardship; OR (C) Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR (D) Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR (E) Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR (F) Is exiting a publicly funded institution or system of care; OR (G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved Con Plan.

Specify particular housing characteristics that have been linked with instability and an increased risk of homelessness

IHCDA follows HUD's guidance on what characteristics may link to instability or an increased risk of homelessness. Those factors tie to the above definition of "at risk" and can include lack of income and affordable housing, consistent change in housing or location, risk of eviction, living in a hotel/motel, overcrowding, existing public institutions or system of care, as well as those experiencing domestic violence, stalking, or fleeing a domestic violence situation.

Discussion

Please see above.

NA-15 Disproportionately Greater Need: Housing Problems - 91.305 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

A disproportionately greater need exists when the members of a racial or ethnic group at any income level experience housing problems at a greater rate (defined as 10 percentage points or more) than the income level as a whole or white households within the same income bracket. For example, assume that 60 percent of all low income households within a jurisdiction have a housing problem and 70 percent of low income Hispanic households have a housing problem. In this case, low income Hispanic households have a disproportionately greater need.

Per the regulations at 91.205(b)(2), 91.305(b)(2), and 91.405, a grantee must provide an assessment for each disproportionately greater need identified. Although the purpose of these tables is to analyze the relative level of need for each race and ethnic category, the data also provide information for the jurisdiction as a whole that can be useful in describing overall need.

Disproportionate housing needs in a population are defined as having one or more of the following four housing problems in greater proportion than the jurisdiction as a whole or than White households:
1) Living in housing that lacks complete kitchen facilities;
2) Living in housing that lacks complete plumbing facilities;
3) More than one person per room (overcrowded); and
4) Cost burden greater than 30 percent of Area Median Income (AMI).

This section discusses housing problems as defined by HUD, using HUD-prepared housing needs data. The tables show the number of Indiana nonentitlement households that have housing problems by income and race and ethnicity.

0%-30% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	235,726	39,549	35,079
White	159,031	29,489	21,751
Black / African American	49,078	7,113	8,216
Asian	4,612	289	2,499
American Indian, Alaska Native	841	145	121
Pacific Islander	37	25	40
Hispanic	17,833	1,728	1,991

*The four housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4.Cost Burden greater than 30%

30%-50% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	196,430	105,257	0
White	146,960	88,824	0
Black / African American	28,873	9,113	0
Asian	3,004	904	0
American Indian, Alaska Native	421	259	0
Pacific Islander	14	0	0
Hispanic	14,082	4,822	0

Table 14 - Disproportionally Greater Need 30 - 50% AMI
Data Source: 2011-2015 CHAS

*The four housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4.Cost Burden greater than 30%

50%-80% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	159,735	294,880	0
White	128,611	248,070	0
Black / African American	17,584	25,995	0
Asian	2,018	3,134	0
American Indian, Alaska Native	363	709	0
Pacific Islander	10	95	0
Hispanic	9,274	13,377	0

Table 15 - Disproportionally Greater Need 50 - 80% AMI
Data Source: 2011-2015 CHAS

*The four housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4.Cost Burden greater than 30%

80%-100% of Area Median Income

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	43,281	229,875	0
White	36,254	198,106	0
Black / African American	3,594	16,528	0
Asian	688	2,610	0
American Indian, Alaska Native	30	339	0
Pacific Islander	0	14	0
Hispanic	2,070	10,047	0

Table 16 - Disproportionally Greater Need 80 - 100% AMI

Data Source: 2011-2015 CHAS

*The four housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4.Cost Burden greater than 30%

Discussion

This section discusses the income categories in which a racial or ethnic group(s) has disproportionately greater need to housing problems.

All groups have relatively high rates of housing problems with a disproportionately high rate of need, particularly with households 30-50 percent AMI, relative to the jurisdiction as a whole.

0-30% AMI.

Eighty-six percent of all households earning 30 percent AMI or less have at least one of the four housing problems. Across all races and ethnicities, housing problems are very high with no single race or ethnicity disproportionately impacted by housing needs.

30-50% AMI.

- While lower compared to the 0-30 percent AMI income level, all households in this income groups still have relatively high rates of housing needs. In the jurisdiction overall, 65 percent of households have at least one housing problem. For households earning 30-50 percent of AMI, all

racial or ethnic groups, with the exception of American Indian, Alaska Native experience a disproportionate need than the jurisdiction overall and White populations.

- African Americans households have a disproportionate need of 14 percentage points higher than White households (11% jurisdiction overall).
- Asian households have a disproportionate need of 15 percentage points higher than
- White households (12% jurisdiction overall).
- Pacific Islander households have a disproportionate need of 38 percentage points higher than White households (35% jurisdiction overall). Note: There are less than 15 Pacific Islander households earning 30%-50% AMI.
- Hispanic have a disproportionate need of 12 percentage points higher than White households (9% jurisdiction overall).

50-80% AMI.

For households earning 50-80 percent of AMI, 35 percent (or 159,735) have at least one of the four housing problems with no disproportionate need among racial groups.

80-100% AMI.

For households earning 80-100 percent of AMI, 16 percent (or 43,281) have at least one of the four housing problems with no disproportionate need among racial groups.

NA-20 Disproportionately Greater Need: Severe Housing Problems – 91.305(b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

This section discusses severe housing needs as defined by HUD, using HUD-prepared housing needs data. The tables show the number of Indiana nonentitlement households that have severe housing problems by income and race and ethnicity.

0%-30% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	195,039	80,311	35,079
White	130,138	58,481	21,751
Black / African American	41,068	15,152	8,216
Asian	4,256	652	2,499
American Indian, Alaska Native	642	344	121
Pacific Islander	37	25	40
Hispanic	15,304	4,252	1,991

Table 17 – Severe Housing Problems 0 - 30% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4.Cost Burden over 50%

30%-50% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	80,705	221,006	0
White	60,159	175,660	0
Black / African American	11,353	26,642	0
Asian	1,578	2,338	0

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
American Indian, Alaska Native	103	576	0
Pacific Islander	10	4	0
Hispanic	5,938	12,954	0

Table 18 – Severe Housing Problems 30 - 50% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4.Cost Burden over 50%

50%-80% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	37,945	416,540	0
White	30,259	346,197	0
Black / African American	3,228	40,340	0
Asian	626	4,545	0
American Indian, Alaska Native	83	990	0
Pacific Islander	0	105	0
Hispanic	3,209	19,468	0

Table 19 – Severe Housing Problems 50 - 80% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4.Cost Burden over 50%

80%-100% of Area Median Income

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	10,687	262,487	0

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
White	8,430	225,950	0
Black / African American	834	19,312	0
Asian	305	2,999	0
American Indian, Alaska Native	10	359	0
Pacific Islander	0	14	0
Hispanic	1,009	11,113	0

Table 20 – Severe Housing Problems 80 - 100% AMI

Data Source: 2011-2015 CHAS

*The four severe housing problems are:
1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4.Cost Burden over 50%

Discussion

This section discusses the income categories in which a racial or ethnic group(s) has disproportionately greater need to severe housing problems.

Most households earning 0%-30% AMI are much more at risk of disproportionately higher rates of need than households with higher AMI.

0-30% AMI.

Seventy-one percent (or 195,039) of all households earning 30 percent AMI or less have at least one of the four severe housing problems. Across all races and ethnicities in this income bracket, housing problems are very high, with Asian households experiencing a disproportionate need of 18 percentage points than White households.

30-50% AMI.

Households earning 30-50% AMI are less likely to experience severe housing problems than households earning 0-30% AMI. However, 27 percent (or 80,705) households still have severe housing needs.

For households earning 30-50 percent of AMI:

- Asian households have a disproportionate need of 15 percentage points higher than White households (14% jurisdiction overall).

- Pacific Islander households have a disproportionate need of 46 percentage points higher than White households (45% jurisdiction overall). Note: There are 10 Pacific Islander households earning 30%-50% AMI.

50-80% AMI.

For households earning 50-80 percent of AMI, less than 10 percent have at least one of the four severe housing problems with no disproportionate need among racial groups.

80-100% AMI.

For households earning 80-100 percent of AMI, less than 5 percent have at least one of the four severe housing problems with no disproportionate need among racial groups.

NA-25 Disproportionately Greater Need: Housing Cost Burdens – 91.305 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

This section provides data on households with disproportionate levels of housing cost burden. Cost burden is experienced when a household pays more than 30 percent of their gross household income toward housing costs, including utilities. Severe cost burden occurs when housing costs are 50 percent or more of gross household income.

Housing Cost Burden

Housing Cost Burden	<=30%	30-50%	>50%	No / negative income (not computed)
Jurisdiction as a whole	1,817,430	357,003	290,630	36,606
White	1,590,495	280,403	207,807	22,513
Black / African American	113,926	45,876	52,519	8,671
Asian	24,999	4,599	5,518	2,624
American Indian, Alaska Native	2,983	887	775	151
Pacific Islander	286	28	37	40
Hispanic	67,784	20,481	18,795	2,166

Table 21 – Greater Need: Housing Cost Burdens AMI

Data Source: 2011-2015 CHAS

Discussion

The table above shows the level of housing cost burden by race/ethnicity of households. For the jurisdiction overall, 1,817,430 households pay less than 30 percent of their income in housing costs. 357,003 (or 15%) of households pay between 30-50 percent of their income in housing costs and are cost burdened, and 290,630 (or 12%) of households pay more than 50 percent and are severely cost burdened.

1 in 4 African American households (or 25%) experience severe cost burden and are disproportionately severely cost burdened at a rate of 13 percentage points than the jurisdiction as a whole.

NA-30 Disproportionately Greater Need: Discussion – 91.305 (b)(2)

Are there any Income categories in which a racial or ethnic group has disproportionately greater need than the needs of that income category as a whole?

Disproportionately greater housing cost burden occurs in all racial and ethnic households earning 30-50 percent AMI. However, 1 in 4 African American households (or 25%) experience severe cost burden and are disproportionately severely cost burdened at a rate of 13 percentage points than the jurisdiction as a whole. Additionally, Asian households earning 50 percent or less AMI experience higher rates of severe housing problems compared to the jurisdiction as whole.

If they have needs not identified above, what are those needs?

Indiana residents with special needs and with disabilities face the greatest challenges to finding housing that accommodates their unique needs and is affordable. The most affordable housing in the state's nonentitlement areas is often older and cannot be retrofitted to be accessible. Newly constructed multifamily and single family units are not affordable to residents on fixed incomes. In some communities, the only housing that accommodates residents with disabilities is housing in congregate settings, which leads to segregation of residents with disabilities. Persons recovering from substance abuse with criminal records may have trouble qualifying for rental housing because of their history.

Are any of those racial or ethnic groups located in specific areas or neighborhoods in your community?

Of the 590,000 Indiana residents who identified their race as African American as of the last Census (2010), 41 percent lived in Marion County and 22 percent lived in Lake County. That is, 63 percent of the State's African American population lived in just two of the State's 92 counties.

Comparatively, just 10 percent of the State's White residents live in Marion County and 6 percent live in Lake County. Twenty-two percent and 21 percent, respectively, of Hispanic residents live in Marion County and Lake County.

GIS analysis of racial dispersion shows that African Americans are more concentrated in just a handful of counties in the state, mostly those that contain larger urban areas. Hispanic residents tend to live in the State's most urbanized counties too—but also have higher-thanaverage populations in many rural counties.

NA-35 Public Housing – (Optional)

Introduction

This section provides an overview of the Housing Choice Voucher (HCV) program administered by the Indiana Housing and Community Development (IHCDA). IHCDA does not own and operate any public housing units. The data in the following tables were pre-populated by HUD and are based on reports filed by PHAs and data maintained by a public housing data center, in addition to data in IHCDA's annual report.

Totals in Use

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project - based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers in use	0	0	0	5,125	301	4,824	247	0	249

Table 22 - Public Housing by Program Type

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

Alternate Data Source Name:
IHCDA Annual Report 2018

Data Source Comments: Housing Pro, HUD PIC and the HUD Voucher Management System

Characteristics of Residents

	Program Type							
	Certificate	Mod-Rehab	Public Housing	Vouchers				
				Total	Project -based	Tenant -based	Special Purpose Voucher	
							Veterans Affairs Supportive Housing	Family Unification Program
# Homeless at admission	0	0	0	884	301	583	247	0
# of Elderly Program Participants (>62)	0	0	0	1,618	58	1,560	69	0
# of Disabled Families	0	0	0	3,146	242	2,904	158	0
# of Families requesting accessibility features	0	0	0	3,973	0	3,868	2	0
# of HIV/AIDS program participants	0	0	0	0	0	0	0	0
# of DV victims	0	0	0	0	0	0	0	0

Table 23 – Characteristics of Public Housing Residents by Program Type

Alternate Data Source Name:
PIC (PIH Information Center)
Data Source Comments:

Race of Residents

	Program Type								
Race	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project -based	Tenant -based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White	0	0	0	4,098	298	3,900	191	0	0
Black/African American	0	0	0	1,116	164	952	52	0	0

Program Type								
Race	Certificate	Mod-Rehab	Public Housing	Vouchers				
				Total	Project - based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Asian	0	0	0	9	2	7	0	0	0
American Indian/Alaska Native	0	0	0	46	3	43	2	0	2
Pacific Islander	0	0	0	10	0	10	9	0	0
Other	0	0	0	0	0	0	0	0	0
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Table 24 – Race of Public Housing Residents by Program Type

Alternate Data Source Name:
PIC (PIH Information Center)
Data Source Comments:

Ethnicity of Residents

Program Type								
Ethnicity	Certificate	Mod-Rehab	Public Housing	Vouchers				
				Total	Project - based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Hispanic	0	0	0	190	5	185	8	0	19
Not Hispanic	0	0	0	4,995	296	4,699	239	0	230
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Table 25 – Ethnicity of Public Housing Residents by Program Type

Alternate Data Source Name:
PIC (PIH Information Center)
Data Source Comments:

Section 504 Needs Assessment: Describe the needs of public housing tenants and applicants on the waiting list for accessible units:

The State of Indiana does not maintain any public housing.

What are the number and type of families on the waiting lists for public housing and section 8 tenant-based rental assistance? Based on the information above, and any other information available to the jurisdiction, what are the most immediate needs of residents of public housing and Housing Choice voucher holders?

Approximately 2,900 households are on IHCDA's wait list for Section 8 tenant based rental assistance. The most immediate need of residents on the waiting list for vouchers is finding rental units in rural and suburban Indiana.

How do these needs compare to the housing needs of the population at large

According to the stakeholders surveyed for this Consolidated Plan, and the rental gaps analysis to support the market analysis, lack of affordable for households earning less than 50 percent of AMI is a top need for all low income residents. However, housing needs have increased across the AMI spectrum, due to a variety of factors, such as limited and/or aging housing stock, more expensive construction costs, and a widening middle-income gap.

Discussion:

Please see above.

NA-40 Homeless Needs Assessment – 91.305(c)

Introduction:

This section summarizes the HUD 2019 Continuum of Care report that is based on point-in-time information provided to HUD by Continuums of Care (CoCs) as part of their CoC Program application process, per the Notice of Funding Availability (NOFA) for the Fiscal Year 2019 Continuum of Care Program Competition. CoCs are required to provide an unduplicated count of homeless persons according to HUD standards. HUD has conducted a limited data quality review but has not independently verified all of the information submitted by each CoC.

Homeless Needs Assessment

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)	24	1,252	0	0	0	0
Persons in Households with Only Children	0	13	0	0	0	0
Persons in Households with Only Adults	513	2,102	0	0	0	0
Chronically Homeless Individuals	0	241	0	0	0	0
Chronically Homeless Families	0	11	0	0	0	0
Veterans	309	40	0	0	0	0
Unaccompanied Child	175	52	0	0	0	0
Persons with HIV	7	22	0	0	0	0

Table 26 - Homeless Needs Assessment

Alternate Data Source Name:
2019 Point in Time Homeless Count

Indicate if the homeless population is: Partially Rural Homeless

Rural Homeless Needs Assessment

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)	6	47	0	0	0	0
Persons in Households with Only Children	0	13	0	0	0	0
Persons in Households with Only Adults	513	2,102	0	0	0	0
Chronically Homeless Individuals	0	273	0	0	0	0
Chronically Homeless Families	0	11	0	0	0	0
Veterans	262	36	0	0	0	0
Unaccompanied Youth	157	38	0	0	0	0
Persons with HIV	0	0	0	0	0	0

Table 27 - Homeless Needs Assessment

Alternate Data Source Name:
2019 Point in Time Homeless Count

OMB Control No: 2506-0117 (exp. 06/30/2018)

Estimate the # experiencing homelessness each year

4,367 annually with 269 returning in 0-6 mos., 192 6-12 mos., 250 13-24 mos. Overall return rate = 16% in 2 years

Estimate the # of days persons experience homelessness

Emergency Shelters and Transitional Housing = 40

For persons in rural areas who are homeless or at risk of homelessness, describe the nature and extent of unsheltered and sheltered homelessness with the jurisdiction:

Emergency shelters and services to assist persons experiencing homelessness or at risk of homelessness are lacking in the state's rural areas. Most must travel to the nearest city to receive help--which requires access to an automobile.

The lack of shelters and services disproportionately affects vulnerable populations, particularly homeless youth and persons experiencing substance abuse and mental health conditions. Stakeholders feel that most of these subpopulations will not receive proper care due to shelter, service, and transportation barriers.

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

These data are not available. Comparing the 2018 and 2019 PIT counts shows that the homeless population in the BOS rose in the past year, suggesting that the number of persons becoming homelessness increased--and the number exiting homelessness may have decreased. The increase was largest for households without children and for veterans.

Nature and Extent of Homelessness: (Optional)

Race:	Sheltered:	Unsheltered (optional)
White	2,235	410
Black or African American	868	108
Asian	14	1
American Indian or Alaska Native	28	11
Pacific Islander	10	3
Ethnicity:	**Sheltered:**	**Unsheltered (optional)**
Hispanic	181	18
Not Hispanic	3,186	519

Alternate Data Source Name:
2019 Point in Time Homeless Count
Data Source Comments:

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

The PIT count gives a lower-bound estimate of the number and types of families in need of assistance. The count identifies families who are unsheltered and who are sheltered in emergency shelters or transitional housing. While all have acute needs, those in transitional housing have temporary housing and generally fewer short term needs.

As of the 2019 count:

1) Households with at least one adult and child totaled 423—6 unsheltered, 277 in emergency housing, 140 in transitional housing.
 2) Unaccompanied youth totaled 192— 36unsheltered, 132 in emergency housing, 24in transitional housing.
 3) Parenting youth households totaled 35, with most, 26, living in emergency shelters and 7 in transitional housing.
 4) Veterans in family settings totaled 12 with 11 living in emergency shelters.

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

Residents of Hispanic descent represent a small proportion of those experiencing homelessness at 4 percent of households without children, 9 percent of those with children, 8 percent of unaccompanied youth, 8 percent of parenting youth, and 3 percent of homeless veterans.

The most common race and ethnicity is Non-Hispanic White, representing 75 percent of households without children, 60 percent of those with children, 70 percent of unaccompanied youth, 65 percent of parenting youth, and 76 percent of homeless veterans.

African Americans represent between 20 and 25 percent of homeless household categories.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

Overall, 17 percent of the 2,990 households identified as experiencing homelessness in the BOS count are unsheltered. Households that are more likely to be unsheltered than all homeless include unaccompanied youth (19% unsheltered) and households without children (also 19%).

It is important to note that the PIT count does not identify households who are doubled up, precariously housed, or in domestic violence or other unsafe situations. The actual number of vulnerable households, therefore, is must higher than the PIT count suggests.

Discussion:

Please see above.

NA-45 Non-Homeless Special Needs Assessment – 91.305 (b,d)

Introduction

This section discusses the needs of non-homeless special needs populations in Indiana. For the purposes of this report, these include:

- Elderly (defined as 62 or older): 1,235,406 residents;
- Frail elderly (defined as an elderly person who requires assistance with three or more activities of daily living, such as bathing, walking, and performing light housework): 89,802 residents;
- Persons with mental, physical, and/or developmental disabilities: 899,701 residents;
- Persons with alcohol or other drug abuse challenges: 112,405 residents;
- Domestic violence victims/survivors: 84,169 residents; and
- Persons living with HIV/AIDS: 5,400 with HIV and 5,400 with AIDS statewide with an estimated 500 in nonentitlement areas.

HOPWA

Current HOPWA formula use:	
Cumulative cases of AIDS reported	5,671
Area incidence of AIDS	0
Rate per population	0
Number of new cases prior year (3 years of data)	0
Rate per population (3 years of data)	0
Current HIV surveillance data:	
Number of Persons living with HIV (PLWH)	5,494
Area Prevalence (PLWH per population)	0
Number of new HIV cases reported last year	0

Table 28 – HOPWA Data

Data Source Comments:

HIV Housing Need (HOPWA Grantees Only)

Type of HOPWA Assistance	Estimates of Unmet Need
Tenant based rental assistance	1,022
Short-term Rent, Mortgage, and Utility	400
Facility Based Housing (Permanent, short-term or transitional)	0

Table 29 – HIV Housing Need

Alternate Data Source Name:
HOPWA CAPER and HOPWA Beneficiary Verification

Data Source Comments: Estimates for HIV Tenant Based Rental Assistance are based on the prevalence of survey respondents living in a precarious housing situation reported in the 2019 Needs Assessment for People Living with HIV in Indiana by the State of Indiana Department of Health.

Describe the characteristics of special needs populations in your community:

Many people with special needs have limited income and likely to be receiving social security disability payments. Those with mobility or physical disabilities have a need for accessibility modifications to housing and access to reliable, affordable public transportation. Persons with a substance dependence such as alcohol or other drug addictions, are more likely to need affordable housing and supportive services.

Similar to most other states in the United States, there is a large, growing population of elderly among the State of Indiana, with 1,235,406 elderly persons. Of these, nearly 90,000 are considered frail elderly (defined as elderly persons who requires assistance with three or more activities of daily living, such as bathing, walking and performing light housework). Frail elderly are more likely to need daily self-care support.

Additional special needs populations include:

- Approximately 360,000 residents 18 years or older have a substance dependence addiction;
- 500 residents are living with HIV/AIDS.
- 900,000 residents are persons with a mental, physical and/or developmental disability.
- 270,000 residents are victims of domestic violence (such as rape, physical violence and/or stalking by an intimate partner).
- 5,471 persons identified as homeless and living in shelters in 2019.

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

As Indiana's population ages, more and more households need accessibility modifications to their homes, ranging from ramps and widening doors to installation of grab bars, raised toilets and roll-in showers.

These are improvements that many low income seniors cannot afford to make. Many of these homeowners also need assistance with yard work and exterior home maintenance. In addition, many seniors have high costs of medications and other home care needs which strains already limited incomes for housing and costs of daily living.

According to stakeholder feedback, for nonprofit developers, a focus on social determinants to health, particularly with special needs populations, such as hiring a community navigator or developing near a health clinic, are becoming more top-of-mind.

The primary housing needs of persons with disabilities is access to affordable, accessible housing. This can include modifications to existing structures—especially for aging homeowners who have recently become disabled—or rental subsidies to help persons with a disability living on fixed incomes to find affordable rental options. It is also important to provide opportunities for persons with disabilities to transition from institutions back into the community. In addition to housing opportunities, persons with disabilities my need additional supportive services such as community-based health supports and access to transportation.

Although the supportive and housing services needed by IPV victims vary, generally, all need health care and counseling immediately following the event and continued mental health support to assist with the traumatic stress disorder related to the event. Victims may also require assistance with substance abuse and mental health services, both of which are common among IPV victims. Affordable housing is also critical: the National Alliance to End Homelessness argues that a "strong investment in housing is crucial [to victims of domestic violence]…so that the family or woman is able to leave the shelter system as quickly as possible without returning to the abuse." The Alliance also reports that studies on homelessness have shown a correlation between domestic violence and homelessness.

Domestic violence can have lasting health effects. The 2010 CDC survey found that IPV victims were more likely to report frequent headaches, chronic pain, difficulty sleeping, activity limitation, poor physical health and poor mental health, at rates higher than those who did not experience IPV violence. The long-term health costs of IPV is unclear, because it is difficult to separate out health care problems that are directly related to IPV. It is likely, though, that the negative impacts of IPV are felt throughout the broader community in health care costs, missed time at work and school and lasting psychological effects on children and victims.

For low income persons with HIV/AIDS, the challenge of finding affordable housing is increased by their need of medical attention and special HIV/AIDS treatment and housing is the key component to their stability and staying permanently housed. Similar to the homeless population, rental assistance can provide housing and services on where they are now in terms of all their needs. Services provided by a Care Coordination Program is one way to provide all services that a person may need during the time of diagnosis, treatment, services and housing options.

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

Indiana consistently has an estimated 10,000 residents living with HIV/AIDS, with about 55 percent the living cases have had an AIDS diagnosis. The largest proportion of cases continues to be white males over the age of 40, and African Americans are still more disproportionately affected by the disease than any other demographic group.

Geographically, areas such Lake, Porter and LaPorte counties in the northwestern part of the state have the highest rates of HIV/AIDS.

Indiana's various instruments to assess the needs of people with HIV have yielded results which affirm the importance of the six core service areas originally defined by HRSA. In addition to Outpatient and Ambulatory Health Services, AIDS Drug Assistance Program Treatments, Oral Health Care, Medical Case Management, Mental Health Services, and Substance Abuse Outpatient Care, the Division has added Emergency Financial Assistance, Housing, and Medical Transportation to describe its priority service needs.

Of those living with HIV, the Indiana State Department of Health has estimated that 33 percent are not currently in care. The current continuum of care is designed to address this population by minimizing barriers and optimizing access to HIV-related medical and social services. The resources of the State's Ryan White Program grantees and other providers have been coordinated to impact each of the priority service needs in an effective and efficient manner.

Discussion:

Please see above.

NA-50 Non-Housing Community Development Needs - 91.315 (f)

Describe the jurisdiction's need for Public Facilities:

Stakeholders consulted for the Consolidated Plan ranked the need for public facilities in nonentitlement areas in the state as moderate. This was prior to the COVID-19 outbreak, however; the need for public facilities--e.g., to provide emergency health care--has likely increased.

Thirty-six stakeholders provided perspective on the state's current public facilities program; of these, 20 stakeholders (56%) had experience with this program. An increase in overall funding and recommendations to simplify the process, including a revamp of the scoring criteria, was suggested to achieve greater programmatic impact.

Public facilities needs and recommendations for program improvements according to stakeholders include:

"Increasing the overall pool of funds. Only being able to fund 2 to 3 per round leads to an almost ridiculous level of competitiveness."

"Grant award amounts need to be increased to $600,000."

"Guidelines are extremely rigid."

"Transfer funds from infrastructure grants to public facilities projects."

"Changes to the scoring system is needed."

"I'm constantly asked if the program includes renovation or restoration of local town halls and police stations. This would be a huge benefit to be able to assist communities with these needs."

How were these needs determined?

Stakeholder consultation through interviews and a survey

Describe the jurisdiction's need for Public Improvements:

Public improvements are the highest ranked community development needs by stakeholders. Half of stakeholders surveyed for the Consolidated Plan identified the need for broadband infrastructure; 40 percent said public transit is needed; 37 percent said water and sewer infrastructure is needed; and 36 percent cited sidewalk improvements as most needed in their communities.

How were these needs determined?

Stakeholder consultation through interviews and a survey

Describe the jurisdiction's need for Public Services:

The primary *community development* public services identified by stakeholders as needed by units of local government include: Building local capacity; grant application awareness and assistance; integrated data sharing; and investments that have strong economic impacts. For residents, job training, financial literacy, and direct financial assistance to support self-sufficiency are needed.

From a *housing perspective*, public services that are most needed include: 1) Supporting social worker capacity to work with persons experiencing homelessness and persons with mental health and substance abuse challenges; 2) Addressing the housing and health care link.

How were these needs determined?

Stakeholder consultation through interviews and a survey

Housing Market Analysis

MA-05 Overview

Housing Market Analysis Overview:

The housing market in Indiana was analyzed using updated American Community Survey (ACS) data from 2018; employment data from the Quarterly Workforce Indicators dataset; new data from the Federal Housing Finance Agency on land valuation; and contributions from stakeholder consultation. Primary findings include:

Needs of Renters

- The percentage of renters who are cost burdened by county ranges from a high of 55 percent in Monroe County to a low of 20 percent in Switzerland County. Burden exists in many areas of the state and there are no clear patterns of concentrations.
- In most counties in the state, the median wage earner can manage the median rent. Exceptions are Hendricks, Brown, Union, Ohio, and Switzerland Counties.
- Even so, extremely low income renters lack affordable housing. Renters earning less than $25,000 per year—renters living below the poverty line—struggle to find units they can afford. Overall in Indiana, there are 23,000 extremely low income renters who cannot afford their rent.

Needs of Owners

- There are nearly 18,000 extremely low income owners in Indiana who are cost burdened.
- The rate of cost burden for owners is much lower than for renters: the county with the highest rate of cost burden is Ohio, where 20 percent of owners face cost burden. The lowest is in Pike at 8 percent. Cost burden varies less by county for owners than for renters.
- In Hamilton, Boone, Brown, Hendricks, Franklin, and Ohio counties, the median home value exceeds what the median-wage earner household could afford.
- Between 2012 and 2018, the value of single family residential land increased by more than 25 percent in Hamilton, Hancock, and Tippecanoe counties. Delaware, Howard, and Steuben counties saw large declines (22% to 25%).

Housing stock

- Indiana's housing stock is dominated by single family detached homes, which make up 73 percent of the state's housing stock.
- Housing units are generally large, with 72 percent of rental units and nearly all owneroccupied units—98 percent—having 2 or more bedrooms.

- Indiana's housing stock is older, with 999,414 owner-occupied and 477,267 renteroccupied housing units built before 1980, having children, and, as such, are vulnerable to of lead-based paint hazards.

MA-10 Number of Housing Units – 91.310(a)

Introduction

This section of the Consolidated Plan provides an overview of the type of housing units in Indiana. Data is gathered from two main sources: ACS 2018 5-Year, that is inclusive of the entire State and HUD CHAS data from 2011-2015, which is specific to nonentitlement communities.

All residential properties by number of units

Property Type	Number	%
1-unit detached structure	2,087,452	73%
1-unit, attached structure	107,460	4%
2-4 units	173,455	6%
5-19 units	237,234	8%
20 or more units	125,085	4%
Mobile Home, boat, RV, van, etc	139,984	5%
Total	*2,870,670*	*100%*

Table 30 – Residential Properties by Unit Number

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Unit Size by Tenure

	Owners		Renters	
	Number	**%**	**Number**	**%**
No bedroom	5,473	0%	55,859	7%
1 bedroom	56,165	4%	378,313	48%
2 bedrooms	635,057	36%	628,837	80%
3 or more bedrooms	2,790,375	160%	505,676	64%
Total	*3,487,070*	*200%*	*1,568,685*	*199%*

Table 31 – Unit Size by Tenure

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Describe the number and targeting (income level/type of family served) of units assisted with federal, state, and local programs.

According to HUD's Multifamily Assistance and Section 8 Contracts database, there are approximately 12,000 units assisted with federal, state, and/or local programs located in nonentitlement areas. Of these, 72 percent are 1 bedroom units; 21 percent are 2 bedroom units; 5 percent are 3 bedroom units; and 2 percent are studios.

By targeted income level, one-fifth rent at between 80 and 100 percent of the Fair Market Rent (FMR), indicating they attainable for Housing Choice Voucher holders. Most units rent between 100 and 120 percent FMR. About one-third of the units are targeted to seniors and persons with disabilities.

Provide an assessment of units expected to be lost from the affordable housing inventory for any reason, such as expiration of Section 8 contracts.

The Multifamily Assistance and Section 8 Contracts database identifies an estimated 2,800 units with contracts that expire in the next five years. Those units represent almost one-quarter of all units in the database. These units are a mix of assisted units for elderly, persons with disabilities, and voucher holders and are located throughout the state.

The State anticipates an additional 262 units being released from the Low Income Housing Tax Credit Program in 2020.

About three-quarters are owned by nonprofit entities, who are likely to keep those units affordable.

Does the availability of housing units meet the needs of the population?

No. A rental gaps model that compares the supply of rental housing to what renter households at various incomes can afford estimates a shortage of 143,000 affordable rental units for households earning less than $20,000 per year. Thirty-one percent of Indiana's renters earn less than $25,000 per year; just 12 percent of the state's rental units are affordable for them. Most of the state's rental units— 65 percent—are priced between $625 and $1,250—affordable to very low and low income households, but not to those living at the poverty level (< $25,000 households).

Home values in the majority of the state's counties are relatively affordable. However, many homes are older and have improvement needs, and weak rural economies fail to attract residential investors.

In sum, the state is lacking deeply affordable rentals and homes to buy for workforce.

Describe the need for specific types of housing:

The types of housing most needed in Indiana, based on the data analysis and stakeholder engagement conducted for this plan include the following. It is likely that these needs could worsen in the short term as national and local economies fully realize the effects of the COVID-19 crisis.

1) Affordable rentals for extremely low income and very low income households, especially those with mental health and substance absuse challenges, and accessible/affordable/integrated housing for persons with disabilities.

2) Homeownership opportunities for low income and moderate income households.

3) Home improvements for existing housing stock--as both a housing preservation and economic development policy.

4) Subsidies to support new development of housing and expanded capacity of affordable housing developers in nonentitlement areas; it is becoming more difficult for nonprofit developers to build new and rehab existing housing stock, due to the growing construction costs.

Discussion

Please see above.

MA-15 Cost of Housing – 91.310(a)

Introduction

This section of the Consolidated Plan provides an overview of the cost of housing in Indiana. Data is gathered from two main sources: ACS 2018 5-Year, that is inclusive of the entire State and HUD CHAS data from 2011-2015, which is specific to nonentitlement communities.

Cost of Housing

	Base Year: 2012	Most Recent Year: 2018	% Change
Median Home Value	123,400	135,400	10%
Median Contract Rent	568	634	12%

Table 32 – Cost of Housing

Alternate Data Source Name:
2012 5-Year ACS
Data Source Comments:

Rent Paid	Number	%
Less than $500	276,671	35.7%
$500-999	438,140	56.5%
$1,000-1,499	45,667	5.9%
$1,500-1,999	8,574	1.1%
$2,000 or more	6,547	0.8%
Total	*775,599*	*100.0%*

Table 33 - Rent Paid

Data Source: 2011-2015 ACS

Housing Affordability

% Units affordable to Households earning	Renter	Owner
30% HAMFI	60,205	No Data
50% HAMFI	253,415	185,555
80% HAMFI	550,520	488,240
100% HAMFI	No Data	698,345
Total	*864,140*	*1,372,140*

Table 34 – Housing Affordability

Data Source: 2011-2015 CHAS

Monthly Rent

Monthly Rent ($)	Efficiency (no bedroom)	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
Fair Market Rent	0	0	0	0	0
High HOME Rent	0	0	0	0	0
Low HOME Rent	0	0	0	0	0

Table 35 – Monthly Rent

Data Source Comments:

Is there sufficient housing for households at all income levels?

No, in nonentitlement areas of the State subsidized rental housing is limited, particularly for those earning less than 30 percent AMI. As demonstrated by Table 31 above, there are very few units available for extremely low income households, and this inventory has declined by more than 50 percent since the last plan.

There are also unmet needs for housing rehabilitation and accessibility improvements, emergency shelters and transitional housing for persons experiencing homelessness, and flexibility in housing and services to address the growing needs of persons who are challenged by substance abuse.

How is affordability of housing likely to change considering changes to home values and/or rents?

Except for Hamilton County, price increases have been relatively modest, even with population growth. Overall in Indiana, the housing supply appears to be accommodating demand. The exception is rental housing for extremely low income households, which the private market cannot provide and for which public subsidies are increasingly limited. Public subsidies are failing to keep up with increases in the costs to develop rental housing, primarily due to rising labor and material costs.

How do HOME rents / Fair Market Rent compare to Area Median Rent? How might this impact your strategy to produce or preserve affordable housing?

N/A at the state level

Discussion

Please see above.

MA-20 Condition of Housing – 91.310(a)

Introduction:

This section summarizes condition indicators that are available from the U.S. Census and from HUD. The data are supplemented by stakeholder consultation on housing condition in rural communities, gathered through the stakeholder survey and interviews.

Definitions

IHCDA does not include a definition of substandard condition (suitable or unsuitable for rehabilitation) in its applications for rehabilitation. Instead, IHCDA relies on the assessment of organizations administering its programs to evaluate the condition needs of housing units. For IHCDA's OOR program, IHCDA requires that recipients follow a Rehabilitation Priority List; this List is a guide to assist in the development of the scope of work. IHCDA identifies several priorities:

1. Health and Safety: lead based paint hazards, moisture instruction, electrical hazards, urgent aging in place modifications etc.

2. Structural: foundation issues. Roof issues, interior walls etc.

3. Aging in Place: additional accessibility issues.

4. Energy: HVAC improvements, insulation and air sealing measures.

Any major household system repaired or replaced as part of the rehabilitation process must meet the stricter of the Indiana State Building Code or local building codes.

Condition of Units

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	**%**	**Number**	**%**
With one selected Condition	290,869	17%	332,800	42%
With two selected Conditions	6,006	0%	18,270	2%
With three selected Conditions	1,220	0%	620	0%
With four selected Conditions	202	0%	25	0%
No selected Conditions	1,462,435	83%	441,371	56%
Total	*1,760,732*	*100%*	*793,086*	*100%*

Table 36 - Condition of Units

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Year Unit Built

Year Unit Built	Owner-Occupied		Renter-Occupied	
	Number	**%**	**Number**	**%**
2000 or later	317,543	18%	106,978	13%
1980-1999	443,775	25%	208,841	26%
1950-1979	621,517	35%	301,222	38%
Before 1950	377,897	21%	176,045	22%
Total	*1,760,732*	*99%*	*793,086*	*99%*

Table 37 – Year Unit Built

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Risk of Lead-Based Paint Hazard

Risk of Lead-Based Paint Hazard	Owner-Occupied		Renter-Occupied	
	Number	**%**	**Number**	**%**
Total Number of Units Built Before 1980	999,414	57%	477,267	60%
Housing Units build before 1980 with children present	176,405	10%	122,975	16%

Table 38 – Risk of Lead-Based Paint

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Vacant Units

	Suitable for Rehabilitation	Not Suitable for Rehabilitation	Total
Vacant Units	0	0	0
Abandoned Vacant Units	0	0	0
REO Properties	0	0	0
Abandoned REO Properties	0	0	0

Table 39 - Vacant Units

Data Source: 2005-2009 CHAS

Need for Owner and Rental Rehabilitation

The need for owner and rental rehabilitation was collected through stakeholder interviews and surveys, as data measuring rehabilitation needs are not readily available through secondary sources such as the U.S. Census. Stakeholders described the need for owner and rental rehabilitation largely from an economic development perspective: housing in many of the state's nonentitlement areas is aging and these areas lack incentives to invest in improvements due to low property values and lack of growth. In some of the state's counties, housing built before 1940 makes up between one-quarter and one-third of

the county's housing stock. In Indiana overall, more than 500,000 homes were built before 1950. If just 10 percent of those have significant needs for rehabilitation--likely a lower bound estimate--than at least 50,000 housing units could need rehabilitation.

Estimated Number of Housing Units Occupied by Low or Moderate Income Families with LBP Hazards

As shown in the table above, 999,414 owner-occupied and 477,267 renter-occupied housing units in Indiana were built before 1980 and have children present. These households have the greatest risk—and potentially the greatest need for mitigation—of lead-based paint hazards.

Discussion:

The vacant unit table above does not allow data entry. The State of Indiana does not track the number of vacant units by suitability for rehabilitation or if they have been abandoned, nor does the state maintain a list of REO properties (or abandoned REO properties). As the HUD IDIS Desk Guide notes, local data are the only source of data for this table, and the state does not require jurisdictions to assemble and report that data.

The American Community Survey (ACS) reports the total number of vacant units statewide. As of the 2018 ACS, there were 304,000 vacant residential units in Indiana, for a statewide vacancy rate of 10.5 percent. By tenure, the homeowner vacancy rate was an extraordinarily low 1.3 percent; the rental vacancy rate was 6.6 percent.

MA-25 Public and Assisted Housing – (Optional)

Introduction:

This section provides additional information about the Housing Choice Voucher (HCV) program administered by the Indiana Housing and Finance Authority (IHCDA). IHCDA does not own and operate any public housing units.

Totals Number of Units

	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project-based	Tenant-based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers available	0	0	0	5,125	301	4,824	247	0	249
# of accessible units			0						
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Table 40 – Total Number of Units by Program Type

Alternate Data Source Name:
IHCDA Annual Report 2018
Data Source Comments:

Describe the supply of public housing developments:

Describe the number and physical condition of public housing units in the jurisdiction, including those that are participating in an approved Public Housing Agency Plan:

N/A. The State of Indiana does not own or operate any PHA developments.

Describe the Restoration and Revitalization Needs of public housing units in the jurisdiction:

N/A. The State of Indiana does not own or operate any PHA developments.

Describe the public housing agency's strategy for improving the living environment of low- and moderate-income families residing in public housing:

N/A. The State of Indiana does not own or operate any PHA developments.

Discussion:

N/A. The State of Indiana does not own or operate any PHA developments.

OMB Control No: 2506-0117 (exp. 06/30/2018)

MA-30 Homeless Facilities – 91.310(b)

Introduction

Facilities and services available to the persons experiencing homeless are difficult to quantify at the State level. Many stakeholders responding to the survey conducted for the Consolidated Plan listed housing and services to serve homeless as a top priority. Recently, State agencies collaborated to develop a crosswalk of services needed in supportive housing for the State's Medicaid Rehab Option (MRO) plan. The crosswalk identified the gaps between permanent supportive housing services covered by MRO and the services not covered. The State is currently evaluating how various block grant funding sources can be targeted to address the identified gaps.

IHCDA does collect information annually in its Housing Inventory Chart as part of the Point in Time County Process. This chart communicates the number and type of beds available to those experiencing homelessness in that year.

Facilities Targeted to Homeless Persons

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)	1,886	702	767	1,270	0
Households with Only Adults	2,302	0	839	2,487	0
Chronically Homeless Households	0	0	0	1,190	0
Veterans	84	0	334	1,233	0
Unaccompanied Youth	74	0	28	9	0

Table 41 - Facilities Targeted to Homeless Persons

Alternate Data Source Name:
2019 Point in Time Homeless Count
Data Source Comments:

Describe mainstream services, such as health, mental health, and employment services to the extent those services are use to complement services targeted to homeless persons

IHCDA partners with BoS CoC to connect individuals experiencing homelessness to these types of services. As there is a strong partnership with the ESG/HOPWA sub-recipients, mentioned above, these services are then shared with ESG and HOPWA sub-recipients. Overall, each region in the CoC works to bring these partners together in their given service area. The CoC BoS board is currently going through a board member recruitment process to continue to strengthen relationships such as these at a higher, more decision-making level. Now, many of these services are represented through board members on the BoS CoC board and through partnerships formed by IHCDA or the CoC. IHCDA sub-recipients themselves are often mental health and health care providers who administer CoC and/or ESG funds. Moreover, IHCDA has a strong relationship with several state agencies and/or statewide associations. Those include, but are not limited to, the Division of Mental Health through the Family and Social Services Agency who oversee the local Community Mental Health Agencies, the Department of Workforce Development and their Work One employment centers, the Indiana Commission for Higher Education (ICHE) and their options for school scholarships, and the Indiana Primary Health Care Association who train all Federally Qualified Healthcare Centers.

List and describe services and facilities that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. If the services and facilities are listed on screen SP-40 Institutional Delivery Structure or screen MA-35 Special Needs Facilities and Services, describe how these facilities and services specifically address the needs of these populations.

MA-35 Special Needs Facilities and Services – 91.310(c)

Introduction

This section summarizes the facilities and services available to meet the needs of certain special needs residents.

HOPWA Assistance Baseline Table

Type of HOWA Assistance	Number of Units Designated or Available for People with HIV/AIDS and their families
TBRA	130
PH in facilities	27
STRMU	222
ST or TH facilities	0
PH placement	40

Table 42 – HOPWA Assistance Baseline

Alternate Data Source Name:
HOPWA CAPER and HOPWA Beneficiary Verification

Data Source Comments:

To the extent information is available, describe the facilities and services that assist persons who are not homeless but who require supportive housing, and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

HIV Care Coordination is a specialized form of HIV case management. Its mission is to assist those living with HIV disease with the coordination of a wide variety of health and social services. Case Management services are available statewide at sixteen regional sites.

Care Coordination provides an individualized plan of care that includes medical, psychosocial, financial, and other supportive services, as needed. The primary goals of the program are to ensure the continuity of care, to promote self- sufficiency, and to enhance the quality of life for individuals living with HIV. The Care Coordinators are trained professionals who can offer assistance in the following areas:

- Access to health insurance to obtain medications. This includes Medicaid, Medicare, Early Intervention Plan (EIP), AIDS Drug Assistance Plan (ADAP), Health Insurance Assistance Plan (HIAP), Indiana Comprehensive Health Insurance Association (ICHIA), Wishard Advantage, and the Ryan White Program (Parts A & C) offered through the Marion County Health Department, etc.
- Access to housing programs such as Section 8, Housing Opportunities for Persons with AIDS (HOPWA), Continuum of Care and ESG funds, etc.

- Access to emergency funds, such as Direct Emergency Financial Assistance (DEFA) to assist with rent, utilities, medications, etc.
- Access to mental health and substance abuse programs
- Referrals for optical and dental care
- Referrals to community and government programs, such as Social Security
- Referrals to local food pantries
- Referrals to support groups
- Referrals to legal assistance
- Assistance with medication management
- Assistance with transportation (e.g., bus passes)
- Access to HIV testing and prevention counseling services
- Access to HIV prevention and education services

Many of the HOPWA subrecipients also have permanent supportive housing programs that they can offer to a HIV/AIDS person if they become chronically homeless. If the HOPWA subrecipients do not have the program, within their area, there are other permanent supportive housing programs for this population.

Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

IHCDA works consistently to improve the awareness of programs and how individuals might access the Coordinated Entry system to receive appropriate supportive housing. IHCDA currently funds several Community Mental Health centers which help directly connect individuals moving out of mental institutions. IHCDA also has a partnership with CSH to conduct a Medicaid Crosswalk. This will inform how the agency might further connect their housing funds to supportive services across other agencies. Finally, the Community Services Director at IHCDA attends a monthly Recovery Housing Support Group to cross collaborate between NAMI, the Indiana Family Social Services Agency (FSSA), the Department of Workforce Development (DWD) on addressing unmet needs for those experiencing substance abuse disorder. New partnerships are currently being formed with the state wide primary care network and their connections to FQHC to educate providers on how to connect individuals with services. Additionally the CoC board is working through a recruitment process for new board members who can improve these connections. IHCDA is recruiting individuals who have experience with homeless healthcare, transitions out of institutions, and other supportive service needs.

Services include: 1) enrollment in Medicaid, Food Stamps, TANF, & SSI; 2) issuance of birth certificates and BMV identification; 3) participation in workforce development programs; 4) limited rental assistance; and 5) referral to other community services. There are still people leaving corrections without stable housing. IDOC is linking their data system with the CoC Assessment–Access system and HMIS to link people to appropriate services and housing.

In some regions, faith based groups have joined up with an IDOC in reach program to mentor people while in jail and prison and continue to do so upon release, to help people use a social support network to find housing, employment and support.

Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. 91.315(e)

During PY2020, ESG dollars are linked to rapid rehousing, outreach, and shelter operational dollars to prevent homelessness. HOPWA will be allocated to TBRA, rental/utilities/mortgage assistance and housing information services to support persons
living with HIV/AIDS who are not homeless but who need housing support.

In competitive funding programs, organizations that propose activities to help seniors age in place and/or assist persons with disabilities with housing needs will have scoring preferences for HOME awards.

For entitlement/consortia grantees: Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. (91.220(2))

N/A

MA-40 Barriers to Affordable Housing – 91.310(d)

Negative Effects of Public Policies on Affordable Housing and Residential Investment

Stakeholders, residents and public housing authorities were asked about barriers to housing choice in the surveys and interviews they completed for this Consolidated Plan. These surveys will also be an important part of the AI. The most mentioned barriers identified included:

- Cost of housing,
- Lack of rental units affordable to households earning less than 30 percent of AMI (rental units with rents below $500/month),
- Lack of fair housing knowledge among small landlords,
- Barriers related to criminal history and substance abuse backgrounds of renters, and
- Limited fair housing resources and trainings in rural areas.

The Fair Housing Council of Central Indiana (FHCCI) was interviewed about barriers access affordable housing and residential investment. Public policies that FHCCI highlighted which could mitigate fair housing barriers include:

- Better regulation and monitoring of predatory lending products that are disproportionately targeted to persons of color;
- Resources at the state level to better monitor potential discrimination in real estate sales (e.g., steering);
- Discrimination towards Housing Choice Voucher holders that could have a disproportionate impact on persons of color and persons with disabilities.

MA-45 Non-Housing Community Development Assets -91.315(f)

Introduction

This section summarizes economic development and employment indicators and needs in Indiana.

Economic Development Market Analysis

Business Activity

Business by Sector	Number of Workers	Number of Jobs	Share of Workers %	Share of Jobs %	Jobs less workers %
Agriculture, Mining, Oil & Gas Extraction	41,216	15,749	1	2	1
Arts, Entertainment, Accommodations	278,310	113,490	9	11	2
Construction	187,588	59,535	6	6	0
Education and Health Care Services	725,412	144,507	23	14	-9
Finance, Insurance, and Real Estate	165,025	35,893	5	4	-1
Information	48,899	9,060	2	1	-1
Manufacturing	600,516	314,095	19	31	12
Other Services	145,709	33,259	5	3	-2
Professional, Scientific, Management Services	263,974	40,420	8	4	-4
Public Administration	107,120	0	3	0	-3
Retail Trade	351,072	139,950	11	14	3
Transportation and Warehousing	168,767	55,232	5	5	0
Wholesale Trade	80,806	51,194	3	5	2
Total	3,164,414	1,012,384	--	--	--

Table 43- Business Activity

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Labor Force

Total Population in the Civilian Labor Force	3,345,383
Civilian Employed Population 16 years and over	3,164,414
Unemployment Rate	5.40
Unemployment Rate for Ages 16-24	11.60
Unemployment Rate for Ages 25-65	4.40

Table 44 - Labor Force

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Occupations by Sector	Number of People
Management, business and financial	1,066,465
Farming, fisheries and forestry occupations	13,666
Service	523,048
Sales and office	671,079
Construction, extraction, maintenance and repair	626,386
Production, transportation and material moving	156,763

Table 45 – Occupations by Sector

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Travel Time

Travel Time	Number	Percentage
< 30 Minutes	2,059,693	69%
30-59 Minutes	757,558	25%
60 or More Minutes	173,218	6%
Total	*2,990,469*	*100%*

Table 46 - Travel Time

Alternate Data Source Name:
2018 5-year and 1-year ACS
Data Source Comments:

Education:

Educational Attainment by Employment Status (Population 16 and Older)

Educational Attainment	In Labor Force		
	Civilian Employed	Unemployed	Not in Labor Force
Less than high school graduate	180,864	20,480	149,201

Educational Attainment	In Labor Force		Not in Labor Force
	Civilian Employed	**Unemployed**	
High school graduate (includes equivalency)	735,956	43,336	284,640
Some college or Associate's degree	814,193	34,837	200,375
Bachelor's degree or higher	805,541	17,043	114,627

Table 47 - Educational Attainment by Employment Status

Educational Attainment by Age

	Age				
	18–24 yrs	**25–34 yrs**	**35–44 yrs**	**45–65 yrs**	**65+ yrs**
Less than 9th grade	14,416	26,953	31,268	52,759	53,660
9th to 12th grade, no diploma	89,320	63,202	56,342	120,067	98,373
High school graduate, GED, or alternative	210,738	225,326	222,599	616,321	411,685
Some college, no degree	259,872	196,462	173,856	346,056	182,468
Associate's degree	23,473	82,210	91,292	160,842	48,166
Bachelor's degree	61,249	192,111	164,893	272,436	97,668
Graduate or professional degree	4,250	70,668	81,464	156,625	104,043

Table 48 - Educational Attainment by Age

Educational Attainment – Median Earnings in the Past 12 Months

Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	24,785,675
High school graduate (includes equivalency)	51,160,805
Some college or Associate's degree	55,845,544
Bachelor's degree	62,145,139
Graduate or professional degree	56,341,242

Table 49 – Median Earnings in the Past 12 Months

Based on the Business Activity table above, what are the major employment sectors within the state?

The single largest employment industry in Indiana is manufacturing, responsible for 29 percent of the state's jobs, according to the Business Activity table above. This is followed by Education and Health Care at 13 percent and Retail Trade at 13 percent of all jobs. The job base is nearly identical to that in 2015.

Describe the workforce and infrastructure needs of business in the state.

The workforce needs of businesses currently operating in nonentitlement areas in Indiana vary by region and industry. Generally speaking, businesses must replace skilled incumbent workers who are rapidly approaching retirement. Many are already beyond retirement age and continue to work for various reasons. Businesses have mostly been unable to develop a pipeline of workers with the training and education to move into these skilled positions as they become available.

Replacements for these workers may come from workers who are underemployed as a result of realignment caused by globalization and technology. Others may be unemployed for similar reasons. Still others may come from the ranks of high school students who are increasingly condisering seeking industry recognized certifications, applied Associate of Science degrees or other points of entry into the workforce. This is but one iteration of the current skills gap currently being expressed by many industry clusters.

Workers for new skilled jobs in technology, robotics, electrical maintenance, electronics, mechanical maintenance, computer technicians, laboratory technicians, welding and other emerging trades are also required. These workers may also come from the ranks of
underemployed, unemployed, and students provided that industry recognized training can be secured.

Describe any major changes that may have an economic impact, such as planned public or private sector investments or initiatives that have affected or may affect job and business growth opportunities during the planning period. Describe any needs for workforce development, business support or infrastructure these changes may create.

The most significant change during this Consolidated Plan period is likely to be continued economic stress from the COVID-19 pandemic, the short- and long-term effects of which are currently unknown. Due to the COVID-19 pandemic, OCRA will use some CDBG funds to help local communities to help small businesses and microenterprises. The focus of these funds is job retention in an effort to address the recent spike in unemployment.

How do the skills and education of the current workforce correspond to employment opportunities in the state?

The negative effect of limited workforce on economic development was a concern expressed by many stakeholders consulted in this plan. Many attributed the lack of public transportation and workforce housing, including homes to buy for middle income households, as a barrier to economic development. Skilled workers exist in the state but are clustered in the state's urban areas.

Describe current workforce training initiatives supported by the state. Describe how these efforts will support the state's Consolidated Plan.

The Governor's Next Level initiative, https://www.nextleveljobs.org/, aims to increase education attainment of the state's workers by expanding training and education to support high-paying jobs in high-growth and high-paying industries. The initiative provides access to free, statewide training to high-paying jobs and reimburses employers to provide training in high-growth fields.

Describe any other state efforts to support economic growth.

The state's non-housing community development priority will be to address the effects of the COVID-19 pandemic on nonentitlement area economies and businesses. OCRA's funds will focus on job retention in an effort to address the recent spike in unemployment.

OCRA is also partnering with the Purdue Center for Regional Development, Ohio State University, the USDA and the Indiana Economic Development Center to launch the Hometown Business Preservation Initiative. This program will provide guidance to communities on how to establish a Revolving Loan Fund to provide loans to small businesses to respond to community needs.

OCRA's effort to expand broadband services in the state's rural areas began in July 2019 and will connect communities in 50 Indiana counties to high-speed Internet.

Discussion

Please see above.

MA-50 Needs and Market Analysis Discussion

Are there areas where households with multiple housing problems are concentrated? (include a definition of "concentration")

There are no strong patterns of multiple housing problems in Indiana. A county-level housing model that was developed for this plan was used to examine variances in housing needs by county. Indiana counties have similar levels of cost burden, with only a few outliers (Switzerland, Scott, Brown, Jennings, Marion, and Lake have cost burden levels that are double the lowest cost-burdened county).

Are there any areas in the jurisdiction where racial or ethnic minorities or low-income families are concentrated? (include a definition of "concentration")

Of the 590,000 Indiana residents who identified their race as African American in the last full Census (2010), 41 percent lived in Marion County and 22 percent lived in Lake County. That is, 63 percent of the State's African American population lived in just two of the State's 92 counties.

Comparatively, just 10 percent of the State's White residents live in Marion County and 6 percent live in Lake County. Twenty-two percent and 21 percent, respectively, of Hispanic residents live in Marion County and Lake County.

Concentrations of African American residents exist in the urban areas within Lake, Marion, and Fort Wayne Counties, and in the more rural areas in Porter, LaPorte, St. Joseph, Elkhart, Delaware, Madison, Putnam, Vigo, and Sullivan Counties. Hispanic concentrations exist in the same urban areas as well as a handful of counties in the northern part of the state.

For the purposes of this plan,

1.   Concentrations exist when the population of either African Americans or Hispanics is at least *20 percentage points* higher than the proportion of these populations in the county overall; and

2.   Concentrations exist when the population of either African Americans or Hispanics is at least *10 percentage points* higher than the proportion of these populations in the county overall (a narrower definition of concentration).

What are the characteristics of the market in these areas/neighborhoods?

Market characteristics vary depending on the county. Few of the concentrated areas are also high-poverty neighborhoods (Racially and Ethnically Concentrated Areas of Poverty or R/ECAPs). Only one R/ECAP in the state, Census tract 2 in Grant County, is located in a nonentitlement area. Thirty-five percent of residents in that tract are African American; another 10 percent are some other race or two

or more races. Forty-two percent of all residents in that tract are living in poverty and 34 percent of families are living in poverty.

Are there any community assets in these areas/neighborhoods?

In general, areas with racial and ethnic concentrations are located near employment centers in urban areas and are areas with future job growth potential.

Are there other strategic opportunities in any of these areas?

Yes, although those opportunities will be determined by policies, programs, and investment of entitlement jurisdictions.

MA-60 Broadband Needs of Housing occupied by Low- and Moderate-Income Households - 91.210(a)(4), 91.310(a)(2)

Describe the need for broadband wiring and connections for households, including low- and moderate-income households and neighborhoods.

Nearly 215 stakeholders, representing a wide range of industries and programmatic services across the state, responded to the online survey between January 2020 and February 2020. One-fourth of stakeholders represent organizations that offer services statewide. Of the organizations that operate locally, they collectively represent 90 out of the 92 counties in Indiana.

The top five community development need identified across all categories were:

- Infrastructure for Internet access (47%)
- Public transit for all (40%)
- Water and sewer infrastructure (37%)
- Sidewalks (36%)
- Placemaking, Master Planning and Community Centers (tied at 29-30%)

The vast majority—72 percent—of respondents stated that their communities experience barriers to digital/broadband access in their service areas. The most common barrier was lack of wiring/connection in rural communities. The top five barriers identified were:

- Wiring/connection not available in rural areas (71%)
- Providers being difficult to find/too few providers (48%)
- Wiring/connection not being affordable (32%)
- Lack of digital/broadband services making it difficult to apply for jobs (28%)
- Lack of digital/broadband services preventing residents from getting health care information and assistance (20%)

Survey participants were asked to pick their top five priority program outcomes from investment of HUD CDBG block fund grants. The top two priorities focused on broadband access (93 respondents or 60%) and affordable childcare centers.

Describe the need for increased competition by having more than one broadband Internet service provider serve the jurisdiction.

The top five barriers identified to broadband implementation according to the stakeholder survey included providers being difficult to find or too few providers in the area (48% of respondents). This indicates a need to bolster the number of service providers in the state. Collaborations between OCRA

and the Director of Broadband opportunities as well as the statewide broadband summit present opportunities to facilitate this expansion of providers, particularly in rural areas.

MA-65 Hazard Mitigation - 91.210(a)(5), 91.310(a)(3)

Describe the jurisdiction's increased natural hazard risks associated with climate change.

According to the 2019 State of Indiana Standard Multi-Hazard Mitigation Plan, "Indiana's unique geography, geology, and meteorology make it vulnerable to earthquakes, floods, tornadoes/high winds, severe winter storms, droughts, and extreme temperatures."

According to the Indiana Climate Change Impacts Assessment (IN CCIA) from 2018, Indiana weather is predicted to change this century in the following ways:

- Temperatures are projected to rise five to six degrees by mid-century.
- The number of extremely hot days will rise.
- Extreme cold events will decline.
- The frost-free season will lengthen.

Rising Temperatures

Temperatures are projected to rise by five to six degrees by mid-century. According to the 2019 State of Indiana Standard Multi-Hazard Mitigation Plan, higher temperatures can cause roadways and pavement to warp and heat-related illnesses among people and pets.

Increased Rainfall

According to the 2019 State of Indiana Standard Multi-Hazard Mitigation Plan, extreme rainfall events are expected to increase. Particularly in the northwestern part of the state. Extreme rainfall events contribute to soil erosion and nutrient runoff which impact water quality and crop productivity.

Tornados

Historically, tornados in Indiana have occurred primarily in the less populated southwest portion of the state. However, new research suggests increased frequency and spatial varying of tornados in Indiana, which will put more residents and property at risk.

Describe the vulnerability to these risks of housing occupied by low- and moderate-income households based on an analysis of data, findings, and methods.

The Indiana Department of Homeland Security (IDHS) identified five groups that are particularly vulnerable to disasters in the 2019 State of Indiana Standard Multi-Hazard Mitigation Plan, these special needs populations include:

- Low-income citizens,
- Older adults,
- Non-English-speaking people,
- People with disabilities, and
- People without a high school diploma.

Although there are other vulnerable groups, these five were selected because they may suffer more severely from the impacts of disasters and require special attention in mitigation planning. The plan makes specific mention of the large Amish population in Indiana, particularly in LaGrange, Elkhart, and Daviess counties. Amish residents typically speak a language other than English at home and end formal education in the 8th grade.

The plan provides a spatial analysis of the five vulnerable groups by county to determine areas that require specialized hazard mitigation planning and additional resources. The following challenges are the primary barriers faced by vulnerable populations during disaster and emergency events.

Low-Income Citizens

Poverty in Indiana is prevalent in both urban and rural areas. Impoverished communities and individuals are less likely to have access to resources to cope with the impact of disasters.

Older Adults

Older adults are vulnerable to disasters due to special health and mobility needs including transportation challenges, physical or mental impairments, specialized healthcare, or medications. The share of the population in Indiana that are seniors will continue to increase as the Baby Boomer generation ages.

Non-English-Speaking People

The primary barriers for non-English speaking groups in emergency or disaster events include lack of multi-language emergency communications, cultural differences, and mistrust of government services.

People with Disabilities

People with disabilities (physical, sensory, or mental) may have difficulty due to mobility and accessibility issues, cognitive challenges understanding instructions, and difficulty communicating.

People Without a High School Diploma

Educational attainment was used in the plan as a proxy for income and poverty. Individuals with higher educational attainment are assumed to have higher incomes and more resources to cope with disaster.

Strategic Plan

SP-05 Overview

Strategic Plan Overview

The SP section of the Consolidated Plan details the State of Indiana's five-year strategic goals to address housing and community development needs with CDBG, HOME, ESG, HOPWA and NHTF.

The five-year plan responds to the needs expressed by stakeholders and the public in development of the plan by:

- Addressing aging water, wastewater and stormwater systems;
- Helping to revitalize rural communities and encourage economic growth;
- Addressing the quality of housing;
- Responding to unique community needs as they arise;
- Building capacity and empower leadership in rural Indiana;
- Addressing the rental housing needs of extremely low income residents;
- Addressing increased units for homeownership for low income residents;
- Allowing seniors to age-in-place and facilitating new housing opportunities for persons with disabilities,
- Addressing the needs of special needs residents, including those with HIV/AIDS and persons who are homelessness, and
- Working to prevent homelessness by providing rental assistance and moving residents who are newly homeless into housing quickly.

SP-10 Geographic Priorities – 91.315(a)(1)

Geographic Area

Table 50 - Geographic Priority Areas

General Allocation Priorities

Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA)

The State of Indiana does not prioritize the allocation of CDBG, HOME or ESG geographically. For CDBG awards, OCRA allocates funds to the areas of greatest need, based on stakeholder consultation and the needs assessment and
market analysis. This information is used to guide the funding priorities for each program year.

For IHCDA's HOME program, applications for rental and homeownership projects located within non-participating jurisdictions and those Participating Jurisdictions which receive less than $500,000 of HOME funding directly from HUD will be considered for funding.

Several IHCDA programs are available for projects statewide. This includes IHCDA's HOME Tenant Based Rental Assistance Program, and projects selected through its Supportive Housing Institute, which utilize HOME and NHTF.

All other NHTF projects for rental development will be allocated statewide. Exact criteria vary by program, yet all programs prioritize assisting low income households. Most of IHCDA's housing programs prioritize 50 percent AMI households; ESG and HOPWA
generally reach to lower income levels due to the nature of the populations they serve.

ESG allocates emergency shelter and rapid re-housing ,homeless prevention, and outreach activities state wide. These and the HOPWA funds follow the CoC jurisdiction of every county outside of Marion.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions. Because IHCDA allocates HOPWA to all ISDH-established care coordination regions except Region 7, it was determined that IHCDA will fund one HOPWA project sponsor per every care coordination region. This will remain true for all care coordination regions. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional sponsor to tailor services to meet the needs of the population.

HTF for rental development is be allocated statewide, to projects that meet the underwriting standards as defined under 24 CFR 93.

SP-25 Priority Needs – 91.315(a)(2)

Priority Needs

Table 51 – Priority Needs Summary

1	Priority Need Name	Infrastructure for Internet Access
	Priority Level	High
	Population	Non-housing Community Development
	Geographic Areas Affected	
	Associated Goals	Improve and Construct Public Facilities
	Description	Infrastructure for internet access is a high priority need for community development throughout Indiana.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
2	Priority Need Name	Water, wastewater and storm water system
	Priority Level	High
	Population	Non-housing Community Development
	Geographic Areas Affected	
	Associated Goals	Improve Community Water, Wastewater and Stormwater
	Description	Water, wastewater and storm water system improvements are a high priority community development need to ensure health and safety and encourage development.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
3	Priority Need Name	Community and youth centers (public facilities)

	Priority Level	High
	Population	Non-housing Community Development
	Geographic Areas Affected	
	Associated Goals	Improve and Construct Public Facilities
	Description	Community and youth centers have been identified as a high priority community development need.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
4	**Priority Need Name**	Public facilities improvements
	Priority Level	Low
	Population	Non-housing Community Development
	Geographic Areas Affected	
	Associated Goals	Improve and Construct Public Facilities
	Description	Stakeholders consulted for the Consolidated Plan ranked the need for public facilities in nonentitlement areas in the state as moderate. This was prior to the COVID-19 outbreak, however; the need for public facilities--e.g., to provide emergency health care--has likely increased.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
5	**Priority Need Name**	Workforce development
	Priority Level	High
	Population	Non-housing Community Development
	Geographic Areas Affected	

	Associated Goals	Respond to COVID-19 Economic Challenges
	Description	The negative effect of limited workforce on economic development was a concern expressed by many stakeholders consulted in this plan. Many attributed the lack of public transportation and workforce housing, including homes to buy for middle income households, as a barrier to economic development. Skilled workers exist in the state but are clustered in the state's urban areas. Workforce development needs are expected to become more acute following the outbreak of COVIS-19.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
6	**Priority Need Name**	Housing for low and very low income persons
	Priority Level	High
	Population	Extremely Low Low
	Geographic Areas Affected	
	Associated Goals	Create and Preserve Affordable Rental Housing
	Description	Housing for low and very low income persons was identified as a high priority need.
	Basis for Relative Priority	The Housing Needs Assessment and Market Assessment portions of the Consolidated Plan highlighted the housing needs for low and very low income persons.
7	**Priority Need Name**	Homeownership opportunities low income households
	Priority Level	High
	Population	Low Moderate
	Geographic Areas Affected	

	Associated Goals	Owner preservation, aging in place, accessibility
	Description	Homeownership opportunities for low income households was identified as a high priority housing need. According to the housing market analysis, there are nearly 18,000 extremely low income owners in Indiana who are cost burdened.
	Basis for Relative Priority	The Housing Needs Assessment and Market Assessment portions of the Consolidated Plan highlighted the need for homeownership opportunities for low income households.
8	**Priority Need Name**	Support of comprehensive community development
	Priority Level	Low
	Population	Moderate Non-housing Community Development
	Geographic Areas Affected	
	Associated Goals	Support Community Revitalization Provide Planning Grants to Local Governments Create and Preserve Affordable Rental Housing Build Nonprofit Housing Developer Capacity
	Description	Support of comprehensive community development efforts was identified as a low priority housing need.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
9	**Priority Need Name**	Aging in place and accessibility
	Priority Level	High
	Population	Elderly Elderly Frail Elderly Persons with Physical Disabilities
	Geographic Areas Affected	

	Associated Goals	Owner preservation, aging in place, accessibility
	Description	Housing that allows homeowners to age in place and is accessible for persons with disabilities was identified as a high priority housing need.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
10	**Priority Need Name**	Assistance to homeless shelters
	Priority Level	High
	Population	Rural Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse veterans Persons with HIV/AIDS Victims of Domestic Violence Unaccompanied Youth
	Geographic Areas Affected	
	Associated Goals	Provide Operating Support for Shelters
	Description	Facilities and services available to the persons experiencing homeless are difficult to quantify at the State level. Many stakeholders responding to the survey conducted for the Consolidated Plan listed housing and services to serve homeless as a top priority.
	Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.
11	**Priority Need Name**	Tenant based rental and rapid re-housing
	Priority Level	High

Population	Rural Chronic Homelessness Individuals Families with Children Mentally Ill Chronic Substance Abuse veterans Persons with HIV/AIDS Victims of Domestic Violence Unaccompanied Youth
Geographic Areas Affected	
Associated Goals	Rapid Re-Housing and TBRA to Prevent Homelessness Assist HIV/AIDS Residents Remain in Housing- STRUM Assist HIV/AIDS Residents Remain in Housing--TBRA Provide Housing Information and Placement Services Support Facilities Serving HIV/AIDS Residents
Description	The HOME Investment Partnerships Program ("HOME") Tenant Based Rental Assistance ("TBRA") is a rental subsidy program that can be used to help income qualified households pay for housing costs including rent, security deposits, and utility deposits. IHCDA focuses its TBRA program on providing rental assistance for formerly incarcerated individuals, defined as (1) persons exiting the correction system and at risk of homelessness due to a lack of stable housing or (2) individuals currently experiencing homelessness who were formerly incarcerated.
Basis for Relative Priority	Stakeholder consultation, survey, focus groups, and interviews.

Narrative (Optional)

The priority needs that have been established for the five-year planning period include those in the above table. These were based on stakeholder input and the housing and community development analysis conducted to support the 2020-2024 Consolidated Plan.

SP-30 Influence of Market Conditions – 91.315(b)

Influence of Market Conditions

Affordable Housing Type	Market Characteristics that will influence the use of funds available for housing type
Tenant Based Rental Assistance (TBRA)	Increased demand for housing affordable to < 30% AMI households; impact of COVID-19 on renters who have experienced economic losses
TBRA for Non-Homeless Special Needs	Increased demand for housing affordable to < 30% AMI households; impact of COVID-19 on renters who have experienced economic losses
New Unit Production	Continued need for small affordable rental developments including those that are accessible and visitable
Rehabilitation	Allocation of CDBG funds for rehabilitation will be evaluated after economic conditions related to COVID-19 stabilize
Acquisition, including preservation	Presence of vacant and underutilized properties and weak interest by the private sector to redevelop

Table 52 – Influence of Market Conditions

SP-35 Anticipated Resources - 91.315(a)(4), 91.320(c)(1,2)

Introduction

The table below lists the resources anticipated to be available to assist the State fulfill its five-year Consolidated Plan housing and community development goals.

Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan $	Narrative Description
			Annual Allocation: $	Program Income: $	Prior Year Resources: $	Total: $		
CDBG	public - federal	Acquisition Admin and Planning Economic Development Housing Public Improvements Public Services	31,772,377	0	0	31,772,377	126,899,508	

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan $	Narrative Description
			Annual Allocation: $	Program Income: $	Prior Year Resources: $	Total: $		
HOME	public - federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	14,601,414	926,668	23,274,000	38,802,082	58,405,656	
HOPWA	public - federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services TBRA	1,591,363	0	0	1,591,363	6,365,452	

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan $	Narrative Description
			Annual Allocation: $	Program Income: $	Prior Year Resources: $	Total: $		
ESG	public - federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	3,934,320	0	0	3,934,320	15,737,280	
HTF	public - federal	Acquisition Admin and Planning Homebuyer assistance Multifamily rental new construction Multifamily rental rehab New construction for ownership	4,644,564	0	0	4,644,564	18,578,256	HTF funds will be dedicated to new construction of affordable rentalhousing. The HTF will leverage 9%LIHTC funding,thus targeting householdsearning less than 60% MFI.

Table 53 - Anticipated Resources

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied

Anticipated matches for PY2020 include:

$7.5 million from local government contributions on all CDBG projects,

In in-kind services match for ESG shelter operations projects

$1 million in in-kind services match for ESG RRH projects

$1.5 million in cash matches from ESG subrecipients

$600,000 in public funds for HOPWA projects (e.g., Ryan White, CDBG, supportive housing),

$70,000 in private funds to support HOPWA projects (financial assistance, food pantries, Indiana AIDS fund),

$22,000 cash match from subrecipients in assisting clients (in-kind).

The HOME match will approximate $2 million, equal to 25 percent on HOME-funded projects.

OCRA match. Matching funds include local public or private sector in-kind services, cash or debt allocated to the CDBG project. The level of local matching funds for CDBG projects is 10 or 20 percent of the total estimated project costs. This percentage is computed by adding the proposed CDBG grant amount and the local matching funds amount, and dividing the local matching funds amount by the total sum of the two amounts. The current definition of match includes a maximum of 5 percent pre- approved and validated in-kind contributions. The balance of the 10 percent must be in the form of either cash or debt. Any in-kind over and above the specified 5 percent may be designated as local effort. Grant funds provided to applicants by the State of Indiana are not eligible for use as matching funds.

IHCDA match. Recent influxes of program funding from the Federal government, along with several new initiatives that expand IHCDA's vision and overall mission into more comprehensive developments, sometimes pose an issue with obtaining the required level of match/leveraging funds. IHCDA continues to use the match pool, which is a collection of resources taken from closed HOME-funded projects that documented match in excess of the required 25 percent. These eligible sources of match are kept on record and may be used as match for future IHCDA-funded projects. The pool allows applicants that, after exploring all possible avenues of meeting the requirement, are left with a shortfall to still proceed with an award application.

ESG match. ESG subrecipients are required to match 100 percent of the ESG award, and can include cash, grants and in-kind donations.

CDBG housing leverage. The State of Indiana requires 10 percent leverage for most CDBG funds. IHCDA recipients have used a variety of funding sources to meet this requirement, including Federal Home Loan Bank grants, Rural Development grants, contractor contributions, cash contributions and cash from local government general funds.

HOME match. The HOME program requires a 25 percent match, which is a Federal requirement. Applicants must demonstrate eligible matching funds equal to 25 percent of the amount of HOME funds requested, environmental review and CHDO operating costs. If the applicant is proposing to utilize banked match for the activity:

*And it is the applicant's own banked match, the match liability on the previous award for which the match was generated must already be met and documented with IHCDA for the match to be eligible as of the application due date. Only HOME-eligible match generated on IHCDA awards made in 1999 or later are eligible to be banked.

*Or, if it is another recipient's match, the applicant must provide an executed agreement with the application verifying that the recipient is willing to donate the match.

If appropriate, describe publically owned land or property located within the state that may be used to address the needs identified in the plan

N/A; the State does not have publicly owned land or properties that will be used to address housing and community development needs during the five-year planning period.

Discussion

$6 million will also be available for the Project Development track, which may be used for either Homebuyer or Rental housing construction. If these funds are not utilized, they may convert to HOME rental construction. This will be funded through prior year funds.

If TBRA funds from HOME are not utilized, they will be converted to new rental construction. TBRA may be used in other participating jurisdictions.

CDBG Admin match: The match requirement is met in two ways. For personnel and other staff expenses, CDBG Administrative funds are matched with funds from OCRA's state sources on a 50/50 basis. This practice ensures that the match is maintained for these on-going variable expenses. For contracts and other set expenses, before obligation, the funding options are reviewed and allocated to meet the match requirement.

SP-40 Institutional Delivery Structure – 91.315(k)

Explain the institutional structure through which the jurisdiction will carry out its consolidated plan including private industry, non-profit organizations, and public institutions.

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
Office of Community and Rural Affairs		Economic Development Non-homeless special needs Planning neighborhood improvements public facilities	Other
INDIANA HOUSING AND COMMUNITY DEVELOPMENT AUTHORITY		Homelessness Ownership Rental	State
BONA VISTA PROGRAMS INC		Non-homeless special needs public services	
BLUE RIVER SERVICES, INC.		Non-homeless special needs public services	
COMMUNITY ACTION PROGRAM INC OF WESTERN INDIANA		Non-homeless special needs	
COMMUNITY ACTION PROGRAM OF EVANSVILLE		Non-homeless special needs	
FOUR RIVERS RESOURCE SERVICES,INC.		Non-homeless special needs public services	
Fort Wayne Habitat for Humanity Inc		Ownership	
HABITAT FOR HUMANITY OF MORGAN COUN		Ownership	
HAND, Inc.		Rental	
Harmony Housing, LLC		Rental	

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
HENDRICKS COUNTY COMMUNITY DEVELOPMENT CORP.		Non-homeless special needs	
HOOSIER UPLANDS		Non-homeless special needs Rental	
HOUSING OPPORTUNITIES INC.		Rental	
LACASA, INC.		Rental	
New Hope Development Services		Rental	
PROVIDENCE HOUSING CORP.		Rental	
SOUTHERN INDIANA HOUSING AND COMMUNITY DEVELOPMENT CORP		Rental	
Thrive Alliance		Non-homeless special needs Rental	
VISION COMMUNITIES INC		Rental	
WHITLEY CROSSINGS NEIGHBORHOOD CORP		Non-homeless special needs	
A BETTER WAY	Non-profit organizations	Homelessness	
Advantage Housing, Inc.	Non-profit organizations	Homelessness	
ALBION FELLOWS BACON CENTER	Non-profit organizations	Homelessness	
ALTERNATIVES INC. OF MADISON COUNTY	Non-profit organizations	Homelessness	
ANCHOR HOUSE	Non-profit organizations	Homelessness	
Beaman Home/Kosciusko County Shelter for Abuse, Inc.	Non-profit organizations	Homelessness	
Beyond Homeless, Inc.	Non-profit organizations	Homelessness	

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
BRIDGES COMMUNITY SERVICES	Non-profit organizations	Homelessness	
COORDINATED ASSISTANCE MINISTRIES	Non-profit organizations	Homelessness	
BECKY'S PLACE (CATHOLIC CHARITIES)	Non-profit organizations	Homelessness	
CITIZENS CONCERNED FOR THE HOMELESS	Non-profit organizations	Homelessness	
COUNCIL ON DOMESTIC ABUSE, INC.	Non-profit organizations	Homelessness	
Community and Family Services	Non-profit organizations	Homelessness	
Emmaus Mission Center, Inc.	Non-profit organizations	Homelessness	
FAMILY CRISIS CENTER MONTGOMERY CO	Non-profit organizations	Homelessness	
FAMILY PROMISE OF GREATER LAFAYETTE	Non-profit organizations	Homelessness	
Family Promise of Hendricks County, Inc.	Non-profit organizations	Homelessness	
FAMILY SERVICE ASSOCIATION	Non-profit organizations	Homelessness	
FAMILY SERVICE SOCIETY	Non-profit organizations	Homelessness	
GABRIEL'S HORN	Non-profit organizations	Homelessness	
GARY COMMISSION FOR WOMEN	Non-profit organizations	Homelessness	
HAVEN HOUSE	Non-profit organizations	Homelessness	
HEART HOUSE	Non-profit organizations	Homelessness	
Hope Springs Safe House	Non-profit organizations	Homelessness	
HOUSE OF BREAD & PEACE	Non-profit organizations	Homelessness	
HOUSING OPPORTUNITIES	Non-profit organizations	Homelessness	

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
HUMAN SERVICES, INC	Non-profit organizations	Homelessness	
Just Neighbors - Interfaith Homeless Network	Non-profit organizations	Homelessness	
LTHC Homeless Services	Non-profit organizations	Homelessness	
MIDDLE WAY HOUSE	Non-profit organizations	Homelessness	
NEW HOPE FAMILY SHELTER	Non-profit organizations	Homelessness	
OZANAM FAMILY SHELTER	Non-profit organizations	Homelessness	
IN-PACT, INC	Non-profit organizations	Homelessness	
SHALOM CENTER	Non-profit organizations	Homelessness	
SHELTERING WINGS CENTER FOR WOMEN	Non-profit organizations	Homelessness	
ST. ELIZABETH CATHOLIC CHARITIES	Non-profit organizations	Homelessness	
ST. JUDE HOUSE	Non-profit organizations	Homelessness	
STEPPING STONE SHELTER FOR WOMEN	Non-profit organizations	Homelessness	
THE CARING PLACE	Non-profit organizations	Homelessness	
Columbus Regional Shelter/Turning Point	Non-profit organizations	Homelessness	
United Caring Services	Non-profit organizations	Homelessness	
Community Service Center of Morgan County dba Wellspring	Non-profit organizations	Homelessness	
YMCA	Non-profit organizations	Homelessness Non-homeless special needs	

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
YMCA OF GREATER FORT WAYNE	Non-profit organizations	Homelessness Non-homeless special needs	
AURORA, INC.	Other	Non-homeless special needs	
Bridges out of Poverty	Other	Non-homeless special needs	
ASPIRE INDIANA, INC.	Non-profit organizations	Homelessness Non-homeless special needs Rental	
Brightpoint	Non-profit organizations	Homelessness Non-homeless special needs Rental	
Region 8 COC	Continuum of care	Homelessness	
Homeless Coalition of Southern Indiana (the CoC)	Continuum of care	Homelessness	
Indiana Balance of State CoC Region 2A	Continuum of care	Homelessness	
LAFAYETTE TRANSITIONAL HOUSING	Non-profit organizations	Homelessness Rental	
AIDS Task Force of Laporte and Porter Counties Inc. dba The Aliveness Project of NWI, Inc.	Non-profit organizations	Non-homeless special needs	
AIDS MINISTRIES AIDS ASSIST	Non-profit organizations	Non-homeless special needs	
NEI Positive Resource Connection	Regional organization	Non-homeless special needs	
IU Health Bloomington Hospital	Non-profit organizations	Non-homeless special needs	
Hoosier Hills AIDS Coalition	Non-profit organizations	Non-homeless special needs	
AIDS Resource Group of Evansville, Inc.	Non-profit organizations	Non-homeless special needs	

Table 54 - Institutional Delivery Structure

Assess of Strengths and Gaps in the Institutional Delivery System

The State has an efficient structure through which programs are delivered. Where gaps exist, these are associated with lack of funding and lack of capacity of nonprofits in rural areas to address the wide variety and growing needs of aging communities in need of economic development.

OCRA's primary partners are units of local government. Institutions like Purdue, IU, and Ball State, which have a strong local presence, are funded by OCRA to provide technical assistance to local governments in this area. During the five year Consolidated Plan period, OCRA will continue current practices of providing planning grants, technical assistance and training, regional workshops, and access to community liaisons and regional representatives to support institutional structure in small communities and rural areas. OCRA also intends to continue the Stellar Communities program to help communities develop a region's institutional structure to facilitate economic development, create jobs, and increase its overall competitiveness.

In addition to the organizations included above, IHCDA partners with national providers, consultants, and trainers to provide technical assistance where needed. IHCDA continually reviews both internal and external processes to determine what gaps may exist and how to address those gaps. Gaps which IHCDA has identified include a dearth of available contractors available for housing construction or repair, a need for training on both development and property management of affordable housing, training for fair housing, and a need for more funding for housing projects.

IHCDA has targeted much of its training over the past several years to address these gaps in delivery, including targeted training through the Indiana Builder's Association to increase the number of Risk Assessors and certified Lead Paint contractors; through training provided by national providers on the development process; and through its partnership with the Indiana Civil Rights Commission on Fair-Housing testing and training.

IHCDA also holds by-weekly calls with its HOME Administrators and CHDOs to discern other gaps or needs from these critical partners. IHCDA also created a CHDO working group several years ago to develop a formal committee of Partners to help identify gaps in delivery.

Other activities include:

- IHCDA uses its "RED" notices, which are sent via email to subscribers, to communicate updates about grant application funding rounds and applications and federal policy changes. The RED notices webpage can be found at: https://www.in.gov/myihcda/rednotices.htm IHCDA also maintains a resource center on its website. OCRA has a similar email system.
- Webinars are used to help potential grantees build capacity to apply for and access funding.
- IHCDA utilizes part of its HOME administrative budget to provide additional technical assistance.

- For the past three years, IHCDA has also hosted a separate track at its Housing Conference focused on the HOME Program, CHDOs and rural housing development.

IHCDA allocates HOPWA to all ISDH-established care coordination regions except Region 7 and parts of Region 11, it was determined that IHCDA will fund one HOPWA project sponsor per every care coordination region. This will remain true for all care coordination regions. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional subrecipient to tailor services to meet the needs of the population.

Availability of services targeted to homeless persons and persons with HIV and mainstream services

Homelessness Prevention Services	Available in the Community	Targeted to Homeless	Targeted to People with HIV
Homelessness Prevention Services			
Counseling/Advocacy	X	X	X
Legal Assistance	X	X	X
Mortgage Assistance			X
Rental Assistance	X	X	X
Utilities Assistance	X	X	X
Street Outreach Services			
Law Enforcement	X	X	X
Mobile Clinics			
Other Street Outreach Services	X	X	
Supportive Services			
Alcohol & Drug Abuse	X	X	X
Child Care	X	X	
Education	X	X	X
Employment and Employment Training	X	X	
Healthcare	X	X	X
HIV/AIDS	X	X	X
Life Skills	X	X	X
Mental Health Counseling	X	X	X
Transportation	X	X	X
Other			

Table 55 - Homeless Prevention Services Summary

Describe the extent to which services targeted to homeless person and persons with HIV and mainstream services, such as health, mental health and employment services are made available to and used by homeless persons (particularly chronically homeless individuals and

families, families with children, veterans and their families and unaccompanied youth) and persons with HIV within the jurisdiction

Through engagement efforts conducted for the 2020-2024 Indiana Consolidated Plan, stakeholders provided perspective on housing needs in Indiana, including services required for people experiencing homelessness. The greatest housing and homelessness needs identified in the survey and in stakeholder interviews are related to lack of housing in general and lack of housing affordability across all income levels, as well as adequate and safe transitional housing to meet basic, immediate needs for vulnerable, at-risk populations. IHCDA addresses these needs through a sub-recipient model. ESG and HOPWA funds are administered to sub-recipients with experience in rental assistance and supportive services. Many organizations have the ability to spend down their funds in a effective manner as long as they have the housing stock available. The concerns communicated from the stakeholders is one that IHCDA has seen as well. There are areas of the state that do not have adequate housing stock to house individuals. There are also regions that do not receive any ESG funds due to the minimal number or organizations who serve the homeless. As such, IHCDA and the CoC BoS board will include this concern in their updated strategic plan. The Community Services department has a goal in the next 1-2 years to increase the number of ESG recipients and review their funding application as to how it might incorporate this need. Lastly, IHCDA has formed a homeless committee internally to discuss such challenges and how the agency might coordinate across programs to assist individuals in a more robust manner.

Describe the strengths and gaps of the service delivery system for special needs population and persons experiencing homelessness, including, but not limited to, the services listed above

Providers of homeless housing and/or services strongly emphasized the need for truly affordable permanent, supportive housing. Additionally, there was a heightened emphasis on the importance of more emergency and transitional housing to fill the immediate need gap. As one stakeholder stated, *"We need more funding for shelter services, transitional housing and permanent supportive housing."*

Affordable Transitional & Permanent Housing:

- *"More temporary locations with supportive services. We just don't have the means to provide housing or care to the most vulnerable populations."*
- *"Exit strategy planning for persons in temporary shelter housing."*
- *"Shelters with accountability programs to get them on the road to success. Housing for families. Our only homeless shelter in Decatur County is for men and it seems they must be a recovering addict to be admitted."*
- *"More permanent supportive housing for those who experience chronic homelessness."*

Supportive Services**:**

- *"Social Workers to get them connected to services, including mental health, home health and supplies to furnish their apartment."*
- *"Job placement, financial literacy, mental or abuse counseling and financial assistance until they are self-sufficient."*
- *"The intersection of housing and health is critical to all populations, especially the most vulnerable like the homeless."*

Provide a summary of the strategy for overcoming gaps in the institutional structure and service delivery system for carrying out a strategy to address priority needs

Stakeholders were asked to provide policies and/or programs that they would like to see the State of Indiana support, finance, and employ to better address housing and community development needs. Those policy and program recommendations included:

More attention to at-risk and homeless youth program development

- *"Because they're not frequent users of emergency services, homeless youth have been relegated to the end of the queue to receive the resources they need."*
- *"Youth homelessness continues to be a low priority for local, state and federal funding as a disproportionately large amount of public support has been directed to the higher profile, costlier population of chronically homeless adults. We know that the homeless youth of today are 5 times more likely to be the homeless youth of tomorrow."*
- *"Asset building programs for young adults. Do more to help young adults train for jobs, buy a house, buy a reliable car."*

One stakeholder shared their perspective on the inaccuracies of the Point-in-Time (PIC) count and its impact on youth homeless programming: "*States that have accurately identified the number of homeless have responded with more effective solutions to the problem. In Indiana, HUD's 2019 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations PIT count in January 2019 stated that there were 3,518 homeless persons over the age of 25 and only 258 unaccompanied homeless youth in Indiana. However, Indiana's public schools identified nearly 19,789 homeless students in the 2017-2018 school year, which included 1,164 unaccompanied youth. (Indiana State Board of Education, Annual Report on Homeless Youth Educational Outcomes, 2019). Youth homelessness needs to be a priority for Indiana."*

IHCDA plans to respond to these challenges through its partnership with the CoC. It has long been recognized that better data and more resources are needed for the field. As such, IHCDA is considering using their HMIS data more publicly to communicate the true nature of homelessness. They are also working to expand partnerships with key state agencies and state wide associations to help meet these needs.

SP-45 Goals Summary – 91.315(a)(4)

Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Improve Community Water, Wastewater and Stormwater	2020	2024	Non-Housing Community Development		Water, wastewater and storm water system	CDBG: $57,000,000	Other: 140 Other
2	Support Community Revitalization	2020	2024	Non-Housing Community Development		Support of comprehensive community development	CDBG: $46,000,000	Other: 100 Other
3	Improve and Construct Public Facilities	2020	2024	Non-Housing Community Development		Infrastructure for Internet Access Community and youth centers (public facilities) Public facilities improvements	CDBG: $8,500,000	Other: 75 Other
4	Respond to COVID-19 Economic Challenges	2020	2024	Non-Housing Community Development		Workforce development	CDBG: $3,200,000	Businesses assisted: 60 Businesses Assisted
5	Provide Planning Grants to Local Governments	2020	2024	Non-Housing Community Development		Support of comprehensive community development	CDBG: $6,000,000	Other: 1000 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
6	Create and Preserve Affordable Rental Housing	2020	2024	Affordable Housing		Housing for low and very low income persons Support of comprehensive community development	HOME: $68,000,000 HTF: $19,000,000	Rental units constructed: 1500 Household Housing Unit Rental units rehabilitated: 1500 Household Housing Unit
7	Owner preservation, aging in place, accessibility	2020	2024	Affordable Housing Non-Homeless Special Needs		Homeownership opportunities low income households Aging in place and accessibility	HOME: $4,500,000	Homeowner Housing Added: 50 Household Housing Unit Homeowner Housing Rehabilitated: 0 Household Housing Unit
8	Build Nonprofit Housing Developer Capacity	2020	2024	Affordable Housing		Support of comprehensive community development	HOME: $2,000,000	Other: 150 Other
10	Provide Operating Support for Shelters	2020	2024	Homeless Non-Homeless Special Needs		Assistance to homeless shelters	ESG: $9,000,000	Other: 150000 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
11	Rapid Re-Housing and TBRA to Prevent Homelessness	2020	2024	Homeless Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOME: $3,000,000 ESG: $6,000,000	Tenant-based rental assistance / Rapid Rehousing: 35000 Households Assisted Housing for Homeless added: 450 Household Housing Unit
13	Assist HIV/AIDS Residents Remain in Housing- STRUM	2020	2024	Non-Homeless Special Needs HIV/AIDS		Tenant based rental and rapid re-housing	HOPWA: $1,000,000	HIV/AIDS Housing Operations: 5000 Household Housing Unit
14	Assist HIV/AIDS Residents Remain in Housing--TBRA	2020	2024	Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOPWA: $2,000,000	Housing for People with HIV/AIDS added: 3000 Household Housing Unit
15	Provide Housing Information and Placement Services	2020	2024	Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOPWA: $1,000,000	HIV/AIDS Housing Operations: 1000 Household Housing Unit
16	Support Facilities Serving HIV/AIDS Residents	2020	2024	Non-Homeless Special Needs HIV/AIDS		Tenant based rental and rapid re-housing	HOPWA: $675,000	Other: 500 Other

Table 56 – Goals Summary

Goal Descriptions

1	Goal Name	Improve Community Water, Wastewater and Stormwater
	Goal Description	OCRA will allocate $10,500,000 of its FY 20202 CDBG funds for the Wastewater Drinking Water (WDW). Future program year funding is anticipated to be similar.
		Applications will be accepted in rounds and awards will be made on a competitive basis. WDW shall have a maximum grant amounts based on present combined user rates (water, wastewater, and stormwater) as shown in the matrix below. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
		OCRA will allocate $3,000,000 of its FY 2020 CDBG funds for the Stormwater Improvements Program (SIP). The SIP shall have a maximum grant amount of $600,000. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
2	Goal Name	Support Community Revitalization
	Goal Description	The Support Community Revitalization goal captures the activities under the Stellar Regional, Main Street, and Blight Clearance programs.
		The Stellar Regions Program seeks to engage one (1) region to achieve a three-year revitalization strategy that will leverage unified state investment and funding from the partnering agencies to complete projects comprehensively. In the revitalization strategy, communities will identify areas of interest and types of projects, produce a schedule to complete projects, produce cost estimates, identify local match amounts, sources, and additional funding resources, indicate the level of community impact, and describe the significance each project will have on the overall comprehensive revitalization of the region. From this revitalization strategy, regions will produce a three-year regional development plan which will identify capital and quality of life projects to be completed during that period.
		The Main Street Revitalization Program (MSRP) will assist Indiana communities with streetscape and façade activities intended to revitalize their downtown area.
		The blight clearance program will help address slum and blight conditions in communities.

3	Goal Name	Improve and Construct Public Facilities
	Goal Description	OCRA will allocate $2 million to the public facilities program in PY2020; future year allocations are expected to be similar. Improvements to public facilities can include infrastructure to support Internet access and health facilities to support a response to COVID-19. Applications will be accepted in rounds and awards will be made on a competitive basis. The PFP shall have a maximum grant amount of $500,000. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
4	Goal Name	Respond to COVID-19 Economic Challenges
	Goal Description	COVID 19 Response Fund to address the immediate and long-terms impacts on small and rural communities due to the COVID-19 pandemic.
5	Goal Name	Provide Planning Grants to Local Governments
	Goal Description	ORCA will make planning-only grants to units of local government to carry out planning activities eligible under 24 CFR 570.205 of applicable HUD regulations. The Planning Grant program shall have a maximum grant amount of $60,000. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary. OCRA will also fund a small amount of technical assistance to support local goverments.
6	Goal Name	Create and Preserve Affordable Rental Housing
	Goal Description	HOME and NHTF will be used to create and preserve affordable rental housing. HOME dollars will provide subsidies in the form of grants and loans to selected applicants for the acquisition, rehabilitation, and/or new construction of rental housing for low and moderate-income people. IHCDA will allocate all of its FY20 HTF funds for affordable rental housing, specifically for supportive housing for persons experiencing homelessness. A portion of the HTF awards will be made as gap financing in conjunction with applications for Rental Housing Tax Credits ("RHTC") under the Qualified Allocation Plan ("QAP"). Requests for HTF awards must be made as a supplemental request along with an RHTC application.

7	Goal Name	Owner preservation, aging in place, accessibility
	Goal Description	CDBG funds allocated to the owner occupied rehabilitation program (OOR) were suspended in 2020 and reallocated funds to the COVID-19 response program. One-year outcomes are 0. Beyond PY2020, the outcomes will depend on reinstatement of that program.
		New construction of affordable homeownership units and preservation of existing owner-occupied units. HOME dollars will be used to provide subsidies in the form of grants and loans to selected applicants for the acquisition, rehabilitation and/or new construction of single-family housing to serve low income beneficiaries.
8	Goal Name	Build Nonprofit Housing Developer Capacity
	Goal Description	This goal builds nonprofit capacity support through pre-development funds and operating funds for CHDOs.
		CHDO Pre-Development Funds are also available to eligible CHDOs on a rolling basis until funds are exhausted.
		CHDO Operating Fund are also available to eligible CHDOs if they are funded for a CHDO Reserve project.
10	Goal Name	Provide Operating Support for Shelters
	Goal Description	Provide assistance to homeless shelters in the form of operations, essential services, and outreach.
11	Goal Name	Rapid Re-Housing and TBRA to Prevent Homelessness
	Goal Description	IHCDA plans to allocate funding to approximately 10-12 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program for line items: Housing Relocation & Services (financial and services), Rental assistance and administration.

13	Goal Name	Assist HIV/AIDS Residents Remain in Housing- STRUM
	Goal Description	Funds will be made available in the following percentages of the total awards made to project sponsors:
		• At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;
		• No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration;
		• No more than 35 percent to housing information and permanent housing placement activities;
		• No more than 35 percent to supportive services that positively affect recipients' housing stability.
		Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.
14	Goal Name	Assist HIV/AIDS Residents Remain in Housing--TBRA
	Goal Description	Funds will be made available in the following percentages of the total awards made to project sponsors:
		• At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;
		• No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration;
		• No more than 35 percent to housing information and permanent housing placement activities;
		• No more than 35 percent to supportive services that positively affect recipients' housing stability.
		Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.

15	Goal Name	Provide Housing Information and Placement Services
	Goal Description	Funds will be made available in the following percentages of the total awards made to project sponsors: • At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations; • No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration; • No more than 35 percent to housing information and permanent housing placement activities; • No more than 35 percent to supportive services that positively affect recipients' housing stability. Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.
16	Goal Name	Support Facilities Serving HIV/AIDS Residents
	Goal Description	Care Coordination Site, we are providing a one stop shop for persons to access level of care that is needed. Persons will be able to receive testing, diagnosis, medical information, supportive services and housing if needed.

Estimate the number of extremely low-income, low-income, and moderate-income families to whom the jurisdiction will provide affordable housing as defined by HOME 91.315(b)(2)

During the five-year Consolidated Planning period, approximately 700 low to moderate income families will receive affordable housing assistance, mostly in the form of affordable rental unit construction.

SP-50 Public Housing Accessibility and Involvement – 91.315(c)

Need to Increase the Number of Accessible Units (if Required by a Section 504 Voluntary Compliance Agreement)

N/A; the State of Indiana does not own or operate any public housing units.

Activities to Increase Resident Involvements

N/A; the State of Indiana does not own or operate any public housing units.

Is the public housing agency designated as troubled under 24 CFR part 902?

N/A

Plan to remove the 'troubled' designation

N/A; the State of Indiana does not own or operate any public housing units.

SP-55 Barriers to affordable housing – 91.315(h)

Barriers to Affordable Housing

The State of Indiana is in the process of updating its statewide Analysis of Impediments to Fair Housing Choice (AI) to more directly address HUDâ¿¿s current expectations of AIs. A draft AI will be completed in Spring 2020.

Stakeholders, residents and public housing authorities were asked about barriers to housingÂ choice in the surveys and interviews they completed for this Consolidated Plan. These surveys will also be an important part of the AI. The most mentioned barriers identified included:

- Cost of housing,
- Lack of rental units affordable to households earning less than 30 percent of AMI (rental units with rents below $500/month),
- Lack of fair housing knowledge among small landlords,
- Barriers related to criminal history and substance abuse backgrounds of renters, and
- Limited fair housing resources and trainings in rural areas.

The Fair Housing Council of Central Indiana (FHCCI) was interviewed about barriers access affordable housing and residential investment. Public policies that FHCCI highlighted which could mitigate fair housing barriers include:

- Better regulation and monitoring of predatory lending products that are disproportionately targeted to persons of color;
- Resources at the state level to better monitor potential discrimination in real estate sales (e.g., steering);
- Discrimination towards Housing Choice Voucher holders that could have a disproportionate impact on persons of color and persons with disabilities.

Strategy to Remove or Ameliorate the Barriers to Affordable Housing

Since the 2016 AI was developed, OCRA and IHCDA have worked closely with the Fair Housing Center of Central Indiana (FHCCI) and the Indiana Civil Rights Division (ICRC) to address the identified barriers. These partnerships will continue during the 2020 Program Year and will focus on:

1) Fair housing testing;
2) Fair housing training and education and outreach; and
3) Inspecting and testing IHCDA funded properties for fair housing compliance.

SP-60 Homelessness Strategy – 91.315(d)

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

The BoS CoC in partnership with IHCDA has created a Coordinated Entry system to identify and asses the needs of persons at-risk of homelessness. Coordinated Entry processes help communities prioritize assistance based on vulnerability and severity of service needs, to ensure that people who need assistance the most can receive it in a timely manner. When an individual or family contacts IHCDA or one of the CoC partner agencies, they are encouraged to connect with the local CE contact in their area. Each region has a CE lead who can assess the client(s) and help get them on the CE list based on their vulnerability.

Coordinated entry changes a CoC from a project focused system to a person focused system. Historically, CoCs allowed each project to develop and implement its admission criteria and processes. Once people were on a project's waiting list, they were usually served on a first-come, first-served basis without regard to their level of vulnerability. As a result, some program participants received assistance that was either more or less extensive than they needed, and many people received no assistance at all because they were screened out by exclusionary admission criteria or preferences set by the projects.

Now, Coordinated Entry aims to 'orient the community to one or two central prioritizing principles by which the community can make decisions about how to utilize its resources most effectively' (Coordinated Entry Policy Brief, p. 4). These prioritization approaches ensure that across all subpopulations and people with various types of disabilities, those most vulnerable, at highest risk of continued homelessness, or with the most severe service needs will be prioritized for assistance.

Any organization that receives funding from IHCDA's Community Services division (including ESG and HOPWA) are required to enter client level data into HMIS and use the CE process to match individuals in that system to the right
 housing needs. IHCDA staff also train sub-recipients to use diversion tactics and coordinated case conferencing to provide the exact need to the client. Some clients simply need assistance with one month's rent or finding counseling on how to mend broken relationships. Others experience more chronic homelessness.

Lastly the CoC board is updating their strategic plan in late2020/early 2021. The current plan is out of date due to staff and board turn over. This plan will inform the IHCDA strategy on preventing and ending homelessness.

- The State relies on its partners to conduct outreach to persons who are homeless, assess their needs and communicate these needs to the State. To that end, the State will:
- Require all HUD McKinney Vento Funded programs to utilize HMIS for all shelter or transitional housing or permanent supportive housing programs serving homeless individuals and families.

- Require all HUD McKinney Vento Funded programs to participate in the annual, statewide homeless Point-in-Time Count in late January and timely submission of this data to IHCDA.
- Require all HUD McKinney Vento Funded programs subrecipients actively participate in their Regional Planning Council on the Homeless meetings regularly (minimum 75% attendance).
- Require all HUD McKinney Vento Funded programs to participate in the Coordinated Entry in their Region.

Addressing the emergency and transitional housing needs of homeless persons

In addition to the allocation of ESG to meet the needs of persons who are homeless (see AP-20), emergency shelter and transitional housing needs are addressed through the shelter and outreach portions of these funds as well as a larger coordination across the CoC. Each ESG recipient is required to participate in their local Regional Planning Council on Homeless in their Region. This ensures that all organizations/individuals who are serving the homeless come together to discuss and create local strategies to address emergency and transitional housing needs. These needs are then communicated up to IHCDA and the CoC board as a whole. Together, IHCDA and the board incorporate this input into the board's vision for meeting these needs across the CoC. During the next five years, the board plans to create a strategic plan and blueprint for the CoC. They will use data from the HIC, PIT, and other HUD data points to make strategic decisions on areas of the state that need additional emergency and transitional shelter.

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

Rapid re-housing activities include housing relocation and stabilization services and financial assistance with rent, utilities, arrears, and deposits. The function of these funds is to provide short-term assistance to individuals and families. The State offers shelters a version of RRH that did not include rental assistance, and instead covers one-time assistance to support a direct connection from shelter to permanent housing including housing relocation and stabilization services, utilities, arrears, and deposits.

Sub-recipients that receive RRH funds are required to create a Memorandum of Understanding (MOU) with shelters in their region to further strengthen the connection from emergency housing to permanent options including rentals with short/medium term subsidy.

IHCDA continued to improve knowledge of sub-recipients in implementing Rapid Re-housing and Prevention services in their communities through training symposiums on RRH and HMIS training about the new data elements to collect and analyze.

A persistent barrier to the transition to permanent housing is lack of employment. This remains especially difficult in rural areas. Emergency shelters also reported that clients face challenges in moving from the shelter into permanent or transitional housing within the 40-day timeframe, which was the objective. Lack of affordable housing availability continues to be a key factor in extended lengths of stay in shelter while the housing search is in process.

There are two ways IHCDA works to eliminate these barriers. The first is the aforementioned Coordinated Entry process which allows for individuals vulnerability to be assessed. Those who are chronically homeless and disabled score higher on this assessment and are placed on a list for permanent housing first. Otherwise with less vulnerability are connected to rapid rehousing or other options in their region. The second way IHCDA works to eliminate barriers is to maintain and create partnerships. Within the agency, divisions collaborate on homelessness initiatives that are not overseen by the CoC such as the PSH Institute which helps build additional permanent supportive housing units across the state. Externally staff works with partners at the Department of Workforce Development (DWD), the Indiana Commission for Higher Education (ICHE), local nonprofits, local cities, and other entities to help create programs that assist in breaking down barriers. An example is the Next Level Jobs programs through DWD. Sub-recipients of IHCDA Funds have been trained on this program to connect clients to training to improve their employability skills and ability to find higher paying jobs.

Help low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from a publicly funded institution or system of care, or who are receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs

The State and CoC are currently working together to better coordinate how funding is utilized for prevention needs. IHCDA is creating a homeless committee to communicate all options for an individual who is on the verge of or is currently experiencing homeless. This will inform additional strategy at the agency and CoC. The agency is also improving external partnerships that may lead to additional services for those affected by this crisis. These partnerships include the Department of Workforce Development, the Indiana Commission for Higher Education, The Department of Education, and the Department of Veterans Affairs.

Finally, the State is working towards a data integration project that could provide data that helps shape how the state should best keep families from becoming homeless especially those with health related/disabilities. They are in the final stages of their Medicaid Crosswalk with CSH which would inform gaps and barriers to partner housing stability and Medicaid services.

SP-65 Lead based paint Hazards – 91.315(i)

Actions to address LBP hazards and increase access to housing without LBP hazards

Lead-based paint hazards will primary be addressed through CDBG and HOME funded rehabilitation activities. IHCDA has developed new lead forms, and done multiple trainings on how to address lead based paint through both these programs in partnership with HUD. In PY2020, IHCDA will be sponsoring a workshop on the Lead Safe Housing Rule and the HUD Lead regulations to administrators and contractors. IHCDA will also be addressing the dearth of eligible risk assessors, inspectors and licensed contractors by working with the Indiana Builders Association to advertise trainings. IHCDA has also developed a program to allow for reimbursement for contractors to receive their appropriate lead licenses.

In addition, IHCDA has been awarded the Lead Hazard Reduction Demonstration Grant through HUD. In partnership with the Indiana State Department of Health, IHCDA is using these funds will for the identification of lead hazards in units occupied by children who have been lead poisoned or are at-risk of becoming lead poisoned; the remediation of the lead hazards through appropriate control or abatement procedures; and ancillary activities such as training, outreach, and casework. Healthy Homes funding will promote and develop coordination of the lead hazard control activities with other healthy homes steps. These and other activities include providing smoke detectors, providing carbon monoxide detectors, installing anti-scald devices on bathtubs and installing and/or checking handrails. IHCDA is in their third year of executing this vital grant.

IHCDA will also be keeping a database of lead-free housing for rental units which undergo lead hazard control through the LHRD grant program.

IHCDA also developed a Lead Advocacy Team, consisting of IHCDA staff, State Department of Health, and the Indiana Community Action Association (INCAA) to discuss lead-based paint hazards across the state. In 2018, IHCDA, along with INCAA launched the Lead Community Action Plan, which is using CDBG-DR funding to provide lead hazard control to 17 rural counties across the State. This program will be closing in 2020.

Lastly, IHCDA in partnership with the Indiana State Department of Healthy has created the Lead Protection Program, which offers multiple resources to qualified residents. IHCDA keeps a website of all state-lead programming, a Lead Paint Safety guide, applications in both English and Spanish for interested families on this website: https://www.in.gov/myihcda/2675.htm

How are the actions listed above integrated into housing policies and procedures?

Addressing the problem through existing and new housing rehabilitation programs is fundamental to reach the State and federal goal of eliminating childhood lead poisoning. Each recipient of a HOME award is subject to the HUD requirements of addressing lead-based paint hazards pursuant to 24 CFR

Part 35. If a risk assessment is required, then all lead-based paint issues must be addressed. Lead-based paint controls and abatement costs are eligible activities in IHCDA's HOME-funded rehabilitation programs.

IHCDA has updated numerous forms and provide training on the importance of addressing lead based hazards and the impact lead based paint has on the health of children. As a requirement for its CDBG OOR program, IHCDA conducts a training on lead paint, and requires all grantees who have an open award with IHCDA to attend to be eligible for future funding.

IHCDA will continue to provide technical assistance on lead-based paint to their recipients, IHCDA, as the Balance of State Public Housing Authority, also works closely with the IHCDA Lead Grant Manager, and the local and state health departments to identify any Housing Choice Voucher units which have a child with an elevated blood lead level.

As mentioned, IHCDA and the Indiana's State Department of Health have created a repository for households across the state to learn more about the risk of lead-based paint and link those households to numerous state programs.

Lastly, IHCDA has developed a reimbursement program for contractors and firms for eligible training costs related to lead abatement courses; this reimbursement includes the costs of registration and the cost of the testing to be licensed to perform work on lead paint throughout the State. With this program, IHCDA hopes to increase the number of licensed lead abatement professionals throughout the State that can perform lead abatement activities and participation in its LHRD, CDBG, HOME and other programs.

SP-70 Anti-Poverty Strategy – 91.315(j)

Jurisdiction Goals, Programs and Policies for reducing the number of Poverty-Level Families

The State of Indiana does not have a formally adopted statewide anti-poverty strategy. In a holistic sense, the entirety of Indiana's Consolidated Plan Strategy and Action Plan is antipoverty related because a stable living environment is also a service delivery platform. However, many of the strategies developed for the five-year Consolidated Plan directly assist individuals who are living in poverty.

Indiana has a history of aggressively pursuing job creation through economic development efforts at the State and local levels. This emphasis on creating employment opportunities is central to a strategy to reduce poverty by providing households below the poverty level with a means of gaining sustainable employment. OCRA supports employment growth through economic development and revitalization.

Education and skill development are an important aspect of reducing poverty. Investment in workforce development programs and facilities is an essential step to break the cycle of poverty. Finally, there continue to be social and cultural barriers that keep people in poverty. Efforts to eliminate discrimination in all settings are important. In some cases, subsidized housing programs are vital to ensure that citizens have a safe and secure place to live.

Many of the strategies outlined in the Consolidated Plan are directed at providing services and shelter to those in need. Once a person has some stability in a housing situation, it becomes easier to address related issues of poverty and provide resources such as childcare, transportation and job training to enable individuals to enter the workforce. Subsidized housing programs are vital to ensure that citizens have a safe and secure place to live.

The State also utilizes the Section 3 requirement (a provision of the Housing and Urban Development Act of 1968). Section 3 applies to employment opportunities generated (jobs created) as a result of projects receiving CDBG or HOME funding through ORCA or IHCDA, whether those opportunities are generated by the award recipient, a subrecipient, and/or a contractor. The requirements of Section 3 apply to all projects or activities associated with CDBG or HOME funding, regardless of whether the Section 3 project is fully or partially funded with CDBG/HOME. A detailed description of Section 3 requirements is included in OCRA/IHCDA's award applications and manuals. A notice of Section 3 requirements is included in bid solicitations and is covered during the award trainings.

Through IHCDA's multitude of programs, the agency provides assistance to impact persons who may be experiencing homelessness, to those who need assistance to purchase their first home. IHCDA utilizes its HOME program to provide TBRA to those exiting the prison system, to providing construction subsidies for supportive housing using the Housing First model, to providing funding to support housing for persons who are disabled, or families in need of stable housing.

How are the Jurisdiction poverty reducing goals, programs, and policies coordinated with this affordable housing plan

Many of the strategies outlined in the Consolidated Plan are directed at providing services and shelter to those in need. Once a person has some stability in a housing situation, it becomes easier to address related issues of poverty and provide resources such as childcare, transportation and job training to enable individuals to enter the workforce. Indiana's community action agencies are frontline anti-poverty service providers. They work in close cooperation with State agencies to administer a variety of State and Federal programs.

In addition to CAP agencies, IHCDA coordinates with a variety of other statewide and local organizations. For mental health care, IHCDA partners with the Division of Mental Health and Addition through FSSA and many of the sub-recipiets of CoC funds are CMHC organizations. For health care, IHCDA partners with the Indiana Association of Primary Care Providers and partners within the CoC are health care organizations such as IU Health. For employment, IHCDA partners with the Department of Workforce Development and encourages organizations to partner with their local Work One office. For education, IHCDA partners with the Indiana Commission for Higher Education and local organizations partner with Ivy Tech and high schools to support youth experiencing homelessness.

As mentioned, IHCDA is a primary sponsor of the Indiana Supportive Institute. The Indiana Supportive Housing Institute is an important element of the Indiana Permanent Supportive Housing Initiative (IPSHI), which was launched by IHCDA and the Corporation for Supportive Housing (CSH) in 2008 to further the strategy to end long-term and recurring homelessness. The focus is on funding lasting solutions instead of stop-gap programs. The 2020 Institute will design supportive housing to serve households experiencing homelessness referred from the local Coordinated Entry system.

The 2020 Institute will build capacity of partners who are new to supportive housing in Indiana and create units in underserved areas. The Institute will help supportive housing partners learn how to navigate the complex process of developing housing with supportive services to prevent and end homelessness. The Institute process is expected to reduce the time it takes to obtain funding for supportive housing by improving the planning and development process.

The 2020 Institute will provide targeted training, technical assistance, and the opportunity to apply for predevelopment financing for both new and experienced development teams. Teams will receive over 80 hours of training including individualized technical assistance and resources to assist in completing their project. In addition, industry experts, including staff from the Indiana Housing and Community Development Authority (IHCDA), will provide insight on property management, financing, and building design. The program also combines the use of numerous IHCDA resources, including, but not limited to HOME, NHTF, Rental Housing Tax Credit Program, Project Based Vouchers, Continuum of Care and Coordinated Entry.

IHCDA continually coordinates internally to provide much needed affordable housing and services support and externally with Partners such as Prosperity Indiana, ICRC, Fair Housing Center of Central Indiana and others to directly coordinate services, policy design and implementation lacross the State.

SP-80 Monitoring – 91.330

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

OCRA conducts a monitoring of every grant project receiving HUD funds. Two basic types of monitoring are used: off-site, or "desk" monitoring and on-site monitoring. Desk monitoring is conducted by staff for non-construction projects and confirms compliance with national objective, eligible activities, procurement and financial management. On-site monitoring is a structured review conducted by OCRA staff at the locations where project activities are being carried out or project records are being maintained. One on-site monitoring visit is normally conducted during a project unless determined otherwise by OCRA staff.

Grants utilizing a subrecipient to carry out eligible activities are monitored on-site annually during the 5-year reporting period to confirm continued compliance with national objective and eligible activity requirements. If there are findings at the monitoring, the grantee is sent a letter within 3 to 5 days of monitoring visit and is given 30 days to resolve it.

HOME and NHTF: An Annual Owner Certification is conducted for each development. IHCDA must approve, at least annually, the rents to be charged by all HOME or HTF-assisted projects. In addition, for each HOME or HTF project with 10 or more units (total units, not assisted units), IHCDA must annually review the financial condition of the project to determine "the continued financial viability of the housing" in accordance with federal Financial Oversight requirements. For those projects determined to need special attention, IHCDA may conduct 1 or more monitoring visits while award activities are in full progress. All awards subject to Davis Bacon requirements will receive an interim monitoring.

All properties are subject to tenant file monitoring and physical inspections once every three years. IHCDA reserves the right to monitor/inspect more frequently, with or without notification to the owner, based on tenant complaints or IHCDA's assessment that a project is high risk. When noncompliance is discovered, IHCDA will work with the owner and/or management agent to remedy the issue during a correction period. If necessary, IHCDA will recapture funds.

All awards will receive at least 1 final closeout monitoring from IHCDA. IHCDA will hold the final $5000 of each award until the final monitoring has been completed and all findings and concerns associated with it have been resolved. At the time of final monitoring, the recipient must provide the IHCDA compliance auditor electronic copies of all beneficiary files with the income certification and verification documents for all beneficiaries.

IHCDA may suspend or debar the entities from participation if noncompliance issues are recurring or egregious-funds are misused, the entity engages in fraudulent activity. Suspension or debarment from

the program may affect other awards and future applications submitted to IHCDA. IHCDA has a separate Manual which outlines the requirements for Ongoing Compliance for all federal programs: https://www.in.gov/ihcda/4273.htm

IDOA oversees compliance with minority business programs and is responsible for contract review; investigating and resolving complaints; and monitoring and maintaining vendor performance records. The state does not have a local comprehensive planning requirement.

Expected Resources

AP-15 Expected Resources – 91.320(c)(1,2)

Introduction

The table below lists the resources anticipated to be available to assist the State fulfill its five-year Consolidated Plan housing and community development goals.

Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan $	Narrative Description
			Annual Allocation: $	Program Income: $	Prior Year Resources: $	Total: $		
CDBG	public - federal	Acquisition Admin and Planning Economic Development Housing Public Improvements Public Services	31,772,377	0	0	31,772,377	126,899,508	

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan $	Narrative Description
			Annual Allocation: $	Program Income: $	Prior Year Resources: $	Total: $		
HOME	public - federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	14,601,414	926,668	23,274,000	38,802,082	58,405,656	
HOPWA	public - federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services TBRA	1,591,363	0	0	1,591,363	6,365,452	

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan $	Narrative Description
			Annual Allocation: $	Program Income: $	Prior Year Resources: $	Total: $		
ESG	public - federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	3,934,320	0	0	3,934,320	15,737,280	
HTF	public - federal	Acquisition Admin and Planning Homebuyer assistance Multifamily rental new construction Multifamily rental rehab New construction for ownership	4,644,564	0	0	4,644,564	18,578,256	HTF funds will be dedicated to new construction of affordable rentalhousing. The HTF will leverage 9%LIHTC funding,thus targeting householdsearning less than 60% MFI.

Table 57 - Expected Resources – Priority Table

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied

Anticipated matches for PY2020 include:

$7.5 million from local government contributions on all CDBG projects,

In in-kind services match for ESG shelter operations projects

$1 million in in-kind services match for ESG RRH projects

$1.5 million in cash matches from ESG subrecipients

$600,000 in public funds for HOPWA projects (e.g., Ryan White, CDBG, supportive housing),

$70,000 in private funds to support HOPWA projects (financial assistance, food pantries, Indiana AIDS fund),

$22,000 cash match from subrecipients in assisting clients (in-kind).

The HOME match will approximate $2 million, equal to 25 percent on HOME-funded projects.

OCRA match. Matching funds include local public or private sector in-kind services, cash or debt allocated to the CDBG project. The level of local matching funds for CDBG projects is 10 or 20 percent of the total estimated project costs. This percentage is computed by adding the proposed CDBG grant amount and the local matching funds amount, and dividing the local matching funds amount by the total sum of the two amounts. The current definition of match includes a maximum of 5 percent pre- approved and validated in-kind contributions. The balance of the 10 percent must be in the form of either cash or debt. Any in-kind over and above the specified 5 percent may be designated as local effort. Grant funds provided to applicants by the State of Indiana are not eligible for use as matching funds.

IHCDA match. Recent influxes of program funding from the Federal government, along with several new initiatives that expand IHCDA's vision

and overall mission into more comprehensive developments, sometimes pose an issue with obtaining the required level of match/leveraging funds. IHCDA continues to use the match pool, which is a collection of resources taken from closed HOME-funded projects that documented match in excess of the required 25 percent. These eligible sources of match are kept on record and may be used as match for future IHCDA-funded projects. The pool allows applicants that, after exploring all possible avenues of meeting the requirement, are left with a shortfall to still proceed with an award application.

ESG match. ESG subrecipients are required to match 100 percent of the ESG award, and can include cash, grants and in-kind donations.

CDBG housing leverage. The State of Indiana requires 10 percent leverage for most CDBG funds. IHCDA recipients have used a variety of funding sources to meet this requirement, including Federal Home Loan Bank grants, Rural Development grants, contractor contributions, cash contributions and cash from local government general funds.

HOME match. The HOME program requires a 25 percent match, which is a Federal requirement. Applicants must demonstrate eligible matching funds equal to 25 percent of the amount of HOME funds requested, environmental review and CHDO operating costs. If the applicant is proposing to utilize banked match for the activity:

*And it is the applicant's own banked match, the match liability on the previous award for which the match was generated must already be met and documented with IHCDA for the match to be eligible as of the application due date. Only HOME-eligible match generated on IHCDA awards made in 1999 or later are eligible to be banked.

*Or, if it is another recipient's match, the applicant must provide an executed agreement with the application verifying that the recipient is willing to donate the match.

If appropriate, describe publically owned land or property located within the jurisdiction that may be used to address the needs identified in the plan

N/A; the State does not have publicly owned land or properties that will be used to address housing and community development needs during the five-year planning period.

Discussion

$6 million will also be available for the Project Development track, which may be used for either Homebuyer or Rental housing construction. If these funds are not utilized, they may convert to HOME rental construction. This will be funded through prior year funds.

If TBRA funds from HOME are not utilized, they will be converted to new rental construction. TBRA may be used in other participating jurisdictions.

CDBG Admin match: The match requirement is met in two ways. For personnel and other staff expenses, CDBG Administrative funds are matched with funds from OCRA's state sources on a 50/50 basis. This practice ensures that the match is maintained for these on-going variable expenses. For contracts and other set expenses, before obligation, the funding options are reviewed and allocated to meet the match requirement.

Annual Goals and Objectives

AP-20 Annual Goals and Objectives – 91.320(c)(3)&(e)

Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Improve Community Water, Wastewater and Stormwater	2020	2024	Non-Housing Community Development		Water, wastewater and storm water system	CDBG: $13,500,000	Other: 35 Other
2	Support Community Revitalization	2020	2024	Non-Housing Community Development		Support of comprehensive community development	CDBG: $10,950,000	Other: 20 Other
3	Improve and Construct Public Facilities	2020	2024	Non-Housing Community Development		Infrastructure for Internet Access Community and youth centers (public facilities) Public facilities improvements	CDBG: $2,000,000	Other: 15 Other
4	Respond to COVID-19 Economic Challenges	2020	2024	Non-Housing Community Development		Support of comprehensive community development	CDBG: $3,200,000	Businesses assisted: 60 Businesses Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
5	Provide Planning Grants to Local Governments	2020	2024	Non-Housing Community Development		Support of comprehensive community development	CDBG: $1,510,000	Other: 200 Other
6	Create and Preserve Affordable Rental Housing	2020	2024	Affordable Housing		Housing for low and very low income persons Homeownership opportunities low income households Support of comprehensive community development	HOME: $17,500,000 HTF: $4,644,564	Rental units constructed: 30 Household Housing Unit Rental units rehabilitated: 30 Household Housing Unit
8	Build Nonprofit Housing Developer Capacity	2020	2024	Affordable Housing		Support of comprehensive community development	HOME: $575,000	Other: 6 Other
10	Provide Operating Support for Shelters	2020	2024	Homeless Non-Homeless Special Needs		Assistance to homeless shelters	ESG: $2,200,000	Other: 50000 Other
11	Rapid Re-Housing and TBRA to Prevent Homelessness	2020	2024	Homeless Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOME: $~~900,000~~1.2 Million ESG: $1,450,000	Tenant-based rental assistance / Rapid Rehousing: 8000 Households Assisted Other: 90 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
13	Assist HIV/AIDS Residents Remain in Housing- STRUM	2020	2024	Non-Homeless Special Needs HIV/AIDS		Housing for low and very low income persons Tenant based rental and rapid re-housing	HOPWA: $270,500	Housing for People with HIV/AIDS added: 1000 Household Housing Unit
14	Assist HIV/AIDS Residents Remain in Housing--TBRA	2020	2024	Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOPWA: $620,600	Tenant-based rental assistance / Rapid Rehousing: 650 Households Assisted
15	Provide Housing Information and Placement Services	2020	2024	Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOPWA: $397,000	HIV/AIDS Housing Operations: 200 Household Housing Unit
16	Support Facilities Serving HIV/AIDS Residents	2020	2024	Non-Homeless Special Needs HIV/AIDS		Support of comprehensive community development	HOPWA: $159,000	Other: 125 Other

Table 58 – Goals Summary

Goal Descriptions

1	Goal Name	Improve Community Water, Wastewater and Stormwater
	Goal Description	OCRA will allocate $10,500,000 of its FY 20202 CDBG funds for the Wastewater Drinking Water (WDW). Future program year funding is anticipated to be similar.
		Applications will be accepted in rounds and awards will be made on a competitive basis. WDW shall have a maximum grant amounts based on present combined user rates (water, wastewater, and stormwater) as shown in the matrix below. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
		OCRA will allocate $3,000,000 of its FY 2020 CDBG funds for the Stormwater Improvements Program (SIP). The SIP shall have a maximum grant amount of $600,000. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
2	Goal Name	Support Community Revitalization
	Goal Description	The Support Community Revitalization goal captures the activities under the Stellar Regional, Main Street, and Blight Clearance programs.
		The Stellar Regions Program seeks to engage one (1) region to achieve a three-year revitalization strategy that will leverage unified state investment and funding from the partnering agencies to complete projects comprehensively. In the revitalization strategy, communities will identify areas of interest and types of projects, produce a schedule to complete projects, produce cost estimates, identify local match amounts, sources, and additional funding resources, indicate the level of community impact, and describe the significance each project will have on the overall comprehensive revitalization of the region. From this revitalization strategy, regions will produce a three-year regional development plan which will identify capital and quality of life projects to be completed during that period.
		The Main Street Revitalization Program (MSRP) will assist Indiana communities with streetscape and façade activities intended to revitalize their downtown area.
		The blight clearance program will help address slum and blight conditions in communities.

3	Goal Name	Improve and Construct Public Facilities
	Goal Description	OCRA will allocate $2 million to the public facilities program in PY2020; future year allocations are expected to be similar. Improvements to public facilities can include infrastructure to support Internet access and health facilities to support a response to COVID-19. Applications will be accepted in rounds and awards will be made on a competitive basis. The PFP shall have a maximum grant amount of $500,000. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
4	Goal Name	Respond to COVID-19 Economic Challenges
	Goal Description	COVID 19 Response Fund to address the immediate and long-terms impacts on small and rural communities due to the COVID-19 pandemic.
5	Goal Name	Provide Planning Grants to Local Governments
	Goal Description	ORCA will make planning-only grants to units of local government to carry out planning activities eligible under 24 CFR 570.205 of applicable HUD regulations. The Planning Grant program shall have a maximum grant amount of $60,000. The amount of CDBG funds granted will be limited to $5,000 cost per project beneficiary.
6	Goal Name	Create and Preserve Affordable Rental Housing
	Goal Description	HOME and NHTF will be used to create and preserve affordable rental housing. HOME dollars will provide subsidies in the form of grants and loans to selected applicants for the acquisition, rehabilitation, and/or new construction of rental housing for low and moderate-income people. IHCDA will allocate all of its FY20 HTF funds for affordable rental housing, specifically for supportive housing for persons experiencing homelessness. A portion of the HTF awards will be made as gap financing in conjunction with applications for Rental Housing Tax Credits ("RHTC") under the Qualified Allocation Plan ("QAP"). Requests for HTF awards must be made as a supplemental request along with an RHTC application.
8	Goal Name	Build Nonprofit Housing Developer Capacity
	Goal Description	This goal builds nonprofit capacity support through pre-development funds and operating funds for CHDOs. CHDO Pre-Development Funds are also available to eligible CHDOs on a rolling basis until funds are exhausted. CHDO Operating Fund are also available to eligible CHDOs if they are funded for a CHDO Reserve project.

10	Goal Name	Provide Operating Support for Shelters
	Goal Description	There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately one-two agencies that may apply for an outreach component. No more than the maximum allowed 60 percent of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non-profits) who have had experience with rental assistance and will be published on the IHCDA and Balance of State CoC website.
11	Goal Name	Rapid Re-Housing and TBRA to Prevent Homelessness
	Goal Description	IHCDA plans to allocate funding to approximately 10-12 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program for line items: Housing Relocation & Services (financial and services), Rental assistance and administration.
13	Goal Name	Assist HIV/AIDS Residents Remain in Housing- STRUM
	Goal Description	Funds will be made available in the following percentages of the total awards made to project sponsors: - At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations; - No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration; - No more than 35 percent to housing information and permanent housing placement activities; - No more than 35 percent to supportive services that positively affect recipients' housing stability. Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.

14	Goal Name	Assist HIV/AIDS Residents Remain in Housing--TBRA
	Goal Description	Funds will be made available in the following percentages of the total awards made to project sponsors:
		• At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;
		• No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration;
		• No more than 35 percent to housing information and permanent housing placement activities;
		• No more than 35 percent to supportive services that positively affect recipients' housing stability.
		Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.
15	Goal Name	Provide Housing Information and Placement Services
	Goal Description	Funds will be made available in the following percentages of the total awards made to project sponsors:
		• At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;
		• No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration;
		• No more than 35 percent to housing information and permanent housing placement activities;
		• No more than 35 percent to supportive services that positively affect recipients' housing stability.
		Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.
16	Goal Name	Support Facilities Serving HIV/AIDS Residents
	Goal Description	Care Coordination Site, we are providing a one stop shop for persons to access level of care that is needed. Persons will be able to receive testing, diagnosis, medical information, supportive services and housing if needed.

AP-25 Allocation Priorities – 91.320(d)

Introduction:

This section summarizes the estimated allocation of funds among activities for PY2020. Per HUD distribution regulations, HOPWA will be allocated as: 67.9% TBRA/STRMU/facility operations; 20% housing information; .7% supportive services; 9.6% administration; 1.8% program delivery.

Please note: AP-45 is not working in IDIS. The state does not intend to allow local governments to complete comprehensive revitalization strategies.

Funding Allocation Priorities

	Improve Community Water, Wastewater and Stormwater (%)	Support Community Revitalization (%)	Improve and Construct Public Facilities (%)	Respond to COVID-19 Economic Challenges (%)	Provide Planning Grants to Local Governments (%)	Create and Preserve Affordable Rental Housing (%)	Build Nonprofit Housing Developer Capacity (%)	Provide Operating Support for Shelters (%)	Rapid Re-Housing and TBRA to Prevent Homelessness (%)	Assist HIV/AIDS Residents Remain in Housing-STRUM (%)	Assist HIV/AIDS Residents Remain in Housing--TBRA (%)	Provide Housing Information and Placement Services
CDBG	43	35	7	10	5	0	0	0	0	0	0	
HOME	0	0	0	0	0	92	3	0	5	0	0	
HOPWA	0	0	0	0	0	0	0	0	0	19	43	
ESG	0	0	0	0	0	0	0	60	40	0	0	
HTF	0	0	0	0	0	100	0	0	0	0	0	

Table 59 – Funding Allocation Priorities

Reason for Allocation Priorities

The State of Indiana does not prioritize the allocation of CDBG, HOME or ESG geographically. For CDBG awards, OCRA allocate funds to the areas of greatest need, based on stakeholder and resident consultation and the needs assessment and market analysis. This information is used to

guide the funding priorities for each program year. Due to the COVID-19 pandemic OOR was paused for FY2020. This pause gives the State the ability to reallocated the funds help in the response to COVID-19. This also gives the state the chance to reassess the impact of OOR.

Exact criteria vary by program, yet all programs prioritize assisting low income households. Most of IHCDA's housing programs prioritize 50 percent AMI households; ESG and HOPWA generally reach to lower income levels due to the nature of the populations they serve.

ESG allocates emergency shelter and rapid re-housing, homeless prevention and outreach activities are target statewide.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions. Because IHCDA allocates HOPWA to all ISDH-established care coordination regions except Region 7, it was determined that IHCDA will fund one HOPWA project sponsor per every care coordination region. This will remain true for all care coordination regions. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional sponsor to tailor services to meet the needs of the population.

NHTF for rental development will be allocated statewide, to projects that meet the underwriting standards as defined under 24 CFR 93.

How will the proposed distribution of funds will address the priority needs and specific objectives described in the Consolidated Plan?

The distribution of housing funds addresses the critical, and growing, need for affordable rental housing. IHCDA, through its HOME and NHTF programs accesses market need, developer financial capacity, the experience of the developer, the financial capacity of the project through the period of affordability. IHCDA also scores these applications on the past performance of the applicant, if the location of the proposed project is near areas of opportunity through its "Opportunity Index" (i.e. in counties with low unemployment), if the location of the project promotes positive health outcomes through it's "Health Needs Index" (i.e. proximity to pharmacies) and if the project will provide a high level of broadband access.

CDBG funds are prioritized for basic health and safety improvements—specifically water and sewer infrastructure investments and emergency and public health and safety needs—in rural areas that do not have the financial capacity or resources to make such critical improvements. Half of the distribution of CDBG allocates these priority needs. The balance address priority needs of economic growth and revitalization of rural communities.

IHCDA will continue to support comprehensive development and homeownership development through its set-aside of funding through the

homebuyer construction set-aside and the new Project Development track, in which either homebuyer construction, rental construction, or a combination may be pursued.

AP-30 Methods of Distribution – 91.320(d)&(k)

Introduction:

This section summarizes the Methods of Distribution (MOD) for CDBG, HOME, ESG, and HOPWA for PY2020. Full MODs are appended to this Action Plan.

Distribution Methods

Table 60 - Distribution Methods by State Program

1	State Program Name:	CDBG-OOR
	Funding Sources:	CDBG
	Describe the state program addressed by the Method of Distribution.	CDBG Owner Occupied Rehabilitation (OOR) application and program information can be found at: https://www.in.gov/myihcda/cdbg.htm This program consists of CDBG funding that is allocated to IHCDA for administration of OOR.
	Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	Scoring is located in the final portion of the OOR MOD (attached). In sum, each application is evaluated based on: Population served (14 points), Needs Analysis (15 points), Readiness (5 points) Capacity (14 points), Leveraging (6 points), Additional Program Features (7 points). Total possible points = 61. The scoring incorporates points for projects that serve below 50% AMI households, persons with disabilities, seniors, veterans and families with children.
	If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	IHCDA offers training and webinars to partner organizations on topics ranging from program application requirements to funds management to weatherization courses. IHCDA maintains a Resource Center on its website with detailed manuals that instruct its partners on how to develop and administer programs.

Describe the process for awarding funds to state recipients and how the state will make its allocation available **to units of general local government, and non-profit organizations, including community and faith-based** **organizations. (ESG only)**	N/A	
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other **community-based organizations). (HOPWA only)**	N/A	
Describe how resources will be allocated among funding categories.	No funding is anticpated during PY2020. Reinstatement of the OOR program may occur in future program years if funding allows and CDBG resources are available. In PY2020, OOR funding has been reallocated to support business recovery programs.	
Describe threshold factors and grant size limits.	The maximum request amount per application is $350,000. Funds must not exceed $25,000 per unit. Detailed subsidy limitations and eligible activity costs are located in the attached CDBG OOR MOD.	

	What are the outcome measures expected as a result of the method of distribution?	The OOR program is designed to improve the quality of existing housing stock in Indiana through owner occupied rehabilitation of properties occupied by low and very low income households. Secondary benefits will include neighborhood revitalization, enabling seniors to age in place, providing accessible, quality housing for persons with disabilities, promoting healthy families and improving energy efficiency in housing. IHCDA is also prioritizing repairs that may be detrimental to health, and that owners are aware of other hazards.
2	**State Program Name:**	Emergency Solutions Grant (ESG)
	Funding Sources:	ESG
	Describe the state program addressed by the Method of Distribution.	The ESG application and more information can be found at: https://www.in.gov/myihcda/ESG.htm. ESG uses different applications for each activity type (street outreach, shelter, rapid re-housing). Funding through the Emergency Solutions Program assists persons and families who are homeless find shelter, avoid homelessness and transition into permanent housing.

Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	IHCDA plans to allocate funding to between 10 and 15 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program for line items: Housing Relocation & Services (financial and services), Rental assistance and administration.
	There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately one-two agencies that may apply for an outreach component. No more than the maximum allowed 60 percent of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non-profits) who have had experience with rental assistance and will be published on the IHCDA and Balance of State CoC website.
	Each proposal will be reviewed by at least one IHCDA Community Services staff person. The reviewer will complete a built in scoring tool in the application, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each subrecipient will be awarded based upon the average of their proposal score and the amount of funding that will be available.
If only summary criteria were described, how can potential applicants access application manuals or other **state publications describing the application criteria? (CDBG only)**	N/A

Describe the process for awarding funds to state recipients and how the state will make its allocation available **to units of general local government, and non-profit organizations, including community and faith-based** **organizations. (ESG only)**	IHCDA plans to allocate funding to between 10 and 15 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program for line items: Housing Relocation & Services (financial and services), Rental assistance and administration. There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately one-two agencies that may apply for an outreach component. No more than the maximum allowed 60 percent of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non-profits) who have had experience with rental assistance. Each proposal will be reviewed by at least one IHCDA Community Services staff person. . The reviewer will complete a built in scoring tool in the application, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each subrecipient will be awarded based upon the average of their proposal score and the amount of funding that will be available.
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other **community-based organizations). (HOPWA only)**	N/A

	Describe how resources will be allocated among funding categories.	No more than the maximum allowed of 60 percent of ESG funds will be allocated to operations, TBRA, and/or STRMU.
	Describe threshold factors and grant size limits.	The amount of each award could be between $50,000 - $350,000
	What are the outcome measures expected as a result of the method of distribution?	The goal of ESG is to prevent homelessness and assist families and individuals experiencing homelessness to find housing as quickly as possible. Please see the ESG MOD for the performance standards expected of ESG subrecipients.
3	**State Program Name:**	HOME
	Funding Sources:	HOME
	Describe the state program addressed by the Method of Distribution.	The HOME applications and information can be found at: https://www.in.gov/ihcda/4084.htm Tenant based rental assistance programs funded with HOME have a separate application, found here: https://www.in.gov/ihcda/4102.htm HOME Partnership Investments Program, which is used to fund affordable rental unit construction and rehabilitation, develop affordable owner-occupied housing, assist special needs and homeless residents with housing needs (including through TBRA) and support the work of CHDOs.

Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	Scoring appears in the HOME MODs for rental and homeownership programs. Those going through the Indiana Permanent Supportive Housing Institute or the Rental Housing Tax Credit Program must meet the requirements of those applications to be eligible as well as HOME regulations.	
	HOME rental applications are evaluated based on: Project characteristics (33 points), Development Features (33 points), Readiness (8 points), Capacity (21 points), Leveraging Other Sources (6 points), Unique Features/Bonus (9 points). The scoring incorporates points for accessibility and visitability features in housing developments.	
	HOME homebuyer applications will be accepted on a rolling basis. If there are not eligible homebuyer applications, these funds may revert to rental. The scoring incorporates points for accessibility and visitability features, as well as units with 3+bedrooms in housing developments.	
	IHCDA will also be kicking off a "Project Development Track". A select number of nonprofit teams will be able to respond to a competitive RFQ. Those chosen will be required to go through an intensive four-five month project development training, through a HUD TA provider. Upon successful graduation, those teams may be eligible for additional HOME funding on a rolling basis.	
	CHDO Pre-Development Funds are also available to eligible CHDOs on a rolling basis until funds are exhausted.	
	CHDO Operating Fund are also available to eligible CHDOs if they are funded for a CHDO Reserve project.	
If only summary criteria were described, how can potential applicants access application manuals or other **state publications describing the application criteria? (CDBG only)**	N/A	

Describe the process for awarding funds to state recipients and how the state will make its allocation available **to units of general local government, and non-profit organizations, including community and faith-based** **organizations. (ESG only)**	N/A
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other **community-based organizations). (HOPWA only)**	N/A

Describe how resources will be allocated among funding categories.	For the 2020 program year, the approximately $14.6 million expected HOME funding will be allocated among the following programs:
	$10.~~5~~ 2 million rental construction projects
	$1 million homebuyer construction projects
	$~~900,000~~1.2 million Tenant Based Rental Assistance (TBRA) (if not utilized, will be converted to rental construction). TBRA may be used in other Participating Jurisdictions
	$750,000 CHDO Operating and CHDO Pre-Development loans
	$1.4 million for administrative uses: $560,000 organizational capacity, $900,000 admin
	$6 million for the Project Development track, which may be used for either Homebuyer or Rental housing construction. If these funds are not utilized, they may convert to HOME rental construction. This will be funded through prior year funds
	The balance of funds, and program income, will be used for rental and homeownership new construction
	If IHCDA does not receive eligible homebuyer applications, that set-aside will revert to rental construction.
	If the final HOME allocation is either increased or decreased from the above proposed amount, the set aside for rental will increase or decreased. If the HOME allocation decreases to where the set-aside for the administrative set-aside is above the allowable 10%, IHCDA will decrease the amount for administration to equal the 10% allowable under the HOME regulations.

	Describe threshold factors and grant size limits.	The maximum request amount per application is $1,000,000 for Rental (non-CHDO or CHDO in an eligible PJ), $1,500,000 (CHDO) $500,000 for homebuyer projects and $6,000,000 for the Project Development track.
		HOME funds used for acquisition, rehabilitation, new construction, soft costs, relocation, rent-up reserve, and developer's fee combined cannot exceed the following for units designated 50% AMI or higher on rental units : $72,000 for a studio, $84,000 for a 1 bedroom unit, $96,000 for a 2 bedroom unit, $117,000 for a 3 bedroom unit and $128,000 for a 4+ bedroom unit; or the following for units designated 40% or lower: $90,000 for a studio, $105,000 for a 1 bedroom unit, $120,000 for a 2 bedroom unit, $145,000 for a 3 bedroom unit and $160,000 for a 4+ bedroom unit
		The minimum amount of HOME funds to be used for rehabilitation or new construction is $1,001 per unit.
		HOME funds cannot be used for reserve accounts for replacement or operating costs, but may be used as a Rent-Up Reserve.
		Lead hazard and homebuyer counseling are limited to $1,000 per homeowner/buyer.
		Tenant Based Rental Assistance will be made available to Partners through a Request for Qualifications. TBRA may pay for rent, security deposits and utility deposits. Eligible participants under this program are households in which at least one household member was formerly incarcerated. TBRA is available statewide. Information on the TBRA Administration Plan and the RFQ may be accessed here: https://www.in.gov/ihcda/4102.htm
	What are the outcome measures expected as a result of the method of distribution?	Actual outcomes will depend on the types of applications received. All programs have the same goal of improving the quality of existing housing stock in Indiana.
4	**State Program Name:**	Housing Opportunities for Persons with HIV/AIDS
	Funding Sources:	HOPWA

Describe the state program addressed by the Method of Distribution.	The HOPWA award manual and request for qualifications for applicants can be found at: https://www.in.gov/myihcda/hopwa.htm	
	Housing Opportunities for Persons with HIV/AIDS assists persons with HIV and/or AIDS and who also have an income below 80% of AMI with housing placement and rental subsidies.	
Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	IHCDA will facilitate a request for qualifications (RFQ), advertised through the CoC network and posted online, for HIV/AIDS service providers. The RFQ will gather information on the number of persons/households they plan to serve, housing plans, housing services, organizational capacity, performance goals, supportive services, and their proposed budget. The RFQ applicants need to meet the following thresholds:	
	• Required to be a non-profit organization	
	• Required to be a current Indiana State Department of Health Care Coordination Site.	
	• Previous experience providing HOPWA assistance.	
	• Actively attending the local Regional Planning Council/Committees/Leadership roles within their Region	
If only summary criteria were described, how can potential applicants access application manuals or other **state publications describing the application criteria? (CDBG only)**	N/A	

Describe the process for awarding funds to state recipients and how the state will make its allocation available **to units of general local government, and non-profit organizations, including community and faith-based** **organizations. (ESG only)**	N/A	
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other **community-based organizations). (HOPWA only)**	IHCDA will facilitate a request for qualifications (RFQ), advertised through the CoC network and posted online, for HIV/AIDS service providers. The RFQ will gather information on the number of persons/households they plan to serve, housing plans, housing services, organizational capacity, performance goals, supportive services, and their proposed budget. The RFQ applicants need to meet the following thresholds: • Required to be a non-profit organization • Required to be a current Indiana State Department of Health Care Coordination Site. • Previous experience providing HOPWA assistance. • Actively attending the local Regional Planning Council/Committees/Leadership roles within their Region. By having all subrecipients to be current Indiana State Department of Health - Care Coordination Site, we are providing a one stop shop for persons to access level of care that is needed. Persons will be able to receive testing, diagnosis, medical information, supportive services and housing if needed.	

Describe how resources will be allocated among funding categories.	Funds will be made available in the following percentages of the total awards made to project sponsors:	
	• At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;	
	• No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration;	
	• No more than 35 percent to housing information and permanent housing placement activities;	
	• No more than 35 percent to supportive services that positively affect recipients' housing stability.	
	Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.	
Describe threshold factors and grant size limits.	Because IHCDA allocates HOPWA to all ISDH-established care coordination regions except Region 7 and parts of Region 11, it was determined that IHCDA will fund one HOPWA project sponsor per every care coordination region. This will remain true for all care coordination regions. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional subrecipient to tailor services to meet the needs of the population.	
What are the outcome measures expected as a result of the method of distribution?	For HOPWA, IHCDA will use the following indicators to measure subrecipient's ability to achieve the desired outcomes:	
	• Rental Assistance households/units	
	• Short-term rent, mortgage and utility assistance households/units	
	• Facility based housing operations support units	
	• Housing information services households	
	• Permanent housing placement services households	
	• Supportive services households	

5	State Program Name:	National Housing Trust Fund
	Funding Sources:	HTF
	Describe the state program addressed by the Method of Distribution.	More information about the National Housing Trust Fund and the allocation plan can be found at: https://www.in.gov/myihcda/2564.htm
	Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	For this funding cycle, a portion of the HTF funds will be offered exclusively to Rental Housing Tax Credit developments that (1) apply for funding under the 2020/2021 Qualified Allocation Plan (QAP) for the Rental Housing Tax Credit Program (RHTC) and (2) successfully completed the 2020 Indiana Supportive Housing Institute. To be eligible to submit an HTF supplemental application, a proposed project must meet all threshold requirements of the QAP, including the specific threshold requirements applicable to supportive housing developments. For FY20 HTF funds, IHCDA will not entertain stand-alone applications.
		IHCDA developed five (5) categories of scoring criteria within its QAP, based on the needs assessment conducted and established housing goals. Those include: Rents Charged (16 points), Development Characteristics (63 points), Sustainable Development (14 points), Financing & Market (21 points), Other (35 points).
	If only summary criteria were described, how can potential applicants access application manuals or other **state publications describing the application criteria? (CDBG only)**	N/A

Describe the process for awarding funds to state recipients and how the state will make its allocation available **to units of general local government, and non-profit organizations, including community and faith-based** **organizations. (ESG only)**	N/A	
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other **community-based organizations). (HOPWA only)**	N/A	
Describe how resources will be allocated among funding categories.	$4,294,564 for rental assistance; $370,000 for administration.	

	Describe threshold factors and grant size limits.	For projects requesting RHTC and NHTF, the maximum request amount per application is $750,000 – however, IHCDA will accept waivers.

At IHCDA's discretion, IHCDA may underwrite and award an increased amount of the NHTF allocation plan.

NHTF funds for acquisition/rehab, acquisition/new construction, rehabilitation, or new construction cannot exceed: $96,750 for a studio, $112,875 for a 1 bedroom unit, $129,000 for a 2 bedroom unit, $155,875 for a 3 bedroom unit and $172,000 for a 4+
 bedroom unit.

Each application must address only one development. See the attached policy for threshold and scoring criteria. |
	What are the outcome measures expected as a result of the method of distribution?	Actual outcomes will depend on the types of applications received. All programs have the same goal of improving the quality of existing housing stock in Indiana and developing rental housing for extremely low income persons.
6	**State Program Name:**	State Allocation of CDBG
	Funding Sources:	CDBG

Describe the state program addressed by the Method of Distribution.	The CDBG MOD discusses the allocation of funds to subrecipients within the State programs of:	
	• Stellar Regions Program,	
	• Blight Clearance Program,	
	• Main Street Revitalization Program,	
	• Public Facilities Program,	
	• Wastewater Drinking Program,	
	• Stormwater Improvements Program,	
	• COVID-19 Response Fund,	
	• Planning Fund,	
	• Technical Assistance, and	
	• Administration	
Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	Program criteria vary. In general, applications are accepted, and awards are made on a competitive basis throughout the program year. Criteria to select applications are located in attachments to the CDBG MOD.	
If only summary criteria were described, how can potential applicants access application manuals or other **state publications describing the application criteria? (CDBG only)**	Please see the MOD attached to this Action Plan.	

Describe the process for awarding funds to state recipients and how the state will make its allocation available **to units of general local government, and non-profit organizations, including community and faith-based** **organizations. (ESG only)**	N/A
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other **community-based organizations). (HOPWA only)**	N/A

Describe how resources will be allocated among funding categories.	For the 2020 program year, the $30.5 million expected CDBG funding will be allocated among the following programs: • Stellar Regions Program, $9 million • Blight Clearance Program, $750,000 • Main Street Revitalization Program, $1.2 million • Public Facilities Program, $2 million • Wastewater Drinking Program, $10.5 million • Stormwater Improvements Program, $3 million • COVID-19 Response Program, $3.2 million • Planning Fund, $1.2 million An additional $200,000 will be used for technical assistance and $612,000 will be allocated to cover administrative costs associated with the programs. CDBG-CV funding received through the CARES Act are allocated through a 2019 Action Plan Amendment. Contingency Plan for CDBG: If cuts are less than 25%: • IHCDA CDBG OOR remains at 10% of the total CDBG allocation • Admin and Technical Assistance remain at allowable percentages • Spread remaining percentage reduction throughout all remaining programs If cuts are greater than 25%: Housing program will not be funded, admin and Technical Assistance remain at allowable percentages, a substantial amendment is issued to reprogram other funds.
Describe threshold factors and grant size limits.	Please see the program specific grant limits and factors located in the CDBG MOD.

What are the outcome measures expected as a result of the method of distribution?	The expected outcomes vary by program; full details are contained in the CDBG MOD. For example, the Stellar Communities Program will make grants available to communities for comprehensive revitalization strategies. In these revitalization strategies, communities will identify areas of interest and types of projects, produce a schedule to complete the projects, produce cost estimates, identify local match amounts, sources, and additional funding, indicate the level of community impact and describe the significance each project will have on the overall revitalization of the region. From these revitalization strategies, regions will produce a three-year regional development plan which will identify capital and quality of life projects to be completed during that period.	

Discussion:

Please see above.

AP-35 Projects – (Optional)

Introduction:

For the 2020 program year, the State proposes to allocate funding to the following activities:

CDBG funds:

§§$0 million for owner-occupied rehabilitation

§§$9 million for the Stellar Regions program
§§$750,000 for Blight Clearance Program
§§$1.2 million for Main Street Revitalization Program

§§$2 million for Public Facilities Program
§§$10.5 million for Wastewater and Stormwater Improvements Program

$3 million for Stormwater Improvements Program

$3.2 million for COVID-19 Response Program
§§$1.3 million for Planning Fund
§§$200,000 for Technical Assistance
§ $612,377 for Administration

HOME funds:

- §§$10.~~5~~ 2 million rental projects/construction
- §§$1 million homeownership projects/construction
- §§$575,000 for CHDO operating and predevelopment
- §§$1.456 administrative uses ($900,000 internal and $560,000 organizational capacity
- $6 million for the Project Development track, which may be used for either Homebuyer or Rental housing construction. If these funds are not utilized, they may convert to HOME rental construction. This will be funded through prior year funds.
- $~~900,000~~1.2 million Tenant Based Rental Assistance (TBRA) (if not utilized, will be converted to

rental construction). TBRA may be used in other Participating Jurisdictions.

- The balance of funds, and any Program Income collected during FY 2020 will be made available for rental,

homebuyer or CHDO operating funds (up to the allowable cap).

ESG funds:

§§$2.2 million emergency shelters with operations, essential services, and outreach

§§$1.45 million rental assistance for rapid re-housing

§§$284,320 for administration

HOPWA funds:

§§$620,600 in TBRA
 §§$334,000 for housing information activities
 §§$270,500 short-term rental, utilities and mortgage assistance

§§$159,000 support facility operations and supportive services

$63,600 Permanent Housing Placement

$144,263 sub recipient and grantee administration

NHTF:

$370,000 (8% of total allocation) for administration

$4.3 million rental construction

Note: the Housing Recovery Program is under program design evaluation by the State of Indiana and will be available for comment at a later date.

#	Project Name

Table 61 – Project Information

Describe the reasons for allocation priorities and any obstacles to addressing underserved needs

Please see AP-25.

Obstacles to meeting underserved needs are largely related to: 1) Limited resources to fill the large gaps between the rents that are needed to serve extremely low income households; 2) Challenges associated with opioid use and mental illness and accessing services; 3) Limited funding to address transportation challenges; and 4) The complexities of economic development in nonentitlement areas.

AP-38 Project Summary

Project Summary Information

AP-40 Section 108 Loan Guarantee – 91.320(k)(1)(ii)

Will the state help non-entitlement units of general local government to apply for Section 108 loan funds?

No

Available Grant Amounts

N/A

Acceptance process of applications

N/A

AP-45 Community Revitalization Strategies – 91.320(k)(1)(ii)

Will the state allow units of general local government to carry out community revitalization strategies?

State's Process and Criteria for approving local government revitalization strategies

AP-50 Geographic Distribution – 91.320(f)

Description of the geographic areas of the state (including areas of low-income and minority concentration) where assistance will be directed

The State of Indiana does not prioritize the allocation of CDBG, HOME or ESG geographically. Instead, OCRA and IHCDA allocate funds to the areas of greatest need, based on stakeholder and resident consultation and the needs assessment and market analysis. This information is used to guide the funding priorities for each program year.

Exact criteria vary by program, yet all programs prioritize assisting low income households. Most of IHCDA's housing programs prioritize 50 percent AMI households; ESG and HOPWA generally reach to lower income levels due to the nature of the populations they serve.

For IHCDA's HOME program, applications for rental and homeownership projects located within non-participating jurisdictions and those Participating Jurisdictions which receive less than $500,000 of HOME funding directly from HUD will be considered for funding.

Several IHCDA programs are available for projects statewide. This includes IHCDA's HOME Tenant Based Rental Assistance Program, and projects selected through its Supportive Housing Institute, which utilize HOME and NHTF.

All other NHTF projects for rental development will be allocated statewide.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions because IHCDA allocates HOPWA to all ISDH-established care coordination regions except Washington, Harrison, Floyd, Scott and Clark counties. These four counties are served by KY. It was determined that IHCDA will fund one HOPWA project sponsor per every care coordination region. This will remain true for all care coordination regions. If a distinct eligible population with specific needs exists in a region (for example, homeless men in Lake County), IHCDA will work with the regional subrecipient to tailor services to meet the needs of the population.

Geographic Distribution

Target Area	Percentage of Funds

Table 62 - Geographic Distribution

Rationale for the priorities for allocating investments geographically

The State agencies that receive funds determine geographic allocation based on grants that are awarded each year. Both OCRA and IHCDA monitor geographic distribution of funds to ensure that application criteria do not have the effect of disproportionately allocating funds into specific geographic areas.

Discussion

Please see above.

Affordable Housing

AP-55 Affordable Housing – 24 CFR 91.320(g)

Introduction:

This section lists the one year goals for numbers of households supported through HOME-funded rental and owner programs. For rental programs, these numbers represent rental units created and rehabilitated; for owner programs, these units represent new construction only. These numbers are based on prior year accomplishments (reported in the CAPER) and projected project costs.

One Year Goals for the Number of Households to be Supported	
Homeless	40
Non-Homeless	60
Special-Needs	40
Total	140

Table 6364 - One Year Goals for Affordable Housing by Support Requirement

One Year Goals for the Number of Households Supported Through	
Rental Assistance	20
The Production of New Units	120
Rehab of Existing Units	0
Acquisition of Existing Units	0
Total	140

Table 6465 - One Year Goals for Affordable Housing by Support Type

Discussion:

The precise number of households to be supported through production of new units, rehab of existing units and acquisition of existing units is not yet known. It will be based upon the number of applications received.

AP-60 Public Housing - 24 CFR 91.320(j)

Introduction:

This section describes IHCDA's efforts as a public housing authority to improve the needs of renters receiving public housing subsidies.

Actions planned during the next year to address the needs to public housing

Since January of 2019, IHCDA has approved several Rental Assistance Demonstration projects, preserving 416 units across the State of Indiana.

Ten percent (10%) of available annual Rental Housing Tax Credits will be set aside for Developments involving the substantial rehabilitation of existing federally assisted affordable housing and/or the demolition and decentralization of federally assisted affordable housing units utilizing the same site (over 50% of the units must be replaced in the Development/Application).

This includes:

1. Developments that propose the preservation of HUD or USDA affordable housing; orRHTC Developments with Compliance Periods that have expired or are expiring in the current year and the extended use agreement is still in place; orFederally assisted developments which entail demolition and decentralization of units with replacement of units on the same site as described above.

To be eligible for the set-aside, a Development must meet the following requirements:

- If a Development contains multiple building and construction types, at least 50% of the units must qualify as preservation units; and
- Rehabilitation hard costs must be in excess of $30,000 per unit excluding the costs of furniture, construction of community buildings and common area amenities. However, USDA Rural Development Section 515 properties may include the cost of construction for community buildings and common area amenities in the minimum per unit amount. Note: for Developments competing in all other set-asides, rehabilitation hard costs must be in excess of $20,000 per unit.

In addition, IHCDA also offers points to Rental Housing Tax Credit Applications who propose the preservation of HUD or USDA affordable housing (including, but not limited to Project Based Section 8, Public Housing or RD 515 Properties).

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

participate in homeownership

N/A; the State does not own or operate public housing developments.

If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance

IHCDA is a High Performing Section 8, only PHA.

Discussion:

Please see above.

AP-65 Homeless and Other Special Needs Activities – 91.320(h)

Introduction

For the 2020 Action Plan, the State considered feedback from service providers and shelters about the growing challenges of assisting residents experiencing homelessness. Stakeholders continued to express concerns about the limited housing and services to assist persons recovery from addiction, especially those leaving the criminal justice system. Housing with an integrated care model is imperative for these residents, and needed for persons with disabilities and seniors.

Over the first year of the Con Plan, the CoC will accomplish the following goals. First, the board will go through a strategic planning process. This will organize the board and create a strong plan for the future of the CoC, which includes ESG sub-recipients and funds. This plan will be pulled together using data from HMIS and local organizational needs. The board will then focus funding and actions based on needs of communities and the full CoC. They will focus on areas that are not currently receiving assistance and need it as well as create a plan for all organizations within the CoC to affectively prevent and reduce homelessness in their area.

Describe the jurisdictions one-year goals and actions for reducing and ending homelessness including

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

Over the first year of the Con Plan, the CoC will accomplish the following goals. First, the board will go through a strategic planning process. This will organize the board and create a strong plan for the future of the CoC, which includes ESG sub-recipients and funds. This plan will be pulled together using data from HMIS and local organizational needs. The board will then focus funding and actions based on needs of communities and the full CoC. They will focus on areas that are not currently receiving assistance and need it as well as create a plan for all organizations within the CoC to affectively prevent and reduce homelessness in their area.

The State relies on its partners to conduct outreach to persons who are homeless, assess their needs and communicate these needs to the State. To that end, the State will:

- Require all HUD McKinney Vento Funded programs to utilize HMIS for all shelter or transitional housing or permanent supportive housing programs serving homeless individuals and families.
- Require all HUD McKinney Vento Funded programs to participate in the annual, statewide homeless Point-in-Time Count in late January and timely submission of this data to IHCDA.
- Require all HUD McKinney Vento Funded programs subrecipients actively participate in their Regional Planning Council on the Homeless meetings regularly.
- Require all HUD McKinney Vento Funded programs to participate in the Coordinated Entry in their Region.

Addressing the emergency shelter and transitional housing needs of homeless persons

In addition to the allocation of ESG to meet the needs of persons who are homeless (see AP-20), emergency shelter and transitional housing needs are addressed through the ESG's participation in their local Regional Planning Council on Homeless in their Region but also through each Committee under the CoC Board. The Committees have been updated by the new CoC Board. They are: Executive Committee, Resources and Funding Committee, Strategic Planning Committee, Performance and Outcomes Committee and Ad Hoc Committees as needed. The State ESG program is part of the work of each committee in some way or another.

The strategic objectives of the CoC Board are being updated in the summer of 2020 through an updated strategic plan.

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

Rapid re-housing activities include housing relocation and stabilization services and financial assistance with rent, utilities, arrears, and deposits. The function of these funds is to provide short-term assistance to individuals and families. The State offers shelters a version of RRH that did not include rental assistance, and instead covers one time assistance to support a direct connection from shelter to permanent housing including housing relocation and stabilization services, utilities, arrears, and deposits.

Sub-recipients that receive RRH funds are required to create a Memorandum of Understanding (MOU) with shelters in their region to further strengthen the connection from emergency housing to permanent options including rentals with short/medium term subsidy.

A persistent barrier to the transition to permanent housing is lack of employment. This remains especially difficult in rural areas. Emergency shelters also reported that clients face challenges in moving from the shelter into permanent or transitional housing within the 40-day timeframe, which was the objective. Lack of affordable housing availability continues to be a key factor in extended lengths of stay in shelter while the housing search is in process.

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or, receiving

assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs

The Indiana Supportive Housing Institute is an important element of the Indiana Permanent Supportive Housing Initiative (IPSHI), which was launched by IHCDA and the Corporation for Supportive Housing (CSH) in 2008 to further the strategy to end long-term and recurring homelessness. The focus is on funding lasting solutions instead of stop-gap programs. The 2020 Institute will design supportive housing to serve households experiencing homelessness referred from the local Coordinated Entry system.

The 2020 Institute will build capacity of partners who are new to supportive housing in Indiana and create units in underserved areas. The Institute will help supportive housing partners learn how to navigate the complex process of developing housing with supportive services to prevent and end homelessness. The Institute process is expected to reduce the time it takes to obtain funding for supportive housing by improving the planning and development process.

Consideration will be given to both integrated supportive housing and 100 percent supportive housing developments.

The 2020 Institute will provide targeted training, technical assistance, and the opportunity to apply for predevelopment
financing for both new and experienced development teams. Teams will receive over 80 hours of training including individualized technical assistance and resources to assist in completing their project. In addition, industry experts, including staff from the Indiana Housing and Community Development Authority (IHCDA), will provide insight on property management, financing, and building design.

Discussion

Please see above.

AP-70 HOPWA Goals – 91.320(k)(4)

One year goals for the number of households to be provided housing through the use of HOPWA for:	
Short-term rent, mortgage, and utility assistance to prevent homelessness of the individual or family	225
Tenant-based rental assistance	125
Units provided in permanent housing facilities developed, leased, or operated with HOPWA funds	0
Units provided in transitional short-term housing facilities developed, leased, or operated with HOPWA funds	0
Total	350

AP-75 Barriers to affordable housing – 91.320(i)

Introduction:

In 2016, the State of Indiana updated its Analysis of Impediments to Fair Housing Choice (AI) to incorporate the new Assessment of Fair Housing framework for identifying barriers to housing choice—as well as access to economic opportunity. Data and information collected to develop this Consolidated Plan will update the AI in 2020.

The following fair housing issues were identified in the 2016 AI, which included quantitative analysis, input from stakeholders in two rounds of surveys, focus groups and interviews, and a statistically significant resident survey with oversampling of persons with disabilities and non-White residents.

Housing Issues

- Poor condition of affordable housing stock according to residents and stakeholders. Inability of residents to make needed improvements due to low incomes.
- Disproportionately high levels of cost burden and lower levels of homeownership for minority populations other than Asian residents.
- Cost burden gaps are greatest for minority residents earning between 30 and 50 percent of the area median income—those just over the poverty level (lower middle class).
- Minority residents and residents with disabilities are most likely to express challenges with home buying associated with down payments and mortgage loan qualifications.
- High mortgage loan denial rates for non-White residents, even when adjusting for income level.
- Higher use of publicly-supported housing by African American residents, suggesting challenges obtaining private market housing.
- Housing choice for residents with disabilities restricted by the lack of available, affordable, accessible housing. Nearly one-fourth of residents say the home they live in does not meet their family's disability needs and nearly two-thirds cannot afford to make improvements. The most needed improvement is ramps and handrails.
- Landlords not accepting service animals and charging higher rents or deposits for persons with disabilities requesting reasonable accommodations.
- Lack of rental housing for families with children: on average 72 percent of Housing Choice Voucher wait lists are families with children. PHAs surveyed for the AI consistently rated families with children as the demographic group with the most trouble finding rental housing—even more so than residents with criminal backgrounds.

Economic Opportunity Issues

- Gaps in educational attainment for Hispanic residents.
- Residents with disabilities face challenges finding employment and those who are employed

earn less than those without a disability.

- Economic differences contributing to segregation, mostly in urban areas. In some areas, systemic steering, lack of opportunity and lack of available housing perpetuate racially homogenous neighborhoods.
- Limitations (property tax caps) on State and local tax revenue generation.
- Severe lack of services and trained staff to deliver mental health and supportive services.

The factors contributing to these issues are:

- Economic weaknesses in some nonentitlement areas preventing residents from making needed repairs.
- Lack of accessible housing stock.
- Historically lower incomes of non-White and Hispanic residents and, for Hispanic residents, lower rates of educational attainment.
- Residents with disabilities facing lower employment opportunities and discrimination in housing markets.
- Families with children and non-White and Hispanic residents experiencing discrimination in rental market transactions.
- Landlords not complying with and/or not understanding fair housing laws, particularly reasonable accommodations.
- Insufficient resources to fund ADA improvements to public buildings and infrastructure, particularly in rural areas.

Actions it planned to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment

Since the 2016 AI was developed, OCRA and IHCDA have worked closely with the Fair Housing Center of Central Indiana (FHCCI) and the Indiana Civil Rights Division (ICRC) to address the identified barriers. These partnerships will continue
during the 2020 Program Year and will focus on: Fair housing testing; Fair housing training and education and outreach; and Inspecting and testing IHCDA funded properties for fair housing compliance.

Land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations and policies affecting the return on residential development and largely determined at the local level and are outside of the State's purview.

Discussion:

Please see above.

AP-85 Other Actions – 91.320(j)

Introduction:

This section describes a variety of other efforts the State will continue during the program year to help address housing and community development needs.

Actions planned to address obstacles to meeting underserved needs

Since January of 2019, IHCDA has approved several Rental Assistance Demonstration projects, preserving 416 units across the State of Indiana.

Ten percent (10%) of available annual Rental Housing Tax Credits will be set aside for Developments involving the substantial rehabilitation of existing federally assisted affordable housing and/or the demolition and decentralization of federally assisted affordable housing units utilizing the same site (over 50% of the units must be replaced in the Development/Application).

This includes:

1. Developments that propose the preservation of HUD or USDA affordable housing; orRHTC Developments with Compliance Periods that have expired or are expiring in the current year and the extended use agreement is still in place; orFederally assisted developments which entail demolition and decentralization of units with replacement of units on the same site as described above.

To be eligible for the set-aside, a Development must meet the following requirements:

- If a Development contains multiple building and construction types, at least 50% of the units must qualify as preservation units; and
- Rehabilitation hard costs must be in excess of $30,000 per unit excluding the costs of furniture, construction of community buildings and common area amenities. However, USDA Rural Development Section 515 properties may include the cost of construction for community buildings and common area amenities in the minimum per unit amount. Note: for Developments competing in all other set-asides, rehabilitation hard costs must be in excess of $20,000 per unit.

In addition, IHCDA also offers points to Rental Housing Tax Credit Applications who propose the preservation of HUD or USDA affordable housing (including, but not limited to Project Based Section 8, Public Housing or RD 515 Properties).

Actions planned to foster and maintain affordable housing

The primary activities to foster and maintain affordable housing are the State's CDBG, HOME and HTF funded activities that include the production of new units, homeownership opportunities, home rehabilitation and capacity support for affordable housing developers. IHCDA uses each of its programs to target a variety of needs and populations including, though not limited to: seniors, persons who are homeless, persons with physical or developmental disabilities, persons with mental impairments, persons with chemical addictions, single parents, victims of domestic violence, abused children families with children six and under veterans, and the re-entry population. IHCDA has supported numerous trainings on different facets on developing and maintaining affordable housing, and supporting fair housing and access to safe, quality housing across the state.

IHCDA's HOME program is focused on the following goals:

1. Demonstrate they are meeting the needs of their specific community;
2. Reach low and very low-income levels of area median income;
3. Link the project to the revitalization of existing neighborhoods, preferably through a comprehensive approach i.e. as part of a published and approved community revitalization plan);
4. Advance projects that promote aging-in-place strategies for seniors, persons with disabilities, and families with seniors or persons with disabilities;
5. Propose projects that are energy-efficient and are of the highest quality attainable within a reasonable cost structure.

Applicants of IHCDA's programs and funds are encouraged to engage in an array of activities necessary

to attain the solutions desired by a community, such as:

- Pre-development and seed financing – limited to eligible nonprofits
- Permanent Supportive Housing – Applicants must participate in the Indiana Supportive Housing Institute to be considered for an IHCDA investment.
- Rental assistance
- Acquisition, rehabilitation, guarantees, refinance, or (re)construction of rental housing
- Homeownership counseling and down payment assistance (not available using HOME funding)
- Acquisition, rehabilitation, guarantees, refinance, or (re)construction of homebuyer housing
- Rehabilitation, modification, and energy improvements to owner-occupied housing.

Additionally, the State utilizes other programs (summarized earlier in this section) to help foster and maintain affordable housing and include:

- Affordable Housing and Community Development Fund;
- Indiana Foreclosure Prevention Network;
- Low Income Housing Tax Credits (LIHTC); and
- Section 8 voucher program.

IHCDA has also updated its housing counseling requirements for its HOME Homebuyer applicants.

The HOME regulations at 92.254(a)(3) require all homebuyers who receive HOME assistance or purchase units development with HOME funds must receive housing counseling. In a final rule published by HUD's Office of Housing Counseling, HUD established housing counseling certification requirements provided in connection with a HUD program. All adult household members who will hold title and be a party to the senior loan are required to complete homebuyer counseling.

Under the rule, all homebuyers assisted under the HOME program must receiving housing counseling that is performed by a certified housing counselor who has passed the HUD certification examination **and** is employed by a HUD-approved housing counseling agency.

Actions planned to reduce lead-based paint hazards

Lead-based paint hazards will primary be addressed through CDBG and HOME funded rehabilitation activities. IHCDA has developed new lead forms, and done multiple trainings on how to address lead based paint through both these programs in partnership with HUD. In PY2020, IHCDA will be sponsoring a workshop on the Lead Safe Housing Rule and the HUD Lead regulations to administrators and contractors. IHCDA will also be addressing the dearth of eligible risk assessors, inspectors and licensed contractors by working with the Indiana Builders Association to advertise trainings. IHCDA has also developed a program to allow for reimbursement for contractors to receive their appropriate lead licenses.

In addition, IHCDA has been awarded the Lead Hazard Reduction Demonstration Grant through HUD. In partnership with the Indiana State Department of Health, IHCDA is using these funds will for the identification of lead hazards in units occupied by children who have been lead poisoned or are at-risk of becoming lead poisoned; the remediation of the lead hazards through appropriate control or abatement procedures; and ancillary activities such as training, outreach, and casework. Healthy Homes funding will promote and develop coordination of the lead hazard control activities with other healthy homes steps. These and other activities include providing smoke detectors, providing carbon monoxide detectors, installing anti-scald devices on bathtubs and installing and/or checking handrails. IHCDA is in their third year of executing this vital grant.

IHCDA will also be keeping a database of lead-free housing for rental units which undergo lead hazard control through the LHRD grant program.

IHCDA also developed a Lead Advocacy Team, consisting of IHCDA staff, State Department of Health, and the Indiana Community Action Association (INCAA) to discuss lead-based paint hazards across the state. In 2018, IHCDA, along with INCAA launched the Lead Community Action Plan, which is using CDBG-DR funding to provide lead hazard control to 17 rural counties across the State. This program will be closing in 2020.

Lastly, IHCDA in partnership with the Indiana State Department of Healthy has created the Lead Protection Program, which offers multiple resources to qualified residents. IHCDA keeps a website of all state-lead programming, a Lead Paint Safety guide, applications in both English and Spanish for interested families on this website: https://www.in.gov/myihcda/2675.htm

Actions planned to reduce the number of poverty-level families

Indiana has a history of aggressively pursuing job creation through economic development efforts at the state and local levels. This emphasis on creating employment opportunities is central to a strategy to reduce poverty by providing households below the poverty level with a means of gaining sustainable employment.

The Governor's 2020 Next Level plan focuses on expanding educational and skill development opportunities in rural areas; attracting Defense Department-related jobs, and investing in broadband statewide.

In recent years, IHCDA has made several program adjustments to more directly target funds to benefit poverty-level families. IHCDA has added an Opportunity Index to incentive the construction of HOME projects in areas with public transit, low unemployment, high job growth, low poverty rate, and higher household income. IHCDA also added a new scoring category on Health and Quality of Life Factors to incentive HOME developments near primary care physicians, fresh produce, and proximity to positive land uses.

The State also utilizes the Section 3 requirement (a provision of the Housing and Urban Development Act of 1968). Section 3 applies to employment opportunities generated (jobs created) as a result of projects receiving CDBG or HOME funding through ORCA or IHCDA, whether those opportunities are generated by the award recipient, a subrecipient, and/or a contractor. The requirements of Section 3 apply to all projects or activities associated with CDBG or HOME funding, regardless of whether the Section 3 project is fully or partially funded with CDBG/HOME. A detailed description of Section 3 requirements is included in OCRA/IHCDA's award manual. A notice of Section 3 requirements is included in bid solicitations and is covered during the award trainings.

Actions planned to develop institutional structure

OCRA and IHCDA will continue to build capacity, leadership, and institutional structure in rural areas through:

- Regional Capacity Building workshops;
- Webinars and regional meetings to discuss funding opportunities and answer questions from grantees;
- Participation in state conferences to market programs;
- The Indiana Permanent Supportive Housing Institute;
- CHDO working group – a group of eight CHDO across the State of Indiana to discuss successes and challenges with the HOME Program, and to provide peer-to-peer support on non-profit capacity building.
- Trainings on Fair Housing and Reasonable Accommodations, Lead Based Paint, Certified Green Professional Certification, Certified Aging in Place Training and Universal Design; and
- Affordable housing development training.

Actions planned to enhance coordination between public and private housing and social service agencies

The State has an active network of community development corporations, many of which have become increasingly focused on housing and community development issues. These organizations are engaged in a variety of projects to meet their communities' needs, from small-scale rehabilitation programs to main street revitalization. Public housing authorities exist in the major metropolitan areas and in small to medium-sized communities throughout the State.

The State also has several organizations that advocate for State policies and organize housing and community development activities at the State level. Prosperity Indiana provides policy coordination, as well as training and technical assistance, to support nonprofit housing and community development activities. The Back Home in Indiana Alliance is composed of Indiana leaders in several affordable-housing and disability-related organizations and help people with disabilities become homeowners in several Indiana communities.

Through provision of training and technical assistance (discussed above), OCRA and IHCDA support coordination and help to build partnerships with and among these organizations. Examples from prior program years, which will be continued in PY2020, include:

IHCDA's and OCRA's executive leadership and staff speak at public and private housing and community development events. IHCDA staff have spoken at a variety of conferences for Accelerate Indiana Municipalities (AIM); the Indiana Association of Regional Councils (IARC); Indiana Housing Conference; and the Indiana Township Trustees Association, among others.

OCRA holds regular "listening sessions" in nonentitlement areas throughout the state to gather information on economic development and housing challenges. Those sessions provide an opportunity for various housing, service, and community development interests to explore solutions to their needs and foster working relationships.

OCRA's community liaisons (OCRA's can be found at https://www.in.gov/ocra/2330.htm) partner with local units of government, the private sector, and nonprofits to locate and proactively work to locate funding and other resources for community and economic development projects, as well as facilitate the meeting of local officials, state, and federal agencies. They also provide technical assistance on all OCRA programs.

IHCDA's two Real Estate Production Analysts each cover a region of the state (North, and, South) and provide frequent outreach and technical assistance. Outreach is provided by email, over the phone, and in-person when requested. Production Analysts also attend ribbon cutting, groundbreakings, and other promotional events.

Continued in the discusion below.

Discussion:

IHCDA conducts regional outreach meetings every year. These meetings are held three to five times a year and are each located in a different area of the state in order to ensure that partners in all areas of the state are able to easily attend. The information provided at these meetings is also tailored to address the specific needs of the region in which the meetings is being held. Local projects are highlighted as well. Production Analysts and other IHCDA staff utilize their existing contacts to invite current and potential partners to these meetings. Outreach meetings provide an opportunity for partners to meet their analysts as well as ask questions and provide input on IHCDA policy.

IHCDA also sponsors, in partnership with the Indiana Affordable Housing Conference, the Indiana Housing Conference. The Indiana Housing Conference is an annual conference for affordable housing professionals in which industry news and best practices are discussed. The conference also provides an opportunity for networking between affordable housing professionals from across the state and country.

The Indiana Supportive Housing Institute will focus on finding lasting solutions instead of stop-gap programs. The 2020 Institute will address issues of homelessness with a focus on serving people experiencing chronic homelessness, including veterans. The 2020 Institute will provide targeted training and technical assistance. Teams will receive over 80 hours of training including individualized technical assistance and resources to assist in completing their project. In addition, industry experts, including staff from IHCDA, will provide insight on property management, financing, and building design.

IHCDA has also continued to partner with the State Department of Heath on Lead based Paint and is partnering with ISDOH on the Lead Hazard Reduction Demonstration Grant. IHCDA has started a Lead Advocacy Group who meets monthly to discuss lead-based paint issues throughout the state. The group consists of IHCDA, ISDH, and the Indiana Community Action Agency.

IHCDA has also established a strong relationship with the Family and Social Services Administration (FSSA) to coordinate affordable assisted living rental housing production and housing for persons with intellectual or developmental disabilities, or persons who have a chemical addiction.

Finally, when funding rounds are open, OCRA and IHCDA both hold webinars and regional visits were held to educate potential grantees about the application process.

Program Specific Requirements

AP-90 Program Specific Requirements – 91.320(k)(1,2,3)

Introduction:

Please see below and the attached MODs for program specific requirements.

Community Development Block Grant Program (CDBG)
Reference 24 CFR 91.320(k)(1)

Projects planned with all CDBG funds expected to be available during the year are identified in the Projects Table. The following identifies program income that is available for use that is included in projects to be carried out.

1. The total amount of program income that will have been received before the start of the next program year and that has not yet been reprogrammed	0
2. The amount of proceeds from section 108 loan guarantees that will be used during the year to address the priority needs and specific objectives identified in the grantee's strategic plan.	0
3. The amount of surplus funds from urban renewal settlements	0
4. The amount of any grant funds returned to the line of credit for which the planned use has not been included in a prior statement or plan	0
5. The amount of income from float-funded activities	0
Total Program Income:	**0**

Other CDBG Requirements

1. The amount of urgent need activities	0
2. The estimated percentage of CDBG funds that will be used for activities that benefit persons of low and moderate income.Overall Benefit - A consecutive period of one, two or three years may be used to determine that a minimum overall benefit of 70% of CDBG funds is used to benefit persons of low and moderate income. Specify the years covered that include this Annual Action Plan.	80.00%

HOME Investment Partnership Program (HOME)
Reference 24 CFR 91.320(k)(2)

1. A description of other forms of investment being used beyond those identified in Section 92.205 is as follows:

   N/A

2. A description of the guidelines that will be used for resale or recapture of HOME funds when used for homebuyer activities as required in 92.254, is as follows:

When a homebuyer property is constructed, redeveloped, rehabilitated, or acquired, in whole or in part, with HOME funds and the HOME funds are provided to the homebuyer property in the form of a development subsidy and there is no homebuyer subsidy the recipient must implement resale requirements.

There are two different consequences that may be associated with a resale provisions (1) the resale provision can be triggered and its requirements must be met (as described below) or (2) an event of non-compliance can occur (as described further below).

The resale provisions are triggered if any of the following occur during the Affordability Period:

1. The homebuyer transfers or conveys the property by deed, land contract, or otherwise;

2. Foreclosure proceedings are commenced against the property;

3. The property is transferred by an instrument in lieu of foreclosure; or

4. The title to the property is transferred from the homebuyer through any other involuntary means.

The resale provision requires that the property:

1. Be marketed to families at or below 80% AMI;

2. Be resold to another individual or family whose income is at or below 80% of the area median income;

3. Be occupied by that individual or family as its primary residence for the remainder of the Affordability Period;

4. Be resold at a price that does not exceed 29% of the reasonable range of low income buyer's income towards the principal, interest, taxes and insurance for the property on a monthly basis ("Affordable Price"); and

5. Be affordable for a reasonable range of low income families between 50% and 80% of the median area income for the geographic area published annually by HUD.

3. A description of the guidelines for resale or recapture that ensures the affordability of units acquired with HOME funds? See 24 CFR 92.254(a)(4) are as follows:

   Please see the Grantee Unique Appendices for the guidelines; Resale appears on page 56 in the PDF of the appendix and Recapture appears on page 55. IHCDA does use the home affordable homeownership limits published by HUD.

4. Plans for using HOME funds to refinance existing debt secured by multifamily housing that is rehabilitated with HOME funds along with a description of the refinancing guidelines required that will be used under 24 CFR 92.206(b), are as follows:

   N/A

Emergency Solutions Grant (ESG)
Reference 91.320(k)(3)

1. Include written standards for providing ESG assistance (may include as attachment)

   Please see the Grantee Unique Appendices for the guidelines.

2. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

   The Coordinated Assessment Committee of the Balance of State Continuum of Care Board is working with the State ESG program to develop and coordinate regional centralized intake and triage centers to ensure access to assistance is driven by the needs of persons experiencing homelessness. IHCDA is the collaborative applicant within the CoC and IHCDA was awarded the Coordinated Access Grant. With the assistance of the CoC Board, IHCDA has will developed and improves upon the coordinated access system.

   Access: The Coordinated Assessment will be in the HMIS system and utilized by the Coordinated Access agency within the Region within the Balance of State CoC whether they are an ESG subrecipient or other programs funded by McKinney Vento. Each Region will determine if their Coordinated Access will be a centralized or decentralized system.

   Assessment: Each homeless person will be assessed and triaged based on their needs in order to prioritize the most vulnerable and those with the highest barriers for first assistance. This priority would include the chronic homeless population.

Assign: Once assessed the person/family then will be assigned to the right type of housing that best suits their needs whether it is permanent supportive housing, rapid rehousing or VASH voucher and whether it is available in that area or Region.

3. Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations (including community and faith-based organizations).

IHCDA plans to allocate funding to a maximum of 15 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Activities of the ESG program for line items such as: housing relocation and services (financial and services), rental assistance and administration.

There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately two - six agencies that may apply for the Annual Action Plan street outreach activity. No more than 60% of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the Balance of State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non-profits) who have had experience with rental assistance. Each proposal will be reviewed by at least one IHCDA Community Services staff person and by a member of a Committee under the CoC Board. Each reviewer will complete a scoring tool, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each subrecipient will be awarded based upon the average of their proposal score and the amount of funding that will be available. The amount of each award could be between $60,000 (for shelters) and $250,000 (for Rapid Re-housing) each.

4. If the jurisdiction is unable to meet the homeless participation requirement in 24 CFR 576.405(a), the jurisdiction must specify its plan for reaching out to and consulting with homeless or formerly homeless individuals in considering policies and funding decisions regarding facilities and services funded under ESG.

The State ESG recipient – IHCDA - has a member of the Resource & Funding Committee and the Balance of State CoC Board who has been formerly homeless and currently lives in a permanent home after recently leaving permanent supportive housing. The committee provides guidance to our CoC Programs and their policies and procedures. The State of Indiana recognizes the invaluable perspective of individuals who are currently homeless and formerly homeless in developing an effective person-centered program and system.

The State program strongly encourages subrecipients of the ESG program to incorporate this participation, to the maximum extent practicable, in a policy-making function of both the

organization and the respective regional Planning Council on the Homeless. The State ESG program application requires subrecipients to demonstrate how participation and input of people experiencing homelessness is utilized at both an organizational level and within their regional Planning Councils on
Homelessness. This will be a threshold item and will require the subrecipient to provide documentation around their policies for verification. This issue is also reviewed during program monitoring visits.

5. Describe performance standards for evaluating ESG.

The performance standards were developed in collaboration with the governing body for the Balance of State CoC Board and the Resource & Funding Committee and approved by the Balance of State CoC Board by using the national standards outlined in Section 427 of the McKinney-Vento Act, as amended by the HEARTH Act.

Baseline performance measurements will be reports generated by the HMIS system and mainly from the ESG CAPER reports for the current grant prior year. Two of the standards are specific to the subrecipient's program performance and the remaining two are specific to system outcomes.

ESG subrecipients will be able to set their own goals for the next years on areas such as: discharging persons to permanent housing, increasing employment income and increasing overall income by persons who exit the emergency housing.

Below are goals that IHCDA would like to reach on an annual basis:

ESG RR -rental assistance program subrecipients: At discharge from program, 82 percent of persons assisted will still be permanently housed, and 65 percent will increase their income.

ESG program subrecipients that are Emergency shelters that have activities such as operations, essential services and financial assistance: 50 percent of persons will discharge to permanent housing, and 25 percent will increase their income.

ESG program subrecipients that have outreach component: 50 percent of identified caseload will be permanently housed.

ESG program subrecipients that have outreach component: 50 percent identified caseload will increase their income.

The average length of stay of participants in ESG funded and other CoC programs should decrease by at least 10 percent.

Housing Trust Fund (HTF)
Reference 24 CFR 91.320(k)(5)

1. How will the grantee distribute its HTF funds? Select all that apply:

☑ Applications submitted by eligible recipients

2. If distributing HTF funds through grants to subgrantees, describe the method for distributing HTF funds through grants to subgrantees and how those funds will be made available to state agencies and/or units of general local government. If not distributing funds through grants to subgrantees, enter "N/A".

N/A

3. If distributing HTF funds by selecting applications submitted by eligible recipients,

a. Describe the eligibility requirements for recipients of HTF funds (as defined in 24 CFR § 93.2). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Eligible applicants include CHDOs, non- and for-profit affordable housing developers, and joint venture partnerships.

1. Whether the development demonstrates a need for HTF in order to make a greater number of units affordable to extremely low and very low households;
2. Whether the development meets State and Federal requirements of all programs for which the applicant is applying, including the threshold requirements;
3. Successful completion of the Permanent Supportive Housing Institute;
4. If the development ranking is sufficient for it to be awarded RHTC pursuant to the RHTC process as outlined in the current QAP; and,
5. The availability of HTF funds.

b. Describe the grantee's application requirements for eligible recipients to apply for HTF funds. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Application requirements are described in Parts V, VI, and VIII in the HTF Policy, which is part of Appendix A (Methods of Distribution) in the Grantee Unique Appendices.

c. Describe the selection criteria that the grantee will use to select applications submitted by eligible recipients. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

The Selection Criteria to select eligible recipients is described in Parts V and VI of the HTF Policy, which is part of Appendix A.

d. Describe the grantee's required priority for funding based on geographic diversity (as defined by the grantee in the consolidated plan). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Eligible developments can be located in any city, town or county located in Indiana. There is no geographic preference to the use of the HTF.

e. Describe the grantee's required priority for funding based on the applicant's ability to obligate HTF funds and undertake eligible activities in a timely manner. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Timely Undertaking – moderate priority: As stated under the Threshold Items Section 6.3 (d) of the HTF Policy, the applicant is required to demonstrate their ability to undertake the activities set forth in its application upon receipt of the HTF award, to begin construction within 12 months of receipt of the award, and to complete the development within a 24 month period.

6.3(d): The applicant must demonstrate experience and capacity to conduct an eligible HTF activity as evidenced by its ability to:

Own, construct, or rehabilitate, and manage and operate an affordable multifamily rental housing development; or

1. Design, construct, or rehabilitate, and market affordable housing for homeownership.
2. That the applicant has the capacity to undertake the activities set forth in its application upon receipt of the HTF award and begin construction within 12 months of receipt of the award and complete the development within a 24-month period.

f. Describe the grantee's required priority for funding based on the extent to which the rental project has Federal, State, or local project-based rental assistance so that rents are affordable to extremely low-income families. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Project-Based Rental Assistance – high priority: As stated under Threshold Items Section 6.3 (c) and 6.3 (e), in order to be eligible for the supportive housing set-aside of the QAP and for HTF funding, the applicant must demonstrate how units will be made affordable to the targeted population of persons experiencing homelessness. All developments are required to identify a source of project-based rental assistance for the supportive housing units, generally through Project-Based Section 8 vouchers or CoC funding. Developments that have not identified an operating subsidy source do not meet threshold and will not be considered for funding. As stated under Section 7.1 Rents Charged, Applicants may be eligible for 28 point for rent targeting.

6.3(c): The Applicant must identify all subsidy sources. Funding commitments must be provided with the RHTC application. If the funding has not yet been committed, application must provide proof of application, a narrative describing the selection process, and a narrative plan on how the development will move forward if the application is denied. HTF cannot be committed until all other sources have been committed.

6.3 (e): The Development must serve populations that are extremely low income and experiencing homelessness. The target population served by the development must be the target population that was identified based on community need and relevant data through the Supportive Housing Institute process and align with the goals of the Consolidated Plan.

g. Describe the grantee's required priority for funding based on the financial feasibility of the project beyond the required 30-year period. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Affordability Period – low priority: As stated under the Threshold Criteria Section 6.3 (a), applicants must meet the minimum 30-year period of affordability to be eligible for funding.

h. Describe the grantee's required priority for funding based on the merits of the application in meeting the priority housing needs of the grantee (such as housing that is accessible to transit or employment centers, housing that includes green building and sustainable development features, or housing that serves special needs populations). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Priority Housing Needs of Indiana – high priority: Through the 2020-2024 Consolidated Plan, the State of Indiana includes extremely low income households and permanent supportive housing/integrated supporting housing as "housing priority needs."

To be eligible for the supportive housing set-aside in the QAP and for HTF, the applicant must further

the creation of community-based housing that targets the extremely low income (less than 30% AMI) with intensive service programs that have a direct impact on reducing homelessness through the Housing First model, to meet the State's priority housing needs of serving extremely low income households. Applicants who have not successfully completed the Supportive Housing Institute and/or who do not meet the set-aside criteria as identified in both the QAP and in Sections 2.1 and 6.3 (e) of this Allocation Plan will not be eligible for funding.

In addition, IHCDA may award additional scoring of 140 points under Sections 7.1 Rents Charged; 7.2 Development Characteristics; and 7.3 Sustainable Development to prioritize projects which best serve.

i. Describe the grantee's required priority for funding based on the extent to which the application makes use of non-federal funding sources. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Extent of Non-Federal Funding – moderate priority: As stated under the Threshold Items Section 6.3 (c), the applicant must demonstrate all subsidy sources. IHCDA may also award up to 14 points for projects that meet the criteria as outlined in Sections 7.2 (o) Tax Credit Per Unit; 7.2 (p) Tax Credit per Bedroom; 7.4 (a) Firm Commitment; and 7.4 (b) Previous Funding in a Local Government.

4. Does the grantee's application require the applicant to include a description of the eligible activities to be conducted with HTF funds? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

5. Does the grantee's application require that each eligible recipient certify that housing units assisted with HTF funds will comply with HTF requirements? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

6. **Performance Goals and Benchmarks.** The grantee has met the requirement to provide for performance goals and benchmarks against which the grantee will measure its progress, consistent with the grantee's goals established under 24 CFR 91.315(b)(2), by including HTF in its housing goals in the housing table on the SP-45 Goals and AP-20 Annual Goals and Objectives screens.

Yes

7. **Maximum Per-unit Development Subsidy Amount for Housing Assisted with HTF Funds.**
Enter or attach the grantee's maximum per-unit development subsidy limits for housing
assisted with HTF funds.

The limits must be adjusted for the number of bedrooms and the geographic location of the
project. The limits must also be reasonable and based on actual costs of developing non-luxury
housing in the area.

If the grantee will use existing limits developed for other federal programs such as the Low
Income Housing Tax Credit (LIHTC) per unit cost limits, HOME's maximum per-unit subsidy
amounts, and/or Public Housing Development Cost Limits (TDCs), it must include a description
of how the HTF maximum per-unit development subsidy limits were established or a
description of how existing limits developed for another program and being adopted for HTF
meet the HTF requirements specified above.

See Part 4.1 Subsidy and Budget Limitations of the HFT Policy for the per unit subsidy limits. A
description of how the limits were determined by be found on page 15 of the HTF policy.

8. **Rehabilitation Standards.** The grantee must establish rehabilitation standards for all HTF-
assisted housing rehabilitation activities that set forth the requirements that the housing must
meet upon project completion. The grantee's description of its standards must be in sufficient
detail to determine the required rehabilitation work including methods and materials. The
standards may refer to applicable codes or they may establish requirements that exceed the
minimum requirements of the codes. The grantee must attach its rehabilitation standards
below.

In addition, the rehabilitation standards must address each of the following: health and safety;
major systems; lead-based paint; accessibility; disaster mitigation (where relevant); state and
local codes, ordinances, and zoning requirements; Uniform Physical Condition Standards; and
Capital Needs Assessments (if applicable).

All HTF funded projects must meet the property standards outlined in 93.301. The rehabilitation
standards are set in a separate appendix.

- Developments must use Uniform Physical Condition Standards (UPCS). A listing of those
  standards can be found in the Multi-Family Checklist. Beyond the UPCS standards, projects must

also comply with IHCDA Rehabilitation Standards (see Exhibit A); and the stricter of the local rehabilitation standards or the Indiana State Building Code.

- The development must meet the accessibility requirements at 24 CFR Part I, which implements Section 504 of the Rehabilitation Act of 1973.
- Covered multi-family units, as defined at 24 CFR 100.201, must meet the design and construction requirements at 24 CFR 100.205, which implements the Federal Fair Housing Act Amendments of 1988.
- Any units utilizing gas appliances must provide carbon monoxide detectors in addition to standard smoke detectors.
- Newly constructed units must meet additional energy efficiency standards for new construction pursuant to section 109 of the Cranston-Gonzalez National Affordable Housing Act.
- Where relevant, the housing must be constructed to mitigate the impacts of potential disaster, in accordance with State and local codes, ordinances, or other State and local requirements, or such other requirements as HUD may establish.

9. **Resale or Recapture Guidelines.** Below, the grantee must enter (or attach) a description of the guidelines that will be used for resale or recapture of HTF funds when used to assist first-time homebuyers. If the grantee will not use HTF funds to assist first-time homebuyers, enter "N/A".

N/A

10. **HTF Affordable Homeownership Limits.** If the grantee intends to use HTF funds for homebuyer assistance and does not use the HTF affordable homeownership limits for the area provided by HUD, it must determine 95 percent of the median area purchase price and set forth the information in accordance with §93.305. If the grantee will not use HTF funds to assist first-time homebuyers, enter "N/A".

☑ The grantee has determined its own affordable homeownership limits using the methodology described in § 93.305(a)(2) and the limits are attached.

<TYPE=[section 3 end]>

N/A

11. **Grantee Limited Beneficiaries or Preferences.** Describe how the grantee will limit the beneficiaries or give preferences to a particular segment of the extremely low- or very low-income population to serve unmet needs identified in its consolidated plan or annual action plan. If the grantee will not limit the beneficiaries or give preferences to a particular segment of the extremely low- or very low-income population, enter "N/A."

Any limitation or preference must not violate nondiscrimination requirements in § 93.350, and the grantee must not limit or give preferences to students. The grantee may permit rental housing owners to limit tenants or give a preference in accordance with § 93.303(d)(3) only if such limitation or preference is described in the action plan.

The purpose of this Housing Trust Fund (HTF) application is to provide subsidies in the form of grants to selected applicants for the acquisition, rehabilitation and/or new construction of supportive housing for persons with extremely low income (at or below 30% of area median income). For this funding cycle, a portion of the HTF funds will be offered exclusively to Rental Housing Tax Credit developments that (1) apply for funding under the Qualified Allocation Plan (QAP) for the Rental Housing Tax Credit Program (RHTC) and (2) successfully completed the Indiana Supportive Housing Institute.

Eligible applicants for tax credits and HTF funds must have successfully fulfilled all requirements and demonstrated meaningful and successful participation in the Indiana Supportive Housing Institute for the specific development for which they are applying. The Indiana Supportive Housing Institute provides training and support to organizations that plan to create supportive housing. Tenant outreach, selection, property management and service plans must be approved as part of the Institute process and prior to submission of a RHTC application. Participation in the Institute is based on a competitive RFP selection process.

12. **Refinancing of Existing Debt.** Enter or attach the grantee's refinancing guidelines below. The guidelines describe the conditions under which the grantee will refinance existing debt. The grantee's refinancing guidelines must, at minimum, demonstrate that rehabilitation is the primary eligible activity and ensure that this requirement is met by establishing a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing. If the grantee will not refinance existing debt, enter "N/A."

N/A; refinancing of existing permanent debt is not eligible under IHCDA's HTF program.

Discussion:

For HOPWA:
IHCDA will facilitate a request for qualifications (RFQ), advertised through the CoC network, posted online, and provided to current HIV/AIDS service providers. The RFQ is available to all agencies who meet the threshold requirements. Many of the programs that apply through the RFQ started off as

grassroots agencies years go by starting a non-profit program based upon the growing HIV/AIDS epidemic and the need in their community. There was a growing need of resources that were not readily available for this population. The non-profits utilized their partners in the community to build their board membership and collaborated with local hospitals, clinics, and housing agencies to assist in providing education, testing,

supportive services, financial assistance and housing. Nonprofit community organizations that apply are usually mental health centers, HIV/AIDS programs specifically, or local hospital.

The RFQ will gather information on the number of persons/households they plan to serve, housing plans, housing services, organizational capacity, performance goals, supportive services, and their proposed budget. The RFQ applicants need to meet the following thresholds:

- Required to be a non-profit organization
- Required to be a current Indiana State Department of Health Care Coordination Site.
- Previous experience providing HOPWA assistance.
- Actively attending the local Regional Planning Council/Committees/Leadership roles within their Region.
- No current outstanding findings with HUD or IHCDA.

By having the threshold that all applicants must be current Indiana State Department of Health Care Coordination Site, we are providing a one stop shop for persons to access level of care that is needed. Persons will be able to receive testing, diagnosis, medical information, supportive services and housing if needed. Care Coordination is a specialized form of HIV case management. Its mission is to assist those living with HIV disease with the coordination of a wide variety of health and social services. Case Management services are available statewide. It provides an individualized plan of care that includes medical, psychosocial, financial, and other supportive services as needed. It is offered free of charge to the person. The primary goals of the program are to ensure the continuity of care, to promote selfsufficiency, and to enhance the quality of life for individuals living with HIV. The trained professionals provide assistance such as: access to health insurance, housing programs, emergency funds, medications, utility assistance, mental health and substance abuse programs, HIV testing and prevention programs.

The RFQ will be evaluated through a tool that will verify that each applicant meets the threshold requirements and have financial capacity by meeting accounting and financial standards. It will be verified that each subrecipient are certified to be a care coordination site by requiring they attach the certificate or agreement showing they meet the standard.

Appendix - Alternate/Local Data Sources

<table>
<tr><td rowspan="9">1</td><td>Data Source Name

Public Housing Authorities</td></tr>
<tr><td>List the name of the organization or individual who originated the data set.

This table was updated with actual numbers from public housing authorities.</td></tr>
<tr><td>Provide a brief summary of the data set.

Public housing authority actual numbers.</td></tr>
<tr><td>What was the purpose for developing this data set?

To provide the most current information available.</td></tr>
<tr><td>Provide the year (and optionally month, or month and day) for when the data was collected.

March 2015</td></tr>
<tr><td>Briefly describe the methodology for the data collection.

Email communications with public housing authority personnel</td></tr>
<tr><td>Describe the total population from which the sample was taken.

All PHAs administered by the IHCDA.</td></tr>
<tr><td>Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.

N/A</td></tr>
<tr><td rowspan="5">2</td><td>Data Source Name

Stakeholder Survey</td></tr>
<tr><td>List the name of the organization or individual who originated the data set.

OCRA and IHCDA for the Consolidated Plan</td></tr>
<tr><td>Provide a brief summary of the data set.

Perspectives of Indiana stakeholders on housing and community development needs</td></tr>
<tr><td>What was the purpose for developing this data set?

To collect local input on the greatest housing and community development needs and the effectiveness of OCRA and IHCDA programs funded with HUD block grants</td></tr>
<tr><td>Provide the year (and optionally month, or month and day) for when the data was collected.

January and February 2020</td></tr>
</table>

	Briefly describe the methodology for the data collection.
	An online survey was distributed to stakeholders in OCRA's and IHCDA's networks and reached approximately 4,000 organizations
	Describe the total population from which the sample was taken.
	Units of local government in nonentitlement areas; affordable housing providers; social service providers; advocacy organizations; organizations specializing in working with persons experiencing homelessness; economic development organizations; specialists in public infrastructure and public works
	Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.
	Nearly 215 stakeholders, representing a wide range of industries and programmatic services across the state, responded to the online survey. One-fourth of stakeholders represent organizations that offer services statewide. Of the organizations that operate locally, they collectively represented 90 out of the 92 counties in Indiana.
3	**Data Source Name**
	2012 5-Year ACS
	List the name of the organization or individual who originated the data set.
	U.S. Census
	Provide a brief summary of the data set.
	American Community Survey 5-Year estimates.
	What was the purpose for developing this data set?
	Characterize the U.S. population.
	Provide the year (and optionally month, or month and day) for when the data was collected.
	2012
	Briefly describe the methodology for the data collection.
	Random sample survey
	Describe the total population from which the sample was taken.
	U.S. population
	Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.
	U.S. population
4	**Data Source Name**
	2018 5-year and 1-year ACS

List the name of the organization or individual who originated the data set.	
U.S. Census Bureau	
Provide a brief summary of the data set.	
American Community Survey 5-year (2014-2018) and 1-year (2018) estimates	
What was the purpose for developing this data set?	
Characterize the U.S. population; provide demographic and housing data for U.S. states, counties, cities, and rural areas	
Provide the year (and optionally month, or month and day) for when the data was collected.	
2014-2018 for 5-year and 2018 for 1-year	
Briefly describe the methodology for the data collection.	
Random sample of the U.S. population; representative sample of Indiana residents	
Describe the total population from which the sample was taken.	
U.S. population; Indiana residents	
Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.	
Varies according to the survey question. All questions are statistically significant within a margin of error.	

5	
	Data Source Name
	IHCDA Annual Report 2018
	List the name of the organization or individual who originated the data set.
	Indiana Housing and Community Development Authority
	Provide a brief summary of the data set.
	Annual report released by IHCDA
	What was the purpose for developing this data set?
	Report annual statistics for the authority
	How comprehensive is the coverage of this administrative data? Is data collection concentrated in one geographic area or among a certain population?
	This data is comprehensive for the IDHCA inventory. The data is not concentrated in one geographic area or among a certain population.
	What time period (provide the year, and optionally month, or month and day) is covered by this data set?
	2018

	What is the status of the data set (complete, in progress, or planned)?	
	Complete.	
6	**Data Source Name**	
	Longitudinal Employer-Household Dynamics 2017	
	List the name of the organization or individual who originated the data set.	
	U.S. Census	
	Provide a brief summary of the data set.	
	Employer-Household Dynamics	
	What was the purpose for developing this data set?	
	Describe employment and household dynamics	
	Provide the year (and optionally month, or month and day) for when the data was collected.	
	2017	
	Briefly describe the methodology for the data collection.	
	Random sample	
	Describe the total population from which the sample was taken.	
	U.S. population	
	Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.	
	U.S. population	
7	**Data Source Name**	
	2019 Point in Time Homeless Count	
	List the name of the organization or individual who originated the data set.	
	Indiana Balance of State Contiuum of Care; IHCDA is the designated Collaborative Applicant	
	Provide a brief summary of the data set.	
	The **Point in Time (PIT Count)** is a nationwide count of sheltered and unsheltered homeless persons on a single date in January. There is a day count and a night count.	
	What was the purpose for developing this data set?	
	To measure the number of sheltered and unsheltered people experiencing homelessness in the nonentitlement areas of the state	
	Provide the year (and optionally month, or month and day) for when the data was collected.	
	January 2019 (the 2020 PIT data were not available at the time this Consolidated Plan was prepared)	

	Briefly describe the methodology for the data collection.
	Local coordinators make sure shelters have survey forms and recruit volunteers to do interviews. Volunteers interview on the street, at shelters, and at service based organizations- including food pantries, emergency rooms, police stations, libraries, health clinics, and soup kitchens.
	Once the data is compiled, a report is released. While a public places count can be subject to seasonal and other variations, the PIT count is currently the most feasible method for gathering important information on homeless individuals and families.
	Describe the total population from which the sample was taken.
	People experiencing homelessness in nonentitlement areas
	Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.
	People experiencing homelessness in nonentitlement areas
8	**Data Source Name**
	PIC (PIH Information Center)
	List the name of the organization or individual who originated the data set.
	PIC is evolving into the PIH Inventory Management System or IMS. During the 3-year transition period, we are using the terminology IMS/PIC to refer to the evolving system. IMS/PIC is responsible for maintaining and gathering data about all of PIH's inventories of Housing Agencies (HAs), Developments, Buildings, Units, HA Officials, HUD Offices and Field Staff and IMS/PIC Users.
	Provide a brief summary of the data set.
	IMS/PIC allows HAs to electronically submit information to HUD. The first release was successfully implemented on December 15, 1999 and introduced a flexible, scalable, Internet-based approach which enables Housing Authority users and Department personnel to access a common database of Housing Authority information via their web browser from anywhere.
	Due to the success of this application, the IMS/PIC technical architecture will continue to be used as the foundation for future PIH systems.
	What was the purpose for developing this data set?
	IMS/PIC allows HAs to electronically submit information to HUD. The first release was successfully implemented on December 15, 1999 and introduced a flexible, scalable, Internet-based approach which enables Housing Authority users and Department personnel to access a common database of Housing Authority information via their web browser from anywhere.
	Provide the year (and optionally month, or month and day) for when the data was collected.
	2019

	Briefly describe the methodology for the data collection. IMS/PIC allows HAs to electronically submit information to HUD. The first release was successfully implemented on December 15, 1999 and introduced a flexible, scalable, Internet-based approach which enables Housing Authority users and Department personnel to access a common database of Housing Authority information via their web browser from anywhere.
	Describe the total population from which the sample was taken. IMS/PIC allows HAs to electronically submit information to HUD. The first release was successfully implemented on December 15, 1999 and introduced a flexible, scalable, Internet-based approach which enables Housing Authority users and Department personnel to access a common database of Housing Authority information via their web browser from anywhere.
	Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed. IMS/PIC allows HAs to electronically submit information to HUD. The first release was successfully implemented on December 15, 1999 and introduced a flexible, scalable, Internet-based approach which enables Housing Authority users and Department personnel to access a common database of Housing Authority information via their web browser from anywhere.
9	**Data Source Name** HOPWA CAPER and HOPWA Beneficiary Verification
	List the name of the organization or individual who originated the data set.
	Provide a brief summary of the data set.
	What was the purpose for developing this data set?
	Provide the year (and optionally month, or month and day) for when the data was collected.
	Briefly describe the methodology for the data collection.
	Describe the total population from which the sample was taken.
	Describe the demographics of the respondents or characteristics of the unit of measure, and the number of respondents or units surveyed.