



Indiana Housing & Community Development Authority

Lead Hazard Reduction Grant Program Effective December 1, 2022



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EQUAL OPPORTUNITY EMPLOYER AND HOUSING AGENCY

State of Indiana
Lieutenant Governor
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1. Program Goal and Summary

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

IHCDA will take the appropriate steps to ensure that its administrative and financial management system is compatible for the Lead Hazard Reduction grant program (LHR). Periodically, written policies, procedures, and forms for the administrative and financial management for the program may be updated. These policies and procedures will be used for the LHR 2022 grant program throughout the 48-month period of performance from December 1, 2022 to December 1, 2026.

Units Assessed and Completed

The goal for the LHR grant is to identify and remediate lead-based paint in approximately 131 target housing units where children less than six years of age are at greatest risk of lead-poisoning (pre-1960 and especially pre-1940 construction). In combination with lead hazard control, other healthy homes hazards will be addressed in approximately 60 units.

Reaching High Risk Groups and Communities/Target Area Selection

This grant will assist in protecting children under the age of six from lead-poisoning. In addition, the Healthy Homes Supplemental (HHS) funding available will enhance the lead-based paint hazard control activities by comprehensively identifying and addressing other housing hazards that affect occupant health. The number of children with a confirmed Elevated Blood Lead Level (EBLL) higher than 3.5 milligrams/deciliter is based on the number of unique children who received blood tests in 2021 (66,881). IHCDA will collaborate with the Indiana Department of Health (IDOH) for referrals of families where a child under the age of six has a confirmed elevated blood lead level. The program will also be advertised and marketed to our partners throughout the State and on our Healthy Homes Resource webpage.

Radon Testing and Mitigation

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

Healthy Home Hazard Assessment

Healthy Homes Supplemental Funding will be used to identify and remediate healthy and safety hazards other than lead-based paint hazards in select units that also receive lead-based paint hazard control. There will be no administrative costs allowed per program regulations. A Healthy Homes assessment will be incorporated in the Lead Inspection/Risk Assessment of approximately 60 homes combined with LHR funds to address hazards found in the assessment.

Eligibility Criteria

- Pre-1978 units where a child less than the age of 6 resides and/or spends a significant amount of time
- Family Income < 80% of Area Median Income
- Property Tax payments are current
- Homeowners' insurance is current
- Unit not located in 100-year flood plain
- Manufactured or mobile homes are not eligible for this program

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

Unit Prioritization

- Household with a child less than 6 years of age and diagnosed with an EBLL greater than 3.5 µg/dL
- Household where a child less than 6 years of age or pregnant female resides
- Household where a child under the age of 6 spends a significant amount of time visiting
- Households on the Weatherization deferral list with a child less than 6 years of age

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

Blood Lead Testing

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

Lead Safe Housing Registry

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

Construction Standards

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

Contractor Warranty

A warranty for a period of one year of all materials and workmanship will be included in each project’s contract undertaken with LHR and HHS funding. The warranty period will begin on the date the final inspection clearance letter is generated by the IHCDA Program Manager and then sent to the contractor via email and/or mail.

Participation Agreement

Upon completion of enrollment, the property owner and occupant are required to sign IHCDA’s Participation Agreement. The LHR Participation Agreement describes the requirements of the property owner and occupant during all phases of the program to ensure work is completed and after completion. All rental units will be placed on IHCDA’s lead safe-registry and agrees to market the unit to income eligible families for three years upon completion of the LHR repairs.

Affirmatively Further Fair Housing

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

2. Staffing and Partners

IHCDA has considerable experience implementing complex programs which includes awarding and regulatory oversight of the Community Development Block Grant Owner Occupied Repair Program (CDBG OOR); 2017 Lead Hazard Reduction Demonstration Grant (LHRD) program; and the Healthy Homes Production (HHP) grant. Our experience with these programs enables us to administer the LHR effectively and efficiently. All primary positions within IHCDA are currently staffed.

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

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

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

Program Director (PD) - Samantha Spergel, Director of Real Estate Strategic Initiatives and

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

The PD will be responsible for providing local officials and citizens with information about the program and leading discussions with communities, partners, industry professionals. The PD will take on the primary role of overseeing all outreach activities. The PD will further also be responsible for preparing the program budget, schedules, and amendments. The PD will work with the PM to prepare all the required reports and will work directly with Program Accounting staff on the processing of claims from for contractors.

Program Manager (PM) - David Pugh, Lead Grant Manager: The PM will dedicate 75% of his time to the Program and will perform the following: The PM will work with the Indiana Department of Health, the Indiana Community Action Programs, and other sources for client referrals of eligible participants for the LHR program. The PM will also be primarily responsible for the quarterly reporting

within HHGMS (Healthy Homes Grant Management System) and day-to-day operations.

The PM will work with the PD on developing SOPs, Policy Guidance, and monitor compliance with all applicable regulations, and ensure compliance with eligibility determination, risk assessments, inspections, remediation, worker licensing, training, and clearance requirements. The PM will review third party LIRA's to ensure all testing requirements are met and all lead hazards found are included in the scope of work. Clearance reports will be reviewed to ensure testing requirements and standards are met.

The IHCD A PM may conduct quality control inspections to ensure contractors follow the HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards, Grant Program Policy Guidance, and other health and safety requirements addressed follow local, State, and Federal regulations.

IHCDA Staff & Roles		
Project Director	Samantha Spergel	Performs oversight and evaluation of the LHR program, reporting, public presentations, and final approval of all contractor payments (soft costs) that are contracted by the grant. She ensures that all grant activities comply with HUD's Lead Safe Housing Rule, program guidance, and all state lead hazard control requirements.
Project Manager	David Pugh	Perform daily grant operations, marketing, outreach, contractor procurement, benchmarks, deliverables, reviewing applications, final approval of invoices for contractors, reviewing project Inspection and Risk Assessment reports and specifications (soft costs), evaluations of intervention outcomes, processes, monitoring, and quarterly reporting within HHGMS.
Program Analyst	Taria Edwards	Will conduct intake activities, income reviews, Tier II ERR submissions, and assist the PD and PM as needed. She will also assist in tracking program progress and documenting client information.
ELOCCS	David Strickland	Will be responsible for the management of the HUD financial system, tracking and reporting recipient progress, and drawing of recipient funds for disbursement to the appropriate financial institution.
Director of Real Estate Compliance	Carol Farzetta	The Director is responsible for ensuring partners comply with State and Federal regulations for the HOME Investment Partnership Program, Community Development Block Grant Program, and Low-Income Tax Credit Program. Specific duties include submitting regulatory reports to HUD, updating and maintaining program and compliance manuals with the most up-to-date guidance from HUD and the IRS, provide technical assistance and conduct compliance trainings.

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

3. Outreach

The LHR grant programs focus is on enrolling eligible privately-owned pre-1978 housing units occupied by income qualified families with children less than six years of age. The recruitment of these units requires collaboration, outreach, marketing, and referrals from several agencies including the Indiana University Lead Task Force, agency partners, state and local health departments, community-based organizations, and other public and private sources.

From a list maintained by the Indiana Lead and Healthy Homes Program (ILHHP) of children diagnosed with an EBLL of 3.5 µg/dL or greater, IHCDCA will work with the Indiana State Health Department to distribute program information to the local health departments for assistance with marketing and outreach.

IHCDCA will sponsor a Renovate, Repair, and Paint (RRP) certification course in partnership with the Indiana Builders Association to increase the pipeline of qualified contractors for the program. We will utilize our network partners to engage licensed lead-based paint contractors throughout the State of Indiana to participate in our program.

IHCDCA will design and lead targeted outreach, affirmative marketing and education on lead hazard control and lead poisoning prevention. We will be responsible for educating the owners of rental properties, tenants, and community on the various regulations pertaining to lead hazards and will provide additional training on lead safe maintenance and renovation practices.

4. Program Guidance and Review

The Program Director and Program Manager will conduct at least three presentations annually to our partners regarding the grant, progress, and all topics but not limited to:

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

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

5. Intake

The LHR grant funds and other matching/leveraged resources will be used in eligible privately-owned pre-1978 housing units where lead-based paint hazards are identified and where income eligible families reside and chose to participate in this *voluntary program*. The program complies with Section 1011 of the *Residential Lead-Based Paint Hazard Reduction Act of 1992* (Title X) in providing lead hazard control grant program services. The program will use an application process in determining eligibility for receiving assistance.

The Intake Analyst will perform all Tier II Environmental Reviews, income verifications, and provide case management in accordance with established procedures. An internal intake document checklist will be utilized to track and ensure all required forms are submitted and the requested income documents are submitted by each applicant. Once all intake documents are submitted and the income verification determines the applicant is eligible, the applicant will be considered enrolled. Electronic signatures by the applicant are acceptable on all program documents where a signature is required.

Households must be income eligible at the time of initial occupancy or at the time LHR/HHS funds are invested, whichever is later, in accordance with the Part 5 method of verifying income. An income verification is good for six (6) months from the time of the verification. IHCD will accept electronic document submission and signatures from applicants. If more than twelve (12) months lapse, the household income must be re-verified. The Program Manager will maintain unit information within HHGMS and an internal spreadsheet of enrolled units to ensure LHR grant program compliance is followed and for tracking of significant events.

Eligible Units:

Owner Occupied Units

These units must be the principal residence of families with income at or below 80 percent of the area medium income level, and not less than 90 percent of the units assisted with LHR grant funds must be occupied by a child under the age of six years old or must be units where a child under the age of six years spends a *significant amount of time visiting*.

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

Rental Housing Units

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

Zero Bedroom Units

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

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

Vacant Rental Units

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

While remediating lead-based paint hazards in vacant units is permissible, IHCDA will not forgo units where children are currently residing in preference of vacant units. IHCDA has established policies to ensure assisted units are prioritized for families with children under the age of six years, such as, but not limited to:

- Requiring compliance in the terms of your assistance agreement with owners
- Registering assisted units in a publicly accessible lead-safe housing registry and/or

Health Insurance Portability and Accountability Act of 1996 - In accordance with HIPAA guidelines, IHCDA has numerous safeguards in place to protect the medical information of a lead poisoned child. All medical information, including children’s blood lead levels and protected health information, will be maintained by HIPAA trained ISDH Lead and Healthy Homes Program Staff and Local Health Department staff in the jurisdiction where the child resides. IHCDA and our partners will not provide or request any medical information regarding a lead poisoned child in the household. The information is not necessary for the purpose of this project. Follow up medical monitoring may be completed by the local health department case managers, along with the family’s medical provider.

6. Lead Inspection and Risk Assessment

A complete lead-based paint inspection and lead hazard risk assessment, including either separate reports or a combined report are required for all units enrolled under this program. Costs associated with lead hazard testing include Lead Inspection, Lead Risk Assessment, and Clearance Testing. Lead inspections, risk assessments, reporting and documentation must in be accordance with *Policy Guidance 2013-01 Lead Inspection-Risk Assessment Reporting and Documentation* at, https://www.hud.gov/sites/documents/PGI_2013-01.PDF.

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

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

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

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

Dust-Lead Action Levels	
Floors	$\geq 10 \mu\text{g}/\text{sf}$
Windowsills	$\geq 100 \mu\text{g}/\text{sf}$

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

A copy of each completed inspection/risk assessment reports must be given to a homeowner, rental property owner and tenant in accordance with 24 CFR 35, subpart B. IHCD will ensure all risk assessments and clearance examinations are uploaded into the State of Indiana's I-LEAD system. Once uploaded, a certificate will be available and must be maintained in the client file.

Work Specifications will be developed by a third-party contractor, LIRA inspector, and/or Project Manager based on the Lead Inspection, Risk Assessment Report, and Healthy Home hazard assessment. IHCD will perform an interim and final inspection of the property during lead hazard control and upon completion of the work. Work specs will be written clearly and define the method of treatment, quantity, and quality of work and work materials used to address lead hazards identified in the risk assessment. Work will focus on the control of lead hazards by limiting lead dust generation, proper containment, and ensuring daily clean-up and through a combination of interim controls and abatement techniques.

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

7. Lead Hazard Control

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

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

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

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

and replacement activities.

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

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

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

Interim Controls	
<ul style="list-style-type: none">• Paint Stabilization• Window jamb liners and aluminum trough enclosures• Repairing rotted or defective substrate that could lead to rapid paint deterioration• Friction and impact surfaces treatment• Dust removal and control (technical cleaning)• Education	

8. Healthy Home Hazard Assessment

A complete 29 Healthy Homes Hazard Assessment will be incorporated in the Lead Inspection/Risk Assessment of approximately 131 homes. The funds will be utilized to address hazards that affect health and safety conditions in approximately 60 homes. There will be no administrative costs allowed per program regulations.

Only units receiving LHR funds are eligible to receive Healthy Homes Supplemental funding. These will be direct costs only. There will be a cap of \$15,000 per home and it must meet the referenced criteria to be eligible for the use of these funds. A maximum of \$450 for each assessment, and report with cost estimates.

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

1. Radon
2. Carbon Monoxide
3. Electrical Hazards
4. Damp and Mold Growth
5. Access Issues
6. Pests and Refuse

The inspection and work specifications, based on the six priorities, will be conducted by the LIRA inspector or qualified contractor. The LIRA inspection and lead hazard control work should be performed in a timely cost-efficient manner with the least interruption to the occupant. All reports will be reviewed to ensure all hazards are included in the initial scope of work with cost estimates. The final project scope of work must be approved by the IHCDA PM.

9. Scope Design

The proposed LHR grant work plan includes specific, measurable, and time-phased objectives for each of the major program tasks and activities and reflects benchmark performance standards for unit production, expenditures, community outreach, education, skills, training, and other program activities.

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

Approximately \$30,000 is available per unit in LHR grant funds, \$15,000 for Healthy Homes Supplemental funding of approximately 60 units (only available for units where LHR funds are used), and \$3,150 for radon mitigation of approximately 131 units. All funds must be used in accordance with this Work Plan, the Policy and Procedures grant manual, and all Office of Lead Hazard Control and Healthy Homes (OLHCHH) policy guidance.

IHCDA is the responsible administrative agency for the LHR grant. Staff, in implementing the program ensures compliance with all the administrative and financial management requirements of the program. David Pugh, under the direction of the Project Director, Samantha Spergel, provides the day-to-day management and oversight of the LHR program tasks, activities, and contractor performance.

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

10. Environmental Review

Environmental Review Tier 1 Broad-Level Review– IHCDA will complete a Tier 1 Environmental Review in compliance with and consistent with 24 CFR Part 58. Lead hazard control or healthy homes intervention work (construction) will not start prior to receiving a signed Release of Funds from HUD.

Environmental Review Tier 2- Site Specific Reviews

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

IHCDA's Environmental Review Record (ERR) and Section 106 Historic Review User's Guide and the ERR Workbook provides additional background information about the federally required processes including why the review is necessary, how to perform the review, and other resource information to help you complete the ERR Workbook. The User's Guide, all appendices, and fillable versions of the ERR Workbooks are available at: <http://www.in.gov/myihcda/2650.htm>

11. Procurement and Contracts

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

Lead hazard control and HHS funding repairs should be bid together and under one contract to minimize the amount of time for procurement and project completion.

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

When the reimbursement method is used, IHCDA will make payments within 30 calendar days after receipt of the billing, unless the OLHCHH believes the request to be improper (See 2 CFR § 200.53, Improper Payments). Note that, if non-federal laws or regulations applicable to a Non-Federal Entity

specify a shorter prompt payment period, the Entity must comply with that shorter period.

IHCDA will set up an eligible pool of contractors who must be approved by the IHCDA Delegation Committee prior to entering a contract. Program information will be sent regularly to interested State of Indiana licensed lead-based paint professionals regarding the opportunity and requirements to be added to eligible contractor pools. Each bidders list will be updated by the PM every six months to ensure all documentation is current. At any time, new contractors may request to be added and current contractors may request to be taken off IHCDA's bidders list.

IHCDA policy on services by a Contractor:

A contractor may be a for-profit entity, a not-for profit, or a municipal employee. A contractor may perform administrative or professional services as a stand-alone or in conjunction with other activities. The competitive negotiation method is recommended for all procurement of professional services. Once a contract for services is signed by the contractor and IHCDA, it will serve at the "notice to proceed" with the contracted work. IHCDA and/or the contractor will notify the property owner the day work will begin.

12. Minority Business Enterprise/Women Business Enterprise Requirements

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

13. Temporary Relocation

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

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

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

Occupants are entitled to receive temporary relocation assistance where applicable pursuant to the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA), 42 U.S.C. §§

4601-4655, as described in regulations at 49 CFR 24.2(a)(9)(ii)(D) and the corresponding Appendix A to Part 24. (These regulations can be accessed from the Government Publishing Office website at <http://www.gpoaccess.gov/cfr/index.html>.)

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

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

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

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

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

14. Unit Monitoring

The IHCDA PM will be responsible for the project administration, compliance, monitoring, and the oversight of lead abatement contractor's performance. IHCDA's Healthy Homes Analyst will perform intake activities to determine income eligibility while contractor procurement will be conducted by the IHCDA PM. All contractors and their applicable licenses and insurance will be submitted to the IHCDA PM for review and approval. All LIRA's, radon tests, assessments, and scopes of work will be reviewed to ensure each hazard identified is documented and included in the work plan. The PM will conduct a final inspection of each unit after all work has been completed and is in accordance with each applicable standard and to communicate the warranty with the property owner.

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

IHCDA's PM will submit the program Quarterly Report via HHGMS by the following dates:

January 31, 2023	April 28, 2023	July 31, 2023	October 31, 2023
January 31, 2024	April 30, 2024	July 31, 2024	October 31, 2024
January 31, 2025	April 30, 2025	July 31, 2025	October 31, 2025
January 30, 2026	April 30, 2026	July 31, 2026	October 30, 2026
January 29, 2027			

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

IHCDA staff will write and submit the Final Progress Report and other required closeout documentation for the grant to HUD after the award end date of December 1, 2026. A file review will be conducted by IHCDA and consist of reviewing completed files including income eligibility and documentation, hazard remediation, work specifications, contractor procurement, contract payments, administrative, and program delivery expenses. Inspection reports will be electronically filed and submitted via HHGMS unit work by the Program Manager upon clearance of an assisted unit.

15. Lead Clearance

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

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

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

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

Final cleaning and clearance samples are not performed until all lead hazard control work and rehabilitation work is completed, thereby ensuring a safe unit for occupancy. Once the project begins, it is only under rare circumstances that a change order may be approved. Upon completion of the project, clearance samples are taken.

Clearance sampling will only be conducted by an Indiana licensed inspector, risk assessor, or clearance examiner. Prior to the removal of warning signs and other demarcation, a visual inspection will be conducted to determine if deteriorated paint, dust, or debris are still present. The contractor will remediate deteriorated paint or properly clean visible dust and remove debris or residue found during the visual inspection. Clearance sampling will be conducted no sooner than 1-hour after the completion of the project, using documented methodologies and procedures outlined in 410 IAC 32-4-9.

The analytical results will be compared to the applicable clearance level to determine whether clearance has been achieved. If clearance has been achieved, the demarcation will be removed, and the project will be considered complete. If clearance levels exceed the applicable levels, the contractor will re-clean and

have retested all failed areas. Upon completion of the project, the Indiana licensed inspector or risk assessor will submit all analytical results to the PM to be included in the final report submitted in HHGMS. The contractor then submits an invoice for the total cost of the project and after reviewing and verifying for accuracy, the PM approves the invoice for payment by generating a check request. The contractor invoice, check request, and lead clearance report are forwarded on to the IHCDA PD and Deputy Executive Officer for review and approval. Payment is then released to the contractor by the IHCDA accounting department.

16. Funds Management

IHCDA is the responsible agency for overseeing the financing of lead hazard control activities in units and for approving payments to the contractors doing the work. IHCDA will directly administer and monitor the financing of work through contracts with the licensed abatement contractors.

Administrative costs may not exceed 10 percent of the grant award, excluding the Healthy Homes Supplemental funds. Administrative costs are determined based on the nature of the activity being performed and, therefore, may be found in both the direct and indirect cost categories. OLHCHH considers all costs included in your negotiated indirect cost rate as “administrative costs”.

LOCCS Access

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

Cost Reimbursement to Contractors

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

Allowable Costs

A cost may be charged to a federal grant only if it is allowable. To be allowable, a cost must be reasonable; necessary to perform the program; allocable to grant as either a direct or indirect cost; consistently treated in like circumstances; adequately documented; and otherwise, consistent with the applicable Notice of Funding Availability, the terms and conditions of the award, and the regulations in Policy Guidance 2015-01.

17. Economic Opportunities for low and very low-income persons

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

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

18. Program Performance Evaluation

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

LHRPROGRAM BENCHMARKS														
	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16
ASSESSED UNITS	3	10	19	28	38	48	55	59	84	98	112	126	139	
COMPLETED UNITS	1	4	14	23	31	36	40	50	59	73	86	99	125	131

The PM will maintain a database of potential enrolled by property address, start date, anticipated LHRD/HHS funding level, match source, and status. Meetings with all Partners will be coordinated by the Program Manager and Director to discuss performance, efforts to increase levels of participation, and benchmark goals.

A Lead-Safe Rental Unit Directory of rental properties will be established by the Program Manager and listed on the Healthy Homes Resource Page. The Directory will include the location (address) of the lead-safe unit and made available to each partner and inter-agency department for publication in their respective websites, newsletters, or office postings. The goal of the registry is to further promote and market lead-safe units to low-income households they serve through other Programs, including but not limited to: Section 8 Housing Choice Voucher Program.

The table below highlights the major tasks:

PROGRAM TASKS/ACTIVITY-DELIVERABLES	NUMBER
Number of families contacted and/or referred	250
Applications received	150
Number of units to receive hazard control work	126
Outreach events scheduled	12

19. Definitions

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

CAA- Community Action Agency

CDBG- Community Development Block Grant

CEST- Categorically Excluded Subject To

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

CFR- Code of Federal Regulations

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

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

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

DMS- Data Management System

EBLL- Elevated Blood Lead Level

EPA- Environmental Protection Agency

LOCCS- Line of Credit Control System

ERR- Environmental Record Review

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

HHGMS- Healthy Homes Grant Management System

HIPPA- Health Insurance Portability & Accountability Act

IHCDA- Indiana Housing & Community Development Authority

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

ILHHP- Indiana Lead & Healthy Homes Program

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

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

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

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

Lead Based Paint Hazard- any condition that causes exposure to lead from lead-contaminated dust, lead-

contaminated soil, or lead-contaminated paint that is deteriorated or present in accessible surfaces, friction surfaces, or impact surfaces that would result in adverse human health effects as established by the appropriate Federal agency

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

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

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

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

LHR- Lead Hazard Reduction Grant

LSHR- Lead Safe Housing Rule

MBE/WBE- Minority Business Enterprise/Women Business Enterprise

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

µg/dL- Micrograms per Deciliter

NOFA- Notice of Funding Availability

OLHCHH- Office of Lead Hazard Control & Healthy Homes

OOR- Owner Occupied Rehabilitation

OSHA- Occupational Health & Safety Administration

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

PD- Project Director

PM- Project Manager

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

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

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

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

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

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