



# **State of Indiana 2015-2019 Five-year Consolidated Plan**

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**Allocation of CDBG, HOME,  
ESG and HOPWA**

**Final Report—Amended**

November 10, 2016

# **State of Indiana 2015-2019 Consolidated Plan and 2015 Action Plan**

**Prepared for**

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# **SECTION I.**

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**2015-2019 Five-year Consolidated Plan  
and 2015 Annual Action Plan: CDBG, HOME,  
ESG, HOPWA**

# Executive Summary

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

### 1. Introduction

The State of Indiana is eligible to receive grant funds from the U.S. Department of Housing and Urban Development (HUD) to help address housing and community development needs. These grant funds include: the Community Development Block Grant (CDBG), HOME Investment Partnerships Program (HOME), Emergency Solutions Grant (ESG), Housing Opportunities for People with AIDS (HOPWA) and the National Housing Trust Fund (HTF). The dollars are primarily meant for investment in the State's less populated and rural areas ("nonentitlement" areas), which do not receive such funds directly from HUD.

The Indiana Office of Rural and Community Affairs (OCRA) receives and administers CDBG. The Indiana Housing & Community Development Authority (IHCDA) receives and administers HOME, ESG and HOPWA.

As a condition for receiving HUD block grant funding, the State must complete a five-year strategic plan called a Consolidated Plan for Housing and Community Development (Consolidated Plan). The Consolidated Plan identifies the State's housing and community development needs and specifies how block grant funds will be used to address the needs.

This document represents the five-year Consolidated Plan for the State of Indiana's 2015-2019 planning period. The report was completed using HUD's new electronic Consolidated Plan suite (eCon Plan). This report also contains the State's annual plan for allocating HUD block grant funds in the program year (PY) that begins in July 2015 and ends in June 2016. The 2015 action plan is designated by "AP" headings.

### 2. Summarize the objectives and outcomes identified in the Plan

During the 2015-2019 strategic planning period, the top-level goals that will guide funding allocations include:

**Goal 1.** Expand and preserve affordable housing opportunities throughout the housing continuum.

**Goal 2.** Reduce homelessness and increase housing stability for special needs populations.

**Goal 3.** Promote livable communities and community revitalization through addressing unmet community development needs.

**Goal 4.** Promote activities that enhance local economic development efforts.

The goals are not ranked in order of importance, since it is the desire of the State to allow each region and locality to determine and address the most pressing needs it faces.

To achieve the goals, the State will use a combination of federal and state funds and other public and private funds for project leveraging to address the priority housing and community development needs.

For the 2015 program year, the State proposes to allocate funding to the following activities:

**CDBG funds:**

- \$2.7 million for owner-occupied rehabilitation (allocated to IHCD)
- \$8.4 million for wastewater/drinking water improvements
- \$3.2 million for public facilities improvements
- \$4 million for the Stellar Communities program
- \$3.5 million for storm water improvements
- \$1.4 million for planning
- \$1.4 million for blight clearance
- \$1 million towards workforce development activities
- \$1.2 million for Main Street Revitalization Program
- \$655,000 for administration
- \$278,000 for technical assistance
- Section 108 loan program—up to \$80 million

**CDBG-DR funds:**

- \$5.5 multifamily housing (<51% AMI)
- \$4.4 million for owner occupied rehabilitation (100% AMI)
- \$3.5 million for comprehensive revitalization
- \$1 million for workforce development
- \$11 million for stormwater improvements
- Community Revitalization through Stellar Communities program (amount TBD)

**HOME funds:**

- \$3.2 million rental projects (competitive or Stellar Communities program funding)
- \$1 million homeownership projects (competitive or Stellar Communities program funding)
- \$1.5 million for Housing First projects (maximum \$500,000 per award)
- \$2.5 million for Rental Housing Tax Credit/HOME combos under the Qualified Allocation Plan (maximum \$500,000 per award)
- \$250,000 for CHDO operating and predevelopment
- \$900,000 administrative uses (\$550,000 internal and \$350,000 organizational capacity building)
- Tenant Based Rental Assistance (TBRA) will be funded with funds remaining from program years (PYs 2013, 2014 and 2015)

**ESG funds:**

- \$1.7 million emergency shelters with operations and essential services
- \$1.45 million rental assistance for rapid re-housing
- \$72,000 rental assistance associated with homeless prevention
- \$124,000 outreach activities

- \$270,000 for administration

#### **HOPWA funds:**

- \$425,000 in TBRA
- \$222,000 for housing information activities
- \$170,000 short-term rental, utilities and mortgage assistance
- \$90,000 support facility operations and supportive services

### **3. Evaluation of past performance**

Both OCRA and IHCD closely monitor the success of their programs funded with HUD block grants. Throughout the program year and as part of the Consolidated Plan process, OCRA and IHCD consult with stakeholders to ensure that the programs developed with HUD block grant funds are meeting unmet needs and making the greatest impact. For example, for the 2013 program year OCRA and IHCD implemented a Section 108 loan program to provide local government's access to difficult-to-obtain community capital. The State plans to continue this program during the 2015-2019 Consolidated Plan period.

The State also considers leveraging opportunities and works to design its programs to work in concert with other funding streams to advance the State's strategic goals. For example, to end long-term homelessness, ESG funds will be required to work in coordination with Continuum of Care (CoC) funds to reduce the length of time people experiencing homelessness stay in shelters.

### **4. Summary of Citizen Participation Process and consultation process**

Residents and stakeholders had many opportunities to participate in the development of the Consolidated Plan:

- Stakeholders participated in an online survey about housing and community development needs in the areas they work and live. More than 200 stakeholders participated in the survey.
- An additional 20 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.
- A statistically significant survey of residents in nonentitlement areas was fielded to collect information on the greatest housing and neighborhood needs; this survey also informed the Analysis of Impediments to Fair Housing Choice (AI).
- Both stakeholders and residents had the opportunity to review the draft Consolidated Plan between April 14 and May 13, 2015. Two public hearings were held in 5 locations on April 23, 2015 to collect comments on the Draft Plan.

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

## 5. Summary of public comments

The public comment period on the Draft 2015-2019 Consolidated Plan ran from April 14 through May 13, 2015. A public hearing was held on April 23 to receive comments on the Draft Plan; 23 people attended the hearings.

Attendees shared the following comments about the Draft Consolidated Plan during the public hearings:

- One attendee was concerned about the length of the Plan. Since it is the first time the public has reviewed the new format now required by HUD, it would have been nice to have more time to review the Plan before the public hearing. This is particularly important for persons who need the Plan transferred into alternative formats *Note: The draft plan was released 10 days in advance of the hearing.*
- In future years, could the state publish a “Save the Date” notice in January about when the hearings will be held in April?
- One attendee was concerned that migrant farm workers were no longer included as a special population in the new Plan.
- The needs of migrant farmworkers were described as severe, with many living in housing in very substandard condition, some without running water and many without modern conveniences (e.g., working appliances).
- One attendee was concerned with the lack of vouchers set aside under Money Follows the Person programs to use for independent living. Another attendee asked that Section 8 homeownership be part of the programs offered by the state’s public housing authorities.
- Two attendees discussed the lack of visitable and accessible housing in the state’s nonentitlement communities and called for a state visitability ordinance. One attendee shared his story: he lives in Fort Wayne and, of the 30 friends he would like to visit in the city; he can only visit one due to the difficulty getting into their homes and around their neighborhoods.
- Chemical sensitivity issues can be a problem in housing that is near agricultural areas. Landlords are not always aware of the requirement to make reasonable accommodations.
- One attendee recommended a program that would help low income homeowners with well and septic take replacements.

Written public comments received are appended to the eCon Plan and appear in Section III of this document.

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

All comments and views submitted during the 2015-2019 Consolidated Plan comment period were accepted and considered in development of the final plan.



# 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
Lead Agency	Office of Community and Rural Affairs
CDBG Administrator	Office of Community and Rural Affairs
HOPWA Administrator	Indiana Housing & Community Development Authority
HOME Administrator	Indiana Housing & Community Development Authority
HOPWA-C Administrator	Indiana Housing & Community Development Authority

Table 1 – Responsible Agencies

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## **PR-10 Consultation - 91.110, 91.300(b); 91.315(l)**

### **Introduction**

This section describes the stakeholder consultation and citizen participation efforts to gather input into the 2015-2019 Consolidated Plan and 2015 Action Plan.

### **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(l))**

OCRA community liaisons, located throughout the state, help OCRA design and direct programs that are consistent with the goals and needs of local communities. Community liaisons facilitate meetings with local officials, state and federal agencies, and nonprofit agencies and service providers.

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. The Lt. Governor and IHCDA's My Community, My Vision pilot program encourages high school students to become involved in their communities by collaborating with local government officials and civic leaders to envision community development projects.

### **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. Also describe consultation efforts to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS**

The IN-502 Continuum of Care (CoC) Board serves and acts as the oversight and planning body on preventing and ending homelessness for the CoC General Membership Body. The Board comprises a diverse set of geographically representative stakeholders with the knowledge and expertise to create policy priorities and make funding decisions related to homelessness. The CoC Board meets 10 times per year.

The CoC Board members represent populations in the homeless community, as well as subpopulations including chronic homeless, seriously mentally ill, chronic substance abuse, families, domestic violence, youth and veterans. There are two representatives from the Regional Planning Councils on Homelessness across the Balance of the State.

The State ESG program presents their program plans to the CoC Board, in addition to entitlement cities at their annual round table meeting.

The Executive Committee provides governance of process and the structure of the CoC IN-502 general membership and CoC Board. They oversee the MOA's with IHCDA and provide the overall communications to the CoC IN-502.

The Resource & Funding Committee oversees local, state, and federal funding for the CoC and seeks new opportunities for funding to end homelessness, such as Section 811 PRAD, McKinney Vento Competitive Applications and the Consolidated State Plan Application for the ESG funding. The Committee works with the Interagency Council, Indiana Department of Corrections, Family of Social Service Administration, Division of Mental Health and Addictions, Veterans Administration, Department of Education, and the Department of Child Services. The objective is to ensure integration of CoC and ESG under the same performance standards, meeting all the needs and gaps in the CoC.

The Performance & Outcome Committee oversees the Homeless Management Information System (HMIS) grant to provide oversight and help to develop, maintain, and update the statewide HMIS including the development and implementation of data protocols, reporting, policies and problem solving measures, and meeting all HUD benchmarks.

**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.**

In determining the ESG Allocation, a request for proposals is distributed to all the Regional Planning Councils on the Homeless throughout the Balance of State, to the current sub-recipients of the ESG program and current permanent supportive housing rental assistance programs who have had experience with rental assistance. Each proposal is reviewed by at least one IHEDA Community Services staff person and by a member of a Committee under the CoC Board. Each reviewer completes 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).

The performance standards for ESG were developed in conjunction with the governing body for the Balance of State CoC Board and the Funding & Resource 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.

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

Stakeholders participated in an online survey about housing and community development needs in the areas they work and live. More than 200 stakeholders participated in the survey.

An additional 20 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.

OCRA also met with several regional planning organizations to collect information on regional housing and community development needs and receive suggestions on how state programs could better meet these needs. This information was shared with IHCD in development of housing programs funded by CDBG and HOME.

A summary of the organizations represented by participating stakeholders is shown in the following table.

<b>Type of Organization/Agency/Group or Clients Represented</b>	<b>% Responding to Stakeholder Survey</b>
Government services/regional planning	29.8
Affordable housing	27.7
Economic development/business services	27.3
Homeless services	23.4
Local government	223.4
Low income residents in general	22.4
Persons with disabilities	20.5
Property management/landlords	12.7
Substance abuse treatment	12.2
Seniors	11.2
Fair housing/landlord tenant services	9.3
Food provision	8.3
Veterans	7.8
HIV/AIDS	4.9

**Table 2 – Agencies, groups, organizations who participated**

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

None; all agency types had the opportunity to participate in development of the 2015-2019 Consolidated Plan through the open stakeholder survey and public forums.

**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?
Indiana Balance of State Continuum of Care	State of Indiana Continuum of Care	ESG goals are developed in concert with CoC planning
IHCDA Strategic Plan	IHCDA	Housing priorities support the strategic plan initiative to “Create and preserve housing for Indiana’s most vulnerable population.” Both housing and community development goals support self-sufficiency initiative and improve resident quality of life and strengthen communities in rural areas
2014 Roadmap	Governor of Indiana	CDBG goals and priorities support the Roadmap 2014 initiative of streamlining and improving water planning

**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))**

As mentioned above, the state met with several regional planning organizations to collect information on regional housing and community development needs and receive suggestions on how state programs could better meet these needs.

Cooperation and coordination efforts are ongoing throughout the program year. For example, OCRA community liaisons, located throughout the state, help OCRA design and direct programs that are consistent with the goals and needs of local communities. Community liaisons facilitate meetings with local officials, state and federal agencies, and nonprofit agencies and service providers.

IHCDA offers ongoing access to and consultation with staff to help nonprofit housing developers and providers.

## **PR-15 Citizen Participation - 91.115, 91.300(c)**

### **1. Summary of citizen participation process/Efforts made to broaden citizen participation**

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

- Stakeholders participated in an online survey about housing and community development needs in the areas they work and live. More than 200 stakeholders participated in the survey.
- An additional 20 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.
- A statistically significant survey of residents in nonentitlement areas was fielded to collect information on the greatest housing and neighborhood needs; this survey was also used to inform the Analysis of Impediments to Fair Housing Choice (AI).
- Both stakeholders and residents had the opportunity to review the draft Consolidated Plan between April 14 and May 13, 2015.

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

**Citizen Participation Outreach**

Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
Online survey	Housing and community development professionals representing nonentitlement areas	➤ 200 stakeholders responded	<p>Top housing needs=housing for &lt; 30% AMI, housing for persons who are homeless, housing for seniors</p> <p>Top community development needs=job training programs, transportation, sidewalks and water/wastewater improvements</p>	N/A	<a href="http://www.surveymonkey.com/s/2015INstakeholders">www.surveymonkey.com/s/2015INstakeholders</a>
Online survey	Public Housing Authorities (PHAs)	28 PHAs responded	30% of PHAs said finding a landlord to accept vouchers is difficult; this disproportionately affects large families, residents with criminal records and residents with substance abuse challenges. The vast majority of PHAs give preferences to protected classes and other hard to house populations (e.g., persons with disabilities, homeless families)	N/A	<a href="http://www.surveymonkey.com/s/IndianaPHAsurvey">www.surveymonkey.com/s/IndianaPHAsurvey</a>

Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
Online survey	Indiana residents desiring to participate in Consolidated Plan development	➤ 60 residents responded	Many residents live in housing in high-crime neighborhoods because they cannot afford housing elsewhere. The most common reason residents are denied housing is low income. Greatest housing and community needs are access to transportation and tenant-based rental assistance.	N/A	<a href="http://www.surveymonkey.com/s/2015INresidents">www.surveymonkey.com/s/2015INresidents</a>
Telephone survey	Statistically significant survey of residents living in nonentitlement areas	380 residents, oversampling of low income and disabled residents	Ongoing	N/A	N/A
In-depth telephone interviews	Housing and community development professionals representing nonentitlement areas	20 stakeholders participated in in-depth interviews	Ongoing	N/A	N/A
Public Hearing	All interested stakeholders and residents		Ongoing	N/A	N/A

**Table 4 – Citizen Participation Outreach**



### **Summarize how the citizen participation process impacted goal-setting**

Information was collected from stakeholders and residents throughout development of the Consolidated Plan for both goal-setting and development of the Methods of Distribution. The top housing and community development needs identified in the citizen participation process were evaluated against the state's proposed five-year goals and allocation plans to ensure that the state is funding the greatest eligible needs (it is important to note that development of public transportation systems, identified as a top community development need in rural areas, is not a CDBG eligible activity). Open ended survey responses and feedback from stakeholders who were interviewed during the public comment period were also considered in program design and implementation.

# Needs Assessment

## NA-05 Overview

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

Indiana's rural areas grew very modestly between 2000 and 2013. The state's population rose by about 375,000 people, an increase of 6 percent. Median household income increased by 16 percent but inflation increased at a faster rate (about 24% in small, Midwestern rural areas), meaning that real incomes declined.

Approximately 268,000 households in nonentitlement areas earn less than 30 percent of the median family income (also known as the area median income or AMI), which is at or below poverty level. Nearly one-third are seniors and one-fifth are households with children. Many seniors live just above the poverty level (30 to 50% AMI), but are still considered low income because they earn half of what moderate-income households earn.

Statewide, there are nearly 900,000 Indiana residents with a physical, mental, and/or developmental disability. Many of these residents are seniors: of the 898,000 Indiana residents who are disabled, 333,000 are 65 years or older (37%). Compared to the population as a whole, poverty rates are much higher for people with disabilities: 23 percent of people with a disability are in poverty compared to 16 percent of the population overall.

The primary needs of persons living with a disability are access to affordable, accessible housing options and public transportation. Another significant need is housing opportunities for persons with disabilities who are transitioning from institutions back into the community.

Stakeholders were asked their opinions about top housing and community development needs in Indiana in a survey for this Consolidated Plan. The top housing needs included: housing for persons earning less than 30 percent AMI, housing for low income households in general, housing to help persons who are homeless and housing for seniors. Top community development needs included: public transportation options, job training and water and wastewater infrastructure improvements.

A needs assessment of areas affected by disasters was completed as part of the application for CDBG supplemental disaster recovery funds. The primary needs included: storm drainage improvements, wastewater and drinking water system improvements, dam and levee improvements, economic development, clearance/demolition of damaged structures and rehabilitation of residential housing.

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

### Summary of Housing Needs

Please see NA-05 for a summary of housing needs in the State of Indiana. This section contains the pre-populated HUD tables that support the needs analysis.

Demographics	Base Year: 2000	Most Recent Year: 2011	% Change
Population	6,080,485	6,454,254	6%
Households	2,337,229	2,472,870	6%
Median Income	\$41,567	\$48,393	16%

**Table 5 - Housing Needs Assessment Demographics**

Data Source: 2000 Census (Base Year), 2007-2011 ACS (Most Recent Year)

### Number of Households Table

	0-30% HAMFI	>30-50% HAMFI	>50-80% HAMFI	>80-100% HAMFI	>100% HAMFI
Total Households *	268,760	272,930	425,710	266,060	1,239,410
Small Family Households *	88,470	83,385	149,575	107,105	697,065
Large Family Households *	17,850	18,415	34,540	23,745	109,120
Household contains at least one person 62-74 years of age	35,770	48,940	84,265	51,620	210,480
Household contains at least one person age 75 or older	31,475	62,650	70,035	29,945	73,575
Households with one or more children 6 years old or younger *	55,870	47,465	71,005	47,355	141,350
* the highest income category for these family types is >80% HAMFI					

**Table 6 - Total Households Table**

Data Source: 2007-2011 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
<b>NUMBER OF HOUSEHOLDS</b>										
Substandard Housing - Lacking complete plumbing or kitchen facilities	3,545	2,715	2,655	765	9,680	1,755	1,585	2,135	865	6,340
Severely Overcrowded - With >1.51 people per room (and complete kitchen and plumbing)	1,825	1,315	1,490	530	5,160	140	360	390	335	1,225
Overcrowded - With 1.01-1.5 people per room (and none of the above problems)	5,685	3,800	3,930	1,385	14,800	1,330	2,255	4,080	2,485	10,150
Housing cost burden greater than 50% of income (and none of the above problems)	110,660	34,855	5,465	700	151,680	51,665	38,795	25,605	6,275	122,340
Housing cost burden greater than 30% of income (and none of the above problems)	17,665	61,225	53,060	5,885	137,835	14,590	37,710	76,565	39,630	168,495

	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)	16,640	0	0	0	16,640	8,970	0	0	0	8,970

**Table 7 – Housing Problems Table**

Data Source: 2007-2011 CHAS

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
<b>NUMBER OF HOUSEHOLDS</b>										
Having 1 or more of four housing problems	121,715	42,685	13,540	3,375	181,315	54,890	42,990	32,210	9,955	140,045
Having none of four housing problems	41,695	92,510	145,945	72,165	352,315	24,850	94,745	234,020	180,560	534,175
Household has negative income, but none of the other housing problems	16,640	0	0	0	16,640	8,970	0	0	0	8,970

**Table 8 – Housing Problems 2**

Data Source: 2007-2011 CHAS

### 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
<b>NUMBER OF HOUSEHOLDS</b>								
Small Related	52,585	38,530	22,990	114,105	19,780	24,585	42,240	86,605
Large Related	9,930	6,620	3,010	19,560	5,040	7,180	10,065	22,285
Elderly	17,345	20,170	11,880	49,395	27,015	32,985	29,635	89,635
Other	57,365	35,775	22,845	115,985	16,790	14,020	22,235	53,045
Total need by income	137,225	101,095	60,725	299,045	68,625	78,770	104,175	251,570

**Table 9 – Cost Burden > 30%**

Data Source: 2007-2011 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
<b>NUMBER OF HOUSEHOLDS</b>								
Small Related	45,890	12,570	1,260	59,720	16,740	13,740	9,635	40,115
Large Related	8,295	1,615	115	10,025	4,270	3,160	1,500	8,930
Elderly	12,380	8,650	2,870	23,900	18,555	14,155	8,825	41,535
Other	51,240	13,725	2,020	66,985	13,825	8,415	5,970	28,210
Total need by income	117,805	36,560	6,265	160,630	53,390	39,470	25,930	118,790

**Table 10 – Cost Burden > 50%**

Data Source: 2007-2011 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
<b>NUMBER OF HOUSEHOLDS</b>										
Single family households	6,635	4,385	3,975	1,400	16,395	1,475	2,195	3,690	1,890	9,250

	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
Multiple, unrelated family households	705	520	1,005	350	2,580	200	550	1,060	935	2,745
Other, non-family households	460	305	465	174	1,404	0	4	25	19	48
Total need by income	7,800	5,210	5,445	1,924	20,379	1,675	2,749	4,775	2,844	12,043

**Table 11 – Crowding Information – 1/2**

Data Source: 2007-2011 CHAS

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

There are approximately 672,000 single person households in Indiana according the 2010 Census. Single person householders are much more likely to be 65 or older than are heads of households with more than one occupant. Of the 672,000 single households in Indiana, 240,000 are seniors living alone.

In nonentitlement areas, seniors comprise a higher proportion of single person households than in urban areas, where students and young adults living alone are more prevalent. Statewide, seniors head 17 percent of multi-person households but 35 percent of single-person households. That difference is even more pronounced in rural areas of Indiana where 43 percent of single person households are headed by a senior compared to 23 percent of larger households.

The higher proportion of seniors in nonentitlement areas means that the needs of single persons will differ from those in urban settings. The only option for seniors in rural areas may be to stay in their homes as they age. Community supports, in-home health care and home repairs and accessibility modifications will grow in demand as residents as in place.

**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.**

The primary needs of persons living with a disability are access to affordable, accessible housing options. 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. There are 898,000 Indiana residents with physical, mental, and/or developmental disabilities. Compared to the population as a whole, poverty rates are much higher for people with disabilities: 23 percent of people with a disability are in poverty compared to 16 percent of the population overall.

Of the 898,000 Indiana residents who are disabled, 333,000 are 65 years or older. As Indiana’s population ages, more and more household 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.

The needs of non-seniors who are disabled are typically more severe: these residents have very high poverty rates and often have difficulty finding jobs that meet their needs. Finding affordable housing with accessibility improvements and which is near transit can be very difficult. Housing opportunities persons with disabilities transitioning from institutions back into the community is also very challenging in rural areas.

The national Center for Disease Control (CDC) tracks the incidence of Intimate Partner Violence (IPV) and Sexual Violence, which includes physical violence as well as non-physical but threatening behavior such as stalking. CDC data and similar studies consistently find the prevalence of physical violence against women to range from approximately one-quarter to one-third of adult women.

Estimates of prevalence rates from the National Intimate Partner and Sexual Violence Survey by the CDC and 2012 American Community Survey population numbers suggest that about 151,360 (6%) women and 120,897 (5%) of men in Indiana have experienced rape, physical violence, and/or stalking by an intimate partner in the past year. About 36 percent of women and 28 percent of men have experienced rape, physical violence, and/or stalking by an intimate partner at some point in their lifetimes.

### **What are the most common housing problems?**

Severe housing cost burden—when households pay more than 50 percent of their incomes in housing costs—is the most common housing problem, affecting more than 150,000 renters and 120,000 owners in Indiana’s nonentitlement areas.

Of the renters experiencing severe cost burden, nearly three-fourths have incomes of less than 30 percent of the AMI, roughly the equivalent of the poverty level. Severe cost burden is more evenly distributed across owner income categories, with 43 percent earning less than 30 percent of the AMI, 32 percent earning between 30 and 50 percent AMI and one-fourth earning more than 50 percent of AMI.

Severe cost burden affects more renters than cost burden (more than 30% of household income in housing costs), whereas more owners face cost burden.

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

Yes, large households for cost burden. Among households earning less than 30 percent AMI, large households have the highest rate of cost burden. This is consistent with stakeholders’ assessment of disproportionate needs: in the survey conducted for this Consolidated Plan, stakeholders commonly identified large households as the household group most impacted by high housing costs.

Both small and large households earning less than 30 percent AMI experience severe cost burden at higher rates than elderly households.

**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 2014 Balance of State Point-in-Time (PIT) homeless count identified 1,086 people living in transitional housing. Of these, 363 were children (33%), 87 were young adults (8%) and 636 (59%) were adults. 188 reported being victims/survivors of domestic violence; 125 had a serious mental disorder; and 117 had a serious substance abuse disorder. 134 were veterans.

**If the state 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**

Identification of persons who are at-risk of homelessness is done at several points in the Continuum of Care. For youth at-risk of aging out of foster care, the State Department of Child Services (DCS) conducts an independent living assessment that determines areas of strengths and challenges for youth while in foster care.

The State Community Mental Health & Addiction Advisory Council has developed a statewide integrated supportive housing network targeting persons in institutional settings and other residential facilities who are at risk of homelessness. The partnership is comparing Medicaid data with HMIS data to identify individuals at high risk of homelessness and to target housing and service resources at these individuals. From this data, the Partnership has also developed an assessment for persons in institutional settings and other restricted living situations for risk of homelessness. This assessment is being linked to the emerging CoC coordinated access network.

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

Based on the PIT surveys and counts, these characteristics include: experiencing domestic violence; serious and persistent mental illness; substance abuse challenges; needing housing affordable to poverty-level households (rental units that rent for less than \$500/month).

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

### Introduction

This section provides data on households with disproportionate housing needs. Data are presented by race and ethnicity and income category. Racial categories and ethnicity (Hispanic) are consistent with the definitions used by the U.S. Census. Income ranges correspond to HUD income categories and are based on the area median income for a family of four, which can be found at <http://www.huduser.org/portal/datasets/il.html>. All data are pre-populated by HUD.

According to HUD, disproportionate need occurs when a household category has a level of need that is at least 10 percentage points higher than the level of need of all households in a particular income category. For example, if 60 percent of households earning between 50 and 80 percent of the area median income (AMI) have a housing problem, and 75 percent of Hispanics in the same income category have a housing problem, Hispanics would have a disproportionate need.

This section provides data on households with disproportionate housing problems. Households are defined by HUD to have housing problems if they live in :1) Overcrowded conditions with more than 1.5 persons per room, not including bathrooms, porches, foyers, halls, or half-rooms, 2) Housing units that lack complete kitchen or plumbing facilities; and/or 3) Pay more than 30 percent of their household income in housing costs (cost burden).

### 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	231,191	44,856	20,830
White	167,537	34,942	14,369
Black / African American	43,166	7,934	3,841
Asian	3,320	243	1,300
American Indian, Alaska Native	710	174	65
Pacific Islander	29	30	0
Hispanic	12,837	1,033	980

**Table 12 - Disproportionally Greater Need 0 - 30% AMI**

Data Source: 2007-2011 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%

**30%-50% of Area Median Income**

<b>Housing Problems</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Jurisdiction as a whole	184,657	103,451	0
White	139,768	89,534	0
Black / African American	27,379	8,297	0
Asian	1,780	409	0
American Indian, Alaska Native	491	133	0
Pacific Islander	75	0	0
Hispanic	12,864	3,819	0

**Table 13 - Disproportionally Greater Need 30 - 50% AMI**

Data Source: 2007-2011 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**

<b>Housing Problems</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Jurisdiction as a whole	163,282	294,823	0
White	134,333	251,228	0
Black / African American	16,233	25,009	0
Asian	1,866	2,256	0
American Indian, Alaska Native	344	558	0
Pacific Islander	20	68	0
Hispanic	8,265	12,223	0

**Table 14 - Disproportionally Greater Need 50 - 80% AMI**

Data Source: 2007-2011 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	53,824	228,986	0
White	45,846	200,690	0
Black / African American	4,734	16,555	0
Asian	706	2,008	0
American Indian, Alaska Native	111	292	0
Pacific Islander	0	29	0
Hispanic	2,003	6,972	0

**Table 15 - Disproportionally Greater Need 80 - 100% AMI**

Data Source: 2007-2011 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

Households in State's nonentitlement areas earning between 30 and 50 percent of AMI have disproportionately greater housing problems according to HUD's tables. In this earning bracket, all racial and ethnic groups face disproportionately greater housing problems at a rate 15 percentage points or higher than whites. The disproportionality by race and/or ethnicity is as follows:

- African Americans and Hispanics: 16 percentage points higher;
- Asians: 20 percentage points higher;
- Native Americans: 18 percentage points higher; and
- Pacific Islanders 39 percentage points higher.

Other households with disproportionately greater need are Asians earning 0 to 30 percent of AMI (10 percentage points higher than whites), and Asians earning 50 to 80 percent of AMI (also 10 percentage points higher than whites).

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

### Introduction

This section provides data on households with disproportionately severe housing problems. Severe housing problems include: 1) Overcrowded households with more than 1.5 persons per room, not including bathrooms, porches, foyers, halls, or half-rooms, 2) Housing units that lack complete kitchen or plumbing facilities; and 3) Households with cost burdens of more than 50 percent of income.

### 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	189,844	86,124	20,830
White	135,099	67,306	14,369
Black / African American	37,167	13,960	3,841
Asian	3,040	521	1,300
American Indian, Alaska Native	578	300	65
Pacific Islander	29	30	0
Hispanic	11,148	2,717	980

Table 16 – Severe Housing Problems 0 - 30% AMI

Data Source: 2007-2011 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	75,220	213,026	0
White	57,224	172,189	0
Black / African American	9,973	25,730	0
Asian	1,066	1,120	0
American Indian, Alaska Native	201	431	0
Pacific Islander	30	45	0

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Hispanic	5,723	10,959	0

**Table 17 – Severe Housing Problems 30 - 50% AMI**

Data Source: 2007-2011 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

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Jurisdiction as a whole	39,832	418,192	0
White	31,803	353,650	0
Black / African American	3,459	37,752	0
Asian	584	3,506	0
American Indian, Alaska Native	87	820	0
Pacific Islander	10	78	0
Hispanic	3,541	16,933	0

**Table 18 – Severe Housing Problems 50 - 80% AMI**

Data Source: 2007-2011 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

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Jurisdiction as a whole	10,740	271,998	0
White	8,917	237,584	0

<b>Severe Housing Problems*</b>	<b>Has one or more of four housing problems</b>	<b>Has none of the four housing problems</b>	<b>Household has no/negative income, but none of the other housing problems</b>
Black / African American	833	20,455	0
Asian	263	2,447	0
American Indian, Alaska Native	18	386	0
Pacific Islander	0	29	0
Hispanic	659	8,358	0

**Table 19 – Severe Housing Problems 80 - 100% AMI**

Data Source: 2007-2011 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**

Households in facing disproportionately severe housing problems include Asians earning 30 to 50 percent of AMI (24 percentage points higher than whites) and Pacific Islanders earning 0 to 30 percent of AMI (10 percentage points higher than whites).

Hispanics earning 30 to 50 percent of AMI face severe housing problems at a rate 9 percentage points higher than whites, which is close to the HUD disproportionate definition.

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

### Introduction

This section provides data on households with disproportionate levels of housing cost burden according to level of cost burden. Housing cost burden occurs when households pay more than 30 percent of their gross household income toward housing costs, which includes utilities. Severe housing 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	1,774,736	383,648	288,218	21,619
White	1,574,562	311,722	216,112	14,914
Black / African American	110,598	44,085	47,743	3,991
Asian	18,282	3,839	4,540	1,345
American Indian, Alaska Native	3,042	811	809	65
Pacific Islander	352	55	65	4
Hispanic	52,971	18,272	15,027	1,025

**Table 20 – Greater Need: Housing Cost Burdens AMI**

Data Source: 2007-2011 CHAS

### Discussion

The HUD tables above show that the only households in the State with disproportionately greater housing cost burden are African Americans, who are severely cost burdened at a rate 13 percentage points higher than whites.



## **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 to 50 percent of AMI. Disproportionately greater *severe* housing cost burden occurs in all racial and ethnic households earning 50 to 80 percent of AMI, with the exception of African Americans.

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

In addition to cost burden, many low income households living in rural areas, regardless of race or ethnicity, need housing rehabilitation assistance. Many low income residents in rural areas are financially unable to make needed repairs. Making needed repairs not only improves residents' safety and quality of life, they help to preserve affordable housing in areas where it is limited.

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

N/A; at the state level, it is unclear if concentrations of disproportionate need exist at the neighborhood level.

## NA-35 Public Housing – (Optional)

This section provides an overview of 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.

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.

### Totals in Use

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers in use	0	0	0	4,701	0	4,701	43	0	1,027

Table 21 - Public Housing by Program Type

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

Data Source: PIC (PIH Information Center)

### Characteristics of Residents

	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	
# Homeless at admission	0	0	0	23	0	23	0	0	0

	Program Type							
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher	
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program
# of Elderly Program Participants (>62)	0	0	0	888	0	859	0	0
# of Disabled Families	0	0	0	1,497	0	1,425	0	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 22 – Characteristics of Public Housing Residents by Program Type**

Data Source: PIC (PIH Information Center)

### Race of Residents

Race	Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White	0	0	0	3,367	0	3,281	2	0	75
Black/African American	0	0	0	574	0	557	0	0	17
Asian	0	0	0	7	0	6	0	0	0
American Indian/Alaska Native	0	0	0	22	0	21	0	0	1
Pacific Islander	0	0	0	3	0	3	0	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 23 – Race of Public Housing Residents by Program Type**

Data Source: PIC (PIH Information Center)

**Ethnicity of Residents**

Ethnicity	Certificate	Mod-Rehab	Public Housing	Program Type					
				Vouchers			Special Purpose Voucher		
				Total	Project - based	Tenant - based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Hispanic	0	0	0	127	0	125	0	0	2
Not Hispanic	0	0	0	3,846	0	3,743	2	0	91

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

**Table 24 – Ethnicity of Public Housing Residents by Program Type**

Data Source: PIC (PIH Information Center)

**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. For this Consolidated Plan, PHAs in the state were surveyed about the condition of the units they manage. In general, the PHAs who responded to the State Consolidated Survey reported that public housing and HCVs work well in the communities in which they operate and that finding a landlord who accepts Section 8 is moderately easy. In addition to more funding and vouchers, the PHAs identified tenant counseling as a need.

**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 1,000 households are on IHCD's wait list for Section 8 tenant based rental assistance. The most immediate need of residents on the waiting list for vouchers is rental units that are affordable to residents earning less than 30 percent of AMI.

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

According to the stakeholders surveyed for this Consolidated Plan, housing for residents earning less than 30 percent of AMI is a top need of residents in general. This need has grown from prior years as a result of weak economic conditions and the inability of some rural areas to recover from the Great Recession.

## NA-40 Homeless Needs Assessment – 91.305(c)

This section summarizes the nature and extent of homeless in Indiana, based on the most recent Point-in-Time (PIT) street and shelter count and survey from 2014. The data in the table below represent the identified homeless population for the “balance of state,” which is largely small and medium sized towns in rural areas.

### Nature and Extent of Homelessness: (Optional)

<b>Race:</b>	<b>Sheltered:</b>	<b>Unsheltered (optional)</b>
White	2,409	217
African American	690	71
Asian	15	1
American Indian/Alaskan Native	14	4
Native Hawaiian/Pacific Islander	3	0
Multi-race	50	0
<b>Ethnicity:</b>	<b>Sheltered:</b>	<b>Unsheltered (optional)</b>
Non-Hispanic	3,082	300
Hispanic	168	20

Table 25 – Ethnicity of Public Housing Residents by Program Type

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

The 2014 PIT count identified 236 families living in shelters, 194 families living in transitional housing, in addition to seven child only families living in shelters and transitional housing.

Veterans with families were a small proportion of shelter and transitional housing residents, with only four families living in shelters and three in transitional housing. Most homeless veterans were not residing in family households: 131 single veterans were residing in shelters and another 122 in transitional housing during the PIT count.

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

Of those individuals identified as homeless and living in shelters in 2014, 76 percent identified their race as white and 95 percent were not of Hispanic descent. The largest minority group residing in shelters was African Americans, at 22 percent of sheltered homeless.

Similarly, 74 percent of those unsheltered were white; 24 percent were African American.

### **Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.**

The Balance of State PIT (BOS PIT) count from 2014 identified 2,183 people seeking emergency shelter and 1,086 living in transitional housing—a total of 3,489 persons experiencing homelessness on the night of the count. Of these, 60 percent resided in emergency shelters; 30 percent were living in transitional housing and 10 percent were unsheltered.

The majority of homeless individuals identified as non-Hispanic white (around 75%) and most (63%) were adults without children. Serious mental illness affected 12 percent of persons who were homeless; substance abuse, about 10 percent. The most common subpopulation was victims/survivors of domestic violence, which affected 20 percent of homeless persons.

### **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.**

Please see above; the narrative reflects the balance of state or rural homelessness.

**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. However, as part of the BOS PIT count, a projection of homeless interventions needed was conducted. The projection estimates the following gaps in permanent housing and temporary stays:

Permanent housing: Shortage of 1,714 of DIV units, 382 of PSH and 4,726 RRH.

Temporary stays: no need for new beds.

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

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

- Elderly and frail elderly,
- Persons with disabilities,
- Persons with substance abuse challenges,
- Domestic violence victims/survivors,
- Persons living with HIV/AIDS.

### Describe the characteristics of special needs populations in your community:

**Elderly.** In Indiana, 1 percent of the total population (1.1 million residents) are aged 62 or older. Over one third (38%) of elderly residents are living with some type of disability and 8 percent are “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). Approximately 89,500 elderly residents are living in poverty.

**People with disabilities.** People with physical, mental, and/or developmental disabilities make up 14 percent of the population in Indiana. Compared to the population as a whole, poverty rates are much higher for people with disabilities. About 29 percent of people ages 18-64 with disabilities are living in poverty compared to 15 percent of the population in that age group as a whole. Similarly, 17 percent of working age people with disabilities are unemployed compared to 8 percent of all working age people.

**Substance abuse challenges.** Rates of alcohol and illicit drug dependence in Indiana (8.5%) are similar to the national rate (8.4%). According to estimates from the Substance Abuse and mental Health Services Administration (SAMHSA), 2.3 percent of Indiana residents (nearly 396,000 adults) need but do not receive treatment for illicit drug or alcohol use.

**Domestic violence victims/survivors.** Based on the 2011 National Intimate Partner and Sexual Violence Survey by the CDC and 2012 Census estimates, about 151,360 (6%) women and 120,897 (5%) of men in Indiana have experienced rape, physical violence, and/or stalking by an intimate partner in the past year. About 36 percent of women and 28 percent of men have experienced rape, physical violence, and/or stalking by an intimate partner at some point in their lifetimes.

**HIV/AIDS.** The number and characteristics of persons living with HIV/AIDS is discussed in detail below.

### 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 household 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.



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 may 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 a 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 reported 514 new and 9,893 living cases of HIV disease in 2010. More than 55 percent of the living cases have had an AIDS diagnosis. The largest proportion of cases continues to be white males over the age of 40, although African Americans are still more disproportionately affected by the disease than any other demographic group. In a year with decreasing total case reports, African Americans experienced a 7 percent increase in new reports; new cases for Hispanics increased by 10 percent.

Geographically, areas such Lake, Porter and LaPorte counties in the northwestern part of the state have also shown steady increases the past few years.

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 in an attempt to impact each of the priority service needs in an effective and efficient manner.

In 2013, there was a reported 5,642 persons who were living with HIV/AIDS in the areas that are covered by the State HOPWA grant. As of March 2015, health officials reported an increase with a total of 55 confirmed cases of HIV and 13 additional preliminary positive cases related to the outbreak in southeastern Indiana in the winter of 2015.

The Indiana State Health Department is working closely with local health officials, the Centers for Disease Control and Prevention (CDC), drug treatment facilities, local medical providers, and other State agencies to contain the outbreak and get HIV positive individuals treatment.

The following tables that summarize the HIV/AIDS population in Indiana were provided by HUD.

### HOPWA

<b>Current HOPWA formula use:</b>	
Cumulative cases of AIDS reported	5,039
Area incidence of AIDS	123
Rate per population	3
Number of new cases prior year (3 years of data)	430
Rate per population (3 years of data)	2
<b>Current HIV surveillance data:</b>	
Number of Persons living with HIV (PLWH)	9,400
Area Prevalence (PLWH per population)	220
Number of new HIV cases reported last year	0

**Table 26 – HOPWA Data**

**Data Source:** CDC HIV Surveillance

### HIV Housing Need (HOPWA Grantees Only)

<b>Type of HOPWA Assistance</b>	<b>Estimates of Unmet Need</b>
Tenant based rental assistance	1
Short-term Rent, Mortgage, and Utility	0
Facility Based Housing (Permanent, short-term or transitional)	33

**Table 27 – HIV Housing Need**

**Data Source:** HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

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

### **Describe the jurisdiction's need for Public Facilities.**

Stakeholders were surveyed and interviewed about the need for public facility improvements in the towns in which they live and work. Water and wastewater improvements were identified as the top public facilities need, followed by sidewalks and infrastructure for the Internet.

### **How were these needs determined?**

Please see above.

### **Describe the jurisdiction's need for Public Improvements. How were these needs determined?**

The Indiana University Public Policy Institute provided OCRA with an estimate of water and wastewater capital needs for this Consolidated Plan. The estimates included capital improvements for: 1) correction of combined sewer overflows; 2) wastewater conveyance and treatment; 3) remediation of failing on-site septic systems; 4) stormwater conveyance and management; and 5) drinking water production, treatment and distribution. The estimates were based on data in the 2008 Clean Watershed Needs Survey and the 2011 Drinking Water Needs Survey (both from the Environmental Protection Agency, EPA) and the 2003 Financial Needs for Wastewater and Water Infrastructure in Indiana study, conducted for the Indiana Advisory Commission on Intergovernmental Relations.

The estimated costs to address public improvement needs on an annual basis include:

- ) Correction of combined sewer overflows = \$269 million
- ) Wastewater conveyance and treatment = \$179 million
- ) Remediation of failing on-site septic systems = \$129 million
- ) Stormwater conveyance and management = \$33 million
- ) Drinking water production, treatment and distribution = \$334 million

Total water and wastewater needs = \$877 million

Currently, annual spending to address the above needs is \$337 million, leaving a funding gap of \$540 million.

An impact and unmet needs assessment was conducted for the Action Plans for Disaster Recovery funds. The primary needs were in economic development (crop losses exceeding \$300 million and land rehabilitation losses exceeding \$200 million), impact to other Indiana businesses (greater than \$400 million), repair of the Columbus Regional Hospital (\$211 million) and damage to housing experienced by more than 17,000 families.

**Describe the jurisdiction’s need for Public Services. How were these needs determined?**

Stakeholders surveyed and interviewed for this Consolidated Plan were also asked about the needs for public services, or supportive services. The top service needs identified by stakeholders included job training programs and technical assistance for identifying grant opportunities and business plan development for small/startup companies.

# Housing Market Analysis

## MA-05 Overview

This section uses HUD pre-populated tables, supplemental data on the housing market and contributions from stakeholder consultation to summarize the current state of the housing market in Indiana.

The top housing market needs identified by stakeholders and in the data analyzed for this section include:

- Rental units affordable to 0-30 percent AMI, or poverty-level, households (roughly housing that rents for less than \$500 per month). Since 1999, the poverty rate of Indiana families more than doubled, from 5.3 percent (1999) to 11.2 percent (2013). This growth in poverty-level households in many areas has raised the need for deeply affordable rental units.
- Rental housing for all low income households.
- Housing rehabilitation for owners and renters who earn less than 80 percent of AMI (about \$45,000 per year). Some of these are seniors who live on fixed incomes (Social Security, retirement savings) and have trouble affording maintenance and needed repairs, including accessibility improvements. Of the residents who had completed the online survey at the time this Consolidated Plan was prepared, 19 percent said they live in a home or apartment that needs repairs they can't afford to make. Fifteen percent of renters said their landlord refuses to make the repairs they request.
- Housing to meet the variety of needs of special populations, including quality, affordable, accessible housing for persons with disabilities; housing for persons with serious mental illness; housing for seniors; and housing for homeless families.

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

This section of the Consolidated Plan provides an overview of the type of housing units in Indiana. These data are pre-populated by HUD and include units for the entire state.

### All residential properties by number of units

Property Type	Number	%
1-unit detached structure	2,027,829	73%
1-unit, attached structure	94,982	3%
2-4 units	175,009	6%
5-19 units	234,688	8%
20 or more units	107,346	4%
Mobile Home, boat, RV, van, etc.	148,943	5%
Total	2,788,797	100%

**Table 28 – Residential Properties by Unit Number**

Data Source: 2007-2011 ACS

### Unit Size by Tenure

	Owners		Renters	
	Number	%	Number	%
No bedroom	1,685	0%	20,232	3%
1 bedroom	29,460	2%	181,884	25%
2 bedrooms	337,085	19%	295,794	41%
3 or more bedrooms	1,389,962	79%	216,768	30%
Total	1,758,192	100%	714,678	99%

**Table 29 – Unit Size by Tenure**

Data Source: 2007-2011 ACS

### 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 (formerly the expiring use database), there are 238 properties (11,679 units) in nonentitlement areas of the State of Indiana with public subsidies. Just 2 percent of those units have rents below 80 percent of FMR, and another 14% of those units have rents between 80 and 100 percent of FMR. There are 2,306 units (20%) that are 202 units, specifically Supportive Housing for the Elderly.

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

There are 5,936 subsidized units (51%) whose Section 8 contracts will expire by the end of 2020. Of those, 1,682 units will expire in year 2015.

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

No, in nonentitlement areas of the state subsidized rental housing is limited, particularly for those earning less than 30 percent AMI. There is also unmet needs for housing rehabilitation and accessibility improvements, as well as emergency shelters and transitional housing for persons experiencing homelessness.

**Describe the need for specific types of housing.**

Stakeholders surveyed and interviewed for this study consistently described a growing and very pronounced need for rental units affordable to 0-30 percent AMI households (roughly housing that rents for less than \$500 per month). On the for-sale side, many stakeholders describe an environment where the housing market has not recovered and excess inventory of foreclosed and overbuilt homes exists.

## MA-15 Cost of Housing – 91.310(a)

Indiana remains one of the more affordable states in the U.S., with a median home value of less than \$150,000 in 2011. Data from the Census' 2013 five-year American Community Survey suggest that home values may have dropped slightly from 2011 to 2013, or at the very least, not increased: the 2013 median is \$122,800.

Although many rental units in the state are relatively affordable (renting below \$500/month), the growth in poverty-level households in many areas has raised the need for deeply affordable rental units. Since 1999, the poverty rate of Indiana families more than doubled, from 5.3 percent (1999) to 11.2 percent (2013).

### Cost of Housing

	Base Year: 2000	Most Recent Year: 2011	% Change
Median Home Value	92,500	123,300	33%
Median Contract Rent	432	555	28%

**Table 30 – Cost of Housing**

Data Source: 2000 Census (Base Year), 2007-2011 ACS (Most Recent Year)

Rent Paid	Number	%
Less than \$500	298,142	41.7%
\$500-999	375,407	52.5%
\$1,000-1,499	29,915	4.2%
\$1,500-1,999	6,195	0.9%
\$2,000 or more	5,019	0.7%
Total	714,678	100.0%

**Table 31 - Rent Paid**

Data Source: 2007-2011 ACS

### Housing Affordability

% Units affordable to Households earning	Renter	Owner
30% HAMFI	52,320	No Data
50% HAMFI	209,715	150,140
80% HAMFI	498,885	437,415
100% HAMFI	No Data	641,020
Total	760,920	1,228,575

**Table 32 – Housing Affordability**

Data Source: 2007-2011 CHAS



### **Is there sufficient housing for households at all income levels?**

Rental housing is lacking for extremely low income households, whose needs have grown since the Great Recession according to stakeholders. The Census estimates that there are 16,000 more renters earning less than \$20,000 per year in 2013 than in 2007 (includes entitlement areas). Almost 10,000 of these earn less than \$5,000 per year.

Needs for owners are mostly related to the aging of residents—and their homes. Residents now living on fixed incomes (Social Security, retirement savings) have less capacity to keep up with maintenance and needed repairs, including accessibility improvements. In contrast to renters, the number of extremely low income owners has declined since 2007. Statewide, the number of owners in the state has decreased between 2007 and 2013.

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

Home prices will remain stable if the State continues to grow at the same rate as in the past decade. Rental affordability may decrease if needs continue to outpace the development of affordable rental units.

### **How do HOME rents/FM rent compare to Area Median rent? How might this impact your strategy to produce and preserve affordable housing?**

Annually, IHEDA releases HOME income and rent limits by county, which are based on HUD's limits and are supplemented by limits for 30 percent, 40 percent and 60 percent AMI levels. Although the limits vary by county, in general, these limits are consistent with the area median rents above. IHEDA monitors its limits relative to market conditions to be sure that its programming is geared toward meeting the most critical housing needs in nonentitlement communities.

## MA-20 Condition of Housing – 91.310(a)

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. Eligible activities include:

- Minor repairs which can include (but are not limited to) an inoperable or faulty furnace, leaking roof, unsafe electrical wiring and plumbing, hazardous structural conditions, etc.
- Funds may be used to remedy conditions that, while not posing an immediate threat to health and safety, represent an ongoing threat to the structural integrity of a building and may eventually result in an emergency situation.

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	380,186	22%	308,513	43%
With two selected Conditions	8,700	0%	16,625	2%
With three selected Conditions	1,455	0%	1,185	0%
With four selected Conditions	183	0%	127	0%
No selected Conditions	1,367,668	78%	388,228	54%
Total	1,758,192	100%	714,678	99%

**Table 33 - Condition of Units**

Data Source: 2007-2011 ACS

### Year Unit Built

Year Unit Built	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
2000 or later	247,108	14%	72,741	10%
1980-1999	453,191	26%	175,190	25%
1950-1979	647,147	37%	288,956	40%
Before 1950	410,746	23%	177,791	25%
Total	1,758,192	100%	714,678	100%

**Table 34 – Year Unit Built**

Data Source: 2007-2011 CHAS

## 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	1,057,893	60%	466,747	65%
Housing Units build before 1980 with children present	132,685	8%	47,450	7%

**Table 35 – Risk of Lead-Based Paint**

Data Source: 2007-2011 ACS (Total Units) 2007-2011 CHAS (Units with Children present)

## Need for Owner and Rental Rehabilitation

Owner and rental unit rehabilitation was a top need mentioned by stakeholders and residents who participated in development of the Consolidated Plan. Stakeholders were asked about the top unmet service needs in the nonentitlement communities they serve. One of the top needs identified was housing rehabilitation for low income homeowners (earning less than 80% AMI).

Of the residents who had completed the online survey at the time this Consolidated Plan was prepared, 19 percent said they live in a home or apartment that needs repairs they can't afford to make. Fifteen percent of renters said their landlord refuses to make the repairs they request.

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

As shown in the table above, an estimated 133,000 owner-occupied and 47,000 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.

## MA-25 Public and Assisted Housing – (Optional)

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. Responses concerning PHA units were based on the PHA survey conducted for this Consolidated Plan.

### Totals Number of Units

	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 available				4,701			43	0	1,027
# of accessible units									
<b>*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition</b>									

**Table 36 – Total Number of Units by Program Type**

Source: PIC (PIH Information Center)

### Describe the supply of public housing developments, including the number and physical condition.

The State of Indiana does not own or operate any PHA developments. The PHAs participating in the Consolidated Plan survey own nearly 12,000 PHA units.

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

N/A; IHCDA does not own any PHA units.

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

N/A; IHCDA does not own any PHA units.

## **MA-30 Homeless Facilities – 91.310(b)**

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.

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

This section summarizes the facilities and services available to meet the needs of certain special needs residents, beginning with residents living with HIV/AIDS.

### HOPWA Assistance Baseline Table

Type of HOWA Assistance	Number of Units Designated or Available for People with HIV/AIDS and their families
TBRA	132
PH in facilities	0
STRMU	217
ST or TH facilities	17
PH placement	45

**Table 37 – HOPWA Assistance Baseline**

**Data Source:** HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

### **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), Shelter Plus Care, 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 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**

The Integrated Supportive Housing Partnership, part of the CoC, was created after the Office of Medicaid Planning and Policy received an HHS planning grant to develop a statewide integrated supportive housing network targeting persons leaving SOFs, hospitals and other residential living arrangements who are at risk of homelessness. The partnership includes state Medicaid, Mental Health, Housing, & Health agencies with CSH, IN NAMI and IU School of Public Health. The Partnership has developed comprehensive policies and financial resources to prepare a Section 811 application to provide rental assistance for an integrated supportive housing network and an outreach engagement system to triage at risk persons from systems of care to appropriate housing. A statewide system of Community Health Workers from seven FQHCs serves as the outreach teams into the health care system. The CoC with Community Health Workers identify appropriate hospital staff to identify homeless & at risk person prior to discharge.

In addition to the above, the Indiana Department of Corrections (IDOC) has a formal discharge policy. The CoC works closely with IDOC discharge reps to develop protocols so that individuals being released from correctional facilities are not discharged into homelessness. IDOC case managers develop individualized Re-Entry Accountability Plans that outline and coordinate the delivery of services necessary to ensure successful transition from incarceration to a community.

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 inreach 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 PY2015, \$72,000 of ESG dollars will be linked to rental assistance 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.



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

### **Negative Effects of Public Policies on Affordable Housing and Residential Investment**

The State of Indiana is in the process of updating its statewide Analysis of Impediments to Fair Housing Choice (AI) to more directly address HUD's current expectations of AIs. A draft AI will be completed in fall 2015.

Stakeholders, residents and public housing authorities were asked about barriers to housing choice in the surveys they completed for this Consolidated Plan. Stakeholders mentioned very few public policies and potential negative effects on affordable housing and residential development; instead, they had many suggestions for improvements to existing housing and community development programs and practices. The most commonly mentioned suggestions included:

- Setting aside additional funding for home modifications;
- Re-establishing Section 8 homeownership program at the state and local level;
- Expanding accessibility and visitability requirements of publicly funded projects;
- Expanding the number of days families can stay in shelters;
- Fund a bedbug removal program;
- Consistently investing in small communities to build capacity and address local needs;
- Continuing and expanding liaison presence in rural areas so communities are aware of the resources available from the state; and
- Expanding investments and resources in rural areas.

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

This section summarizes economic development and employment indicators 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	16,253	16,507	1	2	1
Arts, Entertainment, Accommodations	151,538	111,076	11	11	0
Construction	73,353	50,090	5	5	0
Education and Health Care Services	225,819	141,847	16	14	-2
Finance, Insurance, and Real Estate	68,126	34,627	5	3	-1
Information	19,336	10,684	1	1	0
Manufacturing	327,427	275,825	23	28	4
Other Services	46,692	31,890	3	3	0
Professional, Scientific, Management Services	72,396	37,110	5	4	-1
Public Administration	1	1	0	0	0
Retail Trade	182,675	131,623	13	13	0
Transportation and Warehousing	62,869	47,433	4	5	0
Wholesale Trade	70,522	49,076	5	5	0
Total	1,317,007	937,789	--	--	--

**Table 38- Business Activity**

Data Source: 2007-2011 ACS (Workers), 2011 Longitudinal Employer-Household Dynamics (Jobs)

## Labor Force

Total Population in the Civilian Labor Force	1,891,535
Civilian Employed Population 16 years and over	1,737,502
Unemployment Rate	8.14
Unemployment Rate for Ages 16-24	20.57
Unemployment Rate for Ages 25-65	5.35

**Table 39 - Labor Force**

Data Source: 2007-2011 ACS

Occupations by Sector	Number of People
Management, business and financial	332,659
Farming, fisheries and forestry occupations	60,093
Service	174,537
Sales and office	408,044
Construction, extraction, maintenance and repair	176,908
Production, transportation and material moving	155,789

**Table 40 – Occupations by Sector**

Data Source: 2007-2011 ACS

## Travel Time

Travel Time	Number	Percentage
< 30 Minutes	1,119,431	68%
30-59 Minutes	424,896	26%
60 or More Minutes	100,572	6%
Total	1,644,899	100%

**Table 41 - Travel Time**

Data Source: 2007-2011 ACS

**Education:**

**Educational Attainment by Employment Status (Population 16 and Older)**

Educational Attainment	In Labor Force		Not in Labor Force
	Civilian Employed	Unemployed	
Less than high school graduate	103,287	17,448	85,960
High school graduate (includes equivalency)	515,203	45,812	167,786
Some college or Associate's degree	466,273	31,317	106,071
Bachelor's degree or higher	356,401	10,337	52,042

**Table 42 - Educational Attainment by Employment Status**

Data Source: 2007-2011 ACS

**Educational Attainment by Age**

	Age				
	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
Less than 9th grade	10,456	15,652	14,756	28,762	43,910
9th to 12th grade, no diploma	58,848	37,169	34,373	75,989	71,815
High school graduate, GED, or alternative	112,206	132,072	174,391	422,730	238,519
Some college, no degree	117,126	103,312	108,947	210,425	76,407
Associate's degree	11,911	45,460	54,289	82,307	14,779
Bachelor's degree	19,782	76,299	81,793	123,251	31,037
Graduate or professional degree	1,033	21,312	32,047	84,683	33,868

**Table 43 - Educational Attainment by Age**

Data Source: 2007-2011 ACS

**Educational Attainment – Median Earnings in the Past 12 Months**

Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	0
High school graduate (includes equivalency)	0
Some college or Associate's degree	0
Bachelor's degree	0
Graduate or professional degree	0

**Table 44 – Median Earnings in the Past 12 Months**

Data Source: 2007-2011 ACS

**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 28 percent of the state's jobs, according to the Business Activity table above. This is followed by Education and Health Care at 14 percent and Retail Trade at 13 percent of all jobs.

**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 considering 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 Indiana Regional Cities Initiative was recently formed to address what the initiative reports is the single biggest threat to economic growth in the state: population stagnation. The initiative is working to develop a quality of place that can attract and retain future generations of Hoosiers by:

- **Inspiring regional development** – The state is asking Indiana regions and communities to develop vision and action plans that enhance and build cities and regions by identifying assets including talent-base, infrastructure, business climate, quality of place amenities and more.
- **Encouraging regional collaboration** – Indiana's regions are looking beyond individual cities competing to be the next hot spot in our state and asking regions to work together and focus on entire regions to deliver a network of culture and attraction.

- **Partnering financially** – The IEDC is supporting legislation that enables the state to be a financial partner with regions that develop compelling strategic plans, thus facilitating significant investment that transforms Indiana communities into destinations for a talented workforce.

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

A constant refrain coming from nearly all industry sectors is “We cannot find qualified people for jobs at nearly any level.” The indication is that the skills gap in Indiana is more widespread than we ever thought. Thousands of people have given up looking for work at a time when jobs are going unfilled. Matching the skills of the old economy to the needs of the new economy has become trying for all.

The unemployment rate in Indiana is 5.9 percent, compared to a pre-recession rate of 4.7 percent in 2006. The state had 194,000 unemployed workers as of February 2015. Industry can absorb thousands of additional workers provided that trained workers can be identified. The challenge before us, to identify underemployed workers with the ability to complete training, and then fill the void. Unemployed can be trained in job readiness skills and back fill the entry level or other unskilled positions.

Some secondary schools have begun to identify high school students with the gifts and talents to move into 21<sup>st</sup> Century skilled vocations. These schools are developing educational tracts that bring education, workforce development, economic development, and employers to the table to provide industry and skill specific training. It is hoped that these Career Ready tracts complete with internships will become alternate “Plan A” for many students that do not choose college.

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

Please see the discussion on workforce initiatives that are part of Roadmap 2014 below. The five-year Consolidated Plan goals will support these initiatives by ensuring that nonentitlement areas have the infrastructure in place to grow, that they are places attractive to new workers and that job training activities provide economic opportunity for low and moderate income households.

### **Describe any other state efforts to support economic growth.**

In 2014, Governor Mike Pence released his plan for economic development and growth in Indiana, Roadmap 2014. Roadmap is comprehensive set of strategic initiatives to facilitate economic growth in the state. Areas of focus and initiatives include the following:

INCREASING PRIVATE SECTOR EMPLOYMENT ) Eliminate business personal property tax to spur new investment ) Increase freedom among Indiana employers by eliminating red tape and unnecessary licensing requirements ) Promote entrepreneurship by making it easier for new businesses to raise capital ) Increase the speed of business through one-stop permitting

ATTRACTING NEW INVESTMENT IN INDIANA, WITH EMPHASIS ON MANUFACTURING, AGRICULTURE, LIFE SCIENCES, AND LOGISTICS ) Increase regional competitiveness through new local government transparency portal ) Invest \$400 million in the next era of highway expansion to keep freight and people moving in Indiana ) Fix the agricultural land productivity factor ) Develop plans to raise billions of dollars in new investment in regional cities to attract jobs, businesses and people ) Work with private partners to create a talent initiative to attract entrepreneurs

IMPROVING THE MATH & READING SKILLS OF ELEMENTARY STUDENTS ) Create an Indiana Teacher Innovation Fund to support teachers who improve student outcomes through innovative work in the classroom ) Support teachers who move to under-performing public schools and charter schools serving low-income students ) Establish a voucher pre-K program for low-income families ) Shorten the timeframe for failing schools to become turnaround schools

INCREASING GRADUATION RATES ) Improve charter school performance by allowing charter school networks to manage their funds with the same flexibility as school districts ) Increase the supply of alternative, high-performing schools by repurposing unused educational facilities ) Increase the number of dropout recovery schools for adults who never completed high school

IMPROVING THE QUALITY OF THE HOOSIER WORKFORCE ) Create a performance-based program to equip under-skilled adults for jobs in today's economy ) Strengthen career pathways by conducting a statewide return-on investment assessment of career and technical education ) Establish the Governor's task force on the future of higher education to ensure affordability & quality through new technology and innovation

IMPROVING THE HEALTH, SAFETY AND WELL-BEING OF HOOSIER FAMILIES, ESPECIALLY CHILDREN ) Increase the exemption for parents and children in Indiana's tax code ) Expand and improve adoption in Indiana by offering parents a credit to offset adoption expenses and by removing barriers to adoption ) Continue to seek approval from the federal government to bring health care coverage to more Hoosiers through the innovative Healthy Indiana Plan ) Improve recycling in Indiana through market-based reforms ) Implement the first step of a unified, long-term water plan by streamlining Indiana's water quality permitting responsibilities ) Assist veterans by expanding access to the Military Relief Fund

The State maintains a webpage with more details about RoadMap 2014 at <http://www.in.gov/gov/2680.htm>

## **MA-50 Needs and Market Analysis Discussion**

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

Housing problem concentrations were analyzed in the context of areas of racial and ethnic concentrations and concentrated areas of poverty, given the disproportionate impact identified for racial and ethnic minorities and households earning less than 50 percent of AMI (see tables NA-15 through NA-30).

Racial and ethnic concentrations of poverty (RCAPs and ECAPs) are defined by HUD as those with both minority and poverty concentrations. Specifically, HUD defines RCAPs as having a non-white population (or in the case of ECAPs, Hispanic population) of 50 percent or more and individual poverty rates exceeding 40 percent. HUD gives an alternative to the poverty rate for low poverty areas: an area can have concentrated poverty if it exceeds three times the average Census tract poverty rate.

In addition, two different poverty rates can be used to calculate RCAPs and ECAPs: individual poverty rate and family poverty rate.

The following maps show the location of RCAPs and ECAPs—which are correlated with concentrations of multiple housing problems—in the state.

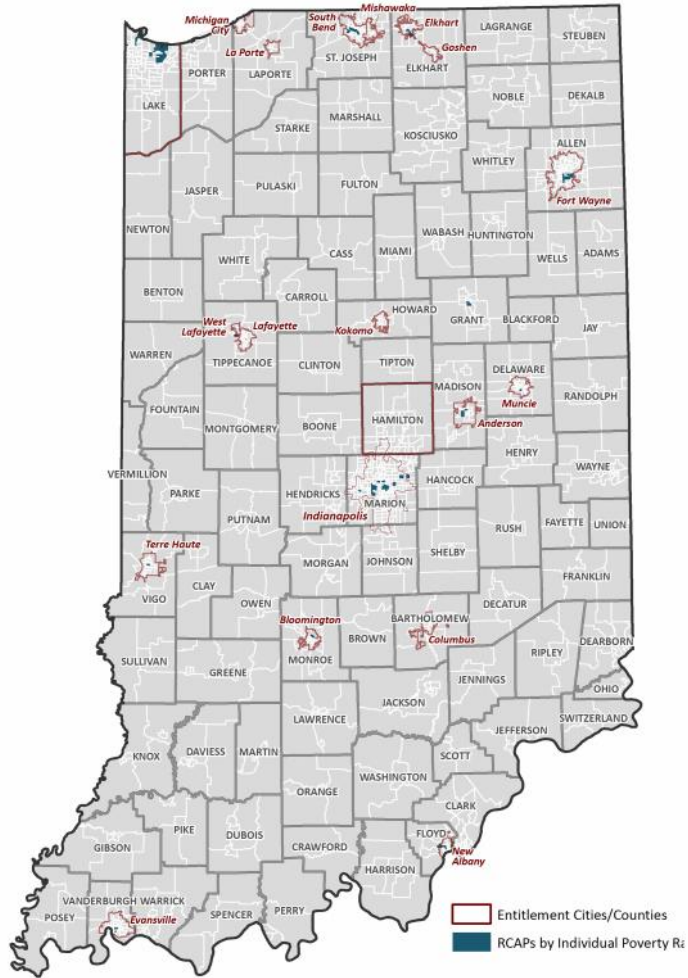
To accurately represent areas of concentration in nonentitlement areas—and to remain consistent with the alternative method of calculating concentrated poverty in low poverty areas—these maps used the 10 percentage point concentration threshold.

As shown by the maps, there are very few RCAPs using the family poverty definition. RCAPs using the individual poverty definition—displayed in the first map—are largely found around Gary/Hammond and in central Indianapolis.

There are few ECAPs in the State, as demonstrated by the second series of maps. Those that exist are mostly located in the urban areas of Fort Wayne, South Bend, Elkhart and Indianapolis.

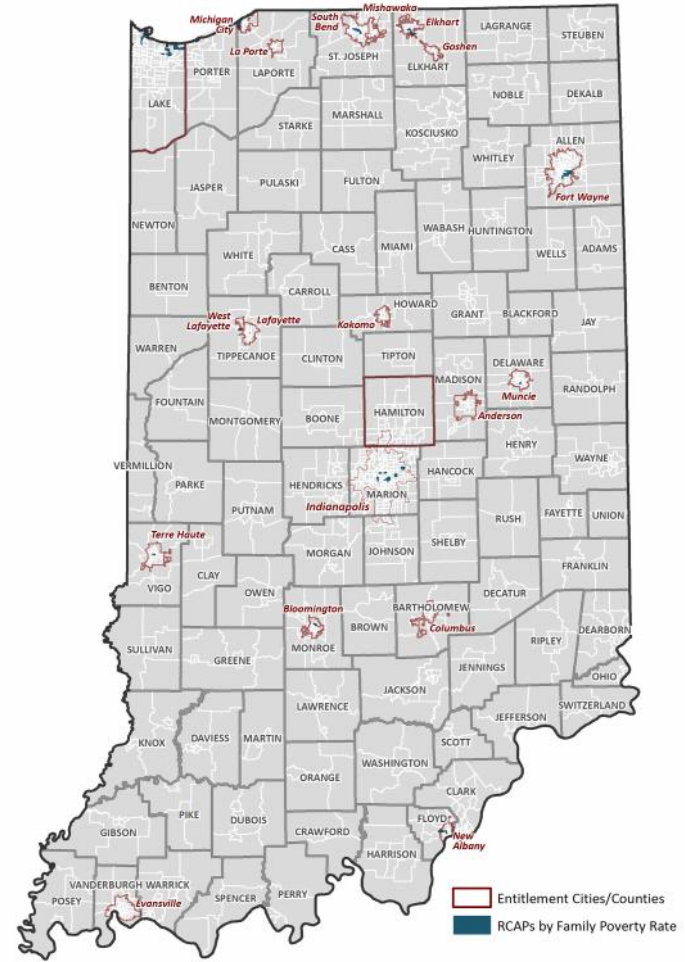


**Racially Concentrated Areas of Poverty (RCAP),  
Individual Poverty Rate, State of Indiana, 2010**



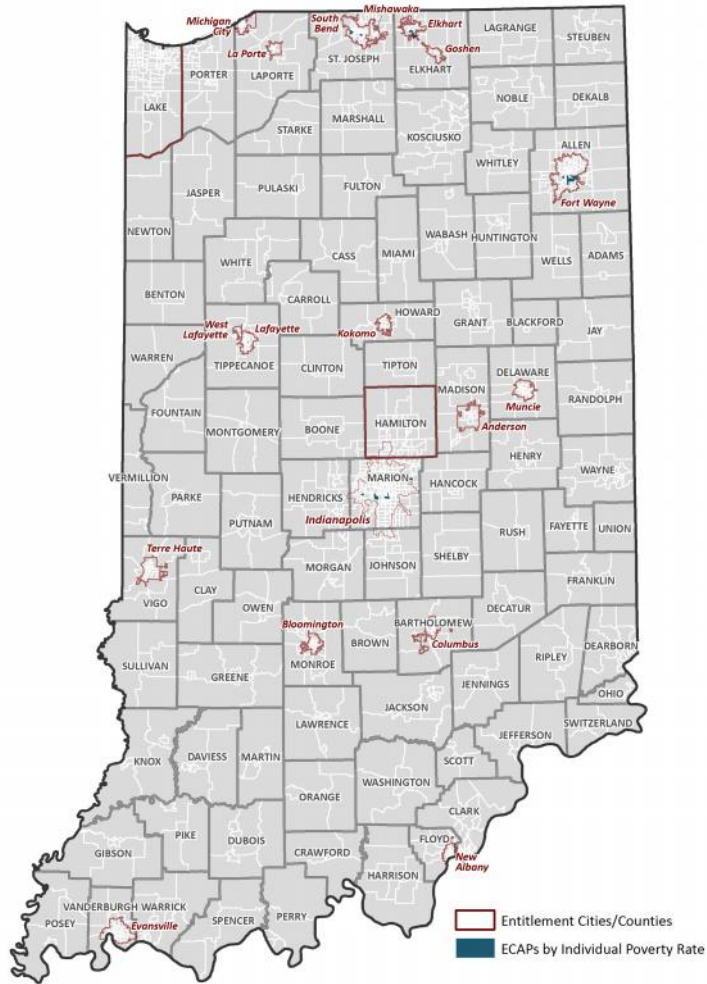
Source: 2010 Census and BBC Research & Consulting.

**Racially Concentrated Areas of Poverty (RCAP),  
Family Poverty Rate, State of Indiana, 2010**



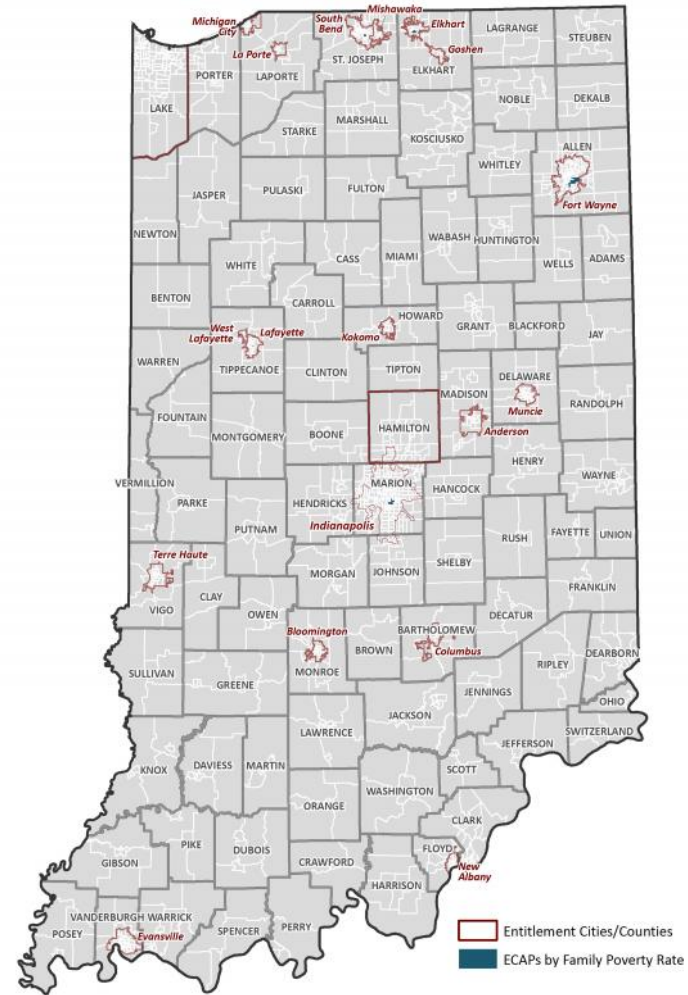
Source: 2010 Census and BBC Research & Consulting.

**Ethnically Concentrated Areas of Poverty (RCAP),  
Individual Poverty Rate, State of Indiana, 2010**



Source: 2010 Census and BBC Research & Consulting.

**Ethnically Concentrated Areas of Poverty (RCAP),  
Family Poverty Rate, State of Indiana, 2010**



Source: 2010 Census and BBC Research & Consulting.

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

The following maps show concentrations of African American and Hispanic residents at the Census tract level for all areas in the state. Two definitions of concentration are used in the maps:

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).

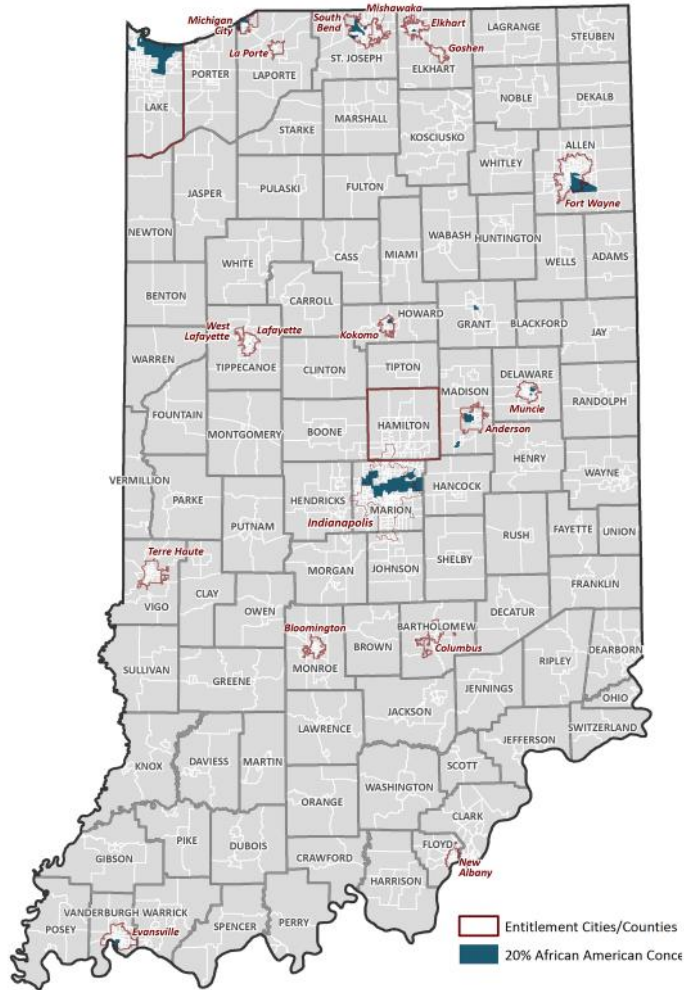
These two definitions represent the most current working definitions of concentration employed by HUD.<sup>1</sup>

Similar to RCAPs and ECAPs, concentrations are largely located in urban areas. Yet the 10 percentage point definition identifies African American concentrations in several rural counties in western Indiana and Hispanic concentrations in northern Indiana.

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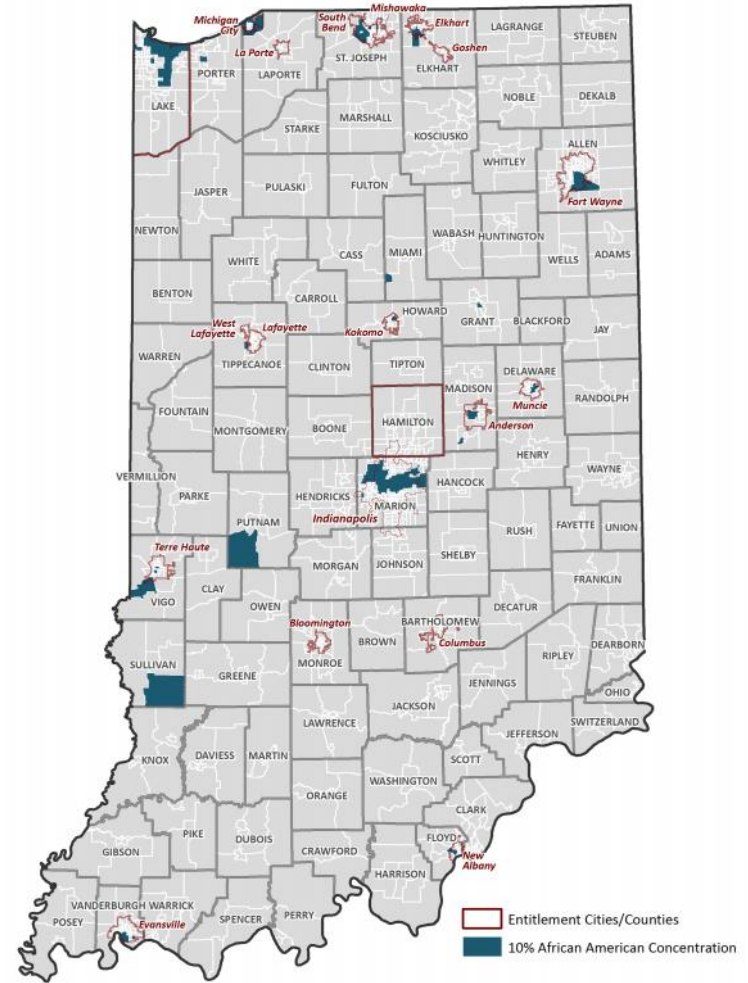
<sup>1</sup> It should be noted that for urban areas, HUD defines concentrations as a total minority population exceeding 50 percent.

**African American Concentrations by Census Tract,  
20 Percentage Point Definition, State of Indiana, 2010**



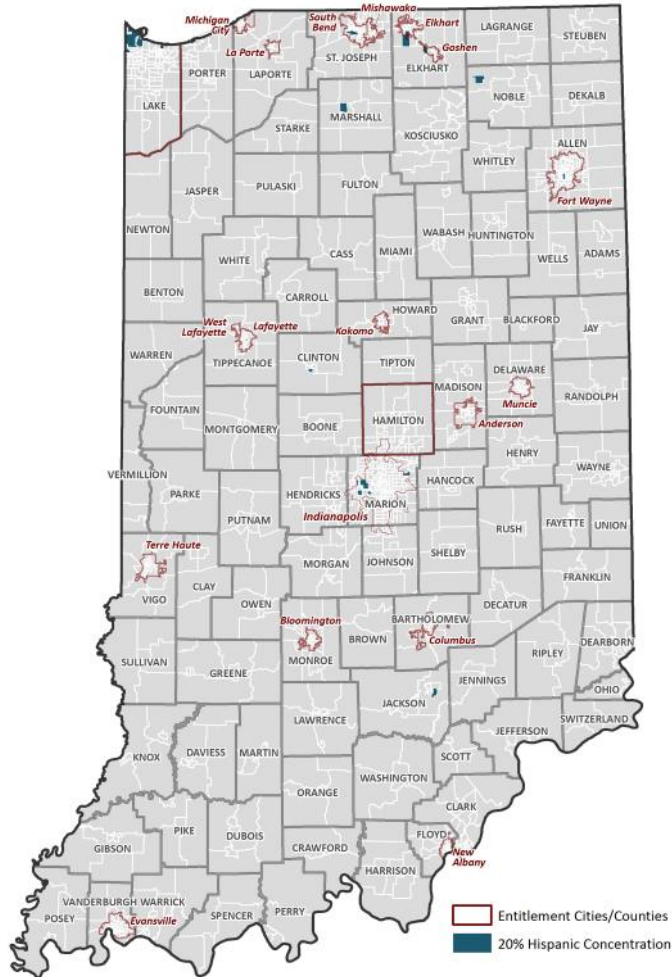
Source: 2010 Census and BBC Research & Consulting.

**African American Concentrations by Census Tract,  
10 Percentage Point Definition, State of Indiana, 2010**



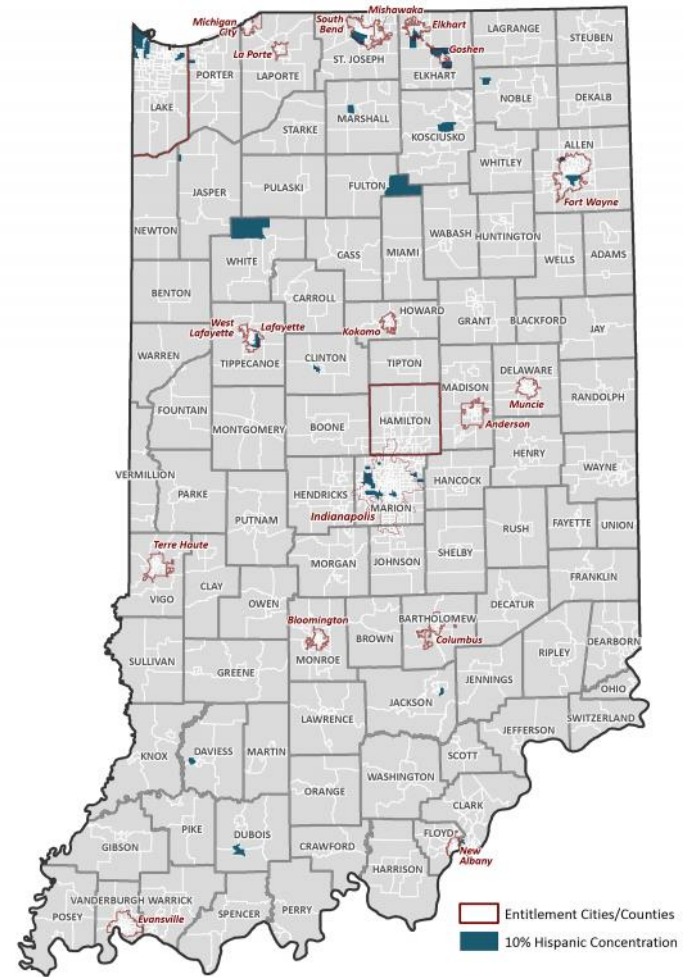
Source: 2010 Census and BBC Research & Consulting.

**Hispanic Concentrations by Census Tract,  
20 Percentage Point Definition, State of Indiana, 2010**



Source: 2010 Census and BBC Research & Consulting.

**Hispanic Concentrations by Census Tract,  
10 Percentage Point Definition, State of Indiana, 2010**

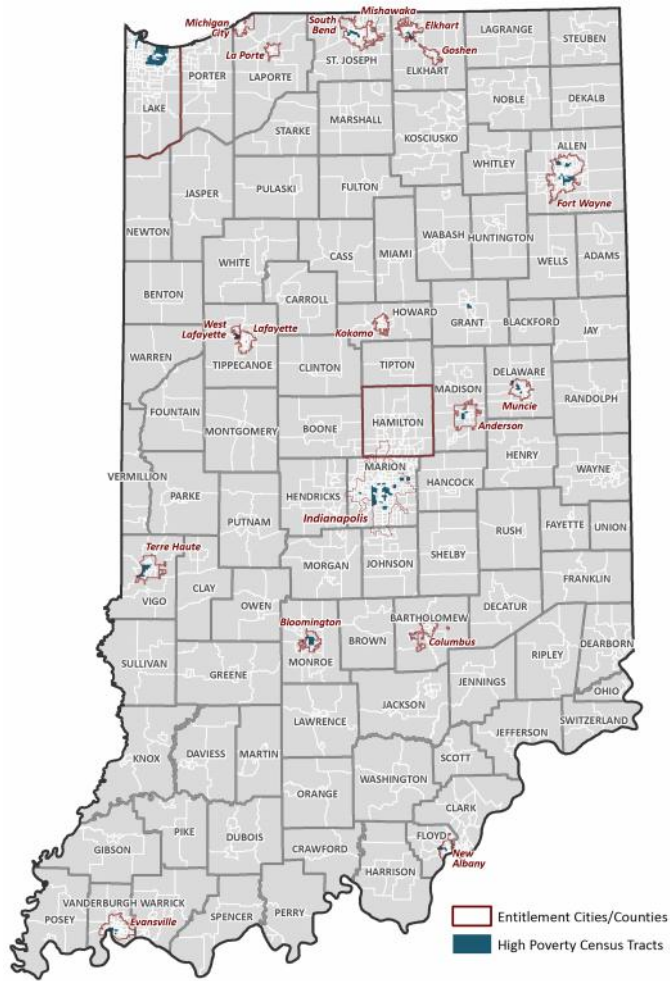


Source: 2010 Census and BBC Research & Consulting.

High poverty concentration maps are shown in the next map. Most of the high poverty Census tracts are located in urbanized areas, as are most of Indiana's racial and ethnic concentrations. Of the 94 high poverty Census tracts, 62 (66%) are also racially and/or ethnically concentrated.

Monroe, Fayette, Tippecanoe and Delaware counties have the highest poverty rates (over 20%) of all Indiana counties. Of those, none have an African American population higher than the state average and only Tippecanoe has a higher than average proportion of Hispanic residents.

# High Poverty Census Tracts, State of Indiana, 2007-2011



Source: 2007-2011 ACS.

**What are the characteristics of the market in these areas/neighborhoods? Are there any community assets in these areas/neighborhoods? Are there other strategic opportunities in any of these areas?**

A survey of the key characteristics of the concentrated areas conducted to support the state's new Analysis of Impediments to Fair Housing Choice (AI) found that most of the concentrated areas offer inexpensive housing—often concentrations of publicly subsidized housing, along with access to supportive services and public transit. In some cases, the residents have deep cultural and familial roots in the neighborhoods; they may have settled in the neighborhoods originally due to historical segregation.

The concentrated areas in small and medium sized communities have been challenged with loss of manufacturing jobs. The strongest assets and opportunities are existing infrastructure, less expensive housing in many urban areas and states and access to major transportation systems.



# 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 and HOPWA.

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' needs;
- Helping to revitalize rural communities and encourage economic and workforce development and growth;
- Addressing the rental housing needs of extremely 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,
- Working to prevent homelessness by providing rental assistance and moving residents who are newly homeless into housing quickly,
- Helping communities affected by disasters rebuild their economies and housing.

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

### **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, the State identifies the greatest needs for the State and nonentitlement areas overall and this information is used to guide the funding priorities for each program year. For local needs, the State relies on the information presented in block grant program funding applications.

OCRA does include a component of scoring in their CDBG applications where the low and moderate income percentage is a weighted score; a higher percentage of low and moderate income will yield a higher score. IHEDA includes a preference for application that attempts to reach low- and very low-income levels of area median income.

ESG allocates emergency shelter and rapid re-housing activities statewide; homeless prevention and outreach activities are more targeted geographically.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions. Because IHEDA allocates HOPWA to all ISDH-established care coordination regions except Region 7, it was determined that IHEDA 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), IHEDA will work with the regional sponsor to tailor services to meet the needs of the population. In instances where the sponsor cannot meet these needs, the sponsor will have the ability to sub-grant a portion of its HOPWA award to another service provider.

### **Rationale for the priorities for allocating investments geographically**

Previously the responsibility for deciding how to allocate funds geographically has been at the agency level. The State has maintained this approach with the understanding that the program administrators are the most knowledgeable about where the greatest needs for the funds are located. Furthermore, the State understands that since housing and community development needs are not equally distributed, a broad geographic allocation could result in funds being directed away from their best use.

## **SP-25 Priority Needs – 91.315(a)(2)**

The priority needs that have been established for the five-year planning period include the following. These were based on stakeholder input and the housing and community development analysis conducted to support the 2015-2019 Consolidated Plan.

### **Community Development Priority Needs**

Water, wastewater and storm water system improvements—High need

Sidewalk improvements—High need

Community revitalization—High need

Public facility improvements—Moderate need

Workforce development –Moderate need

### **Housing Priority Needs**

Low and very low income households—High need

Support of comprehensive community development efforts—Moderate need

Developments that utilize existing infrastructure, buildings and/or parcels—Moderate need

Visitable homeowner housing—High need

Housing that allows homeowners to age in place and is accessible for persons with disabilities—High need

Housing that support families—Moderate need

Housing incorporating green building and energy efficiency—Moderate need

Projects that utilize minority-owned, women-owned and disadvantaged business enterprises—Moderate need

### **Homeless and Special Needs**

Assistance to homeless shelters for operations and essentials—High need

Tenant based rental and rapid re-housing assistance—High need

## 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
TBRA for Non-Homeless Special Needs	Increased demand for housing affordable to < 30% AMI households
New Unit Production	Emphasis on small affordable developments that are accessible and visitable, which are lacking in many nonentitlement areas
Rehabilitation	Aging of population and increase in number of residents with disabilities
Acquisition, including preservation	In slow-growth communities, vacant and underutilized properties

**Table 45 – Influence of Market Conditions**

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

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. It includes funds from the federal disaster recovery program.

**Anticipated Resources**

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Reminder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
<b>CDBG</b>	<b>Federal</b>	Admin and Planning Economic Development Housing Public Improvements Public Services	<b>\$27,777,397</b>	<b>\$0</b>	<b>\$0</b>	<b>\$27,777,397</b>	<b>\$108,000,000</b>	
<b>HOME</b>	<b>Federal</b>	Admin and Capacity Building Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA Stellar Communities	<b>\$9,369,078</b>	<b>\$0</b>	<b>PY2013, 2014 and 2015 HOME funds will be used for TBRA</b>	<b>\$9,369,078</b>	<b>\$36,000,000</b>	

<b>ESG</b>	<b>Federal</b>	Financial Assistance (shelter operations) Rapid re-housing (rental assistance) Prevention and outreach	<b>\$3,635,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,635,000</b>	<b>\$14,500,000</b>	
<b>HOPWA</b>	<b>Federal</b>	Financial assistance (facility operations) Housing information Permanent housing placement STRUM Supportive services TBRA	<b>\$953,000</b>			<b>\$953,000</b>	<b>\$3,800,000</b>	
<b>Housing Trust Fund</b>	<b>Federal</b>	Multifamily rental new construction	<b>\$2,700,000</b>			<b>\$2,700,000</b>	<b>\$7,100,000</b>	HTF funds will be dedicated to new construction of affordable rental housing. The HTF will leverage 9% LIHTC funding, thus targeting households earning less than 60% MFI.

<b>CDBG-DR Program Income</b>	<b>Federal</b>	Multifamily housing Owner-occupied rehabilitation Public facilities improvements Workforce development Stormwater improvements	<b>\$5,496,481— DR 1 (Midwest Floods) \$20,158,976 DR 2 (IKE)</b>	<b>\$173,339</b>			<b>Program income: \$3.9 million— 2016 \$520,550 annually, 2017-2019</b>	
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**Table 46 - Anticipated Resources**

Note on CDBG-DR: The actual amounts received may be less than the figures anticipated above. Some loans were made as cash flow contingent so if the project does not cash flow, repayment will not be made. IHEDA intends to use additional funds received through repayments to fund additional multifamily activity (anticipate 100 units of multifamily housing serving 51% AMI households).

**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 PY2015 include:

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

\$655,000 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 will thus create a 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, less administration, 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.

Only banked match from awards made in 1999 or later that have fully met their match liability are eligible to donate to another applicant. The award must be closed before the agreement to donate match is executed. Match cannot be sold or purchased and is provided purely at the discretion of the recipient that granted it.

Banked leverage generated on a CDBG award cannot be used as match on a future HOME award. Only banked match generated on a HOME award can be used on a future HOME award.

The HOME regulations outline the very specific types of HOME-eligible matching funds, and IHEDA must document expenditures of matching funds by individual sites. HOME recipients often use Federal Home Loan Bank grants, savings from below-market interest rate loans, and donations of property, as match for their HOME awards. Additionally, IHEDA documents the MRB financing used in the First Home program as a match.

**If appropriate, describe publicly 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.

## **SP-40 Institutional Delivery Structure – 91.315(k)**

**Describe how the service delivery system including, but not limited to, the services listed above meet the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth)**

The delivery of CDBG program funds will be made through eligible applicants. These include 1) all counties, cities, incorporated towns which do not receive CDBG entitlement funding and are not located in an urban county or other area eligible for entitlement funding from HUD, and 2) all Indian tribes meeting the criteria set forth in Section 102 (a)(17) of the Federal Act.

Owner-occupied rehabilitation funds will be delivered through qualifying units of local government (nonentitlement communities) and nonprofit partners that serve nonentitlement communities.

Eligible applicants for CDBG disaster funds include not-for-profit organizations, cities, towns, or counties that are located in Indiana, whose proposed activities are consistent with the State's HUD-approved Disaster Plan and are NOT located in the one of the following ineligible CDBG Disaster (CDBG-D) counties: Blackford, Clinton, Delaware, Howard, Lagrange, Miami, Steuben, Tipton, Warren and Wells.

Rental and homeownership activities funded with HOME will be carried out through awards to non-HOME participating jurisdictions, CHDOs, nonprofit organizations, public housing authorities and joint ventures of these groups.

ESG subrecipients will be required to create MOU's with all shelter providers, housing agencies, community action agencies, township trustees, mental health centers, health clinics and homeless service providers in their proposed service area. Once available in their area, each ESG subrecipient will be required to partner with the Coordinated Access point by providing immediate housing to those persons who are unsheltered if space is available. Additionally, as part of the proposal process, subrecipients are required to develop a program design that is inclusive not only of other targeted homeless services, but also of other mainstream resources such as public housing programs, programs receiving project-based or tenant-based Section 8, Supportive Housing for persons with disabilities (Section 811), HOME Investment Partnerships Program, Temporary Assistance for Needy Families (TANF), State Children's Health Insurance Program, Head Start, Mental Health and Substance Abuse Block Grants and services funded under the Workforce Investment Act. IHEDA encourages programs to be strategic and comprehensive in their program design by requiring applicants to include all available resources to the maximum extent practicable.

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

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 an aging population living in aging housing stock.

**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**

Please see above.

### SP-45 Goals Summary – 91.315(a)(4)

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Goal Outcome Indicator (estimated five year)
1	Improve Community Water and Wastewater Systems	2015	2019	Non-Housing Community Development		Creating livable and revitalized communities	Other: 35 wastewater projects, 35 drinking water projects
2	Support Community Revitalization	2015	2019	Non-Housing Community Development		Local economic development	Other: 15 Stellar Community projects, 25 Brownfield/Clearance projects, 10 Downtown Revitalization projects
3	Improve and Construct Public Facilities	2015	2019	Non-Housing Community Development		Local economic development	Other: 35 projects
4	Improve Stormwater Systems	2015	2019	Non-Housing Community Development		Local economic development	Other: 35 projects
5	Support Workforce Development	2015	2019	Non-Housing Community Development		Local economic development	Other: 20 Workforce Development/Skills Training projects
6	Provide Planning Grants to Local Governments/CHDOs	2015	2019	Non-Housing Community Development			Other: 200 Other
7	Support Community Capital Needs	2015	2019	Non-Housing Community Development			Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Goal Outcome Indicator (estimated five year)
8	Support Community Development Activities	2015	2019	Non-Housing Community Development			Other
9	Create and Preserve Affordable Rental Housing	2015	2019	Affordable Housing		Provide affordable housing opportunities	Rental units constructed: 250 Rental Units rehabilitated: 250 Household Housing Units
10	Create and Preserve Affordable Owner Occupied Housing	2015	2019	Affordable Housing		Provide affordable housing opportunities	Homeowner Housing Added: 125 Household Housing Units
11	Preserve Affordable Owner-Occupied Housing, Improve Aging-in-Place and Visitable and Accessible Housing	2015	2019	Affordable Housing		Provide affordable housing opportunities	Homeowner Housing Rehabilitated: 1,100 Household Housing Units
12	Build Nonprofit Housing Developer Capacity	2015	2019	Affordable Housing		Provide affordable housing opportunities	Other: 40 Other
13	Create Permanent Supportive Housing Opportunities	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	Housing for Homeless added: 1,000 Household Housing Units
14	Provide Tenant-Based Rental Assistance to Prevent Homelessness	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	Tenant-based rental assistance / Rapid Rehousing: 1,000 Households Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Goal Outcome Indicator (estimated five year)
15	Support Housing Activities	2015	2019	Internal support			HOME program admin
16	Provide Operating Support for Shelters	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	50,000 adults and children served
17	Provide Rapid Re-Housing	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	Tenant-based rental assistance / Rapid Rehousing: 8,000 Households Assisted
18	Provide Outreach to Persons who are Homeless	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	1,200 adults and children served
19	Prevent Homelessness	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other: 500 Other
20	Support Homeless Activities	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	
21	Assist HIV/AIDS Residents Remain in Housing--TBRA	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Tenant-based rental assistance / Rapid Rehousing: 580 Households Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Goal Outcome Indicator (estimated five year)
22	Assist HIV/AIDS Residents Remain in Housing--STRUM	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	STRUM: 1,200 Households Assisted
23	Provide Housing Information and Placement Services	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other: 900 Households Assisted
24	Support Facilities Serving HIV/AIDS Residents	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other: 2,000 Households Assisted
25	Provide Services to HIV/AIDS Residents	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other: 1,400 Households Assisted
26	Support Program Delivery--TBRA	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other
27	Support Program Delivery--STRUM	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other
28	Permanent Housing Placement	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	Other



<b>Sort Order</b>	<b>Goal Name</b>	<b>Start Year</b>	<b>End Year</b>	<b>Category</b>	<b>Geographic Area</b>	<b>Needs Addressed</b>	<b>Goal Outcome Indicator (estimated five year)</b>
<b>29</b>	Address Disaster Affected Community Needs	2015	2019	Non-Homeless Special Needs		Local economic development	Other

**Table 47 – Goals Summary**

## **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 Involvement**

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; the state of Indiana does not own or operate any public housing units.

### **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 HUD's current expectations of AIs. A draft AI will be completed in fall 2015.

Stakeholders, residents and public housing authorities were asked about barriers to housing choice in the surveys they completed for this Consolidated Plan. These surveys will also be an important part of the AI. The most commonly 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,
- Limited fair housing resources and trainings in rural areas.

### **Strategy to Remove or Ameliorate the Barriers to Affordable Housing**

The strategies to remove or ameliorate barriers to housing choice will be part of the Fair Housing Action Plan in the 2015 state AI.

## **SP-60 Homelessness Strategy – 91.315(d)**

This section describes the State’s Homeless Strategy for identifying and assessing the needs of persons at-risk of homelessness and assessing their needs. A particular focus of the homeless strategy is addressing the needs of youth aging out of foster care and persons leaving institutional settings.

Identification of persons who are at-risk of homelessness is done at several points in the Continuum of Care (CoC). For youth at-risk of aging out of foster care, the State Department of Child Services (DCS) conducts an independent living assessment that determines areas of strengths and challenges for youth while in foster care. DCS and IHCD have collaborated to develop a comprehensive resource map to address the needs of at-risk youth and the Indiana University public health department is developing a survey tool to help identify successful strategies to address needs of such youth. The CoC Housing & Services Committee has a sub-committee working to prevent youth matriculating from foster care from becoming homeless; this group meets regularly to develop and provide technical assistance to supportive housing projects targeting youth matriculating from foster care at risk of homelessness.

The CoC Integrated Supportive Housing Partnership was created after receiving a grant to develop a statewide integrated supportive housing network targeting persons leaving institutional settings and other residential living arrangements who are at risk of homelessness. The partnership includes state Medicaid, Mental Health, Housing, & Health agencies with CSH, IN NAMI and Indiana University School of Public Health. The Partnership is comparing Medicaid data with HMIS data to identify individuals at high risk of homelessness and to target housing and service resources at these individuals. From this data, the Partnership has also developed an assessment for persons in institutional settings and other restricted living situations for risk of homelessness. This assessment is being linked to the emerging CoC coordinated access network.

The state Community Mental Health & Addiction Advisory Council has developed a statewide integrated supportive housing network targeting persons in institutional settings and other residential facilities who are at risk of homelessness.

## **SP-65 Lead-based Paint Hazards – 91.315(i)**

### **Identify actions to address LBP hazards and increase access to housing without LBP hazards. How are the actions listed above integrated into housing policies and procedures?**

The Indiana Lead and Healthy Homes Program (ILHHP), of ISDH, has as its goal the elimination of lead poisoning as a public health problem, especially among young children whose health and development are most susceptible to the harmful effects of lead. The primary source of lead poisoning is lead-based paint. Effective January 1, 2010, ISDH has taken 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.

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 IHCD's HOME-funded rehabilitation programs.

Using HOME dollars, IHCD also funds lead-hazard mitigation training as part of the CHDO operating support.

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

### **Jurisdiction Goals, Programs and Policies for reducing the number of Poverty-Level Families. How is the Jurisdiction poverty reducing goals, programs, and policies coordinated with this affordable housing plan?**

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 anti-poverty related because a stable living environment is also a service delivery platform. However, many of the strategies developed for the five-year 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.

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.

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 IHCD, 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/IHCD's award applications and manuals. A notice of Section 3 requirements is included in bid solicitations and is covered during the award trainings.

## 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.**

**CDBG (non-housing) monitoring.** OCRA uses the following processes and procedures for monitoring projects receiving HUD funds:

Evaluation on program progress;

Compliance monitoring;

Technical assistance;

Project status reports;

Monitoring technical assistance visits;

Special visits; and

Continued contact with grantees by program representatives.

**Monitoring.** 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. Desk monitoring 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 the course of a project, unless determined otherwise by OCRA staff. Grants utilizing a sub-recipient 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. In addition, 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.

**CDBG (housing) monitoring.** IHCD uses the following processes and procedures for monitoring projects receiving CDBG and HOME funds:

Self-monitoring;

Monitoring reviews (on-site or desk-top);

Results of monitoring review;

Determination and responses;

Clearing issues/findings

Sanctions;

Resolution of disagreements;

Audits.

IHCDA conducts at least one monitoring of every grant project receiving CDBG and HOME funds. The recipient must ensure that all records relating to the award are available at IHCDA's monitoring. For those projects determined to need special attention, IHCDA may conduct one or more monitoring visits while award activities are in full progress. Some of the more common factors that would signal special attention include: activity appears behind schedule, previous audit or monitoring findings of recipient or administrative firm, high dollar amount of award, inexperience of recipient or administrative firm, and/or complexity of program. These visits will combine on-site technical assistance with compliance review. However, if the recipient's systems are found to be nonexistent or are not functioning properly, other actions could be taken by IHCDA, such as suspension of funding until appropriate corrective actions are taken or termination of funding altogether.

**Monitoring.** Two basic types of monitoring are used: on-site monitoring and desk-top monitoring.

On-site monitoring review:

Community Development Representative will contact recipient to set-up monitoring based on award expiration and completion/close-out documentation submitted and approved.

Recipient will receive a confirmation letter stating date, time, and general monitoring information.

On date of monitoring, IHCDA staff will need: files, an area to review files, and a staff person available to answer questions.

Before leaving, IHCDA staff will discuss known findings and concerns, along with any areas that are in question.

Desk-top monitoring review:

Community Development Representative or Community Development Coordinator will request information/documentation from award recipient in order to conduct the monitoring. IHCDA staff will give approximately 30 days for this information to be submitted.

IHCDA staff will review information/documentation submitted and correspond via the chief executive officer the findings of the desk-top review. However, if during the course of the review additional information and/or documentation is needed, staff will contact the award administrator.



## Expected Resources

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

This section summarizes the resources that are expected to be available to fulfill the objectives of the 2015 Action Plan.

#### Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1			
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$
<b>CDBG</b>	<b>Federal</b>	Admin and Planning Economic Development Housing Public Improvements Public Services	<b>\$27,777,397</b>	<b>\$0</b>	<b>\$0</b>	<b>\$27,777,397</b>
<b>HOME</b>	<b>Federal</b>	Admin and Capacity Building Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA Stellar Communities	<b>\$9,369,078</b>	<b>\$0</b>	<b>PY2013, 2014 and 2015 HOME funds will be used for TBRA</b>	<b>\$9,369,078</b>
<b>ESG</b>	<b>Federal</b>	Financial Assistance (shelter operations) Rapid re-housing (rental assistance) Prevention and outreach	<b>\$3,635,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,635,000</b>

<b>HOPWA</b>	<b>Federal</b>	Financial assistance (facility operations) Housing information Permanent housing placement STRUM Supportive services TBRA	<b>\$953,000</b>			<b>\$953,000</b>
<b>Housing Trust Fund</b>	<b>Federal</b>	Multifamily rental new construction	<b>\$2,700,000</b>			<b>\$2,700,000</b>
<b>CDBG-DR Program Income</b>	<b>Federal</b>	Multifamily housing Owner-occupied rehabilitation Public facilities improvements Workforce development Stormwater improvements Community Revitalization	<b>\$5,496,481— DR 1 (Midwest Floods) \$20,158,976 DR 2 (IKE)</b>	<b>\$173,339</b>		

**Table 48 - Anticipated Resources**

Note on CDBG-DR: The actual amounts received may be less than the figures anticipated above. Some loans were made as cash flow contingent so if the project does not cash flow, repayment will not be made. IHCDAs intends to use additional funds received through repayments to fund additional multifamily activity (anticipate 100 units of multifamily housing serving 51% AMI households).

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

**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.

**IHCDAs match.** Recent influxes of program funding from the federal government, along with several new initiatives that expand IHCDAs vision and overall mission into more comprehensive developments, sometimes pose an issue with obtaining the required level of match/leveraging funds. IHCDAs will thus create a 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 IHCD A-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. IHCD A 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, less administration, 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 IHCD A for the match to be eligible as of the application due date. Only HOME-eligible match generated on IHCD A 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.

Only banked match from awards made in 1999 or later that have fully met their match liability are eligible to donate to another applicant. The award must be closed before the agreement to donate match is executed. Match cannot be sold or purchased and is provided purely at the discretion of the recipient that granted it.

Banked leverage generated on a CDBG award cannot be used as match on a future HOME award. Only banked match generated on a HOME award can be used on a future HOME award.

The HOME regulations outline the very specific types of HOME-eligible matching funds, and IHCD A must document expenditures of matching funds by individual sites. HOME recipients often use Federal Home Loan Bank grants, savings from below-market interest rate loans, and donations of property, as match for their HOME awards. Additionally, IHCD A documents the MRB financing used in the First Home program as a match.

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

N/A.

## Annual Goals and Objectives

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

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator (estimated five year)
1	Improve Community Water and Wastewater Systems	2015	2019	Non-Housing Community Development		Creating livable and revitalized communities	CDBG \$8,444,075	Other: 35 wastewater projects, 35 drinking water projects
2	Support Community Revitalization	2015	2019	Non-Housing Community Development		Local economic development	CDBG \$4 million Stellar Communities, HOME TBD, \$1.4 Blight Clearance, \$1.2 million Main Street Revitalization	Other: 15 Stellar Community projects, 25 Brownfield/Clearance projects, 10 Downtown Revitalization projects
3	Improve and Construct Public Facilities	2015	2019	Non-Housing Community Development		Local economic development	CDBG \$3.2 million	Other: 35 projects
4	Improve Stormwater Systems	2015	2019	Non-Housing Community Development		Local economic development	CDBG \$3.5 million	Other: 35 projects
5	Support Workforce Development	2015	2019	Non-Housing Community Development		Local economic development	CDBG \$1 million	Other: 20 Workforce Development/Skills Training projects
6	Provide Planning Grants to Local Governments/CHDOs	2015	2019	Non-Housing Community Development			CDBG \$1.4 million	Other: 200 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator (estimated five year)
7	Support Community Capital Needs	2015	2019	Non-Housing Community Development			Section 108 Loan Program up to \$80 million	Other
8	Support Community Development Activities	2015	2019	Non-Housing Community Development			CDBG \$655,548 administration; \$277,774 Technical Assistance	Other
9	Create and Preserve Affordable Rental Housing	2015	2019	Affordable Housing		Provide affordable housing opportunities	HOME \$3.2 million competitive or Stellar Communities program rounds  \$2.5 million to support Rental Housing Tax Credits	Rental units constructed: 250 Rental Units rehabilitated: 250 Household Housing Units
10	Create and Preserve Affordable Owner Occupied Housing	2015	2019	Affordable Housing		Provide affordable housing opportunities	HOME \$1,000,000	Homeowner Housing Added: 125 Household Housing Units
11	Preserve Affordable Owner-Occupied Housing, Improve Aging-in-Place and Visitable and Accessible Housing	2015	2019	Affordable Housing		Provide affordable housing opportunities	CDBG \$2.7 million	Homeowner Housing Rehabilitated: 1,100 Household Housing Units
12	Build Nonprofit Housing Developer Capacity	2015	2019	Affordable Housing		Provide affordable housing opportunities	HOME \$600,000	Other: 40 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator (estimated five year)
13	Create Permanent Supportive Housing Opportunities	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	HOME \$1,500,000	Housing for Homeless added: 1,000 Household Housing Units
14	Provide Tenant-Based Rental Assistance to Prevent Homelessness	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	\$0 for PY2015 (funded with PY2013 and 2014 carry over)	Tenant-based rental assistance / Rapid Rehousing: 1,000 Households Assisted
15	Support Housing Activities	2015	2019	Internal support			HOME \$550,000	HOME program admin
16	Provide Operating Support for Shelters	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	ESG \$1,704,743 million	50,000 adults and children served
17	Provide Rapid Re-Housing	2015	2019	Homeless Non-Homeless Special Needs		Reduce homelessness and improve stability	ESG \$1,450,000 million	Tenant-based rental assistance / Rapid Rehousing: 8,000 Households Assisted
18	Provide Outreach to Persons who are Homeless	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	ESG \$123,942	1,200 adults and children served
19	Prevent Homelessness	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	ESG \$72,000	Other: 500 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator (estimated five year)
20	Support Homeless Activities	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	ESG \$270,000	
21	Assist HIV/AIDS Residents Remain in Housing--TBRA	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA, \$400,000 TBRA	Tenant-based rental assistance / Rapid Rehousing: 580 Households Assisted
22	Assist HIV/AIDS Residents Remain in Housing--STRUM	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA, \$165,000 rental/mortgage/utilities assistance	STRUM: 1,200 Households Assisted
23	Provide Housing Information and Placement Services	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA \$230,000	Other: 900 Households Assisted
24	Support Facilities Serving HIV/AIDS Residents	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA \$88,000	Other: 2,000 Households Assisted
25	Provide Services to HIV/AIDS Residents	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA \$1,500	Other: 1,400 Households Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator (estimated five year)
26	Support Program Delivery--TBRA	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA \$5,350	Other
27	Support Program Delivery--STRUM	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA \$3,169	Other
28	Permanent Housing Placement	2015	2019	Non-Homeless Special Needs		Reduce homelessness and improve stability	HOPWA \$10,367	Other
29	Address Disaster Affected Community Needs	2015	2019	Non-Homeless Special Needs		Local economic development	\$5.5 million DR1, \$20 million DR2, \$3.9 program income 2015, \$550,000/year 2016-2019	Other

**Table 47 – Goals Summary**



## **AP-25 Allocation Priorities – 91.320(d)**

This section identifies the priorities for allocating funding in Program Year 2015. The extensive public process and stakeholder consultation efforts conducted for the Consolidated Plan and Action Plan were used to develop these priorities.

### **Community Development Priority Needs**

Water, wastewater and storm water system improvements

Sidewalks

Community revitalization

Public facility improvements

Workforce development

### **Housing Priority Needs**

Low and very low income households

Support of comprehensive community development efforts

Developments that utilize existing infrastructure, buildings and/or parcels

Visitable homeowner housing

Housing that allows homeowners to age in place and is accessible for persons with disabilities

Housing that support families

Housing incorporating green building and energy efficiency

Projects that utilize minority-owned, women-owned and disadvantaged business enterprises

### **Homeless and Special Needs**

Assistance to homeless shelters for operations and essentials

Tenant based rental and rapid re-housing assistance

### **HOPWA only: Method of selecting project subrecipients**

IHCDA will facilitate a request for qualifications (RFQ), advertised through the IHCDA website, to current HOPWA sub-recipients, other HIV/AIDS service providers, mental health centers, community action agencies and Department of Health Care Coordination Sites. The RFQ will gather information on the

number of persons/households they plan to serve; housing plans, housing services, organizational capacity, financial capacity, performance goals, supportive services, and their proposed budget.

The Indiana Housing and Community Development Authority (IHCDA) is a HOPWA recipient/grantee supporting activities in areas of Indiana not supported by other HOPWA recipients/grantees.

Within the state of Indiana there are 12 HIV Care Coordination Regions as established by the Indiana State Department of Health (ISDH.) IHCDA tries to ensure that each region that does not already receive a portion of HOPWA funds from Indianapolis or neighboring states is provided with funding to assist persons who are living with HIV and/or AIDS and meet the poverty level requirements.

IHCDA expects to fund at least 8 sub-recipients to cover all Regions that are not covered by other HOPWA funds.

### **REGION 1**

Counties Served: Lake, Porter, LaPorte

### **REGION 2**

Counties Served: St. Joseph, Elkhart, Starke, Marshall, Pulaski, Fulton

### **REGION 3**

Counties Served: LaGrange, Steuben, Kosciusko, Noble, DeKalb, Whitley, Allen, Wabash, Huntington, Wells, Adams

### **REGIONS 4, 5, 6, and 9**

Counties Served (Region 4): Newton, Jasper, Benton, White, Carroll, Warren, Tippecanoe, Clinton, Fountain, and Montgomery

Counties Served (Region 5): Grant, Blackford, Jay, Delaware, and Randolph

Counties Served (Region 6): Cass, Miami, Howard, Tipton,

Counties Served (Region 9): Henry, Wayne, Rush, Fayette, Union, Decatur, Franklin, Ripley, and Dearborn, Ohio

### **REGION 7\***

Counties Served: Boone, Hamilton, Hendricks, Hancock, Marion, Morgan, Johnson, Shelby, Madison, Putnam, and Brown. \*These counties are Not served by State HOPWA grant because they are covered by Indianapolis HOPWA grant.

### **REGION 8**

Counties Served: Vermillion, Parke, Putnam, Vigo, Clay, Sullivan

## **REGION 10**

Counties Served: Owen, Greene, Monroe, Lawrence, Brown, Bartholomew

## **REGION 11**

Counties Served: Jackson, Jennings, Jefferson, Switzerland, Crawford, and Orange. In 2014, Washington, Scott, Clark, Floyd and Harrison counties were covered by Kentucky HOPWA program not by the State HOPWA.

## **REGION 12**

Counties Served: Knox, Daviess, Martin, Gibson, Pike, Dubois, Posey, Vanderburgh, Warrick, Spencer, Perry

In the 2015 year, HOPWA will be utilizing HMIS on a regular basis as required and will be able to pull their Annual Performance Reports from the software system to assist in the final report (CAPER) that IHEDA has to provide at the end of the grant period.

HOPWA will not be utilized for capitol issues such as acquisition, rehabilitation or construction of a project.

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 Program Site.
- Required to have no current unresolved findings with IHEDA or HUD.
- Required to attend the Regional Planning Council on Homelessness or a subcommittee in 2014
- Required to provide a Certificate of Consistency for each area that the sub-recipient provides services to clients

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

This section summarizes the Method of Distributions (MOD) used to allocate funds from the four HUD block grants--CDBG, HOME, ESG and HOPWA--to nonentitlement communities in the State of Indiana. The detailed MODs are appended to the Consolidated Plan.

### Distribution Methods

<b>1</b>	<b>State Program Name:</b>	CDBG
	<b>Funding Sources:</b>	State allocation of CDBG (anticipated to be \$27.8 million, with \$2.7 million for CDBG-OOR)
	<b>Describe the state program addressed by the Method of Distribution.</b>	The CDBG MOD discusses the allocation of funds to subrecipients within the State programs of: <ul style="list-style-type: none"> <li>) Housing Owner-Occupied Rehab (also in IHEDA MOD),</li> <li>) Stellar Communities,</li> <li>) Planning Fund,</li> <li>) Main Street Revitalization,</li> <li>) Wastewater/Drinking Water Improvements Program,</li> <li>) Blight Clearance,</li> <li>) Public Facilities Program,</li> <li>) Storm Water Systems Program</li> <li>) Workforce Development and</li> <li>) Section 108.</li> </ul>
	<b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b>	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.
	<b>If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)</b>	Please see the attached MOD.

<p><b>Describe how resources will be allocated among funding categories.</b></p>	<p>For the 2015 program year, the \$27.8 million expected CDBG funding will be allocated among the following programs:</p> <ul style="list-style-type: none"> <li>) Stellar Communities Program--\$4,000,000</li> <li>) Planning Fund--\$1,400,000</li> <li>) Main Street Revitalization--\$1,200,000</li> <li>) Wastewater/Drinking Water Improvements Program--\$8,444,075</li> <li>) Blight Clearance--\$1,400,000</li> <li>) Public Facilities Program--\$3,200,000</li> <li>) Storm Water Systems Program--\$3,500,000 and</li> <li>) Workforce Development (new)--\$1,000,000.</li> </ul> <p>An additional \$277,774 will be used for technical assistance and \$655,548 will be allocated to cover administrative costs associated with the programs. The Section 108 program could lend up to \$80 million.</p>
<p><b>Describe threshold factors and grant size limits.</b></p>	<p>Please see the program specific grant limits and factors located in the CDBG MOD.</p>
<p><b>What are the outcome measures expected as a result of the method of distribution?</b></p>	<p>The expected outcomes vary by program; full details are contained in the CDBG MOD. For example, the Stellar Communities Program will make grants to communities for comprehensive revitalization strategies. In these 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 and additional funding, indicate the level of community impact and describe the significance each project will have on the overall revitalization of the town/city. These strategies will be used to produce a three-year community investment plan to identify capital and quality of life projects to be completed.</p>
<p><b>2 State Program Name:</b></p>	<p>CDBG--OOR</p>
<p><b>Funding Sources:</b></p>	<p>\$2.7 million in CDBG</p>
<p><b>Describe the state program addressed by the Method of Distribution.</b></p>	<p>This program consists of CDBG funding that is allocated to IHEDA for administration of an owner occupied rehabilitation program (OOR).</p>

	<b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b>	Scoring is located in the final portion of the OOR MOD. In sum, each application is evaluated based on: Project characteristics (43 points), Readiness (10 points), Capacity (30 points), Financing (10 points) and Completeness Bonus (5 points). The scoring incorporates points for projects that serve below 50% AMI households, persons with disabilities, seniors and families with children.
	<b>If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)</b>	Please see the attached MOD for the CDBG-OOR program.
	<b>Describe how resources will be allocated among funding categories.</b>	\$2.7 million on CDBG is allocated to IHEDA to use for owner occupied rehabilitation of units occupied by low and very low income households.
	<b>Describe threshold factors and grant size limits.</b>	The maximum request amount per application is \$350,000. Funds must not exceed \$25,000 per unit. All subsidies are secured through an affordability period. Detailed subsidy limitations and eligible activity costs are located on page 10 of the CDBG OOR MOD.
	<b>What are the outcome measures expected as a result of the method of distribution?</b>	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.
<b>3</b>	<b>State Program Name:</b>	ESG
	<b>Funding Sources:</b>	State allocation of ESG, anticipated to be \$3,635,000
	<b>Describe the state program addressed by the Method of Distribution.</b>	Funding through the Emergency Solutions Program assists persons and families who are homeless find shelter, avoid homelessness and transition into permanent housing.

<p><b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b></p>	<p>IHCDA plans to allocate funding to approximately 8-10 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program for line items: Housing Relocation &amp; Services (financial and services), Rental assistance and administration.</p> <p>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.</p> <p>Each proposal will be reviewed by at least one IHCD 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.</p>
<p><b>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)</b></p>	<p>Please see above.</p>

	<b>Describe how resources will be allocated among funding categories.</b>	No more than the maximum allowed of 60 percent of ESG funds will be allocated to operations, essentials and street outreach.
	<b>Describe threshold factors and grant size limits.</b>	The amount of each award could be between \$50,000 - \$350,000
	<b>What are the outcome measures expected as a result of the method of distribution?</b>	The ultimate 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.
<b>4</b>	<b>State Program Name:</b>	HOME
	<b>Funding Sources:</b>	State allocation of HOME, expected to be \$9,369,078
	<b>Describe the state program addressed by the Method of Distribution.</b>	HOME Partnership Investments Program, which is used to fund affordable rental unit construction and rehabilitation, provide downpayment assistance to homebuyers, develop affordable owner occupied housing, rehabilitate owner occupied housing, assist special needs and homeless residents with housing needs (including through TBRA) and support the work of CHDOs.
	<b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b>	Scoring appears in the HOME MODs for rental and homeownership programs. In sum, each application is evaluated based on: Project characteristics (38 points), Development features (25 points), Readiness (8 points for rental, 13 for homebuyer), Capacity (30 points), Financing (10 points) and Unique Features/Bonus (10 points). The scoring incorporates points for accessibility and visitability features in housing developments.
	<b>Describe how resources will be allocated among funding categories.</b>	Please see AP-20 for how HOME funding will be allocated among program categories.



<p><b>Describe threshold factors and grant size limits.</b></p>	<p>The maximum request amount per application is \$500,000 for both rental and homebuyer projects.</p> <p>HOME funds used for acquisition, rehabilitation, new construction, program delivery, relocation, rent-up reserve, and developer’s fee combined cannot exceed: \$55,000 for a studio, \$63,000 for a 1 bedroom unit, \$77,000 for a 2 bedroom unit, \$99,000 for a 3 bedroom unit and \$109,000 for a 4+ bedroom unit.</p> <p>The minimum amount of HOME funds to be used for rehabilitation or new construction is \$1,000 per unit.</p> <p>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.</p> <p>HOME funds may also be allocated through a non-competitive (non-scored) application for designated Stellar Communities that identify a HOME-eligible project in their approved Strategic Investment Plan.</p>
<p><b>What are the outcome measures expected as a result of the method of distribution?</b></p>	<p>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.</p>
<p><b>5 State Program Name:</b></p>	<p>HOPWA</p>
<p><b>Funding Sources:</b></p>	<p>State allocation of HOPWA, expected to be \$953,000</p>
<p><b>Describe the state program addressed by the Method of Distribution.</b></p>	<p>Housing Opportunities for Persons with HIV/AIDS assists persons with HIV and AIDS with housing placement and rental subsidies.</p>

<p><b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b></p>	<p>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:</p> <ul style="list-style-type: none"> <li>) Required to be a non-profit organization</li> <li>) Required to be a current Indiana State Department of Health Care Coordination Site.</li> <li>) Previous experience providing HOPWA assistance.</li> <li>) Actively attending the local Regional Planning Council/Committees/Leadership roles within their Region.</li> <li>) Agencies will need to commit to utilize Coordinated Access of the Continuum of Care once it is available in their area.</li> </ul>
<p><b>Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)</b></p>	<p>Please see above.</p>
<p><b>Describe how resources will be allocated among funding categories.</b></p>	<p>Funds will be made available in the following percentages of the total awards made to project sponsors:</p> <ul style="list-style-type: none"> <li>) At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;</li> <li>) No more than 7 percent to sponsor administration and 3 percent to grantee administration;</li> <li>) No more than 35 percent to housing information and permanent housing placement activities;</li> <li>) No more than 35 percent to supportive services that positively affect recipients' housing stability</li> </ul>

<p><b>Describe threshold factors and grant size limits.</b></p>	<p>Because IHEDA allocates HOPWA to all ISDH-established care coordination regions except Region 7, it was determined that IHEDA 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), IHEDA will work with the regional sponsor to tailor services to meet the needs of the population. In instances where the sponsor cannot meet these needs, the sponsor will have the ability to sub-grant a portion of its HOPWA award to another service provider.</p>
<p><b>What are the outcome measures expected as a result of the method of distribution?</b></p>	<p>For HOPWA, IHEDA will use the following indicators to measure subrecipient's ability to achieve the desired outcomes:</p> <ul style="list-style-type: none"> <li>) Rental Assistance households/units</li> <li>) Short-term rent, mortgage and utility assistance households/units</li> <li>) Facility based housing operations support units</li> <li>) Housing information services households</li> <li>) Permanent housing placement services households</li> <li>) Supportive services - households</li> </ul>

**Table 50 - Distribution Methods by State Program**

## **AP-35 Projects – (Optional) and AP-38 Project Summary**

Please see the Method of Distribution and program application sections appended to this Consolidated Plan for a full description of the 2015 proposed allocation and funding scoring preferences. The activities and funding levels proposed for PY2015 include:

### **CDBG funds:**

- \$2.7 million for owner-occupied rehabilitation (allocated to IHCD)
- \$8.4 million for wastewater/drinking water improvements
- \$3.2 million for public facilities improvements
- \$4 million for the Stellar Communities program
- \$3.5 million for storm water improvements
- \$1.4 million for planning
- \$1.4 million for blight clearance
- \$1 million towards workforce development activities
- \$1.2 million for Main Street Revitalization Program
- \$655,000 for administration
- \$278,000 for technical assistance
- Section 108 loan program—up to \$80 million

### **CDBG-DR funds:**

- \$5.5 multifamily housing (<51% AMI)
- \$4.4 million for owner occupied rehabilitation (100% AMI)
- \$3.5 million for comprehensive revitalization
- \$1 million for workforce development
- \$11 million for stormwater improvements

### **HOME funds:**

- \$3.2 million rental projects (competitive or Stellar Communities program funding)
- \$1 million homeownership projects (competitive or Stellar Communities program funding)
- \$1.5 million for Housing First projects (maximum \$500,000 per award)
- \$2.5 million for Rental Housing Tax Credit/HOME combos under the Qualified Allocation Plan (maximum \$500,000 per award)
- \$250,000 for CHDO operating and predevelopment
- \$900,000 administrative uses (\$550,000 internal and \$350,000 organizational capacity building)
- Tenant Based Rental Assistance (TBRA) will be funded with funds remaining from program years (PYs 2013, 2014 and 2015)

### **ESG funds:**

- \$1.7 million emergency shelters with operations and essential services
- \$1.45 million rental assistance for rapid re-housing
- \$72,000 rental assistance associated with homeless prevention
- \$124,000 outreach activities

**HOPWA funds:**

- \$425,000 in TBRA
- \$222,000 for housing information activities
- \$170,000 short-term rental, utilities and mortgage assistance
- \$90,000 support facility operations and supportive services

## **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? Yes.**

### **Available Grant Amounts**

Full program description can be found with the Method of Distribution for CDBG.

The State of Indiana operates a Section 108 loan funds program, the State of Indiana Community Enhancement and Economic Development Loan Program. The program is administered by OCRA and IHEDA.

### **Acceptance process of applications**

Full program description can be found with the Method of Distribution for CDBG.

## **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?** Indiana does not fund local Community Strategy Areas; however, the state does have a number of programs that invest in community revitalization. These are discussed below.

### **Local Government Revitalization Initiatives**

Please see the CDBG MOD and the new Section 108 Loan Program for more information about the State's programs to conduct community enhancement and economic development activities.

The Stellar Communities Program, funded with CDBG, makes available funds for 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 community. From this revitalization strategy, communities will produce a three-year community investment plan which will identify capital and quality of life projects to be completed during that period.

Evaluation and selection of the final two communities to the Stellar Communities Program will be based on:

- Completion of a Summary of Comprehensive Community Revitalization Strategy
- Identification of at least one project to be completed in each of the 3 program years. The total number of projects is solely limited to the community's ability to successfully complete each project;
- Documentation of all project cost estimates, local match amounts and sources, and additional funding resources.
- Completion of the site visit checklist from the resource team.
- Documentation and support for the level of need for each project and the significance of each project in the overall revitalization efforts within the community;
- Explanation of the capacity of the applicant to administer the funds; and
- Description of the long-term viability of the strategic community investment plan.

## **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, the State identifies the greatest needs for the State and nonentitlement areas overall and this information is used to guide the funding priorities for each program year. For local needs, the State relies on the information presented in block grant program funding applications.

OCRA does include a component of scoring in their CDBG applications where the low and moderate income percentage is a weighted score; a higher percentage of low and moderate income will yield a higher score. IHEDA includes a preference for application that attempts to reach low- and very low-income levels of area median income.

ESG allocates emergency shelter and rapid re-housing activities statewide; homeless prevention and outreach activities are more targeted geographically.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions. Because IHEDA allocates HOPWA to all ISDH-established care coordination regions except Region 7, it was determined that IHEDA 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), IHEDA will work with the regional sponsor to tailor services to meet the needs of the population. In instances where the sponsor cannot meet these needs, the sponsor will have the ability to sub-grant a portion of its HOPWA award to another service provider.

### **Rationale for the priorities for allocating investments geographically**

Previously the responsibility for deciding how to allocate funds geographically has been at the agency level. The State has maintained this approach, with the understanding that the program administrators are the most knowledgeable about where the greatest needs for the funds are located. Furthermore, the State understands that since housing and community development needs are not equally distributed, a broad geographic allocation could result in funds being directed away from their best use.



## Affordable Housing

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

**Introduction:**

<b>One Year Goals for the Number of Households to be Supported</b>
Homeless = 11,200 adults and children
Non-Homeless = 1,700 with rental assistance and prevention activities (ESG), 300 (HOPWA)
Special-Needs = 655 residents with HIV/AIDS

**Table 51 - One Year Goals for Affordable Housing by Support Requirement**

<b>One Year Goals for the Number of Households Supported Through</b>
Rental Assistance = 1,700 with rental assistance and prevention activities (ESG), 300 (HOPWA)
The Production of New Units = 60
Rehab of Existing Units = 60
Acquisition of Existing Units = N/A

**Table 52 - One Year Goals for Affordable Housing by Support Type**

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

This section describes IHCD'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**

The state does not own or operate public housing units. IHCD will continue the Section 8 HCVP Family Self Sufficiency Program (FSS), launched during the spring of 2013. FSS is designed to enable families to achieve economic independence and self-sufficiency. By linking the Section 8 Housing Choice Voucher Program (HCVP) vouchers with the help of both private and public resources, families are able to receive job training, educational services and other much needed assistance over a five year period. The goal is to eliminate the family's need for public assistance and enhance their ability to achieve homeownership, if desired.

### **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**

IHCD is a High Performing Section 8 Only PHA.

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

This section discusses 2015 program year activities that will benefit persons who are homeless and special needs populations.

**Describe one-year goals and actions for reducing and ending homelessness including:**

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

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 IHCD.
- 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 Access in their Region as it is implemented in their area.

### ***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:

- Decrease shelter stays by increasing rapid rehousing to stable housing.
- Reduce recidivism of households experiencing homelessness.
- Decrease the number of Veterans experiencing homelessness.
- Decrease the number of persons experiencing Chronic Homelessness.
- Create new permanent supportive housing beds for chronically homeless persons.
- Increase the percentage of participants remaining in CoC funded permanent housing projects

for at least six months to 86 percent or more.

- Decrease the number of homeless households with children.
- Increase the number of rental assistance programs and services.
- Increase the percentage of participants in ESG-funded rental assistance programs that move into permanent housing to 82 percent or more.
- Increase the percentage of participants in all CoC funded transitional housing that move into permanent housing to 70 percent or more.
- Increase the percentage of participants in CoC funded projects that are employed at exit to 38 percent or higher.
- Increase persons experiencing homelessness access to mainstream resources.
- Collaborate with local education agencies to assist in the identification of homeless families and inform them of their eligibility for McKinney-Vento education services.
- Improve homeless outreach and coordinated access to housing and services.
- Improve HMIS data quality and coverage, and use data to develop strategies and policies to end homelessness.
- Develop effective discharge plans and programs for individuals leaving State Operated Facilities at risk of homelessness.

***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.***

Please see above.

***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.***

Please see above.

## **AP-70 HOPWA Goals – 91.320(k)(4)**

### **Goals for the 2015 year:**

The grantee/recipient plan for the sub-recipients to serve at least this number of households utilizing HOPWA:

Tenant Based Rental Assistance: Approximately 120

Permanent Housing Placements: Approximately: 8

Transitional/Short Term: Approximately 13

Short Term Rental, utilities and Mortgage assistance: Approximately 240

Supportive Services: Approximately 285

Housing Information: Approximately 180

Total Housing Subsidy provided: 395

Total HOPWA beneficiaries (this includes those with HIV/AIDS and their family members): 655

## **AP-75 Barriers to Affordable Housing – 91.320(i)**

**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**

The State of Indiana is in the process of updating its statewide Analysis of Impediments to Fair Housing Choice (AI) to more directly address HUD's current expectations of AIs. A draft AI will be completed in fall 2015. A review of state regulations that may affect land use, tax policies, zoning and provision of housing is currently in process. The review will also assess zoning ordinances in a sample of communities and recommend best practices for encouraging a wide variety of housing options. The stakeholder survey completed for this Consolidated Plan will help inform the regulations and policies examined in the review.

## **AP-85 Other Actions – 91.320(j)**

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**

The State faces a number of obstacles in meeting the needs outlined in the five-year Consolidated Plan:

- Housing and community needs are difficult to measure and quantify on a statewide level. The Consolidated Plan uses both qualitative and quantitative data to assess statewide needs. However, it is difficult to reach all areas of the State in one year, and the most recent data in some cases are a few years old. Although the State makes a concerted effort to receive as much input and retrieve the best data as possible, it is also difficult to quantify local needs. Therefore, the State must rely on the number and types of funding applications as a measure of housing and community needs.
- The ability of certain program dollars to reach citizens is limited by the requirement that applications for funding must come from units of local government or nonprofit entities. If these entities do not perceive a significant need in their communities, they may not apply for funding.
- Finally, limitations on financial resources and internal capacities at all levels can make it difficult for the State to fulfill the housing and community development needs of its many and varied communities.

To mitigate these obstacles the State will continue to provide training for the application process associated with the HUD grants to ensure equal access to applying for funds, and continually review and update its proposed allocation with current housing and community development needs, gathered through the citizen participation plan and demographic, housing market and community development research.

### **Actions planned to foster and maintain affordable housing**

The primary activities to foster and maintain affordable housing are the State's CDBG and HOME funded activities that include the production of new units, homeownership opportunities, home rehabilitation and capacity support for affordable housing developers. Through the CDBG Program, IHCD seeks to improve the quality of existing housing stock in Indiana. This program is designed to give preference in allocating Community Development Block Grant Owner- Occupied Repair (CDBG OOR) funding among selected developments that meet IHCD's goals:

1. Demonstrate they are meeting the needs of their specific community.
2. Attempt to reach low and very low-income levels of area median income.
3. Are ready to proceed with the activity upon receipt of the award.
4. Revitalize existing neighborhoods, preferably with a comprehensive approach as part of a published community revitalization plan.
5. Propose projects that promote aging in place strategies for seniors, families with seniors, and persons with disabilities.

6. Propose projects that promote healthy family strategies for families with children under the age of 18.
7. Propose projects that are energy-efficient and are of the highest quality attainable within a reasonable cost structure.

Applicants of IHCD'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
- Operating capacity grants – limited to eligible nonprofits
- Permanent Supportive Housing – Applicants must participate in the Indiana Permanent Supportive Housing Institute to be considered for an IHCD investment.
- Rental assistance
- Acquisition, rehabilitation, guarantees, refinance, or (re)construction of rental housing
- Homeownership counseling and down payment assistance
- 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.

### **Actions planned to reduce lead-based paint hazards**

Lead-based paint hazards will primary be addressed through CDBG and HOME funded rehabilitation activities.

### **Actions planned to reduce 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 anti-poverty related because a stable living environment is also a service delivery platform. However, many of the strategies developed for the five-year 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.

Other efforts are also needed to combat poverty. 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.

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.

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 IHCD, 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/IHCD'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.**

During PY2015, the state intends to continue current practices of providing planning grants, technical assistance and training, regional workshops and access to community liaisons and regional representatives.

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

Please see above.

## Program Specific Requirements

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

**Introduction:** This section details available program income and describes resale and recapture provisions for HOME, as well as ESG program policies.

#### 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 = \$173,339
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 = \$173,339

#### Other CDBG Requirements

1. The amount of urgent need activities = \$0 allocated in PY2015.
2. The estimated percentage of CDBG funds that will be used for activities that benefit persons of low and moderate income = 75%

**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:

**Homebuyer Resale Provisions**

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 direct homebuyer subsidy the recipient must implement resale requirements. A direct homebuyer subsidy consists of any financial assistance that reduces the purchase price from fair market value to an affordable price, or otherwise directly subsidizes the purchase (“direct homebuyer subsidy”). The development subsidy consists of the difference between the cost of producing the unit and the market value of the property.

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) must be resold to another individual or family, whose income is at or below eighty percent (80%) of the area median income and (2) must be occupied by that individual or family as its primary residence for the remainder of the Affordability Period; and (3) must be resold at a price that is affordable, therefore a family between fifty percent (50%) and eighty percent (80%) of AMI would not pay more than twenty-nine percent (29%) of its gross income towards the principal, interest, taxes and insurance for the Real Estate on a monthly basis (“Affordable Price”); and (4) must be affordable for a reasonable range of low income families between fifty percent (50%) and eighty percent (80%) of the median area income for the geographic area published annually by HUD. The homebuyer is entitled to a fair return on its investment (as described below) upon the sale of the property. The fair return will be based on the percentage change in the Consumer Price Index for All Urban Consumers Owners’ Equivalent Rent of Primary Residence category in Table I of the CPI Detailed Report (the “CPI Index”) during the period of the homebuyer’s ownership of the property. Accordingly, the CPI Index during the month the residence was completed (the month during which the completion

reports were received by and approved by IHCD) will be compared to the CPI Index during the month the homebuyer sells the residence to determine the percentage of the return. This percentage will be multiplied by the homebuyer's investment. Here is an example:

Original sales price=\$100,000

initial homebuyer investment=\$5,000

capital investment=\$9,000

Percentage change in CPI=3.5%

$(\$5,000 + \$9,000) \times 3.5\% = \$490$  fair return

$\$5,000 + \$9,000 + \$490 = \$14,490$  total return to original homebuyer at sale

$\$100,000 + \$14,490 =$  maximum allowable subsequent sales price.

The homebuyer's investment will include any down payment, plus any capital improvements. A capital improvement is any property enhancement that increases the overall value of the property, adapts it to new uses, or extends its life such as: adding windows, insulation, a new drive way, a new furnace, a garage, bedroom, new roof, remodeling kitchen, etc. Any capital improvement will be valued based on actual cost as documented by the homebuyer's receipts. Generally, replacing worn or dated components such as appliances or carpet would not be considered an improvement that adds value or adapts it to new uses. In certain circumstances, such as a declining housing market where home values are depreciating, the homebuyer may not receive a return on his or her investment because the home sold for less or the same price as the original purchase price and a loss on investment may constitute a fair return.

IHCD will provide HOME assistance to the subsequent homebuyer to ensure that the original homebuyer received a fair return and that the unit is affordable to the defined low-income population.

The recipient will be required to ensure that a lien and restrictive covenant agreement, drafted by IHCD has been executed and recorded on any HOME-assisted property. In accordance with CPD Notice 12-003, the recipient must also execute a HOME written agreement with the homebuyer before or at the time of sale. The purpose of the agreement is to ensure that all parties are aware of the provisions related to the lien and restrictive covenant agreement and HOME requirements applicable to the HOME-assisted unit (i.e., period or affordability, principal residency requirement, etc.). The recipient will be required to use IHCD's form of Homebuyer Resale Agreement.

**Non-compliance.** Non-compliance occurs during the Affordability Period when an owner (1) vacates the unit or rents the unit to another household, (2) sells the unit to a buyer that is not income-eligible, (3) sells the unit to a buyer that will not agree to use the property as its principle residence for the remainder of the Affordability Period (will not sign a lien and restrictive covenant agreement), or (4)

does not sell it to the buyer at a reasonable price. In the event of noncompliance, the recipient must repay the entire amount of HOME funds invested in the housing.

Under resale guidelines the Affordability Period is based upon the total amount of HOME funds invested into the property.

Total Amount of HOME Funds Invested into the Property	Affordability Period
Under \$15,000	5 years
\$15,000 to \$40,000	10 years
Over \$40,000	15 years

### Homebuyer Recapture Guidelines

The recipient must implement recapture restrictions for any homebuyer property purchased, in whole or in part, by a homebuyer that received a direct subsidy from the recipient from HOME funds. A direct homebuyer subsidy consists of any financial assistance that reduces the purchase price from fair market value to an affordable price, or otherwise directly subsidizes the purchase (e.g., down-payment or closing cost assistance, subordinate financing). **Developers, other than CHDO’s, are not allowed to provide down-payment or closing cost assistance, however a developer may provide a direct subsidy by reducing the purchase price from fair market value to an affordable price.**

There are two different consequences that may be associated with a recapture provision (1) the recapture provision can be triggered (as described just below) or (2) an event of non-compliance can occur (as described further below).

The recapture 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.

Recapture provisions require that the direct homebuyer subsidy must be recaptured if any of the above-referenced events occur. The amount of the direct homebuyer subsidy shall be reduced by multiplying the direct homebuyer subsidy by the Forgiven Ratio (“defined below”) in order to determine the amount that will be forgiven. The amount to be recaptured and shall be limited to the Net Proceeds of the sale. “Net Proceeds” means the sales price minus superior loan repayment (other than HOME funds) and closing costs. If there are no Net Proceeds, the amount to be recaptured will be zero and the HOME

loan is considered satisfied. In the event there is significant market appreciation, once the HOME obligation is recaptured, the homebuyer can retain any appreciation. The amount recaptured cannot exceed the Net Proceeds, if any. "Forgiven Ratio" means a ratio that calculates the amount of the Direct Subsidy that is forgiven. This ratio shall be calculated by dividing the number of full months that owner occupies the property as its principal residence by the total of number of months in the Affordability Period.

The recipient will be required to ensure that a lien and restrictive covenant agreement, drafted by IHEDA has been executed and recorded on any HOME-assisted property.

In accordance with CPD Notice 12-003, the recipient must also execute a HOME written agreement with the homebuyer before or at the time of sale. The purpose of the agreement is to ensure that all parties are aware of the provisions related to the lien and restrictive covenant agreement and HOME requirements applicable to the HOME-assisted unit (i.e., period or affordability, principal residency requirement, etc.). The recipient will be required to use IHEDA's form of Homebuyer Recapture Agreement.

If there is both a development subsidy and a direct homebuyer subsidy or just a direct homebuyer subsidy, a recapture provision must be implemented. In cases where a direct homebuyer subsidy was not provided and there is only a development subsidy, resale restrictions must be executed on the property.

**Non-compliance.** Non-compliance occurs during the Affordability Period when any of the following occur: 1) the original homebuyer no longer occupies the unit as his or her principal residence (i.e., unit is rented or vacant), or 2) the home was sold during the Affordability Period and the recapture provisions were not enforced. In the event of noncompliance, the recipient must repay the entire amount of the HOME funds invested in the property. Net Proceeds ("as defined above") and the Forgiven Ratio ("as defined above") are not applicable when there is a non-compliance.

Under recapture guidelines the Affordability Period is based upon the total amount of the direct homebuyer subsidy that the homebuyer received in HOME funds. A direct homebuyer subsidy consists of any financial assistance that reduces the purchase price from fair market value to an affordable price, or otherwise directly subsidizes the purchase (e.g., down-payment or closing cost assistance, subordinate financing).

Amount of Homebuyer Subsidy	Affordability Period
Under \$15,000	5 years
\$15,000 to \$40,000	10 years
Over \$40,000	15 years

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

3. 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 MOD, ESG Program Requirements, for written standards for providing ESG assistance.

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 CoC Board created a Coordinated Access Task Force that is currently in the process of implementing a coordinated assessment system. The CoC has chosen four pilot communities to start out the process of establishing a coordinated assessment that works in each of those communities. The four cities involved are Lafayette, Fort Wayne, Bloomington, and Evansville.

The communities will all use a common assessment tool to decrease the time it takes to complete multiple assessments at intake. This tool will be part of the Homeless Management Information System (HMIS). Persons with the highest barriers such as chronic homeless singles and families will be the priority population to assist in them receiving the best housing that is available based upon their need.

By improving targeting of those who require support to end their homelessness and offering a light touch to those who only require it, our CoC will increase the speed of connecting individuals and families to appropriate permanent housing. As part of Coordinated Access, a shelter-diversion training including mediation skills will be taught to centralized access teams and decentralized leaders who will then train others in their region. This will improve homelessness prevention efforts as people are able to have support in building or maintaining social support networks as opposed to entering the shelter.

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).

A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the state, to the current sub-recipients for each of the ESG programs, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non- profits) and other similar non-profit agencies who have had experience with rental assistance, outreach or sheltering homeless. We will have the RFP's on our website and on the CoC Balance of State website.

Each proposal will be reviewed by at least one IHCD Community Services staff person and by another person outside of the agency, preferably a person who is part of our CoC Board, part of the Regional Planning Councils or through one of the subcommittees under the CoC Board. Each reviewer will complete a scoring tool, assigning points based on the following program design



components: strength of agencies' partnerships in the community, systems coordination, organizational capacity, financial capacity, permanent housing placement strategy, ability to assist clients in increasing income, maintain income (if applicable), history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each sub-recipient will be awarded based upon the average score of their proposal, the funding available, and the 2015 Annual Action Plan. This amount could be between \$50,000 - \$250,000 each.

ESG regulations require that no more than 60% of funding can be allocated to Operations and Street Outreach. Also, no more than 7.5% can be allocated to administration. The Funding & Resource Committee reviewed the RFP's for Operations, Street Outreach and Rapid Rehousing/Homeless Prevention, reviewed the allocation process and made final adjustments and recommendations and sent to the BOS CoC Board for approval. After administration portion is allocated, the CoC Board approved that no more than 55% of the allocations would be for Operations and Street Outreach activities therefore 45% would be allocated to Rapid Rehousing and Homeless Prevention activities. The Rapid Rehousing and Homeless Prevention portion would be split by providing 90% of the funds for Rapid Rehousing and only 10% would be for Homeless Prevention.

By increasing the funding in Rapid Rehousing activity line item, the BOS CoC Board is responding to HUD's request of CoC's to shorten the length of stay of homeless families/persons within our CoC. We are also identifying that there is a rental assistance need within our BOS CoC and not all areas are covered yet. We are encouraging all Regions within our BOS CoC to apply for this ESG activity line item.

IHCDA expects approximately 8-10 non-profit agencies that will apply for the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program.

IHCDA expects approximately 60 non-profit agencies that will apply for the operations, essential services and financial assistance, and approximately 3 non-profit agencies who may apply for the street outreach component.

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.

Any ESG recipient that cannot meet the participation requirement under CFR § 576.405(a) must include a plan that meets the requirements under CFR § 576.405(b).

The State ESG recipient – IHCDA - has two previously homeless persons that are members of the CoC Board that provide guidance to our CoC Programs and their policies and procedures. Both currently live in permanent supportive housing programs. The State of Indiana recognizes the invaluable perspective of homeless and formerly homeless individuals in developing an effective client-centered program and system. The State program strongly encourages sub-recipients 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 applicants to explain how homeless

participation is achieved at both an organizational level and within their regional Planning Councils on the Homeless. This issue is also reviewed at each program monitoring visit.

5. Describe performance standards for evaluating ESG.

Baseline performance measurements will be reports generated by the HMIS system and mainly from the Annual Progress Reports and the ESG reports for the 2015 year. The standards are specific to the sub-recipient's program performance outcomes.

For 2015, ESG rental assistance program sub-recipients: At discharge from program, 70 percent persons assisted will still be permanently housing. 60 percent of persons will increase or maintain their income.

For 2015 ESG program sub-recipients that are Emergency shelters that have activities: operations, essential services and financial assistance: 56 percent persons will discharge to permanent housing, 55 percent of person's will increase or maintain their income.

For 2015 ESG program sub-recipients that are Transitional Housing programs that have activities: operations, essential services and financial assistance: 75 percent will discharge to permanent housing, 60 percent will increase or maintain their income.

For 2015 ESG program sub-recipients that have outreach component: 50 percent of identified caseload will exit to a positive housing solution (shelter, transitional housing, permanent housing, etc.)

For 2015 ESG program sub-recipients that have outreach component: 40 percent identified caseload will increase their income.