

Safe and Healthy Home Investment Partnerships

**HUD
Office of
Healthy
Homes and
Lead Hazard
Control**

What is HUD's Approach to Healthy Homes?

- Lead Hazard Control (Grants)
- Asthma and Allergen Reduction (Grants)
- Enforcement of Lead Safe Housing Rules
- Research and Development (Grants)
- Promotion of Best Practices and Support for Local Initiatives

Lead Hazard Control

- Lead Hazard Control Grants.
 - Lead Hazard Reduction Demonstration Grants
- Enforcement of Lead Safe Housing Regulations



Asthma Triggers and Allergen Reduction

- Healthy Homes Production Grants
- Research and Development Technical Studies Grants

Promotion of Best Practices

- Support for Green and Healthy Homes Initiative
- Support for Healthy Homes Training Programs
- Support for HUD Assisted Housing Health Improvements
- Safe and Healthy Homes Investment Partnership (NEW!)

What is SHHIP?

The Safe and Healthy Homes Investment Partnership (SHHIP) is a **federal certification** that recognizes local governments and their non-profit partners that are **working together** to provide **citizen centered building based** interventions.



SHHIP Principals



Organizes
around the
needs of the
citizens being
served



Working Together

Braids multiple
service
disciplines and
funding streams

Citizen Centered



Building Based

Intervenes by
making
changes in the
physical
structure

SHHIP Model

Current Model



- Multiple targets based on program divisions
- Little cross program coordination
- Interventions limited by program requirements
- Gaps in Services

SHHIP Model



- Single target based on citizen need
- Major cross program coordination
- Interventions coordinated to meet resident needs
- No gaps in services

SHHIP Model

SHHIP is based on best practices pioneered by :

- HUD Healthy Homes Demonstration Grantees
- The Green and Healthy Homes Initiative
- The CT Efficiency Healthy Homes Initiative
- the One Touch Healthy Homes Intervention Program



SHHIP Model

The SHHIP brings these practices to scale
through federal certification
and NOFA points



SHHIP Model

Because certification and funding opportunities are separate, the SHHIP enables any Federal Government program to offer NOFA points to SHHIP certified communities.

This enables the SHHIP to become a government wide vehicle for collaboration.



SHHIP Requirements

A SHHIP Requires at least:

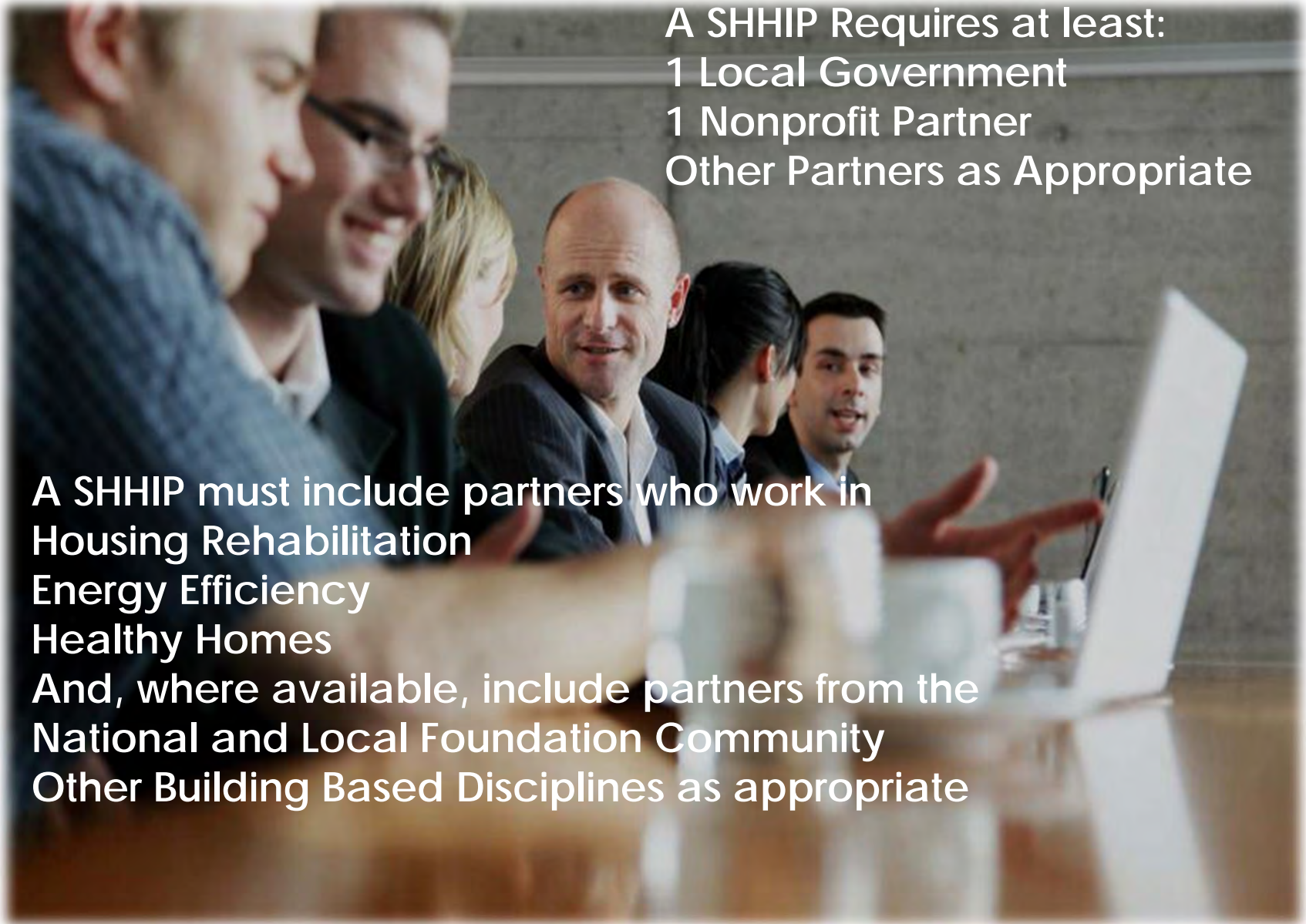
1 Local Government

1 Nonprofit Partner

Other Partners as Appropriate

A SHHIP must include partners who work in
Housing Rehabilitation
Energy Efficiency
Healthy Homes

And, where available, include partners from the
National and Local Foundation Community
Other Building Based Disciplines as appropriate



SHHIP Requirements

A SHHIP's mission must include:

- Improving the way services are delivered
- Improving the health outcomes of the community
- Improving the local workforce of healthy building professionals
- Improving housing in a way that is sustainable, healthy and safe

SHHIP Requirements

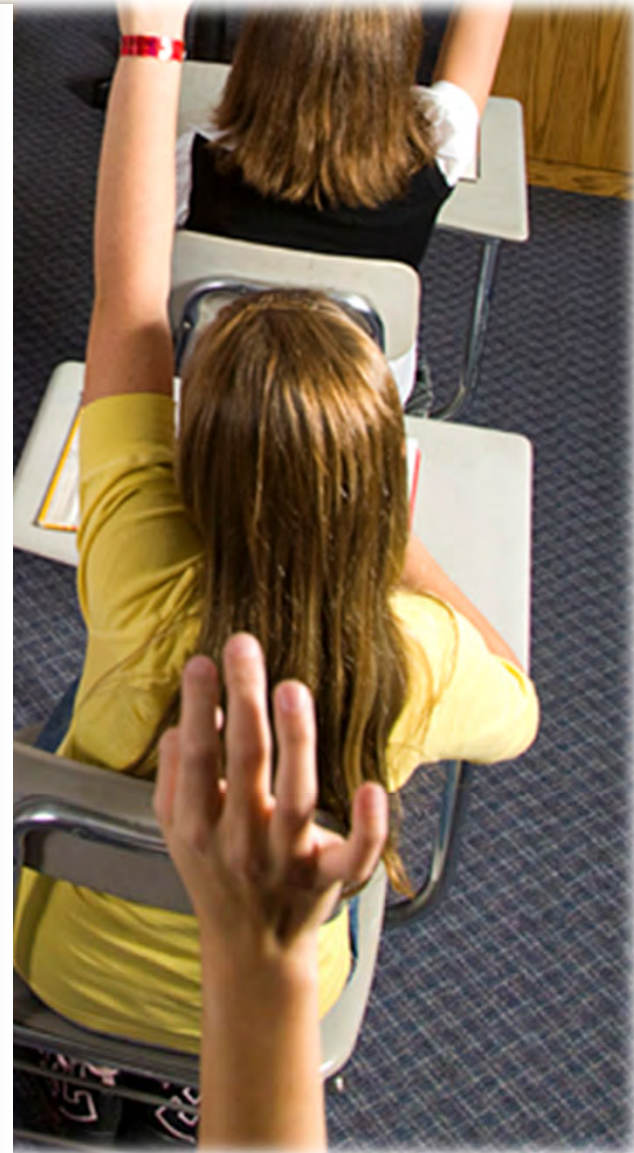


A SHHIP's service methodology must include:

- Single citizen point of contact
- Utilize HUD Healthy Homes Rating Tool
- Support common multidisciplinary workforce training
- Report data in a standardized manner
- Provide service in a unified manner
- Identify and eliminate barriers to effective service delivery

F.A.Q.

- What does SHHIP Certification get a community?
- What is the process for getting a SHHIP Certification
- Who reviews the applications for SHHIP Certification?
- What is your timeline for implementation?



SHHIP Status

- Numerous Pilots have been run and demonstrated the value of the core concept.
- A proposed notice has been published in the Federal Register seeking comment on some of the remaining policy questions.
- After receiving 44 comments, the comment period is now closed and OHHLHC is ready to make final decisions and move toward launch.
 - Proof of concept – Complete
 - Program Design – Q2 FY12
 - Public Beta Launch Q4 FY12
 - Full Operations Q1 FY13
 - Long Term Growth Q3 FY13

Remaining Policy Choices

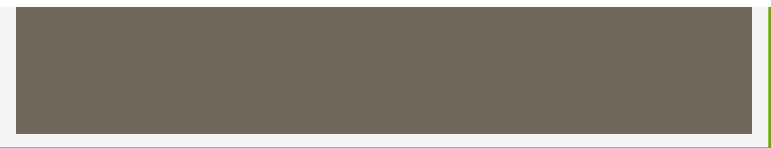
1. How should we define the Single Point of Contact Concept?
2. How should program data be shared?
3. How should we implement the HHRS Requirement?
4. How should we address smoking?
5. How should we address Radon?
6. Should we integrate “bodies” programs along with the “buildings” programs?
7. Should we require participation by community organizations?
 - a) If so, philanthropies or community advocacy organizations?
8. Should we allow states to apply?
9. How difficult should we make it to prove partnership?
 - a) If difficult, should we allow partial certification for partial points?
10. How should the certification process be structured?

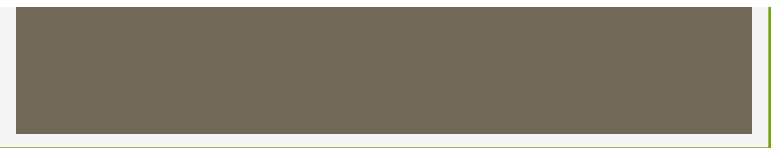


1. How should we define the Single Point of Contact Concept – Literal SPOC or Seamless Experience?

Seamless with robust data and tracking system.

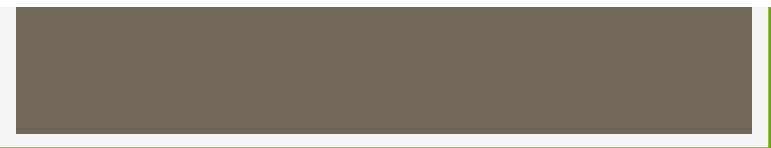
*2. How should program data be shared? OHHLHC will need specific location information, either by address or GPS coordinates.

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3. How should we implement the HHRS requirement, standard data elements or the specific tool? Require standard data elements.
 5. How should we address Radon? Include as an optional item.



7. Should we require participation by community organizations (or Gov't only)? Include community partners – philanthropy and/or CBO's to meet 3rd party requirement.

8. Should we allow States to apply? Allow certification of states with the restriction that ONLY the participating program receives NOFA points and the state cannot be the consortium leader.



10. How should the certification process be structured (checklist vs points)? Use a “Threshold + Menu” approach where applicants must meet a set of requirements and then a certain number of additional activities from an approved list.

Field Tested Practices

- City of Phoenix Neighborhood Services
- State of CA – Community Services & Development
- State of WA – Department of Commerce

WA – Dpt. of Commerce

- 7 WAP's participating as sub-grantee (Lead Hazard Control)
- Coordinate outreach, training, intake, paint inspections, work specs, contractor bidding process
- Coordinate Wx & lead work
 - Opportunity Council – Training Provider, HH Essentials/Practitioner

Courtesy of Cynthia Sanderson,
Manager of Matchmaker & Lead Programs

CA – Community Services & Development

- Continuous operation of a Wx + LHC program since 1993
 - >\$25 million LHC grant funding
 - Educated residents, tested and enrolled >2200 units
 - Completed and cleared >2100 units
- Full service including Low-Income Home Energy Assistance Program and DOE WAP
 - Reduces lead hazards, IAQ improvements, energy efficiency
- Continue to build relationships with local housing and health departments to coordinate lhc with rehab, referral system of at-risk units, expand local certified workforce.

Courtesy of Dorcas Reyes-Fernandez,
CSD Energy and
Environmental Services

Phoenix – Neighborhood Services Department

- Identify public & private resources to facilitate neighborhood revitalization
- Create & maintain affordable and safe housing for vulnerable individuals
- Seek out and conduct pilot projects that promote sustainability, and build on successes
- Collaborate and network with internal & external agencies to leverage services
 - HOME, CDBG (various housing rehab programs), OHHLHC (LHC, HH Demo), Wx (Governor's Office of Energy, AZ Public Service, SW Gas, Salt River Project)

Courtesy of Yolanda Martinez,
Phoenix Neighborhood Services Department

Phoenix Healthy & Green Rehab Standards

- Hard flooring
- Low VOC products
- HVAC + Building Envelope & Energy Assessment
- Low flow water fixtures
- Xeriscape
- Energy Star appliances
- Solar PV &/or water systems on reconstructs
- Preference points for non-smoking multi-family applications

Phoenix – Challenges to Braiding Resources

- Complex project management
- Tracking eligible activities based on funding source
- Multi-layered regulatory mandates
- Owner buy-in to “added” measures or loan (lien) products
- Length of construction phasing & relocation coordination

Phoenix – Outcomes & Lessons Learned

- Sustainable, affordable, healthier, comfortable housing for low-income, at-risk families
- Staff capacity built with sustainable internal infrastructure
- Fully engaged in networking and relationship building
- Established trust and authority with staff and partners
- Implemented green & healthy rehab
- Practices that emerge as policy



Thank You!

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