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**Draft Report**

# **State of Delaware 2025-2029 Consolidated Plan and 2025 Action Plan**

**PREPARED FOR:**

Delaware State Housing Authority  
[www.destatehousing.com](http://www.destatehousing.com)

**CREATED**

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# Executive Summary

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

### 1. Introduction

The State of Delaware 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 ("non-entitlement" areas), which do not receive such funds directly from HUD. Jurisdictions that receive HUD block grants directly from HUD include Wilmington, Dover, and New Castle County.

The administering agency for the HUD block grant funds is the Delaware State Housing Authority (DSHA). In this role, DSHA sets the priorities and goals to guide annual funding; selects projects to fund; completes all required reports and participates in program audits; and works with subgrantees to ensure appropriate and timely use of funds.

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 is the 2025-2029 five-year Consolidated Plan for Delaware, and it will guide the allocation of block grant funds in the state between 2025 and 2029.

### 2. Summary of the objectives and outcomes identified in the Plan

The State of Delaware will receive the following allocation of HUD block grants for program year 2025 (PY2025):

- Community Development Block Grant (CDBG) - \$2,776,815
- HOME Investment Partnerships Program (HOME) - \$3,014,372.26
- Emergency Solutions Grant (ESG) - \$269,136
- Housing Opportunities for People with AIDS (HOPWA) - \$410,445
- Housing Trust Fund (HTF) - \$3,134,373.20

DSHA has established the following five-year goals for the Consolidated Plan period:

- Enable Delaware families to achieve and sustain homeownership (Homebuyer Assistance category);
- Preserve and expand affordable rental housing (Affordable Rental Housing);
- Preserve homeownership housing (Homeowner Rehabilitation);
- Mitigate the risk of homelessness, and expand access to affordable, integrated, supportive housing options, including permanent supportive housing, for those experiencing and at risk of homelessness (Homeless Assistance and Permanent Supportive Housing); .
- Prevent foreclosures and address impact of foreclosures (Foreclosure Prevention and Recovery); and
- Provide resources for local communities to address community development needs (Non-Housing Community Development).

In establishing the five-year goals, DSHA considered housing market conditions; the housing needs of low income and special needs residents; block-grant funding levels; and the ability to leverage HUD funds with other resources.

The objectives and outcomes associated with those goals will be measured through:

- Units preserved and occupied by low- and moderate-income renters.
- Construction of affordable rental units.
- Units preserved and occupied by low- and moderate-income owners through DSHA's HOME program.
- Households assisted with homeownership.
- Permanent supportive housing (PSH) units created.
- Providing Delaware's non-entitlement cities with community development activities through DSHA's CDBG program. Eligible activities such as homeowner rehabilitation, handicap accessibility and emergency repairs will be provided to eligible homeowners.
- Providing Street Outreach, Shelter Operations, Rapid Re-Housing, and Homelessness Prevention services to those experiencing homelessness and at-risk of homelessness through DSHA's ESG program.

Not all strategies apply to all areas of the State as local conditions and residents determine how best to address the housing and community development needs of each community.

Each successive Action Plan endeavors to reflect and adhere to these strategies in its resource allocation and program planning.

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

During the 2020-2024 Consolidated Plan period, DSHA primarily invested HUD block grant funding (excluding pandemic or recovery funding) in the following activities:

- Creation and preservation of affordable rental units;
- Provision of rental assistance to very low income and special needs households;
- Preservation of homeownership units occupied by low- and moderate-income homeowners;
- Support of homeownership through DSHA’s assistance and loan programs;
- Provision of rental assistance to keep people in housing as well as rapid rehousing assistance after they have fallen into homelessness;
- Assistance for emergency shelters to ensure they are operating at a high level of service; and
- Support for improving public infrastructure.

These investments were very successful and resulted in improvements to housing conditions and public infrastructure in Delaware’s non-entitlement communities, in addition to helping low-income residents remain in housing and avoid homelessness.

These investments were also consistent with the primary findings in the 2023 Delaware Statewide Housing Needs Assessment (Delaware HNA), which found a need for:

- Rental assistance and permanent supportive housing to address the gap between supply and the 13,600 renters who have incomes of less than 30% AMI and cannot afford units provided by the private sector;
- Funding to support the construction of at least 250 rental units a year targeted at < 50% AMI renters;
- Rehabilitation to units occupied by an estimated 28,000 renters and 4,250 owners who live in fair or poor condition housing and 730 residents with disabilities living in mobile homes; and
- New affordable homeownership units and targeted downpayment assistance and loans for the more than 34,000 renters who express a desire to own a home in Delaware.

#### **4. Summary of citizen participation process and consultation process**

Residents and stakeholders had many opportunities to participate in the development of the Consolidated Plan. The first phase of engagement included:

- 517 residents participated in a statistically significant survey about housing and community development needs in their communities; this survey provides information about the needs and preferences of Delawareans overall and by demographic group. Additionally, more than 2,133 residents participated in a “snowball sample”, a non-random sample that aimed to collect information from groups that typically face additional housing challenges in Delaware.
- More than 100 stakeholders participated in one-on-one interviews and small focus groups. Stakeholder interviews were conducted with specialists in housing, community development, and local government affairs.
- Two focus groups were held with Spanish speaking residents to supplement survey data.

The second phase of engagement included stakeholder focus groups to ensure that the priority needs identified through the Delaware HNA remained current and two public hearings—one before the 30-day public comment period and one during the comment period.

## 5. Summary of public comments

*This section will be updated after the public comment period has concluded.*

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

All comments and views submitted during the 2025-2029 Consolidated Plan and 2025 Action Plan comment period were accepted and considered in development of the final plan.

## 7. Summary

### Contingency Plans

The contingency plans that were developed to adjust the following allocations if HUD funding varies from DSHA normal estimates.

**CDBG.** If cuts are less than 25%: CDBG Homeowner Rehab program will remain at 15% of the total CDBG allocation. Administration and Technical Assistance will remain at their allowable percentages.

If cuts are greater than 25%: DSHA will reduce the amount of the CDBG Homeowner Rehab program. Administration and Technical Assistance remain at allowable percentages.

**HOME.** If DSHA receives more HOME funding than stated under this proposed plan, the increase in funds would be applied to the admin set-aside (up to the allowable cap), utilizing the eligible amount available for CHDO Operating costs and the remainder added to the rental construction activity.

If DSHA receives less HOME funding than stated under this proposed plan, the set-asides for CHDO Operating, Pre-Development and Admin will decrease by the proportional percentage of allocation reduction to ensure those line-items are within the required caps.

If the remaining reduction is less than \$500,000, DSHA will reduce the amount set-aside for rental activities. If the remaining reduction is greater than \$500,000 a proportional decrease will be established.

**HTF.** If DSHA receives more HTF funding than stated under this proposed plan, the increase in funds would be applied to the admin set-aside and construction set-aside proportionally.

If DSHA receives less HTF funding than stated under this proposed plan, the decrease in funds would be applied to the admin set-aside and construction set-aside proportionally.

**ESG.** If DSHA receives more ESG funding than stated under this proposed plan, the increase in funds would be applied to the admin set-aside (up to the allowable cap), increase the amount available for each state-recipient based on past performance and required percentage caps.

If DSHA receives less ESG funding than stated under this proposed plan, the sub-recipient amounts would decrease as would the admin totals.

**HOPWA.** If DSHA continues to receive a HOPWA allocation after FY25 under this proposed plan, the funds will be applied to the admin set-aside (up to the allowable cap) and used to fund the state-recipient's TBRA program.

# 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 Delaware State Housing Authority (DSHA) is responsible for preparing the Consolidated Plan and administering all block grant funds that the state receives annually. DSHA oversees the provision of affordable housing for low- and moderate-income Delawareans. DSHA includes the following departments:

- **Housing Development:** Oversees acquisition and rehabilitation of affordable rental and for-sale housing developments, compliance monitoring for all federal programs and LIHTC program, Section 8 Contract Administration, code enforcement and administers all federal and state homeless grants.
- **Housing Finance:** Manages downpayment assistance and foreclosure prevention program, issuance of single family and multi-family mortgage revenue bonds
- **Housing Management:** Manages DSHA’s public housing sites and administers the Housing Choice Voucher Program and Moving to Work Program
- **Policy and Planning:** Works with legislative issues and compiles housing data, research, and strategic planning
- **Public Relations:** Works as liaison between DSHA and the community through producing annual reports, Housing Services Directory, and marketing materials

Agency Role	Name	Department/Agency
Lead Agency	DELAWARE	
CDBG Administrator	DELAWARE	Delaware State Housing Authority (DSHA)
HOPWA Administrator	DELAWARE	Delaware State Housing Authority (DSHA)
HOME Administrator	DELAWARE	Delaware State Housing Authority (DSHA)
ESG Administrator	DELAWARE	Delaware State Housing Authority (DSHA)
HTF Administrator	DELAWARE	Delaware State Housing Authority (DSHA)

**Table 1 – Responsible Agencies**

### Consolidated Plan Public Contact Information

#### Alexander Modeas

Director of Policy and Planning

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

## 1. Introduction

This section describes the stakeholder consultation and citizen participation efforts that supported the Delaware Housing Needs Assessment and supported the 2025-2029 Consolidated Plan.

Residents and stakeholders had many opportunities to participate in the development of the Consolidated Plan. The first phase of engagement included:

- 517 residents participated in a statistically significant survey about housing and community development needs in their communities; this survey provides information about the needs and preferences of Delawareans overall and by demographic group. Additionally, more than 2,133 residents participated in a “snowball sample”, a non-random sample that aimed to collect information from groups that typically face additional housing challenges in Delaware.
- More than 100 stakeholders participated in one-on-one interviews and small focus groups. Stakeholder interviews were conducted with specialists in housing, community development, and local government affairs.
- Two focus groups were held with Spanish speaking residents to supplement survey data.

The second phase of engagement included stakeholder focus groups to ensure that the priority needs identified through the Delaware HNA remained current and two public hearings—one before the 30-day public comment period and one during the comment period.

Delaware Housing Leaders,

The Delaware State Housing Authority (DSHA) is conducting two community meetings and one public hearing in February to inform its five-year “Consolidated Plan,” a housing and community development needs report required by the U.S. Department of Housing and Urban Development (HUD).

These discussions will be held virtually, on the dates and times listed below. To RSVP, and receive a virtual link, email [lucy@rootpolicy.com](mailto:lucy@rootpolicy.com) with the date and time that works best with your schedule. You are welcome to share this information with interested colleagues and clients.

The community meetings will last 1.5 hours and provide an overview of the Consolidated Plan and housing needs in Delaware; discuss DSHAs work on housing; and move into break out groups to discuss priority housing and community development needs in the state. The hearing will be a more formal meeting to take comments on needs.

**Delaware Housing and Community Development Focus Group Times:**

- February 18—8:30 a.m. to 10 a.m.
- February 25—6 to 7:30 p.m.
- February 28 (formal public hearing to take comments on priority needs)—noon to 1 p.m.

Individuals who require an accommodation to participate can email [lucy@rootpolicy.com](mailto:lucy@rootpolicy.com) or call (970) 880-1415. An example of a reasonable accommodation would be having language translation available or ensuring that the discussion materials and format accommodates a disability.

**Thank you** in advance for your interest! Please contact Alexander Modeas at DSHA, [Alexander.Modeas@delaware.gov](mailto:Alexander.Modeas@delaware.gov), with questions.

Sincerely,

**Alexander Modeas**

Director of Policy and Planning

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The public hearings included:

- A hearing on February 25, 2025 prior to the release of the Consolidated Plan draft. There was one participant, and no other public comments received.
- A hearing was held on August 4, 2025 during the 30-day public comment period to take comments on the draft 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))**

DSHA is an active member and convener of initiatives to enhance coordination between housing providers and private and governmental health, mental health, and service agencies. DSHA is an active member of:

- Behavioral Health Planning and Advisory Council
- Housing Committee of the State Council for Persons with Disabilities/ Governor’s Commission
- Continuum of Care Governance Board and Committees
- Delaware Correctional Reentry Commission
- Fair Housing Task Force
- Statewide Community Development Network
- Family Services Cabinet Council
- African American Task Force
- Childhood Lead Poisoning Prevention Advisory Committee
- Sussex Housing Group

Through partnership programs, DSHA is also in regular contact with partners in the Department of Health and Social Services, Division of Developmental Disabilities Services, Division of Substance Abuse and Mental Health, Division of Services for Aging and Adults with Physical Disabilities, Department of Services for Children, Youth and their Families, and numerous health advocates.

DSHA also works with Housing Alliance Delaware (HAD), the coordinating entity for Delaware’s Continuum of Care regarding the use of Emergency Solutions Grant (ESG) funds, performance standards for ESG supported programs, and Community Management Information System (CMIS) to coordinate needs of people experiencing homelessness.

**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**

As a small state, Delaware has one statewide Continuum of Care (CoC). DSHA is an active partner with the statewide CoC and DSHA’s Housing Development Administrator is a member of the board. Members

of the Delaware CoC meet every three months. Meetings provide data updates and training and funding information.

The Delaware CoC's current priorities to better address the needs of homeless persons and persons at risk of homelessness include:

- Increasing state and federal funding for affordable housing;
- Reforming land use and zoning practices to encourage affordable housing development;
- Protecting the rights of people experiencing homelessness, and implementing data-driven solutions to homelessness;
- Enhancing Tenant Rights and Protections; and
- Increasing Delaware's supply of supportive.

DSHA also coordinates with Housing Alliance Delaware (HAD), coordinating entity for Delaware's Continuum of Care, which oversees a centralized intake line to assist individuals and families seeking emergency shelter, brings together housing advocates, and takes on legislative and policy initiatives related to affordable housing. HAD was an active participant in the HNA that preceded the Consolidated Plan through participation in stakeholder interviews and helping to arrange focus groups with service providers who assist persons experiencing homelessness and individuals who have experienced domestic violence and human trafficking.

**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**

DSHA consults with the Continuum of Care as well as the other ESG-funded jurisdictions, City of Wilmington and New Castle County, in allocating and prioritizing ESG funding (DSHA prioritizes ESG funding in Sussex and Kent Counties); developing shared performance standards and ensuring adequate funding for the administration of the Community Management Information System (CMIS, Delaware's HMIS) through DSHA sources. This role enables DSHA to coordinate with the CoC to form a collaborative process to identify priorities, housing needs and strategies for the State of Delaware.

In 2024, the Committee wrote the CoC's first Government Rental Assistance Guide that educated and recruited private landlords in the process of providing units to people receiving rental assistance. They also host public trainings for case managers and service providers to most effectively track client applications. Housing Alliance Delaware (HAD) and the CoC Funding Committee coordinate to respond to the annual funding process for the HUD CoC Program Notice of Funding Opportunity. These funds are used to fund permanent supportive housing, rapid re-housing, transitional rapid re-housing, transitional housing, and CoC infrastructure, such as planning, CMIS, and Coordinated Entry). In FY2024, the CoC was awarded \$1,080,844 in government grants.

All ESG jurisdictions require grantee participation in CMIS. DSHA staff participate on the Continuum of Care board and other committees, including Centralized Intake and Policy/ Advocacy Committee.

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

During the development of the Delaware HNA and Consolidated Plan, more than 100 stakeholders participated in one-on-one interviews and small focus groups. Stakeholder interviews were conducted with specialists in housing, community development, and local government affairs. Members of housing groups throughout the state were consulted, including Sussex County Community Development and Housing, Kent County Planning, New Castle County Community Development and Housing, Sussex Housing Group, and Delaware Affordable Housing Coalition.

The figure that follows— “Organizations and Industries Represented in Interviews and Focus Groups”— lists the organizations that participated in stakeholder consultation.

## Organizations and Industries Represented in Interviews and Focus Groups

American Planning Association	DE Department of Transportation	House Housing Committee	New Castle County
Better Homes of Seaford	DE Federation of Housing Counselors	Housing Advocates	New Ecology
Biden School of Public Policy and Administration	DE Homebuilders	Housing Alliance of Delaware	Newark Police Department
Cardinal Financial	DE Housing Coalition	Independent Resources	Office of State Planning Coordination
Catholic Charities	DE League of Local Governments	Ingerman Group	Peoples Place
Center for Community Research	DE Manufactured Home Owners Association	Kent County	Reach Riverside
Children's Beach House	DE NAHRO	La Esperanza	Redemption City
City of Dover	DE State Housing Authority	Landlords & Property Owners	Senate Housing and Land Use Committee
City of Newark	Discover Bank	Latin American Community Center	Southbridge Community Services
City of Wilmington	Division of Public Health / Population Health Bureau	Licensed Social Workers & Service Providers	Springboard Collaborative
Community Legal Aid	Domestic Violence Task Force	LifeLine	State Council for Persons with Disabilities
Community Resource Center	Energize Delaware	LIHTC Developers	Sussex County
Cornerstone West CDC	Family Promise of Southern Delaware	Market Rate Developers	Sussex Housing Group
DE Apartment Association	Fuller Center for Housing	Metropolitan Wilmington Urban League	United Way of Delaware
DE Association of Realtors	Habitat for Humanity	Milford Housing Development Corporation	West End Neighborhood House
DE Coalition Against Domestic Violence	HDC MidAtlantic	Ministry of Caring	Wilmington Conservancy Land Bank
DE Council on Housing	Healthy Communities Delaware	Mortgage Bankers Association	Woodlawn Trustees
	HOMES Campaign	NeighborGood Partners	YMCA of Delaware

Local organizations also assisted in the administration of a community survey that collected a “snowball sample”, a non-random, non-statistical sample that aimed to collect information from groups that typically face additional housing challenges in Delaware. 2,133 residents were represented by the non-random sample and 517 residents were randomly selected for a statistically significant survey. The figure below— “Resident Survey Sample Sizes and Proportions”—a provides a demographic breakdown of respondents. Additionally, two focus groups were held with Spanish speaking residents to supplement survey data.

### Resident Survey Sample Sizes and Proportions

	Random Sample		Snowball Sample		ACS %
	n = 517	%	n = 2,133	%	
<b>Household composition</b>					
Families with children < 18	148	29%	756	35%	24%
Single parents with children <18	53	10%	398	19%	9%
Families with adult children	124	24%	564	26%	-
People with a disability	139	27%	742	35%	13%
Over 65	151	29%	514	24%	19%
<b>Race</b>					
Non-Hispanic White	325	63%	1,334	63%	66%
Black	69	13%	499	23%	21%
Hispanic	65	13%	62	3%	7%
Other	58	11%	133	6%	6%
<b>Tenure</b>					
Owners	322	62%	1,052	49%	71%
Renters	110	21%	714	33%	29%
Mobile Home	23	4%	68	3%	7%
Precariously Housed	40	8%	225	11%	-
Other	22	4%	74	4%	-
<b>County</b>					
New Castle	264	51%	1,037	49%	57%
Sussex	151	29%	561	26%	25%
Kent	102	20%	535	25%	18%
<b>City</b>					
Wilmington	107	21%	465	22%	7%
Dover	45	9%	243	11%	4%
Newark	40	8%	150	7%	3%

Note: "n=" refers to the number of respondents, or the sample size.

Source: 2021 5-year ACS and Root Policy Research from the 2023 Delaware Housing Survey and the 2023 Delaware Housing Snowball Survey.

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

N/A all relevant organizations and agencies were invited to participate in the process and no organizations were intentionally excluded.

**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?
Delaware Housing Needs Assessment 2023-2023	Delaware State Housing Authority	Presents demographic shifts, market conditions, and housing need projections
Delaware Housing Needs Assessment 2015-2020	Delaware State Housing Authority	Useful to compare previous market conditions and goals with present-day challenges
2020 Statewide Analysis of Impediments to Fair Housing Choice	Delaware State Fair Housing Consortium	Directs goals and useful to compare levels of need
Housing and Homelessness in Delaware	Housing Alliance Delaware (HAD)	Informs state-wide homelessness strategy and homeless needs assessment
Risk Analysis and Resilience Assessment	Delaware State Housing Authority	Informs hazard mitigation planning.
Community and Choice: Housing Needs for People with Disabilities in Delaware	Delaware Housing Coalition and Housing Sub-Committee of the Governor’s Commission on Community Based Alternatives for People with Disabilities	Informs non-homeless special needs assessment and related goals
State Transition Task Force for Emerging Adults with Disabilities and Special Health Care Needs	Governor’s Advisory Council for Exceptional Citizens	Informs non-homeless special needs assessment and related goals
2023 Delaware Continuum of Care Annual Report	Delaware Continuum of Care	Informs homeless needs assessment and related goals

**Table 2 – 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(I))**

Delaware is a small state, enabling DSHA to play a central and coordinating role in housing policy. During the research phase of the Consolidated Plan—conducted in development of the Delaware HNA—the research team met with the Governor, state legislators, local policymakers and community leaders,

members of task forces representing residents with disabilities and residents experiencing homelessness, and trade associations (e.g., the Delaware League of Local Governments, the Delaware Apartment Association, the Domestic Violence Task Force).

The elements of the Consolidated Plan specifically involving state and local partnerships include:

- In allocating tax credits—which are supported with HOME funding—DSHA works closely with local governments and planning departments to identify areas of opportunity and plan locations of multifamily affordable housing. Local governments take part in the community public hearings of the municipalities that they submit applications for/on behalf of as part of our Citizen Participation Plan.
- ESG-funded activities are carried out by nonprofit, faith-based, and local government partners who provide street outreach, emergency shelter, homeless prevention and rapid rehousing programs located in Kent and Sussex Counties.
- \$398,132 funds are allocated to the project sponsor, Delaware HIV Consortium, Inc., who receives referrals to the program by community-based HIV/AIDS case managers.

In addition,

- DSHA works with Energize Delaware to evaluate conditions of home and energy costs, which inform rehabilitation programs and policies. DSHA has created incentives for property owners to improve energy efficiency and weatherization.
- DSHA also works closely with the Office of State Planning Coordination to coordinate with local governments to determine housing needs and development capacity. The Planning Office is an advisor to local governments and reviews local Comprehensive Plans, housing strategies, and land use and zoning codes.
- DSHA has worked with Delaware Department of Transportation to coordinate the location of housing and transit in disadvantaged communities for better transit planning.
- Elected officials are now more intentionally coordinating with DSHA on housing policy and programs to ensure consistency and effectiveness.

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

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

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

- 517 Delaware residents participated in the 2023 Delaware Housing Survey—a statistically significant survey in which respondents were randomly selected to form a representative sample;
- 2,133 Delaware residents responded to the 2023 Delaware Housing Survey using snowball sampling methodology. This methodology utilizes service providers and other community connectors to disperse the survey and then asks respondents to spread the word about the survey;
- 29 stakeholders involved in local and state government, development, financing, and service provision participated in one-on-one interviews
- Two focus groups were held with five Spanish speakers to enhance the perspective of Hispanic residents in Delaware; and
- 84 stakeholders participated in focus groups. Stakeholders were specialists in housing, community development, and local government affairs.
- Two public hearings were held—one before, and one during, the public comment period—to collect input on housing and community development needs and take comments about the Draft Plan.

## Citizen Participation Outreach

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
1	Statistically significant Resident Survey	Representative sample of Delaware residents	517 randomly selected respondents	Respondents answered questions regarding housing challenges, displacement and pandemic effect, and future housing preferences and solutions. Top concerns from renter respondents included ability to find place quickly and housing condition. Mobile home occupants also had housing condition and accessibility concerns. Respondents who were displaced reported the experience was due to financial issues, health issues, worry of rent increase, and inability to keep up with maintenance	N/A; all comments are accepted.	
2	Resident survey	Residents of Delaware	2,133 residents responded via advertisement from community contacts and "snowballing," where respondents pass survey on to other contacts	This non-random sample had more respondents who were lower-income renters, single mothers, Black households, households with a disability, and those who are precariously housed. This enabled cross-tabulation that revealed disparities in need for disability modifications by county and income, barriers to homeownership including credit scores for Hispanic and Black households, and displacement due to substandard housing issues for low-income earners.	N/A; all comments are accepted.	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
3	Focus group	Spanish speaking, Hispanic residents in Delaware	Five residents participated in a virtual focus group from Georgetown, Millsboro, Wilmington, Dover, and Newark. The focus group was conducted in Spanish.	Spanish speaking residents appreciate the safety, small town feel, quality of schools, and resources in Delaware and came to the state in pursuit of a better life. Participants expressed concern regarding rapidly rising rents and barriers to housing access such as credit history, lack of social security number, children, and language. Given the barriers, many noted that they feel their only options are mobile homes, which can be expensive and inadequate for large families.	N/A; all comments are accepted.	
4	Stakeholder focus group	Service providers for survivors of domestic violence	Three service providers participated in a focus group to discuss needs of survivors of domestic abuse and human trafficking	Stakeholders noted that because domestic violence is interfamilial, housing instability is an immediate consequence. There are very limited number of vouchers for survivors of human trafficking and the housing available that accept vouchers are limited. Stakeholders pointed to need for more transitional spaces for survivors to better facilitate housing navigation and longer-term programming.	N/A; all comments are accepted.	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
5	Stakeholder meeting	Service providers and affordable housing developers	23 stakeholders from the Delaware Housing Alliance joined to discuss unaddressed needs, successful programs, and desires for future programming	Stakeholders identified needs for low-income families, seniors on fixed-income, people with disabilities who have accommodation needs, young people lacking credit history, and families with children. They desire more affirmative marketing to address discrimination, more transparency in the homebuying process, expedited waiting lists for affordable housing, small-scale investor access to condemned property, allow multiple voucher users within the same unit, and more funding for non-profits to develop housing	N/A; all comments are accepted.	
6	Stakeholder focus group	Affordable housing developers	7 stakeholders from the Delaware Housing Coalition joined to discuss unaddressed needs, successful programs, and desires for future programming	Stakeholders discussed the increasing preference for smaller starter homes that are more affordable and accommodate young families. High interest rates and increasing home values are making homeownership unaffordable to families 80% AMI and below. They also shared concerns about community opposition to affordable housing development, especially in areas outside of Wilmington.	N/A; all comments are accepted.	

<b>Sort Order</b>	<b>Mode of Outreach</b>	<b>Target of Outreach</b>	<b>Summary of response/attendance</b>	<b>Summary of comments received</b>	<b>Summary of comments not accepted and reasons</b>	<b>URL (If applicable)</b>
7	Stakeholder meeting	Stakeholders in southern Delaware	20 stakeholders from the Sussex Housing Group joined to discuss housing issues state-wide and in Sussex County	Stakeholders discussed community opposition to affordable housing in Sussex County as a barrier to development and also pointed to need for more homeless shelters and wrap-around services for people experiencing homelessness. Stakeholders also shared concern for the lack of workforce housing to support service industry workers in beach towns.	N/A; all comments are accepted.	
8	Stakeholder focus group	Service providers and community development stakeholders	4 stakeholders participated in a virtual focus group.	Stakeholders discussed housing and community development needs, including lead abatement, affordable and accessible rental housing, and barriers to homeownership	N/A; all comments are accepted.	
9	Stakeholder focus group	Service providers and community development stakeholders	4 stakeholders participated in a virtual focus group.	Stakeholders discussed housing and community development needs, including need for family shelter and transitional housing for families in Sussex County, need for more programs for youth with disabilities	N/A; all comments are accepted.	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
8	Stakeholder focus group	Stakeholders in the housing finance space	2 stakeholders from Neighborgood Partners and Cardinal Financial joined to discuss housing needs	Stakeholders discussed potential of expanding affordable housing supply through manufactured homes. There are still barriers to accessing loans for low-income families with low credit scores. Housing counselors are increasingly shifting their hats to provide resources for renters who are seeking housing stability after a lease was not renewed by landlord or those who have fallen behind in rent. Counselors put together a work plan to establish savings and improve credit. Debt is often still a significant barrier to homeownership. Housing counselor also noted that most people that seek services are Black and/ or single mothers. They provide outreach and workshops in the community. Stakeholders would like to see more financial education from an earlier age so people are aware of the importance of credit and savings.	N/A; all comments are accepted.	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
9	Stakeholder focus group	Affordable housing developers	6 stakeholders joined to provide input on barriers to development of affordable housing and needs of populations they serve	Discussed concern for increasing housing instability following pandemic aid and lack of funding for owner-occupied rehabilitation. Additionally, there are challenges in acquiring land because of increasing competition with for-profit developers. There is large need for affordable, accessible senior housing. Some developers expressed frustration about the overall lack of funding and LIHTC credits.	N/A; all comments are accepted.	
10	Stakeholder focus group	Service providers	11 stakeholders joined to provide input on greatest housing needs	Identified young adults (18-23) as vulnerable discrimination, facing credit barriers, and finding difficulty finding affordable studios or one bedroom units. Also expressed extreme concern for households 0-30% AMI who have very few options in Sussex County. There is need to rehabilitate homes and to demolish some beyond repair to start over. Service providers for people with disabilities wanted to see more centralized and straightforward paths to finding accessible housing. Overall, service providers would like to see service cliff minimized with rewards for earning more income. All want to see long-term support services prioritized.	N/A; all comments are accepted.	

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
11	Stakeholder focus group	Service providers for survivors of domestic violence	7 service providers for survivors of domestic violence participated in a focus group to discuss greatest barriers and housing needs of their clients	The greatest barriers identified by stakeholders were cost of housing and childcare, housing availability for survivors that desire to stay in same neighborhood or keep their child in the same school, criminal background and eviction checks, landlords not understanding VAWA. Providers would like to see low barrier housing for ELI women and their children with wrap-around services. They would also like to see more source of income protections and improved quality of existing housing stock.	N/A; all comments are accepted.	
12	Public Hearings, February 28 and August 5, 2025	Delaware residents and stakeholders	One resident attended this hearing		N/A; all comments are accepted.	

# Needs Assessment

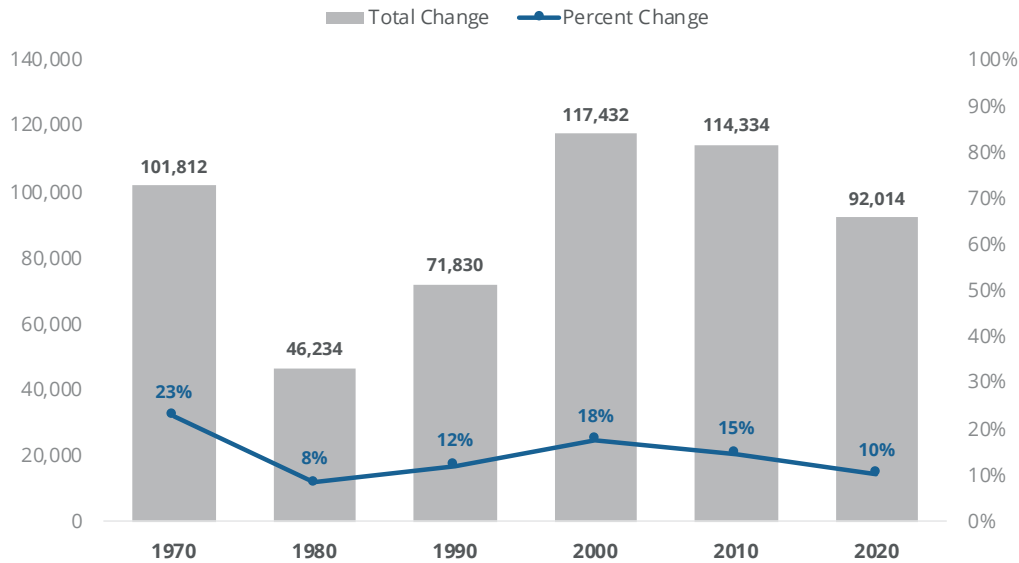
## Overview

### Needs Assessment Overview

The Needs Assessment for the Consolidated Plan draws from an analysis of the housing and supportive services needs of special populations, input from stakeholders who work with target populations, and demographic and housing market conditions in Delaware and its non-entitlement areas.

**Population, households, and income.** Delaware’s population has continued a steady increase, reaching 1,031,890 people as of 2023, according to American Community Survey estimates—yet the rate of population growth by decade has slowed since 2000. Between 2010 and 2023, population rose by 14.7%, compared to household growth of 25.3%—meaning that people are forming smaller households, which can increase housing demand. Median income growth was strong, rising 45.7% between 2010 and 2023.

### Numerical and Percent Change in Population by Decade, Delaware, 1970-2020



Source: U.S. Census Bureau, Decennial Census, and Root Policy Research.

**Primary needs identified in needs assessment.** The needs assessment conducted to support this Consolidated examines the housing and supportive needs of certain special populations, consistent with HUD Consolidated Plan regulations. That needs assessment found that:

- Single parent households face high rates of displacement: 28% of single parent households have experienced displacement, according to the 2023 Delaware Housing Survey. Rental and emergency assistance would help mitigate displacement and the disruption caused to households and children from frequent moves.

- Residents with disabilities need accessibility improvements and/or live in housing that is inaccessible. More than one in four residents in Delaware have some type of disability. Residents with disabilities are more likely than residents overall to be living in mobile homes and have high rates of accessibility needs: the Delaware Housing Survey found that 40% of residents living in mobile homes have accessibility needs. Homeowners are also more likely than renters to need accessibility improvements, which is likely correlated with age.
- Households and individuals experiencing (or have experienced) domestic violence have trouble using vouchers in Delaware and are at a greater risk for displacement and chronic homelessness. Contributing factors were identified as: perceptions and stigma among landlords; lack of available rentals in Delaware; affordability challenges due to limited incomes; complications with background checks; and capacity and resource constraints within the organizations who specialize in serving these populations.

**Primary needs identified in consultation.** Stakeholders who work in state and local government were consulted to gain insight into unaddressed needs and barriers to housing across the state and to provide input on programs or policies they wish to see considered, highlighting ongoing cooperation and coordination.

Unaddressed needs included:

- Housing insecurity for single mothers, those who have been evicted, and those who have gone into foreclosure and unable to find another affordable unit;
- Unaffordable student and workforce housing in college towns;
- Rapid rehousing options in rural areas of the state are lacking – people generally want to stay as local as possible;
- Sussex County lacks homeless shelters. People experiencing homelessness will spend majority of income made at jobs in Sussex County on Ubers or other transit to go back to shelters in northern Delaware;
- Substandard housing – asthma, lead poisoning from old water lines;
- Workforce housing is missing for people in essential jobs such as nurses, firefighters, teachers, and people who work in the service industry;
- Housing stability and accessibility for senior renters;
- Housing for people with high barriers to housing, such as criminal history, sexual offenses, or substance abuse issues;
- Waitlists into subsidized housing are alarmingly long;
- Broadband access in rural areas;
- Lack of transportation for residents in affordable units in rural areas; and
- Owner-occupied rehabilitation programs.

Stakeholders were asked their opinions about top housing and community development needs. They identified:

- Affordable housing for extremely low, very low-, and low-income persons was a concern across the board. Specific needs included additional targeted units, supportive services, and emergency shelters for people experiencing homelessness, especially outside of Wilmington, housing navigation services for elderly and persons with a disability;
- Workforce housing options that are affordable to workers within the healthcare, social services, and services industry – all crucial workers that are necessary for the state’s economic sustainability;
- Affordable homeownership opportunities. Stakeholders noted that barriers to homeownership included downpayments, realty tax, seniors’ inability to downsize, and interest rate increases;
- Need for housing rehabilitation to address lead concerns and upgrade older housing stock. This was especially a concern in Sussex County where there is a lack of oversight and inspection of rental housing. Current grant funding and vouchers are not enough to cover need and stakeholders expressed difficulty in accessing loans through Delaware’s existing programs;
- Need to make energy efficient improvements to older units across the state to ease the cost of energy for low- and moderate-income households.
- Accessible transit that connects affordable housing to resources such as grocery stores, pharmacies, and community centers.

In a statewide survey, residents identified the following housing and community needs most frequently:

- Need for more assistance for housing repairs and rehabilitation, especially for renters and mobile home occupants;
- Desire for more affordable housing options of any kind – including small single-family homes, units near dense apartments, ADUs, and condos;
- Renters identified downpayment assistance as a key program to improving their housing situation.

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

## Summary of Housing Needs

According to the Delaware HNA, Delaware’s population has increased since 2000, but the pace has slowed. South New Castle County accounted for the largest growth in the state. The state has also gotten more diverse, particularly in New Castle and Kent County, where the number of Black and Hispanic residents has grown the most. Delaware’s population growth is partially fueled from people moving from out of state. An estimated 40,052 people moved from another state in 2019. East Sussex has seen the greatest increase of this population with a 30% increase in in-migration since 2015. In terms of households, household growth outpaced population growth, indicating that household formation is decreasing, and more people are living alone. Crucially, household growth also outpaced housing unit growth, resulting in a shortfall of 6,700 units needed to keep up the growth.

Housing challenges related to supply and affordability were explored in the 2023 Delaware Housing Survey. Results provided insight into barriers specific to very low- and low-income households. Housing conditions were a key challenge faced disproportionately by lower income respondents. Thirty-one percent of households with income less than \$30,000 in New Castle County reported their home was in fair or poor condition compared to only 6% of respondents with household income between \$95,000 and \$160,000. In Sussex and Kent Counties, half (50%) of respondents with income less than \$25,000 reported their home was in fair or poor condition compared to only 4% of households with income between \$75,000 and \$160,000.

In terms of housing stability, respondents with income less than \$47,500 in New Castle County were most likely to report that unsafe housing, eviction, and rent increases were reasons for moving when they did not want to. In Sussex and Kent County, households with income less than \$35,000 were more likely to report that landlords selling their unit, eviction, and rent increases were reasons for displacement. Respondents within the lowest income bracket in Delaware identified emergency assistance, rental assistance, and money for critical repairs as key resources to improve their housing situation.

Demographics	Base Year: 2010	Most Recent Year: 2023	% Change
Population	323,408	393,351	21.6%
Households	125,875	157,804	25.4%
Median Income	\$57,599	\$82,855	43.8%

**Table 3 - Housing Needs Assessment Demographics**

Data Source Name:  
2010 and 2023 5-Year ACS; Note that median income reflects all of Delaware

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

There are 40,684 single person households in Delaware’s non-entitlement areas. Of these single person households, 3,324 (or 8%) need housing assistance according to a needs assessment model built to support the Consolidated Plan. This is based on the number of single person households living below the poverty level. In the next five years, the number of single person households in need of housing assistance is projected to grow to 3,626 households.

Of single person heads of household, typically single parents have the greatest needs—and this was evident in the 2023 Delaware Housing Survey. According to the survey, 28% of single parents reported that they had experienced displacement in the past five years compared to 15% of married-couple households with children. The top reasons for displacement identified by single parents were rent increases, landlord refusing to renew lease, and trouble affording utilities. This group has difficulty accessing the homeownership market due to bad or low credit, difficulty saving for a downpayment, and lack of affordable homeownership options in the areas they would like to live in. Single parents desired money for critical repairs, emergency financial assistance, and help with budgeting and managing money to improve their housing situation.

## **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.**

### **Households with disabilities.**

In the statistically significant 2023 Delaware Housing Survey, 27% of respondents reported a disability. When applying this estimate to the non-entitlement population of Delaware, this equates to approximately 106,205 people with disabilities in Delaware in non-entitlement areas. An estimated 31%, or 32,923 residents with disabilities, need accessibility improvements according to the survey. Of this population, 40% who lived in a mobile home, 29% of homeowners, and 18% of renters needed accessibility improvements. Specifically, homeowners and those who lived in mobile homes desired grab bars and renters desired service animals. Respondents with disabilities who lived in Sussex County were least likely to find an accessible home.

### **Victims of domestic violence.**

According to the Centers for Disease Control (CDC), 41% of women and 26% of men aged 18 or older have experienced contact sexual violence, physical violence, or stalking by an intimate partner in their lifetime. Annual incidence rates—meaning the proportion of people who have experienced contact sexual violence, physical violence, or stalking by an intimate partner in the previous year—are 4.5% for women and 2.8% for men.

Applying these rates to the non-entitlement population of Delaware over 18 indicates that 11,551 residents 18 and older are likely to have experienced some type of domestic violence, dating violence,

sexual assault and/or stalking by an intimate partner in the previous year. National statistics show that 13.4% of women and 5.3% of men experiencing intimate partner violence need housing services. In non-entitlement Delaware, these statistics suggest that 1,218 women and 285 men who are victims of domestic violence require housing services each year.

According to stakeholders who work closely with residents who have experienced domestic violence, these residents face greater challenges utilizing Housing Choice Vouchers than many voucher holders because of the stigma associated with their history, deep affordability needs and very low incomes, complications with background checks, and limited resources. They are also very vulnerable to eviction: s one service provider noted, many landlords are unsympathetic to these households and would rather evict victims than hold their perpetrators responsible.

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

According to secondary data, severe cost burden and severe housing problems, for extremely low-income renter and owner households, are the most common housing problems.

More detail on housing problems is available in the 2023 Delaware Housing Survey. The most common housing problems include:

- The rising cost of housing and resulting risk of displacement. Ten percent of Delawareans reported that they had to move when they did not want to in the past five years. Rent increases were the most cited reason for displacement (22%).
- Inadequate housing supply, especially for very low-income renters.
- Challenges finding a rental unit when using a Housing Choice Voucher.
- Evictions due to rent arrears and declining resources for rental assistance.
- Property owners/landlord also struggle to keep up with the rising cost of maintenance that often leads to price increases.

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

**Displacement.** Respondents in the 2023 Delaware Housing Survey were asked if they have had to move in the past five years when they did not want to. Single mothers, Black respondents, respondents with income between \$30,000 and \$47,500 experienced displacement at the highest rates: Twenty-eight percent of single parents, 22% of Black respondents, and 22% of respondents in New Castle County with income between \$30,000 and \$47,500 reported displacement compared to 10% of all respondents.

**Challenges maintaining increasing rent.** Rent increases were the most common reason for displacement reported by all respondents. Seventeen percent of single parents who were displaced reported their displacement was due to the landlord refusing to renew the lease, 18% of Black respondents who experienced displacement reported eviction, and 23% of respondents in New Castle County with income between \$30,000 and \$47,500 who experienced displacement reported eviction.

**Substandard housing condition.** The survey also revealed that substandard housing issues also led to displacement, especially for households with income below \$30,000 in New Castle County and less than \$25,000 in Sussex and Kent Counties. Housing conditions varied by tenure, race, ethnicity, income, and household characteristics in the survey:

- Twenty-six percent of renters reported poor or fair conditions— 20 percentage points higher than homeowners;
- Eighteen percent of Black respondents reported poor or fair conditions compared to 11% of non-Hispanic White and 9% of Hispanic respondents;
- One in five single parents and households with a disability reported poor or fair conditions in housing;
- Generally, as income increases, so does the quality of housing. No respondents making over \$160,000 reported conditions that were poor or fair. By contrast, 50% of households earning less than \$25,000 in Sussex and Kent Counties reported living in poor or fair condition housing. Low-income households in New Castle County are much less likely than low-income households in Sussex and Kent Counties to report living in fair or poor housing conditions (31% versus 50%).

**Cost burden.** According to the Delaware HNA, cost burden rates are higher for renter families. Fifty percent of renters in Delaware experience cost burden compared to 21% of owners.

**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**

From January through December 2024, Delaware’s Central Intake (CI) for persons experiencing or at-risk of homelessness received 35,732 calls from residents seeking assistance. Of these calls, 38% came from households living in doubled up conditions and 10% came from households currently housed. About two-thirds of the calls came from adults living in households with other adults and one-third from families with children; 64% of households were female-headed and 36% were male headed.

**Families with children.** Families with children face unique housing barriers in Delaware, specifically families with more than two children. Stakeholders explained that many areas across the state have occupancy requirements which often force families to rent larger units that they cannot afford.

Others noted the substantial increase in the number of families being displaced because landlords refuse to renew leases. Service providers struggle to support family’s post-displacement due to limited capacity and funding. Without support, many families are at a greater risk for homelessness or long-term housing instability.

Stakeholders and service providers reported concern for children experiencing homelessness and their educational outcomes. Many participants explained that it is increasingly difficult for homeless children

to get to school as many families do not have a car. School districts have made efforts to remedy these challenges with one school district spending over \$60,000 per year for transportation services.

**Single mothers.** Stakeholders mentioned single mothers as among the hardest populations to house and the most housing-challenged of all resident groups. This was attributed to their sources of income—many must rely on child support which landlords view as inconsistent income.

Stakeholders mentioned that rising housing costs are exacerbated by high childcare costs—the incomes of single mothers are being squeezed by both. Some stakeholders complimented Wilmington’s approach to addressing the needs of single mothers which was summarized as building single family homes and selling them to single mothers at an affordable rate.

Single parents in the 2023 Delaware Housing Survey also disproportionately reported experiencing displacement compared to the state (28% versus 10%). These families are at imminent risk of becoming unsheltered.

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

DSHA and its partnering agencies adhere to the HUD definition of “imminent risk-of homelessness” to determine which households fall into the “at-risk” category. This includes: an individual or family who will imminently (within 14 days) lose their primary nighttime residence provided that no subsequent residence has been identified and the individual or family lacks the resources or support networks needed to obtain other permanent housing.

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

The 2023 Delaware Snowball Survey overrepresented respondents who are precariously housed, allowing for deeper analysis within this group facing housing instability compared to the statistically significant 2023 Delaware Housing Survey. Precariously housed individuals were defined as those who are staying with friends and family (and are not on the lease or property title), staying in a shelter or transitional housing, living out of a car or RV, camping or sleeping outside, or staying in motels. Precariously housed respondents in this sample reported that rent increases were the main reason for their initial displacement. This varied by geography, race and ethnicity, and household characteristics:

- In New Castle County, precariously housed respondents reported rent increases as the top reason for displacement. In Sussex County, the top reason was a unit being rented to someone else. In East Sussex and Kent County, it was unsafe housing.
- White precariously housed respondents reported unsafe housing as the top reason for displacement. Precariously housed Black respondents reported rent increase and precariously housed Hispanic respondents reported eviction as their top reason for displacement.

- Precariously housed families with children and single parents both listed unsafe housing as a reason for displacement. Those with a disability listed poor condition of property as the top reason.

In summary, income that cannot keep up with rent increases, eviction, non-renewal of leases, unsafe housing conditions (e.g. domestic violence), and poor housing conditions are linked to housing instability and increased risk of homelessness in Delaware.

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

### **Introduction**

Disproportionate housing needs in a population are defined as having one or more of the following four housing problems in greater proportion than the jurisdiction as a whole or than White households:

- 1) Living in housing that lacks complete kitchen facilities;
- 2) Living in housing that lacks complete plumbing facilities;
- 3) More than one person per room (overcrowded); and
- 4) Cost burden greater than 30% of Area Median Income (AMI).

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

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

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

The largest racial and ethnic groups in Delaware are non-Hispanic White, Black or African American, and Hispanic. As part of the Delaware HNA, focus groups were conducted with all of these groups to identify housing needs. They included rising housing costs, barriers to housing such as credit history, lack of documentation, having children in the household, and language barriers. Several participants also detailed struggles living in manufactured homes.

**Rising housing costs.** Residents noted that the rise in housing costs has accelerated recently. They noted rent increases over the past year ranging from \$30 per month (in mobile homes parks) to \$300 per month (in apartments). Residents in mobile home parks noted their rents are in the \$1,000 to \$1,200 range, and after utilities housing costs range between \$2,500 to \$3,000 a month.

Several have more than one family occupying the housing unit, which helps them manage living expenses—and is also a reflection of the consequences of limited housing supply.

Some residents also noted that high housing costs prevent them from saving for college and planning for their children's future. Children in turn feel discouraged about not being able to afford college in the future and begin losing motivation in school, feeling they might be better off working than going to school.

**Barriers to housing.** Residents shared the main barriers they faced when looking for housing. The main barriers discussed were:

- **Credit history.** This was the number one barrier cited by participants. Many do not have a credit history due to their low incomes and others do not have the financial literacy to navigate the credit system. A participant noted that their household moved to Delaware specifically with the goal of buying a home, but their mortgage application was denied due to their low credit score. They recently applied for a credit card to start building their credit but are unsure they are correctly navigating the credit system. One potential solution to credit barriers is a tenant rent reporting program to allow renters to build their credit through on-time payments. In January 2023, DSHA launched the Delaware Tenant Rent Reporting Pilot program in partnership with Self Financial, Inc. and Neighborgood Partners. Renters could then build their credit based on on-time rent payments as reported by Equifax, Experian, and TransUnion.
- **Children in the home.** Participants stated that landlords prefer to rent to tenants without children. They noted landlords are unwilling to rent to tenants with children and turn them away.
- **Language.** Participants also noted that not speaking English well makes it very difficult to fill in the paperwork correctly and communicate with potential landlords.

**Mobile homes.** Due to the barriers listed above—many of which are unique to the newcomer community—several participants noted they feel their only housing option is a mobile home, where owners are more likely to be flexible with rent and homes have more bedrooms that can accommodate families with children. That said, one participant living in a mobile home noted affordable rents at around \$800 only offer a one bedroom, which is not adequate to accommodate the 4 children in the household.

Participants in mobile homes noted that their landlords do not take care of any maintenance requests, tenants are in charge of doing and paying for any necessary repairs to the rental unit. When they have asked for repairs in the past, landlords have told them that if they do not like making the repairs themselves, the only option they have is to move out.

All participants noted their long-term dream is to own a home in the state. However, they noted they were not interested in ownership of a mobile home where lot rents are charged. They noted lot rents are about \$500 to \$800; thus, they feel a mobile home is equivalent to renting. They noted that the landlord can ask residents to leave the lot and moving a mobile home is not a reasonable option. In addition, they noted mobile home parks can be sold or closed without any protection for mobile homeowners.

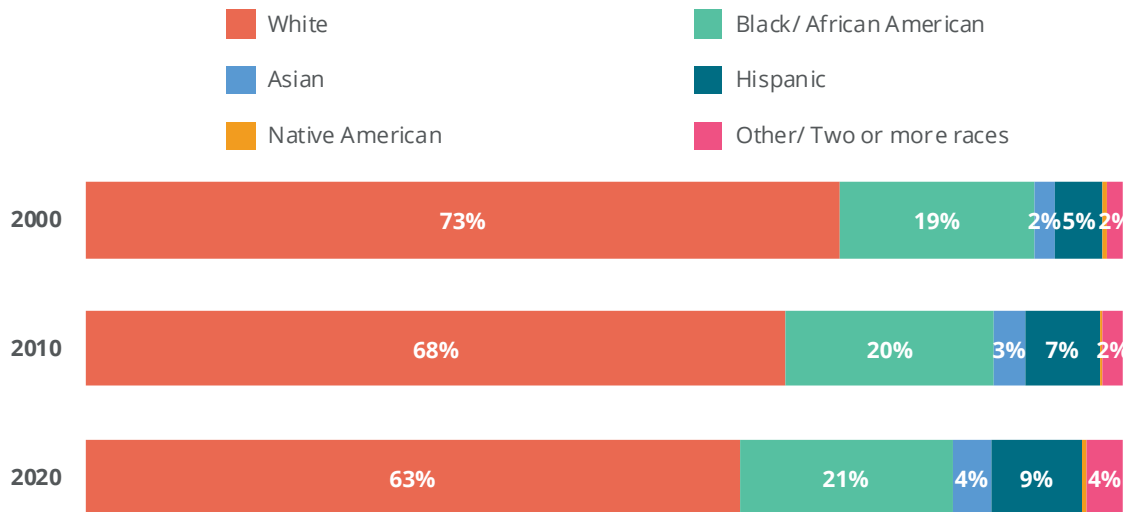
The participants living in mobile home parks also noted that they currently pay their rent in cash, making it hard to build a record of stable rent payment history.

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

Residents with housing needs live throughout Delaware; however, the most acute needs are in rural areas where housing supply is very limited and new housing has not been built.

Delaware's population has grown more diverse since 2000. The proportion of Black, Asian, and Hispanic residents rose two-percentage points since 2000.

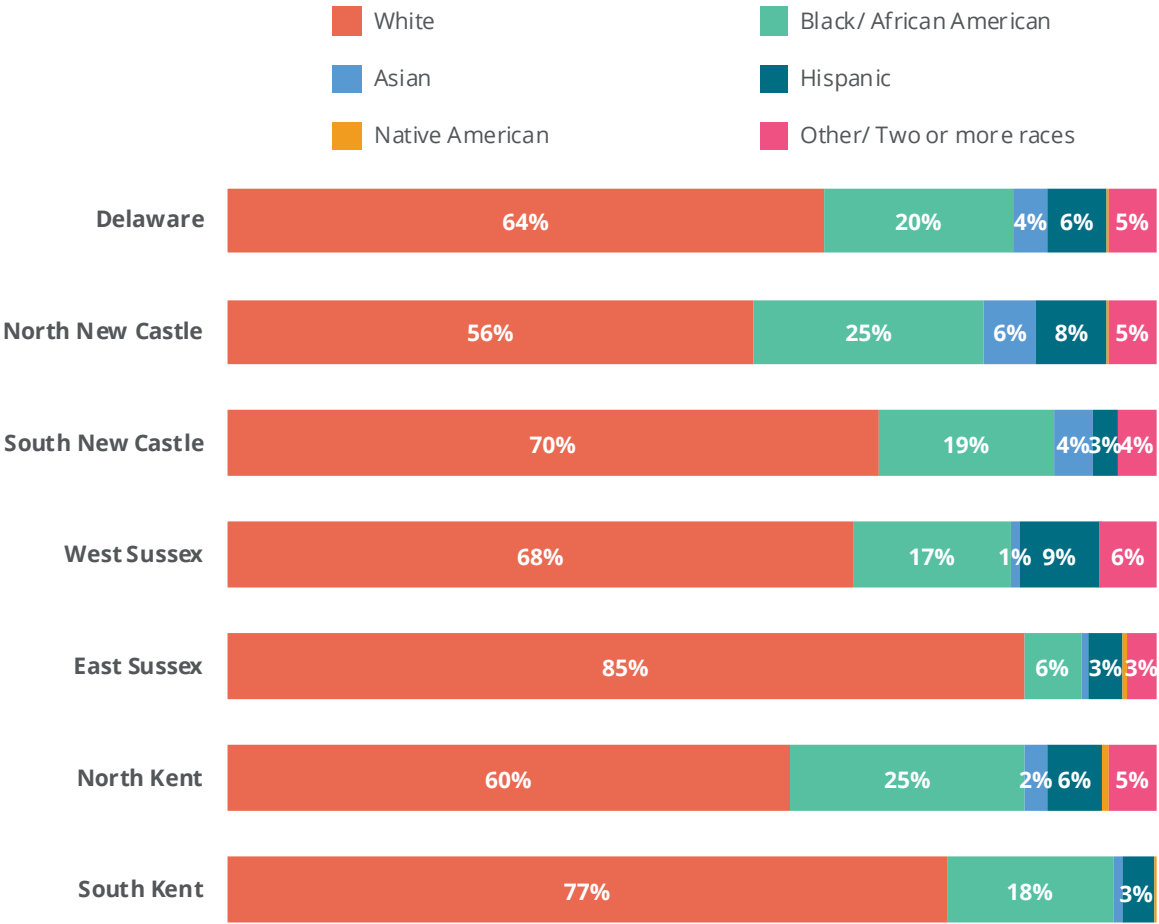
## Population by Race and Ethnicity, Delaware, 2000, 2010, and 2020



Source: U.S. Decennial Census and 2010 and 2020 5-year ACS and Root Policy Research.

North New Castle County and North Kent County have the highest proportion of residents who are Black while West Sussex has the highest proportion of Hispanic residents.

### Race and Ethnicity, Delaware, Market Areas, 2021



Source: 2021 ACS 5-year estimates and Root Policy Research.

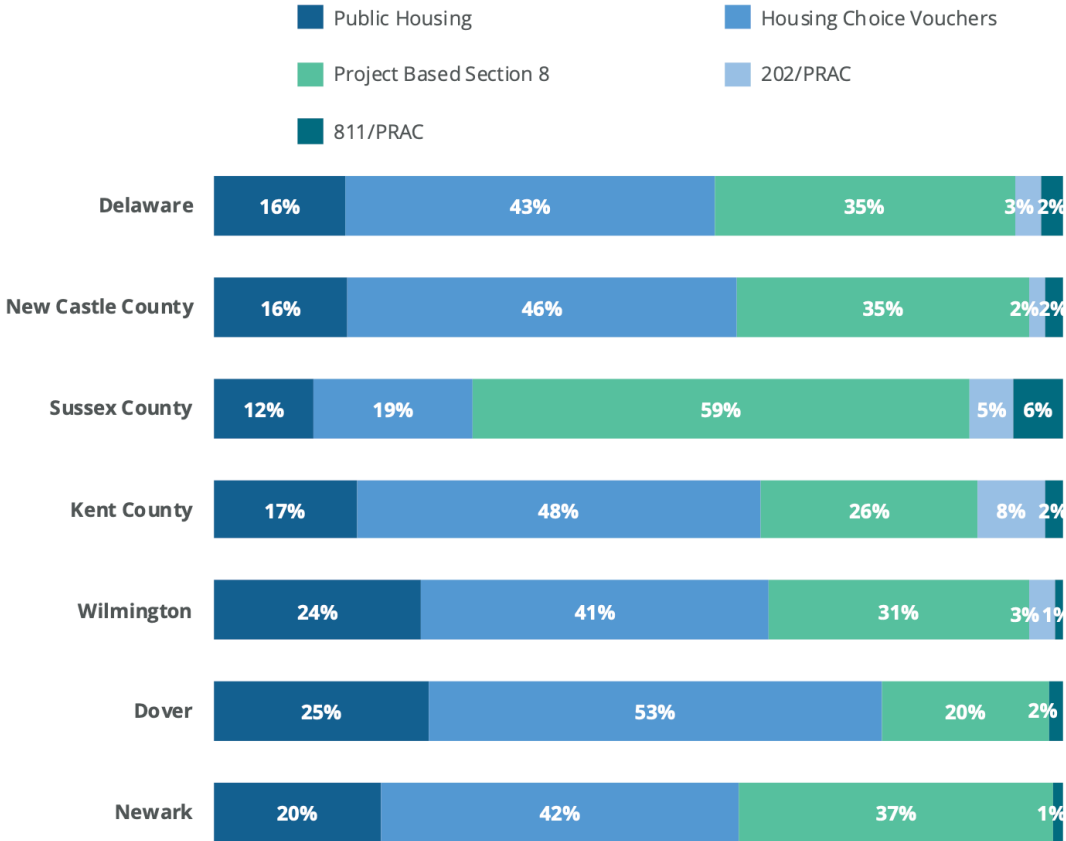
# NA-35 Public Housing – (Optional)

## Introduction

In the State of Delaware, four of the five public housing authorities in the state operate public housing programs. Those include the Dover Housing Authority, Newark Housing Authority, Wilmington Housing Authority, and DSHA. DSHA is the public housing authority serving non-entitlement areas.

As the public housing authority for Kent and Sussex Counties (excluding the City of Dover), DSHA owns and manages 290 units of public housing and 206 Rental Assistance Demonstration (RAD) LIHTC units. During 2024, 2,337 Delaware families were served with DSHA vouchers. According to HUD Picture of Subsidized Households data, in the state overall, public housing makes up 15% of assisted housing units, Project Based Section 8 developments make up 35%, and HCV vouchers make up 43%.

**Proportion of HUD Programs by State, County, and City, 2022**

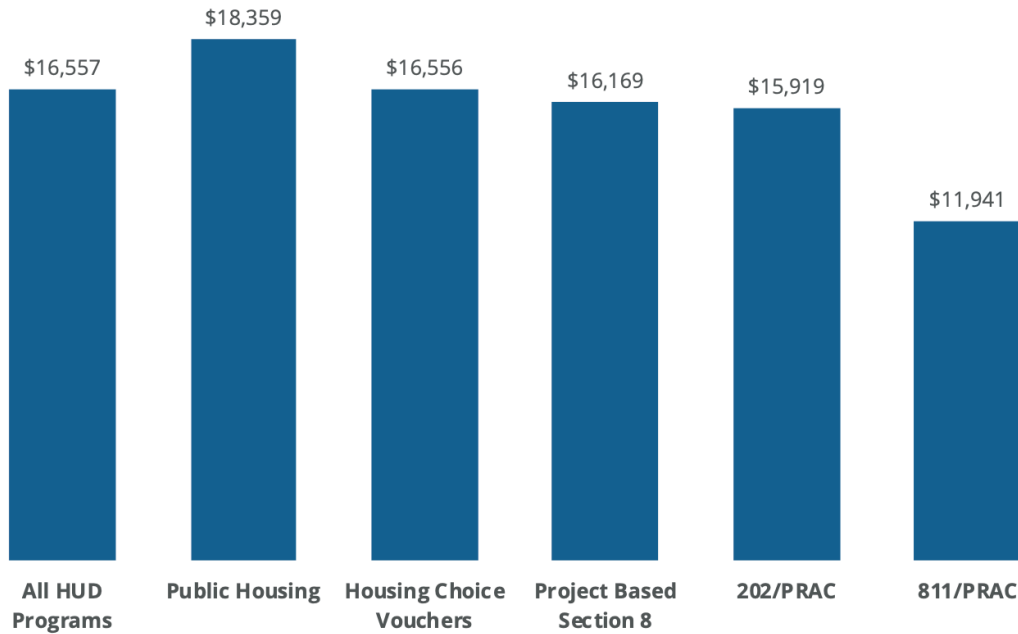


Source: HUD Picture of Subsidized Households.

An analysis of assisted units in Delaware conducted as part of the HNA found that, during 2022, public housing residents had an average household income of \$18,359; HCV holders had an average income of

\$16,556; and Project Based Section 8 housing occupants had an average income of \$16,169.

### Average Household Income of Recipients by Program Type, Delaware, 2022



Source: HUD Picture of Subsidized Households.

A five-year physical needs assessment of the public housing sites and plans for capital expenditures are included in DSHA's annual Moving to Work (MTW) Action Plan. DSHA has a goal of converting 54 public housing sites to RAD by 2026. Improvements and major maintenance are planned on a five-year basis, developed by considering the physical needs assessment, high-priority needs, and need for efficiency and cost-effectiveness, as well as input from residents and the public.

Cutbacks in public housing operating funds continue to be a major challenge for PHAs in Delaware, including DSHA. MTW status has allowed DSHA to use funds from HCV Program Reserves to invest in capital improvement projects at its public housing sites such as replacement of heating and addition of

air-conditioning systems. Both the MTW Annual Plan and Annual Reports are available on DSHA's

**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			290	1,232	218	1,014	25	70	65

**Table 4 - Public Housing by Program Type**

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

Alternate Data Source Name:

Office of Public and Indian Housing - Housing Choice Voucher Data Dashboard 2025

**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									
# of Elderly Program Participants (>62)									
# of Disabled Families									
# of Families requesting accessibility features									
# of HIV/AIDS program participants									
# of DV victims									

**Table 5 – Characteristics of Public Housing Residents by Program Type**

Alternate Data Source Name:

Data Source  
Comments:

### Race of Residents

Race	Certificate	Mod-Rehab	Public Housing	Program Type					
				Vouchers			Special Purpose Voucher		
				Total	Project-based	Tenant-based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White				N/A	N/A	N/A			
Black/African American				N/A	N/A	N/A			
Asian				N/A	N/A	N/A			
American Indian/Alaska Native				N/A	N/A	N/A			
Pacific Islander				N/A	N/A	N/A			
Other				N/A	N/A	N/A			

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

**Table 6 – Race of Public Housing Residents by Program Type**

Alternate Data Source Name:

Data Source  
Comments:

### 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				N/A	N/A	N/A			
Not Hispanic									

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

**Table 7 – Ethnicity of Public Housing Residents by Program Type**

Alternate Data Source Name:

Data Source  
Comments:

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

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination, based on a disability, in programs and activities conducted by HUD, or that receive financial assistance from HUD. Housing Connect provides a preference for public housing tenant selection based on “inaccessibility of a unit and/or to accommodate a disability under a request for reasonable accommodation.” DSHA accommodates needs as they arise.

**What are the number and type of families on the waiting lists for public housing and section 8 tenant-based rental assistance?**

**Immediate needs and challenges.** Emergency rental assistance and subsidized housing are therefore high needs for families on waiting lists. The most immediate needs of residents in publicly assisted housing are deeper affordability to ease worries about rent increases and ability to pay housing costs, larger options to accommodate families, utility assistance, and programs that incentivize continued landlord participation in the HCV program.

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

According to stakeholders who work with voucher holders and residents who participated in focus groups, challenges unique to voucher holders include finding landlords who accept vouchers, very long wait lists for obtaining vouchers, concentrations of units that accept vouchers in Wilmington due to shortages in other parts of the state, and discrimination.

Stakeholders feel that landlords are more likely to turn down voucher holders in the current market and this frequency has increased in recent years. High demand markets have almost no units that accept vouchers. Public housing authorities have increased the AMI at which vouchers can be used and this has done little to change voucher utilization outside of Wilmington. Stakeholders worry vouchers are increasingly concentrated within Wilmington.

Regulatory barriers that prevent vouchers from being efficiently used include limits of applying vouchers to only one unit and delays in inspecting units for housing quality. If more than one voucher could be used per unit (equivalent to students or roommates sharing housing), that would open up many housing options. Several organizations and agencies in the state administer vouchers through their programs, and it can be challenging for voucher holders and applicants to differentiate among the various requirements and rules. Property owners noted that in Wilmington, for example, they need to work with three different agencies (State Rental Assistance Program, DSHA, and the Wilmington PHA) to

administer one voucher. One noted “The way the State Rental Assistance Program works is a model. If every voucher were like SRAP, we would accept them all!”

Other solutions that would make voucher use more effective include:

- Establish a landlord mitigation fund to incentivize landlords to accept vouchers.
- Provide landlords with better information and resources on housing choice vouchers. Many landlords do not understand the voucher process and the majority do not know where to start.
- Streamline the housing quality inspection process and allow pre-inspections. The delay in leasing up units due to inspection approvals is a huge disincentive for private owners to rent to voucher holders (v. market rate tenants). Wilmington is especially difficult because they contract with a private company which only does inspections on Wednesdays. If their schedule is full, it can take weeks to get an inspection. If the inspection fails—and sometimes they fail for very minor issues—it can take weeks to get a re-inspection. Minor issues, such as a crack in a wall electrical outlet which can be easily repaired, should be able to be re-certified in a virtual inspection.
- Establish one point of contact for households seeking rental assistance representing all five housing authorities. Participants explained that households in need of vouchers face barriers accessing resources due to the lack of collaboration among authorities and local governments.
- Additionally, the Affordable Housing Production Task Force Manufactured Housing Subcommittee recommended the establishment of a voucher program for manufactured homes and provide more information on vouchers for manufactured homeowners to expand voucher-user’s options.

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

## Introduction:

This section summarizes the counts of people who experienced homelessness based on the 2024 Point-in-Time (PIT) count.

## Homeless Needs Assessment

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)	79	2	0	0	0	0
Persons in Households with Only Children	0	0	0	0	0	0
Persons in Households with Only Adults	128	90	0	0	0	0
Chronically Homeless Individuals	40	27	0	0	0	0
Chronically Homeless Families	Did not count	2	0	0	0	0
Veterans	27	3	0	0	0	0
Unaccompanied Child	0	0	0	0	0	0
Persons with HIV	1	0	0	0	0	0

**Table 8 - Homeless Needs Assessment**

**Alternate Data Source Name:**  
2024 Point-in-Time County

**Data Source**  
**Comments:**

Data reflects PIT count for Sussex County and Kent County (excluding Dover). The number of persons and families experiencing homelessness each year, becoming homeless each year, exiting homelessness, and the number of days persons experience homelessness are not available.

Indicate if the homeless population is:

Partially Rural Homeless

**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:**

The 2023 Delaware Housing Survey provided representative and comprehensive data on Delaware residents, including those at-risk of homelessness (termed precariously housed individuals in the survey). Of these precariously housed respondents, 49% resided in New Castle County, 22% resided in Sussex County, and 28% resided in Kent County.

Precariously housed individuals in New Castle County were more likely to be staying with family or friends, whereas precariously housed individuals in more rural Sussex and Kent Counties were more likely to be living out of a car / RV or staying in a motel. In Sussex and Kent Counties, where populations are more sparse and social networks may be more limited, motels and cars may be the first option for people experiencing homelessness who cannot access other emergency shelters.

Stakeholders who work with unhoused populations expressed the dire need for affordable units and homeless shelters across the state. Stakeholders representing rural and suburban areas noted that most rapid rehousing options were located in Wilmington, and that there need to be more options across the state to avoid people being relocated and losing community connections when they become homeless. Stakeholders noted that many lower income communities have formed informal networks to help each other out and concentrating resources in Wilmington disrupts these communities. One stakeholder pointed out that there are no family shelters in Sussex County. They estimated that they get up to five calls a day from families experiencing homelessness in the county. The lack of shelter for families often meant that they stayed within an unhealthy relationship or lived in motels.

**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):**

The data for the categories "number of persons becoming and existing homelessness each year," and "number of days that persons experience homelessness" were not available. Below are descriptions of homelessness by population type.

**Chronically homeless individuals.** The PIT count identified 40 sheltered and 27 unsheltered chronically homeless individuals. This group is made up of primarily single adults. Service providers shared that this group is one of the hardest to house in the county and face several barriers to entering housing, including criminal and eviction records or substance abuse challenges.

**Chronically homeless families.** The PIT count did not identify any sheltered chronically homeless families and identified 2 unsheltered homeless families. and 10 unsheltered chronically homeless families. The lack of sheltered chronically homeless families reflects the absence of family shelters in

Kent and Sussex County. One stakeholder who assists in the prevention and support of homeless families in Sussex County noted they receive at least five calls a day from families experiencing or at severe risk of homelessness. The families are afraid to reach out for help in fear that they will be separated from their children. The stakeholder noted that families who are homeless are often fleeing domestic violence and that the lack of shelter in Sussex County is a reason for staying in an abusive household.

**Veterans.** The PIT count identified 27 sheltered homeless veterans and 3 unsheltered homeless veterans. The Delaware Center for Homeless veterans is located in Wilmington and provides housing and supportive services. The Delaware Center for Homeless Veterans also has a Veterans Center in Georgetown and outpatient clinics in Kent County (Dover) and Sussex County (Georgetown). The Veterans Multi-Service Center has an office in Dover that offers the Veteran Employment Program that assists homeless or formerly homeless veterans reintegrate into the workforce.

**Unaccompanied youth.** There were no unaccompanied youth identified in the PIT count.

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

<b>Race:</b>	<b>Sheltered:</b>	<b>Unsheltered (optional)</b>
White	102	50
Black or African American	75	24
Asian	1	0
American Indian or Alaska Native	0	0
Pacific Islander	0	0
<b>Ethnicity:</b>	<b>Sheltered:</b>	<b>Unsheltered (optional)</b>
Hispanic	14	4
Not Hispanic	190	77

**Alternate Data Source Name:**  
 2024 Point in Time Homeless Count  
**Data Source**  
**Comments:** Reflects counts from Sussex County and Kent County (excluding Dover)

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

**Families with children.** Based on findings from the statistically significant 2023 Delaware Housing Survey, families with children and single parents were more likely to be displaced due to rent increases and reported concern for displacement due to financial issues at higher rates than other demographic groups. Specifically, 28% of single parents and 15% of families with children have had to move when they did not want to in the past five years. Twenty percent of single parents and families with children reported that a rent increase was the reason for displacement.

Additionally, 76% of families with children and 67% of single parents were concerned that they would be displaced from their current home due to financial issues. Within the snowball sample from the Delaware Housing Survey, which was more representative of renters' experiences, 16% of households with children under 18 and 15% of single parents were displaced because of eviction. Within the snowball sample from the Delaware Housing Survey, which was more representative of renters' experience, 16% of households with children under 18 and 15% of single parents were displaced because of eviction.

When asked what would help them achieve more housing stability, rental assistance was the top need among children with families, including single parents, followed by money for critical repairs and assistance for emergency situations.

The Delaware Housing Assistance Program (DEHAP) was administered by DSHA in 2020 to assist renters with arrears, current rent, and utilities. Although program data did not capture if there were children in the home, 10,796 applicants, or 30% of all applications, had three or more people in their household, a potential proxy for children in the home.

**Veterans.** The PIT count identified 27 sheltered homeless veterans and 3 unsheltered homeless veterans. This group typically has higher needs for accessible housing, mental health supports, and substance abuse recovery supports.

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

Based on PIT estimates:

- Half (50%) of people experiencing sheltered and unsheltered homelessness is White;
- One-third (33%) are Black; and
- Six percent are Hispanic.

Of precariously housed respondents in the 2023 Delaware Housing Snowball Survey, 53% were White, 32% were Black, 4% were Hispanic, and 8% reported another race. White precariously housed respondents selected unsafe housing (e.g. domestic violence) as the most common reason for displacement while Black precariously housed respondents selected rent increase and Hispanic precariously housed respondents selected eviction as the most common reason for displacement.

Findings from the survey also suggested that families with children were most vulnerable to homelessness during the COVID-19 pandemic: Around one in five (21%) Black respondents with children under 18 lost their housing—148% more than all Black respondents. This is a particularly striking finding given that children also experienced school disruptions during the pandemic.

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

It is important to note that traditional PIT counts do not consider those who are staying with family and friends (couch surfing) or staying in a motel/ hotel. The Delaware Housing Survey provides estimates of a broader definition of homelessness, and the “Snowball” was more representative of low income and vulnerable households. Twenty-eight percent of precariously housed individuals in the 2023 Delaware Housing Snowball Survey was with family and friends (but not on lease). This was followed by 25% who were staying in shelter or transitional housing, 15% who were living out of a car, and 10% who were camping or sleeping outside. This means that the state’s homeless population is much larger than traditional street and shelter counts are identifying.

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

## Introduction

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

- Elderly and 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);
- Persons with mental, physical, and/or developmental disabilities;
- Persons with alcohol or other drug abuse challenges; and
- Domestic violence victims/survivors;
- Justice involved residents; and
- Persons living with HIV/AIDS/

## HOPWA

As of September 2023, according to the State Health and Social Services Division (DHSS), there were 3,932 people living with HIV or AIDS in Delaware.

<b>Current HOPWA formula use:</b>	
Cumulative cases of AIDS reported	3,932
Area incidence of AIDS	0
Rate per population	0
Number of new cases prior year (3 years of data)	0
Rate per population (3 years of data)	0
<b>Current HIV surveillance data:</b>	
Number of Persons living with HIV (PLWH)	3,932
Area Prevalence (PLWH per population)	0
Number of new HIV cases reported last year	124

Table 9 – HOPWA Data

Data Source Comments: Delaware Health and Human Services Division

## HIV Housing Need (HOPWA Grantees Only)

Type of HOPWA Assistance	Estimates of Unmet Need
Tenant based rental assistance	31
Short-term Rent, Mortgage, and Utility	0
Facility Based Housing (Permanent, short-term or transitional)	0

Table 10 – HIV Housing Need

Data Source Comments: DHSA

**Describe the characteristics of special needs populations in your community. What are the housing and supportive service needs of these populations and how are these needs determined?**

**Elderly and frail elderly.** According to data in the Delaware HNA, householders aged 65 and older have increased from 11,850 in 2010 to 16,824 in 2020— a 42% increase. In 2020, those age 65 and older made up 19% of Delaware’s population; by 2050, this cohort is projected to make up 25% of the population. The statistically significant 2023 Delaware Housing Survey revealed that of older adults, 30% reported a disability. Of these, 31% report needing modifications in their home to improve accessibility. The most identified modification for this group was grab bars. Additionally, 10% of older adults said that help caring for their home would improve their housing situation and 9% cited money for critical repairs. These needs will only grow bigger as Delaware’s population ages.

Stakeholders reported that rising housing costs have resulted in a sharp increase in homelessness and displacement among seniors. To avoid displacement, service providers explained that they have witnessed a significant increase in the number of seniors and elderly persons re-entering the workforce with one individual sharing that “73-year-olds are working in supermarkets.” For those who are displaced, service providers observed that many seniors end up living out of their cars. The state’s subsidized senior-only housing is severely limited, have long waitlists, and are older, often needing condition improvements.

Stakeholders advocated for more resources targeted to seniors, specifically resources that help elderly persons navigate the state’s housing market and service system. Seniors aren’t sure where to go to look and they aren’t always adept at navigating internet search engines. Service providers would also like to see more assistance for home repairs as well as financial assistance for seniors interested in downsizing and selling their homes.

**Persons with disabilities.** In the statistically significant 2023 Delaware Housing Survey, 27% of respondents reported a disability. When applying this estimate to the non-entitlement population of Delaware, this equates to approximately 106,205 people with disabilities. An estimated 31% or 32,923 residents with disabilities need accessibility improvements according to the survey.

Need for modifications also vary by tenure, income, race, and housing type, according to the 2023 Delaware Housing Survey:

- Forty-two percent of renters and 57% of mobile home residents with a disability need modifications compared to 34% of homeowners with a disability. Renters reported more need for service animal accommodations and mobile home residents reported need for grab bars most often;
- Middle income households (\$47,000 to \$75,000) reported needing modifications more often than lower income households across counties;
- Black and non-Hispanic White households reported highest need for modifications at 40% and 38%, respectively; and

- Over half of single parents (55%) reported a need for modifications, followed by households with children under 18 (47%), and households with adult children (46%).

Stakeholders who worked with people with disabilities describe the shortage of accessible housing as acute. One stakeholder shared that there is a “horrible lack of affordable housing available for disabled adults who need minimal support but cannot live independently.” Waitlists are years long, and if the units are privately provided, many are in poor condition without accessibility improvements (inside or outside the unit). For most Delawareans with disabilities, public housing is often the best option, but the availability is very limited.

Stakeholders also felt that limited accessible housing options have been exacerbated by landlords refusing to grant accommodations. Stakeholders connected the growth of housing wait lists for accessible, publicly assisted units with the lack of accessible private sector units.

Beyond the need for accessibility, survey respondents with a disability struggled to afford housing. Fifteen percent of households with a disability reported that they had to move when they did not want to in the past five years compared to 10% of all survey respondents. The most common reason for displacement reported by households with a disability was a rent increase (21%).

**Survivors of domestic violence.** An estimated 1,218 women and 285 men who are victims of domestic violence require housing services each year. Although the supportive and housing services needed by domestic violence survivors 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. One provider in Delaware who annually serves more than 5,000 people noted that 40% indicate they have housing needs—equivalent to 2,000 survivors annually who need housing assistance. In addition, 1,200 annually need continuing services.

According to service providers for this population interviewed for the Delaware HNA, lack of housing is an acute issue for survivors. They can have a criminal background or eviction record due to the violence, as law enforcement can charge both parties. Landlords perceive them as higher risk and fear having the police called to their properties. As one service provider noted, many landlords are unsympathetic to these households and would rather evict victims than hold their perpetrators responsible. Property owners do not understand the provisions or requirements of the Violence Against Women Act (VAWA).

Credit was also identified as a barrier. As explained by providers, many victims are not in charge of their finances—their abusers are—and have no or bad credit which severely limits housing opportunities for them.

**Justice involved residents.** Stakeholders and service providers identified recently incarcerated residents and residents with criminal histories as being one of the most difficult populations to serve. Stakeholders said that residents with a criminal history are significantly more likely to be turned down by landlords and are often subject to indiscriminate rental prices / increases.

Recently incarcerated individuals are often mandated to move to transitional housing or group homes. However, Delaware has a very limited supply of these housing types, most of which are located in Georgetown, and these come with time limits to find permanent housing.

Providers would like to see Delaware provide increased housing subsidies for these residents, as well as a larger supply of transitional housing, especially because many need extra time to find a job before they can live without housing supports. DSHA's Delaware Family Reentry Program is designed to allow Delawareans with recent history of involvement with the criminal justice system to reunite with family members who live in housing subsidized by one of Delaware's five PHAs.

**Substance abuse and addiction.** According to the 2023 National Survey on Drug Use and Health from the U.S. Department of Health and Human Services, 9.9% of those 18 and older have a drug use disorder and 10.9% have an alcohol use disorder. The 2021 National Survey on Drug Use and Health reports that 7.6% of these individuals need treatment. Applying these estimates to the non-entitlement population, an estimated 51,015 residents 18 and over have a substance abuse disorder and 20,086 (39%) are in need of treatment.

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

Delaware Public Health's HIV Prevention Program reported 3,932 people living in the state with HIV or AIDS in 2023. The incidence rate of Stage 3 HIV (AIDS) is 5.9 per 100,000. Geographically, 73% of HIV cases ever diagnosed in Delaware occurred in New Castle County. Forty-six percent of all cases in Delaware are in the Wilmington Metropolitan area. Kent County accounted for 12% of all cases and Sussex County accounted for 15%.

The Delaware HIV Consortium provides Ryan White HIV Case Management services for the Delaware Division of Public Health. The Consortium offers the following housing stability resources for HIV positive residents:

- Housing Assistance Program – statewide rental assistance program for those within the Ryan White HIV Case Management system;
- Permanent Supportive Housing – Residential program with onsite services for 12 homeless, single adults with HIV and who are dealing with substance abuse and behavioral issues;
- House of Joseph II – 16-bed communal residence for homeless single men and women with HIV who need long-term housing with onsite case management;
- Mother Teresa House – Independent housing for six low-income adults living with HIV.

In interviews conducted by the Delaware Division of Public Health (DDPH) in 2022, persons with HIV/AIDS were most likely to report the need for additional dental and shelter services. The need for additional shelters is affirmed by the waitlist for the Housing Assistance Program. DDPH is working to ensure that all Delawareans have access to HIV/AIDS testing through a free at-home test kit and case management for people that do test positive.

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

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

Public facilities were not identified as a significant need during the consultation or engagement conducted to support the Consolidated Plan.

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

Analysis of input from stakeholder consultation and resident engagement.

### **Describe the jurisdiction's need for Public Improvements:**

Public improvements can include a wide range of needs, and the need mentioned the most was transportation. The 2023 Delaware Housing Survey asked respondents about their current transportation situation. Satisfaction with current mode of transportation varied by household characteristics:

- Single parents have the lowest satisfaction with using a car at 72%. Single parents also have the highest proportion of respondents who reported they do not drive and are not satisfied with alternatives;
- Respondents with a disability have the highest proportion of respondents who are unsatisfied with using a car (9%) compared to all respondents (6%); and
- Eight percent of older adults use a mix of car and alternative transportation and are satisfied with their situation – slightly higher than 5% of respondents.

The cost of gas was the most cited reason for dissatisfaction with current transportation (38%), followed by feeling too reliant on a car (31%). Reasons for dissatisfaction varied by resident group. Forty-seven percent of Hispanic respondents and 23% of Black respondents said that the bus does not run frequently enough. Thirty-one percent of non-Hispanic White respondents reported there were no bus stops nearby. Additionally, older adults were the only group whose top concern was the lack of alternative transportation, such as a bus.

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

Analysis of input from stakeholder consultation and resident engagement.

### **Describe the jurisdiction's need for Public Services:**

Stakeholders interviewed to support the Consolidated Plan talked extensively about gaps in public, or supportive, service provision. Funding is woefully inadequate to address service needs, which costs localities and the state through housing instability—evictions, foreclosures, and homelessness.

More funding is needed to help families avoid losing their homes, especially now that pandemic-era programs are over. One housing provider analyzed rent payment rates in their portfolio of 3,400 units

and found a much higher rent repayment rate (95% of tenants paid rent) in properties where onsite supportive services were provided (rent repayment was 75% in properties without services).

There is some concern of impending foreclosures in an economic downturn, especially with reduced federal funding; people tend to wait until they really need it before they seek out help, and sometimes that is too late.

A shortage of service workers exacerbates the gaps.

Another critical area of services was home repair. Twenty-six percent of renters reported that their home was in fair or poor condition compared to 5% of homeowners. Renters were more likely to need repairs to their foundation, bathroom plumbing, interior walls, water systems, and heating systems. Homeowners reported needed repairs for broken windows, roofs, and electrical wiring.

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

Analysis of input from stakeholder consultation and resident engagement.

# Housing Market Analysis

## MA-05 Overview

### Housing Market Analysis Overview:

The housing market in Delaware was analyzed using updated American Community Survey (ACS) data; market data and findings from the Delaware HNA; and survey and stakeholder feedback conducted for the Delaware HNA.

According to the Delaware HNA, the top needs of renters and owners in the state include:

### Needs of Renters

- Increased funding for Housing Choice Vouchers or similar rental assistance to help the 13,600 renters who have incomes of less than 30% AMI and cannot find affordable private sector rental units. The greatest need for rental assistance is in the North New Castle market area.
- New affordable rental units paired with services for the approximately 1,600 households without regular safe shelter.
- To keep up with new growth in, increased funding to support the construction of an average of at least 250 rental units per year annually affordable to <50% AMI renters. This should be coupled with new and continued partnerships with the private sector to build housing across the income spectrum and invest in workers' skill development and income growth.
- Improvements, including accessibility improvements, to rental housing to address the needs of the more than 28,000 renters who report living in poor or fair condition housing.

### Needs of Owners

- To maintain the state's homeownership rate across income ranges and keep up with growth, production of at least 800 ownership units a year affordable to households with incomes of less than 100% AMI.
- To address gaps in homeownership, targeted down payment assistance coupled with affordable homeownership products to facilitate ownership for the more than 34,000 low- and moderate-income renters who express high levels of interest in owning a home, even with equity gain restrictions.
- Improvements, including accessibility improvements, for the 4,250 low-income homeowners who report living in poor or fair condition homes.
- Accessibility improvements for 730 households with a disabled member living in mobile homes.

In the consultation conducted to support the Consolidated Plan, stakeholders expressed their concerns for the housing market’s long-term trajectory, especially as housing prices continue to outpace income growth. Rents are “out of reach” for many households across the state as rents and home prices grow. Higher rents have increasingly prevented renters in the state from transitioning to homeownership, as they have less discretionary income to put toward a down payment on a home. If these trends continue, stakeholders warn that the state will lose a significant portion of its families, young adults, and essential workers (e.g., doctors, teachers, service workers) to more affordable states.

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

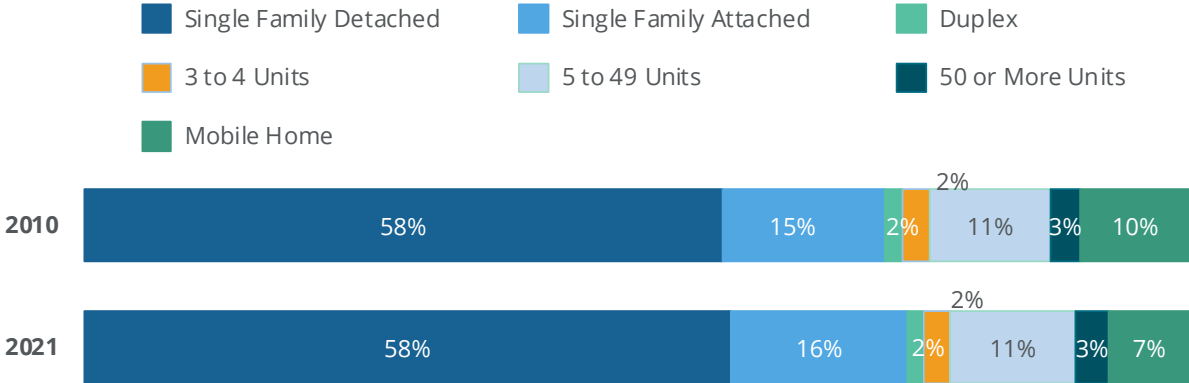
## Introduction

The Delaware HNA analyzed housing stock and production. As shown below, Delaware’s housing stock is largely comprised of single family detached homes (58% overall), followed by townhomes and rowhomes (16%), small multifamily developments (11%), and mobile homes (7%). Large multifamily structures make up just 3% of housing units. Since 2010, the most significant change to the state’s housing stock has been the decline in mobile homes: Mobile home inventory dropped by nearly 6,800 units. Most of the decline occurred in East Sussex County.

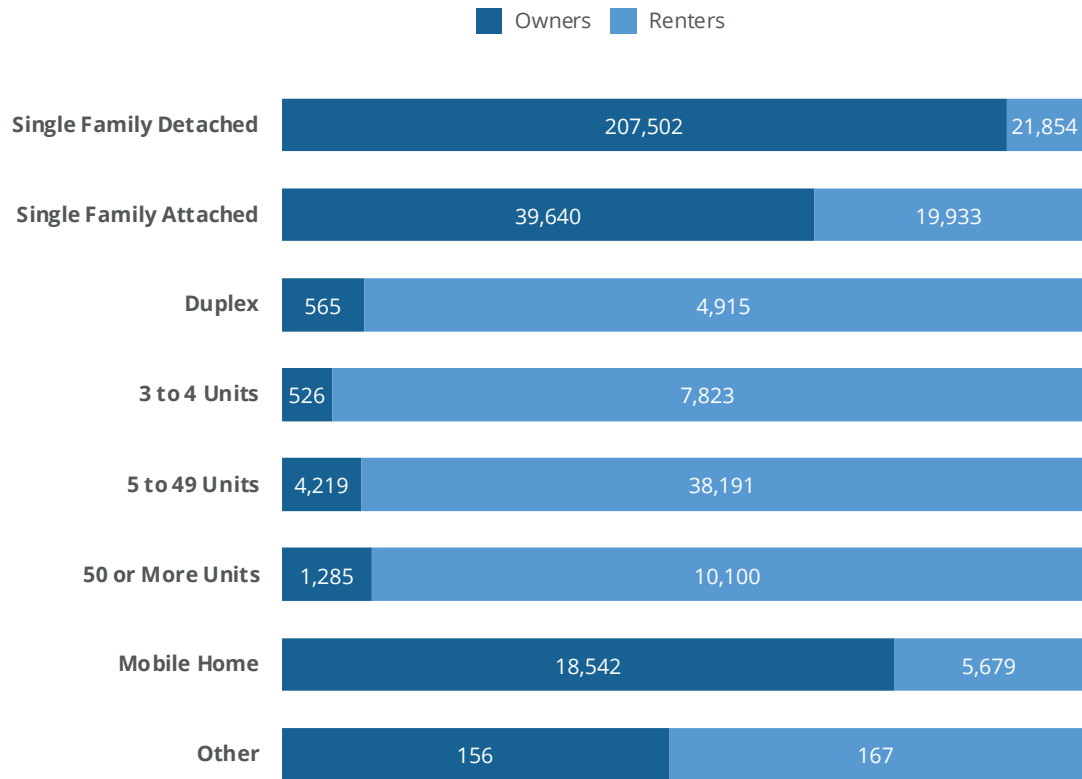
Trends in building permits—or type of development to come—indicate that the composition of the state’s housing stock is unlikely to change in the near future. Across all three counties in Delaware, single family homes comprise the largest share of new permitting and existing stock at roughly 74% across the state followed by structures of 5-49 units at 11% and mobile homes at 7%. Two-to-four-unit structures are virtually non-existent with the exception of a small quantity in Sussex County. The unit’s most commonly occupied by renters smaller to moderately-sized multifamily units.

Vacation homes across the state have increased slightly with most activity in the East Sussex market area. Statewide, there are about four times the number of vacant units for seasonal or recreational purposes as there are vacant units for rent and for sale combined.

## Housing Units by Type, Delaware, 2010 and 2021



## Housing Units by Occupancy, Delaware, 2021



## All residential properties by number of units, 2023

Property Type	Number	%
1-unit detached structure	138,516	67%
1-unit, attached structure	18,879	9%
2-4 units	5,764	3%
5-19 units	10,793	5%
20 or more units	5,273	3%
Mobile Home, boat, RV, van, etc	27,017	13%
<b>Total</b>	<b>206,242</b>	<b>100%</b>

Table 11 – Residential Properties by Unit Number

Alternate Data Source Name:  
2023 5-year ACS

## Unit Size by Tenure, 2023

	Owners		Renters	
	Number	%	Number	%
No bedroom	270	0%	690	2%

	Owners		Renters	
	Number	%	Number	%
1 bedroom	775	1%	4,014	13%
2 bedrooms	15,244	12%	11,270	36%
3 or more bedrooms	110,041	87%	15,500	49%
<b>Total</b>	<b>126,330</b>	<b>100%</b>	<b>31,474</b>	<b>100%</b>

Table 12 – Unit Size by Tenure

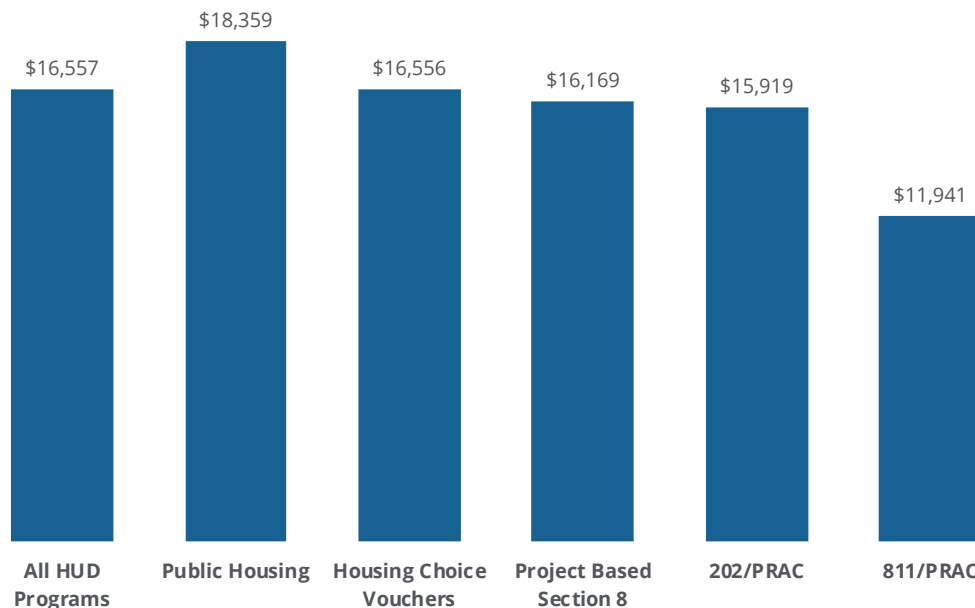
Alternate Data Source Name:  
2023 5-year ACS

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

According to HUD Picture of Subsidized Housing data analyzed in the Delaware HNA, there are about 13,000 units that have a contract or are managed by an entity that ensures their affordability. This equates to about 3% of all housing units in the state. Of these assisted housing units, 94% are designated for families, 3% are for seniors, and 2% are designated for residents with special needs. New Castle County has the largest number of assisted units with 9,111 for families, 201 for residents with disabilities, and 161 for elderly residents. Wilmington alone has 5,084 family units—more than Sussex and Kent County combined.

The average income of households living in housing with any type of assistance is \$16,557. Average income varies slightly by assistance program. Those in 8/11 PRAC housing (for people with disabilities) have the lowest average income at \$11,941 while those in public housing have the highest at \$18,359.

**Average Household Income of Recipients by Program Type, Delaware, 2022**



Source: HUD Picture of Subsidized Households.

The primary assistance programs are Housing Choice Vouchers and project-based developments. Sussex County has the largest proportion of Project-Based Section 8 units—developments in which rental assistance vouchers are attached to units—with 59% of their HUD units project-based. New Castle County has the largest share of Housing Choice Vouchers of any county (46%).

It is important to note that the effectiveness of Housing Choice Vouchers is closely linked to rental market conditions. In very low vacancy markets, vouchers are much harder to use, as property owners may choose to rent to higher income renters and/ or raise their rents above the Fair Market Rent that determines the voucher reimbursement.

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

According to the National Housing Preservation Database (NHPD), there are 1,701 units with subsidy contracts set to expire between July 1<sup>st</sup>, 2025, and July 1<sup>st</sup>, 2030. Of these units, 367 have Section 8 contracts, 87 have HOME subsidies, 1,102 have LIHTC subsidies, and 24 have state subsidies through the Delaware Housing Development Fund.

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

No. Based on a housing gaps analysis conducted to support the Delaware HNA, gaps in availability and demand include the following<sup>1</sup>:

- 22,348 renter households in Delaware have incomes between 0% and 30% AMI (equivalent to \$19,920 or less for a two-person household) and need rental units \$498/ month or less to avoid being cost burdened. Just 8,730 units in the state rent for less than \$498/ month. This leaves a “gap”, or shortage, of 13,617 units for these lower income households;
- 17,801 renters earn between 31% and 50% AMI (equivalent to income between \$19,920 and \$33,200 for a two-person household) and need rental units priced between \$498 and \$830 to meet their affordability needs. However, there are only 11,985 in this price range, leaving a 5,816-unit shortage;
- 38% of renters have incomes lower than 50% of the AMI. For these renters, homeownership is nearly impossible, with only 3% of home sales priced at their affordability level
- Middle income renters, with incomes between 50% and 100% of AMI, will also find homeownership largely out of reach. These renters make up 39% of all renters. About 20% of homes sold in 2022 were priced at their affordability level
- 80% of homes for sale in 2022 were priced for 120%+ AMI households. This compares to 25% of Delaware renters with incomes at that level
- The homeownership market in 2022 catered to higher income buyers migrating into Delaware or buying second homes rather than existing Delaware renters

## **Describe the need for specific types of housing:**

The specific housing types needed to meet the most critical needs includes:

- Permanent supportive housing for residents at-risk of or experiencing homelessness;
- Rental units affordable to <50% AMI renters; and
- First time homebuyer products affordable to 100% AMI and less renters.

It is also important to note that mobile homes represent only 7% of the housing stock yet fill a critical housing need for households making less than \$35,000: 40% of mobile home occupants are in this income category. A decrease in mobile home stock and increase in prices have resulted in mobile homes being accessible only to households earning more than \$75,000 in 2021, particularly for families needing a larger unit (double wide).

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<sup>1</sup> The analysis compares the supply of housing at various price points to the number of households who can afford such housing. If there are more housing units than households, the market is “oversupplying” housing at that price range. Conversely, if there are too few units, the market is “undersupplying”

Thirty-three percent of respondents in the 2023 Delaware Housing Survey expressed interest in buying deed-restricted homes as a possible route to affordable homeownership. Interest was higher for respondents captured in the snowball sample of the survey, which captured more low-income households:

- Respondents in Kent County expressed the most interest for buying a deed restricted home with 80% of renters selecting somewhat interested or very interested in a deed restricted program.
- Interest for the program is strong across income ranges except for the very highest income households.
- 81% of Hispanic households and 73% of Black households would be interested in a deed-restricted program to achieve homeownership compared to 68% of non-Hispanic White residents.
- 73% of single parents and 74% of families with children under 18 would be interested in a deed restricted program. Older adults have the least support at 56%.

### MA-15 Cost of Housing – 91.310(a)

Between 2010 and 2023, Delaware experienced increases in home values and rental costs. The notable increases were consistent with feedback from residents and stakeholders who observed a shortage of affordable units or felt they could not keep up with rent. As shown in table titled the “Cost of Housing”, the median home value rose from \$242,300 in 2010 to \$326,800 in 2023—a 35% increase. During this same period, median contract rent saw an even sharper rise from \$780 to \$1,154—a 48% increase.

Growing affordability concerns, particularly for renters, are further emphasized in the table titled “Rent Paid” that presents the distribution of rent paid by Delaware residents in non-entitlement areas in 2023. The largest share of renters (36.84%) paid between \$500 and \$999 per month, followed by those paying \$1,000 to \$1,499 (32.52%). 12.98% paid rents less than \$500 and only 4.68% of renters paid \$2,000 or more. The overall pattern indicates that a significant share of renters is clustered in the mid-range of the rental market, with affordability likely strained for many amid rising costs.

#### Cost of Housing

	Base Year: 2010	Most Recent Year: 2023	% Change
Median Home Value	\$242,300	\$326,800	35%
Median Contract Rent	\$780	\$1,154	48%

Table 13 – Cost of Housing

Alternate Data Source Name:  
2010 and 2023 5-Year ACS – Reflects all of Delaware

Rent Paid	Number	%
Less than \$500	3,739	12.98%
\$500-999	10,607	36.84%
\$1,000-1,499	9,364	32.52%
\$1,500-1,999	3,737	12.98%
\$2,000 or more	1,348	4.68%
<b>Total</b>	<b>3,739</b>	<b>12.98%</b>

Table 14 - Rent Paid

Data Source: 2023 5-year ACS

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

Housing stability questions in the 2023 Delaware Housing Survey reveal that respondents with lower incomes struggle the most finding and staying stably housed. Respondents with income less than \$47,500 in New Castle County were most likely to report that unsafe housing, eviction, and rent increases were reasons for displacement. In Sussex and Kent County, households with income less than \$35,000 were more likely to report that landlords selling their unit, eviction, and rent increases were reasons for displacement. These results indicate that there are not enough affordable housing options for low-income residents to remain stably housed.

Delaware lacks sufficient homeownership opportunities for residents across the income spectrum. Survey respondents who currently rent but would like to own reported that large down payments and credit history were significant barriers in accessing homeownership in Delaware. Low-income respondents (less than \$30,000 in New Castle County and \$25,000 in Sussex and Kent County) indicated that a bad or low credit score was a barrier to homeownership.

Stakeholders observed that opportunities for homeownership are severely limited in Delaware due to the low inventory of affordable homes for renters, young adults, first-time homebuyers, and low-income households. Similar to survey results, stakeholder observed that the main barriers to homeownership were residents lacking down payments, no options for seniors to downsize affordability, and interest rates pricing out potential buyers.

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

It is unlikely that the number of renters who are cost burdened will decline during the 5-year Consolidated Planning period without a significant change in economic conditions for low wage workers. According to findings from the Delaware HNA, between 2010 and 2021, the number of Delaware renters paying more than 30% of their incomes in housing costs increased by 26%. This indicates that wages are not keeping up with changes to rents and thus the affordability of rental units has declined over time throughout the state.

The cost of homeownership has increased with rising interest rates and is unlikely to drop to a level needed to accommodate first time homebuyers, who need homes priced around \$130,000. As noted in the Delaware HNA, as of 2022, the homeownership market catered to higher income buyers migrating into Delaware or buying second homes rather than existing Delaware renters.

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

N/A at the state level

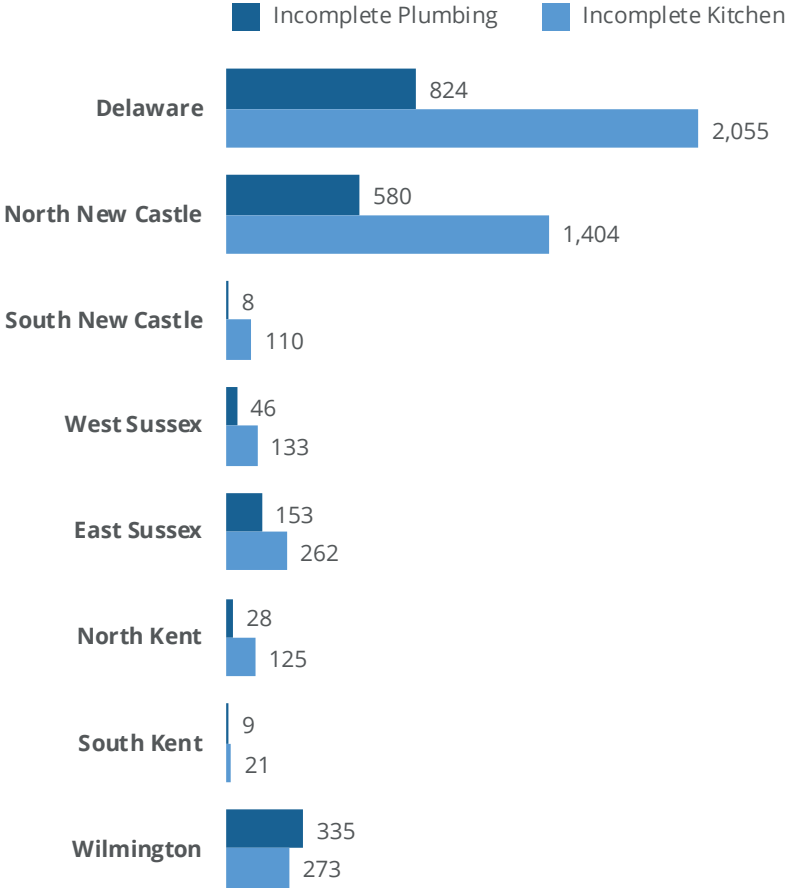
### MA-20 Condition of Housing – 91.310(a)

Census data track units in severely substandard condition—lacking complete plumbing and kitchen facilities. The figure below shows the unit count of substandard units. North New Castle stands out for its large number of units that are severely substandard. Over half of the state’s units with incomplete kitchen and plumbing facilities are in North New Castle. New Castle County has the oldest housing stock in the state, with more than 80% of units built before 1980. South New Castle and East Sussex have the highest proportion of new homes.

#### Units with Incomplete Plumbing and Kitchen Facilities, Delaware, Market Areas, and Wilmington, 2021

Note:  
Data unavailable for Dover and Newark.

Source:  
2021 5-year ACS and Root Policy Research.



In the resident survey conducted to support this Plan, 13% of Delaware residents rated the condition of their current home or apartment as fair or poor. This is the highest in Kent County at 16%; 11% to 12% of residents in New Castle and Sussex Counties said their homes were in fair or poor condition. Across all housing units and types, weatherization is cited by residents as the top home improvement need, followed by interior walls.

Housing conditions also varied by tenure, race, ethnicity, income, and household characteristics.

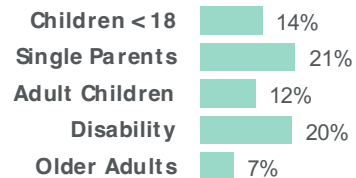
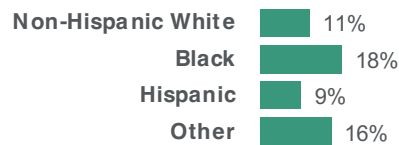
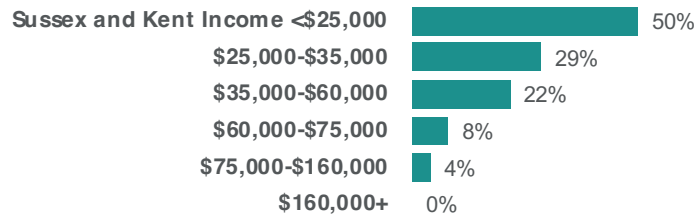
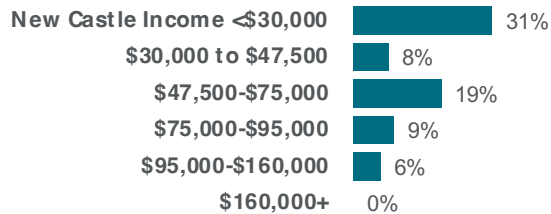
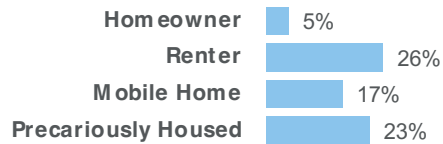
- Twenty-six percent of renters reported fair or poor conditions—20 points higher than homeowners.

- Eighteen percent of Black respondents reported poor or fair conditions compared to 11% of non-Hispanic White and 9% of Hispanic respondents;
- One in five single parents and households with a disability reported poor or fair condition housing.

## How would you rate the condition of your home? Percent Fair or Poor, 2023

Note:  
N = 512.

Source:  
Root Policy Research from the 2023 Delaware Housing Survey.



The remainder of 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 2023 Delaware Housing Survey and interviews.

**Definitions**

For the purposes of this Plan, “substandard condition” is defined as homes that are vacant and abandoned; homes that are occupied but are in unlivable conditions; and homes that are occupied and in disrepair. “Substandard condition but suitable for rehabilitation” are substandard condition homes but the nature of the substandard condition makes rehabilitation financially and structurally feasible.

Units with incomplete plumbing and kitchen facilities are considered severely substandard by HUD. The Delaware HNA found that there are a total of 824 units with incomplete plumbing and 2,055 with incomplete kitchens. Over half the state’s units with these conditions are in North New Castle County.

According to the Delaware HNA, overall in the state renters are slightly more likely than owners to live in homes or apartments that were built during periods when lead-based paint was used: 55% of renters live in housing built before 1980 compared to 42% of owners. Differences are much larger in the South New Castle, West Sussex, and North Kent areas.

**Condition of Units, 2023**

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
With one selected Condition	26,108	21%	14,277	45%
With two selected Conditions	331	0%	893	3%
With three selected Conditions	25	0%	45	0%
With four selected Conditions	0	0%	0	0%
No selected Conditions	99,866	79%	16,259	52%
<b>Total</b>	<b>126,330</b>	<b>100%</b>	<b>31,474</b>	<b>100%</b>

**Table 15 - Condition of Units**

Alternate Data Source Name:  
2023 5-year ACS

**Year Unit Built as of 2023**

Year Unit Built	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
2000 or later	64,579	51%	10,234	33%
1980-1999	32,453	26%	8,526	27%
1950-1979	21,621	17%	8,910	28%
Before 1950	7,677	6%	3,804	12%
<b>Total</b>	<b>126,330</b>	<b>100%</b>	<b>31,474</b>	<b>100%</b>

**Table 16 – Year Unit Built**

Alternate Data Source Name:  
2023 5-year ACS

### Risk of Lead-Based Paint Hazard

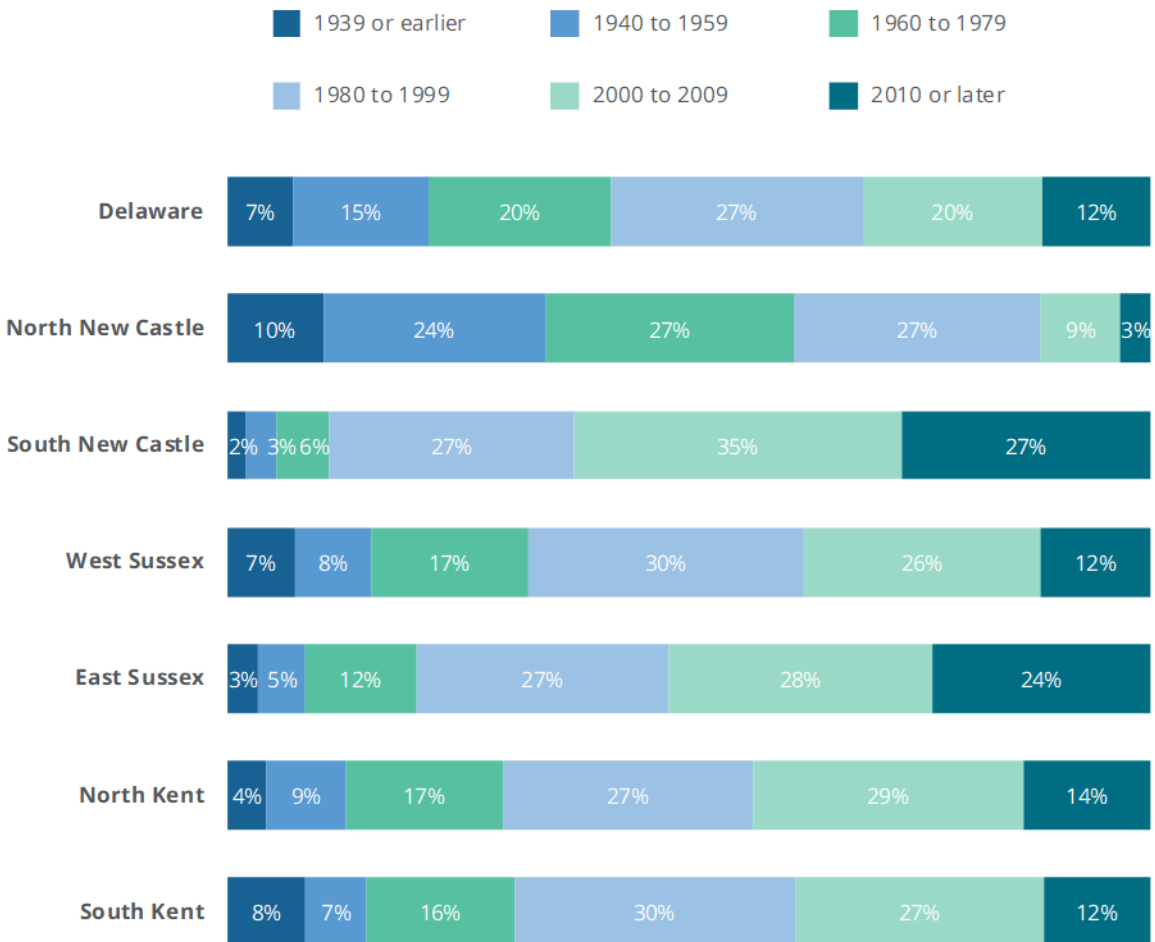
Risk of Lead-Based Paint Hazard	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
Total Number of Units Built Before 1980 as of 2023	29,298	23%	12,714	40%
Housing Units build before 1980 with children present	N/A	N/A	N/A	N/A

Table 17 – Risk of Lead-Based Paint

Alternate Data Source Name:  
2023 5-year ACS

The figure titled “Distribution of Owner-Occupied Housing Units by Decade Built, Delaware and Market Areas, 2021” shows the distribution of owner-occupied units by decade built. Forty-one percent of owner-occupied units in Delaware were built before 1980. This varies by market area. In North New Castle, 61% were built before 1980. Only 11% of owner-occupied units in neighboring South New Castle were built before 1980.

### Distribution of Owner-Occupied Housing Units by Decade Built, Delaware and Market Areas, 2021

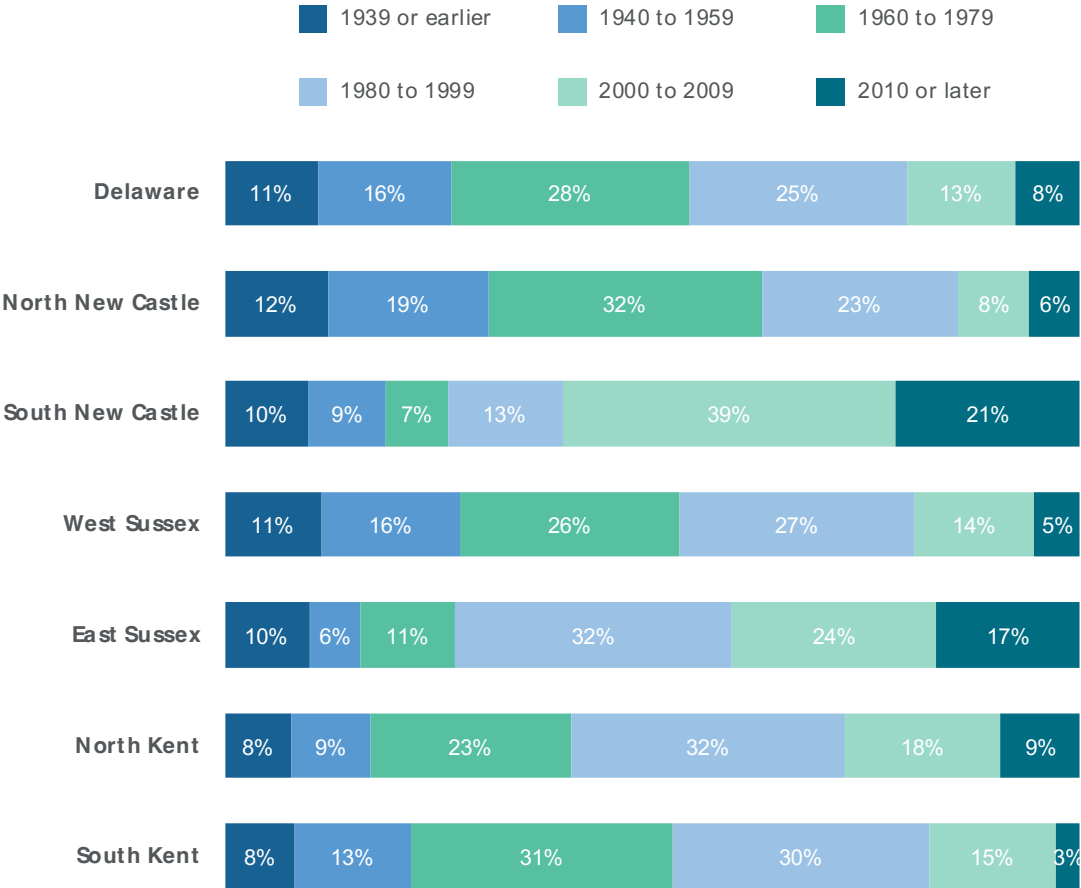


Source: 2021 5-year ACS and Root Policy Research.

The figure titled “Distribution of Renter Occupied Housing Units by Decade Built, Delaware and Market

Areas, 2021” shows the distribution of renter-occupied housing units by decade built. Over half (55%) of renter-occupied units were built before 1980 compared to 41% of owner-occupied units. As with owner-occupied households, North New Castle has the highest proportion of units built before 1980 at 63% while South New Castle has the least (26%), closely followed by East Sussex (27%).

**Distribution of Renter Occupied Housing Units by Decade Built, Delaware and Market Areas, 2021**



Source: 2021 5-year ACS and Root Policy Research.

**Vacant Units**

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

Table 18 - Vacant Units

Data Source: 2005-2009 CHAS

## Need for Owner and Rental Rehabilitation

Repairs needed for households who reported poor or fair condition of housing in the resident survey varied by tenure and household groups:

- Homeowners needed electrical wiring repairs the most (29%), followed by roof repairs (28%);
- 38% of renters identified weatherization as a concern followed by interior wall repairs (33%);
- Across all household groups, weatherization was a key concern except for households with a disability who indicated interior wall repairs were slightly more important than weatherization;
- Mobile home residents were the only group who identified bathroom plumbing as a top concern (32%); and
- Residents in Sussex and Kent Counties were more likely to report that money for critical repairs would improve their housing situation.

Stakeholders interviewed emphasized that mobile and manufactured homeowners face unique housing challenges, especially in Sussex County. Sussex County has a large supply of mobile homes that were built in the 1960s and 1970s. Given that these homes were built 50 years ago, many are in fair or poor condition.

Housing industry members noted that the cost of maintaining rental properties has significantly increased due to the state's aging housing stock, difficulty finding labor and on-site managers to complete ongoing maintenance, and the high cost of supply and materials. Stakeholders explained that maintenance fees have become increasingly challenging and although Delaware provides repair programs, many residents are unaware of qualification requirements and how to access such programs.

Members from the real estate industry explained that the cost of maintenance has incentivized landlords and property owners to keep rents high.

Maintenance costs were also discussed in the context of Delaware's rehabilitation programs. According to stakeholders, rehabilitation loans are rarely used because of the construction and rehabilitation oversight needed to execute these loans. Participants explained that the requirements for oversight have made it increasingly difficult to issue these loans as well as manage them. As a result, residents often look to grants, some provided by foundations or nonprofits, rather than loans, though this is also problematic as funding for these programs are being cut.

Poor housing condition is a particular concern for low-income households, and stakeholders explained that many low income housing units, including publicly-assisted housing, has poor insulation and some have lead pipes. This was attributed to Delaware not having energy efficient requirements or high building standards for these housing types and people living in poverty in rural areas having no ability to maintain or improve housing, including those living in mobile homes. Most of the state's mobile homes were built in the 1960s and 1970s and have challenges that cannot be easily fixed. Some estimates put Delaware's homes in poor or fair condition at 160,000 units.

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

Homes built before 1978, when the use of lead-based paint was banned, can have lead hazards that compromise the cognitive development of young children. According to the Delaware HNA, 41% of owner-occupied units in Delaware were built before 1980. This varies by market area. In North New Castle County, 61% were built before 1980. In West Sussex, 32% were built before 1980 and in East Sussex, 20% were built before 1980. In North Kent, 30% were built before 1980 and in South Kent, 31% were built before 1980.

Renter-occupied units are much older in Delaware. Over half (55%) were built before 1980. North New Castle has the highest proportion of units built before 1980 at 63%. In West Sussex, 53% were built before 1980 and in East Sussex, 27% were built before 1980. In North Kent, 40% were built before 1980 and in South Kent, 52% were built before 1980.

When discussing the condition of housing in Delaware, stakeholders specifically mentioned lead hazards as a significant housing and health concern. In fact, one participant mentioned that there has been a substantial uptick in the number of residents with asthma, likely due to lead pipes and paint in homes. Participants explained that Delaware had a lead hazard program that was award winning until funding was cut. Stakeholders strongly recommend re-introducing this program. Others recommended tying housing condition with health improvements such as using health indicators to determine lead priorities because addressing poor condition housing saves health care costs.

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

This section provides additional information about the Housing Choice Voucher (HCV) and public housing programs.

### 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	0	0	290	1,232	218	1,014	25	70	65
# of accessible units									

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

Table 19 – Total Number of Units by Program Type

Alternate Data Source Name:

Office of Public and Indian Housing - Housing Choice Voucher Data  
Dashboard 2025

### Describe the supply of public housing developments:

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

DSHA administers over 1,000 housing choice vouchers and has approximately 290 public housing units. DSHA is in the process of converting all of its existing Public Housing to RAD-PBV to improve conditions of existing public housing units and to streamline inspections without the use of outside entities.

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

According to the most recent Moving to Work Annual Plan, community area improvements, roof replacement, storm door replacements, and bathroom rehabilitation will be completed at two scattered public housing sites.

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

DSHA residents in the Moving to Work Program receive case management services, financial literacy classes, and workforce training.



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

**Introduction**

Annually, DSHA assists in funding the Housing Alliance Delaware (HAD), formerly the Homeless Planning Council of Delaware for its support of the CoC, HUD required CoC activities, and Delaware Community Management Information System (DE-CMIS – Delaware’s HMIS) administration. The Homeless Planning Council (HPC) has coordinated HUD applications for homeless funding for several years and in 2017 merged with another local housing agency to form Housing Alliance Delaware (HAD). This newly formed agency continues to be the lead applicant for the DE Continuum of Care (CoC), and lead agency for the CoC’s HMIS and coordinated entry systems.

In 2015, the Delaware CoC was established, encompassing stakeholders from throughout Delaware. This group, which is required by HUD for communities that receive HUD Continuum of Care funding, has a memorandum of agreement with Housing Alliance Delaware to:

- Manage the Homeless Management Information System,
- Manage the statewide coordinated entry system, and
- Coordinate the Delaware application for Continuum of Care Funding, including providing leadership on various activities required by HUD such as mandated policies and the Point-in-Time Count.

**Facilities Targeted to Homeless Persons**

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)	26	106	8	475	0
Households with Only Adults	69	103	22	131	0
Chronically Homeless Households	0	0	0	387	0
Veterans	0	0	24	219	0
Unaccompanied Youth	0	0	0	0	0

**Table 20 - Facilities Targeted to Homeless Persons**

Alternate Data Source Name:  
2024 CMIS

Data Source Reflects data from Kent County (excluding Dover) and Sussex County.

Comments:

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

**Health services.** There are several programs that connect low-income and homeless individuals in Delaware with health services:

- The Delaware Department of Health and Human Services (DHSS)'s Health Care Connection program connects uninsured residents with existing public programs and resources, links them with appropriate financial resources, and at-home medical care;
- Westside Family Healthcare operates in New Castle, Kent, and Sussex County. They offer social support services alongside healthcare. Coordinators connect patients with food, housing, employment, and other support programs. Cost of services is based on income;
- Hope Medical Clinic offers free healthcare services for uninsured and homeless individuals, including primary care, dental services, chronic disease management, and mental health services. Hope Clinic is based in Dover and services individuals from throughout Kent County;
- Connections Community Support Program provides mental health services, substance abuse treatment, and psychiatric care to individuals experiencing homelessness statewide. Clients of Connection can apply for the State Rental Assistance Program and other programs funded by the Division of Substance Abuse and Mental Health (DSAMH), such as the Supervised Apartment Program, crisis beds, and other housing depending on the client level of need; and
- The Division of Public Health offers health services across the state for low-income and homeless populations. Services include vaccinations, STD/ HIV testing, and other preventative health services.
- La Red Health Center offers care for uninsured individuals, particularly those working in agriculture

**Mental health services.** The previously mentioned Connection Community Support Program, Westside Family Healthcare, and Hope Medical Clinic all offer mental health services to homeless individuals. Additional supports throughout the state for homeless individuals include:

- Delaware Division of Substance Abuse and Mental Health (DSAMH) offers mental health and substance use disorder services for homeless and low-income populations, referrals to shelters and community programs, 24/7 crisis intervention services for individuals experiencing a mental health crisis; and
- Homeless Mental Health Outreach Team (HMHOT) provides mental health outreach and care to homeless individuals. The team offers psychiatric evaluations, therapy, crisis intervention, and connections to housing and supportive services. This is part of Crisis Intervention Services that have clinics in greater Smyrna in Northern Kent County and Sussex County staffed 24/7. Crisis Intervention Services also conduct mobile crisis intervention. The team is dispatched to help de-escalate situations and connect individuals with appropriate services.

**Employment services.** Delaware offers several employment services aimed at helping homeless individuals gain job skills, find employment, and access supportive services. These programs focus on empowering individuals to become self-sufficient through training, job placement, and resources:

- Delaware Department of Labor’s Division of Employment and Training assists individuals with job training, career counseling, and employment assistance. These services are extended to those facing barriers to employment, including homelessness. Services can be found online and in-person in career centers in Dover, Newark, and Wilmington;
- Goodwill of Delaware offers employment training and placement services for homeless and low-income individuals. Goodwill also operates job training centers and thrift stores employ individuals from their training programs;
- Connections Community Support Programs offer job readiness programs, employment assistance, and vocational training as part of their supportive services for individuals experiencing homelessness;
- Friendship House Delaware offers employment assistance within their Empowerment Centers, including access to computers, assistance with writing resumes, and applying for jobs. They also help homeless individuals obtain birth certificates, IDs, and social security cards; and
- Salvation Army of Delaware offers employment training, job placement assistance, and life skills workshops through their transitional housing programs.
- The Delaware Fatherhood Program provided by the Division of Child Support Services in Partnership with the Department of Labor provides free employment services, skills training, financial education, and peer mentorship for fathers who are unemployed and face barriers to accessing jobs, such as recent incarceration or suspended driver’s licenses

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

**Chronically homeless individuals.** Several facilities and programs support chronically homeless individuals. These services focus on providing permanent housing, mental health care, substance abuse treatment, and other crucial resources for long-term stability. Services and facilities include:

- Home of the Brave Foundation in Milford provides transitional housing alongside supportive services to homeless veterans who are chronically homeless;
- Shepherd Place in Kent County provides temporary housing and services for chronically homeless individuals. Crucially, Shepherd Place also connects clients with long-term housing solutions, case management, job readiness programs, and referrals to mental health and addiction services – all of which are crucial supports for this population;
- People’s Place in Kent County offers emergency and transitional housing assistance alongside supportive services like mental health counseling, substance abuse support, and job readiness programs.

- Crisis House in Georgetown offers emergency housing for homeless individuals. While it primarily serves as an emergency shelter, it also provides resources and referrals for chronically homeless individuals, including connections to mental health services, addiction recovery, and permanent supportive housing programs.
- Connections Community Support Programs offers permanent supportive housing units. Low-barrier housing is provided to chronically homeless individuals who receive additional case management, mental health care, addiction treatment, and employment services in Kent and Sussex County.
- La Red Health Center offers care for uninsured individuals, particularly those working in agriculture
- First State Community Action Agency offers assistance in Georgetown (Sussex County), including a food pantry, case management, and emergency services
- Casa San Francisco in Milton provides emergency shelter to individuals experiencing homelessness

**Families with children.** Families with children in Delaware can access various shelters and services that provide temporary housing, case management, childcare, and other supportive services. Below are some key resources:

- Shepherd Place in Kent County provides shelter to families with children. Services include case management, access to healthcare, and assistance with finding permanent housing;
- Whatcoat Social Services in Kent County provides emergency and transitional housing for families. The Ruth Dorsey Emergency Homeless Shelter provides 25 beds for up to a 45 day stay. Vera's Haven Transitional Housing provides 10 townhomes for households who commit to working and continuing their education;
- Casa San Francisco in Milton provides short-term shelter to families with children, nutritional assistance, referrals for healthcare and childcare, and educational support for children;
- Family Promise of Southern Delaware provides families with rental assistance, transportation, and emergency shelter
- First State Community Action provides emergency services, case management, summer enrichment camp, youth employment programs, and after school programs
- People's Place provides family visitation centers for families to reunite in a safe and neutral environment. This organization also runs the Abriendo Puertas program, an emergency shelter for Latina women and children in domestic violence situations in Sussex County. Abriendo Puertas offers family therapy, case management, and transitional services

**Veterans and their families.**

- Home of the Brave provides assistance to veterans and their families, including a 15-bed facility for males and an 8-bed facility for females and their children, individual case management, mental health counseling, substance abuse program referrals, transportation, vocational training, and clothing.

- People’s Place provides veteran outreach and services for veterans across the state, including medical care, psychotherapy referrals, transportation services, and mental health counseling

**Unaccompanied youth.** There are no facilities designated for unaccompanied youth.

**Population needs.** The 2023 Delaware Housing Survey provided representative and comprehensive data on Delaware residents, including precariously housed individuals. Of these precariously housed respondents, 49% resided in New Castle County, 22% resided in Sussex County, and 28% resided in Kent County. Precariously housed individuals in New Castle County were more likely to be staying with family or friends, whereas precariously housed individuals in more rural Sussex and Kent Counties were more likely to be living out of a car / RV or staying in a motel. The difference in housing situation marks a difference in the social safety net that is more common in urban settings. People who become homeless in denser Wilmington in New Castle County, for instance, may be physically closer or have larger social networks to stay with compared to those in rural areas. In Sussex and Kent Counties, where populations are more sparse and social networks may be more limited, motels and cars may be the first option for people experiencing homelessness who cannot access other emergency shelters.

Stakeholders who work with unhoused populations expressed the dire need for affordable units and homeless shelters across the state. Stakeholder representing rural and suburban areas noted that most rapid rehousing options were located in Wilmington, and that there need to be more options across the state to avoid people being relocated and losing community connections when they become homeless. Stakeholders noted that many lower income communities have formed informal networks to help each other out and concentrating resources in Wilmington disrupts these communities.

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

**HOPWA Assistance Baseline Table**

Type of HOWA Assistance	Number of Units Designated or Available for People with HIV/AIDS and their families
TBRA	31
PH in facilities	0
STRMU	0
ST or TH facilities	0
PH placement	0

**Table 21 – HOPWA Assistance Baseline**

**Alternate Data Source Name:**  
HOPWA CAPER and HOPWA Beneficiary Verification

**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**

The Delaware Department of Health and Social Services (DHSS) operates four long-term care facilities throughout the state:

- Governor Bacon Health Care Center, located in Delaware City, has 82 licensed beds, and provides residents with skilled intermediate and long-term care.
- Delaware Hospital for the Chronically Ill, located in Smyrna, has 400 licensed beds, and provides residents with skilled intermediate and long-term care.
- The Stockley Center, located in Georgetown, has 50 licensed beds and serves individuals with developmental and intellectual disabilities.
- Delaware Psychiatric Center, located in New Castle, has 115 licensed beds and serves individuals with both short- and long-term mental health and substance abuse disorders.

With increasing attention at both the national and state levels on compliance with the Americans with Disabilities Act and the Olmstead Supreme Court decision of 1999, housing and service providers in Delaware have been shifting dramatically away from institution-based care toward supportive housing options in community-based settings. DHSS has been the main driving force behind this shift, chiefly by partnering with DSHA and with private and nonprofit housing service providers to offer service-enhanced housing to DHSS clients: the housing provider will administer tenant-based or project-based rental assistance, while DHSS or one of its contractors offers wraparound supports and services to ensure the client’s continued success living independently in the community.

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

**Managed Care Organizations (MCOs)** are under contract to the Delaware Department of Health and Social Services (DHSS) Division of Medicaid and Medical Assistance (DMMA) and are primarily focused on serving individuals with physical disabilities who qualify for Medicaid assistance—specifically long-term care supports and services under the Diamond State Health Plan Plus (DSHP+) Program. MCO members are primarily referred through either DMMA or the Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD). MCO supports include transition services, case management, and care coordination, while DMMA staff members provide quality oversight of MCO activity. MCOs and DHSS staff are engaged to either provide directly or to coordinate referrals to longer-term supports and services for the DSAAPD and DMMA populations. These include assistance with activities of daily living, adult day services, adult foster care, assistive devices, attendant services, congregate and home delivered meals, legal services, employment, and personal care services. Staff members further assist these populations with securing access to the funds to pay for necessary services beyond what DHSS is equipped to provide directly.

**Support Coordinators** employed by the Delaware Division of Developmental Disabilities Services (DDDS) conduct outreach at the Stockley Center, as well as group homes, and congregate living arrangements. Support Coordinators meet with DDDS clients in those settings once a quarter and can determine if and when an individual wants to move from a segregated setting into a community setting. If an individual expresses a need or desire to move, the Support Coordinator will facilitate a referral to a **Community Navigator**, who will assist the client with identifying needed supports and services, and in developing a team of individuals (both paid and volunteer) who can provide those supports once the client has transitioned to housing in the community. The amount and type of supports provided are dependent upon what the individual needs to live successfully and independently in the community, and may include learning how to shop, budget, schedule medical services, and plan meals. These “Supported Living” services are included in the DDDS Lifespan Waiver.

The Delaware Division of Substance Abuse and Mental Health (DSAMH) coordinates various points of service delivery with a range of contracted service providers, such as PATH (Projects for Assistance in Transition from Homelessness) Providers, and PROMISE (Promoting Optimal Health for Individuals through Supports and Empowerment) Providers, as well as peer supports. **DSAMH Vendors** are charged with developing a person-centered plan for the provision of community mental health services, and with providing clients assistance in obtaining and coordinating social and support services, including: activities of daily living, access to entitlements, emergency food, personal finance planning and management, transportation services, habilitation and rehabilitation services, educational supports, and prevocational and vocational services. PATH services may be restricted to a shorter term and geared toward initial outreach and stabilization in permanent housing. PROMISE services are available for as long as a participating household should require them.

In addition to the above positions, DHSS contracts with specific **Housing Case Management** entities to coordinate housing placement and housing related assistance and supports to promote participant independence, self-sufficiency and freedom of choice. Participants served include individuals referred by DMMA and DSAAPD. Housing Case Managers often interact and collaborate with other service providers to facilitate the transition of individuals from institutional care to community-based care.

**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)**

- DSHA will continue to issue SRAP vouchers up to its established budget authority.
- DSHA's rental assistance program ended after ERAP funds were exhausted, and there is not currently funding to reinstate the program. DSHA will pursue additional funding opportunities as they arise.
- The coordinated referral process is leveraged to fill Tax Credit Target Units with qualified applicants from designated special populations.
- DSHA's mortgage assistance program (DEMAP) was suspended while we spent HAF on mortgage assistance; the HAF program is closed, we are working on redesigning and relaunching our DEMAP in the coming months. Program specifics and funding amounts are still undetermined.
- One- and five-year goals include a priority for affordable rental housing development and use of public services dollars to prevent and mitigate homelessness through effective service provision.

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

N/A

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

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

The Affordable Housing Production Task Force (AHPTF) was convened in August 2024 to identify barriers to the development of affordable housing and coordinate recommendations. The AHPTF was made up of state and local officials, state agencies, housing-focused organizations, homebuilders, community members, and other representatives from the housing sector.

Barriers to addressing housing needs identified by the Task Force included:

- Community opposition to affordable housing and successful campaigns that tie more development to increased traffic. By-right zoning is critical to ensure that affordable housing is developed. As one affordable developer noted “if you can’t build by right, you look for sites of least resistance. NIMBY’s come out when zoning changes.”
- Limited funding for affordable housing and extremely limited LIHTC opportunities (3 per year);
- Short-term rentals taking private stock from market, especially in Sussex County;
- Affordable developers are frustrated over DSHA policy that developers can only have to active projects at one time and wish to see DSHA staff up to process more development deals;
- Overlapping regulations between state and local governments that make requirements hard to navigate; and
- Density allowances across the state are too low and process of getting approved is too long.

To address the housing unit shortfall identified in the Delaware HNA, the AHPTF identified the following objectives:

- Objective 1: Increase/expand funding opportunities for affordable housing;
- Objective 2: Implement local zoning reform;
- Objective 3: Streamline the approval/permitting process;
- Objective 4: Adopt a statewide building code;
- Objective 5: Strengthen comprehensive plan requirements;
- Objective 6: Provide incentives to developers to create affordable housing units;
- Objective 7: Develop the construction workforce pipeline;
- Objective 8: Assist in the purchase of manufactured home communities by homeowners;
- Objective 9: Optimize and improve the capacity of existing programs/processes.

Policies to consider included:

- Federal funding that matches the need and rise of need – the problem is too large for a state or county to take on;
- State and local housing trust funds to assist potential homebuyers with downpayments;
- Expansion of workforce housing inclusionary ordinances and density bonuses;
- Better financial and services supports for family members who are caregivers to people with disabilities;

- Increased funding and tax credits to incentivize energy efficiency;
- Incentives for ADUs and template designs for ADUs to expedite building process;
- Inventorying empty lots or buildings in small towns. Filling them in would result in more housing and walkable community;
- Source of Income (SOI) protections;
- Diverse housing options to attract people to lesser populated areas in need of revitalization, especially in Kent County;
- A state tax credit for development of affordable rental housing;
- Build connectivity between anchor institutions like healthcare and universities. For example, a hospital could work with development partners to develop around campus and address workforce needs; and
- More education campaigns to inform people potentially opposed to new development about the benefits of affordable and workforce housing.

Stakeholders interviewed for the Plan provided more detailed examples of how zoning and land use decisions create barriers to affordable housing development:

- In the unincorporated areas within New Castle County, the code prevents developing attached housing such as townhomes. There has been little effort since 2000 to address this, and it is driven by NIMBYism and resistance to diverse housing types by current owners.
- Most development proposals must go through a long and risky approval process. By-right development is very rare in unincorporated areas, including in the more urban New Castle County. Conditional use is very common.
- In rural areas, limited infrastructure (water and sewer system expansion) can be used to resist growth—even for very small developments, like group homes, where infrastructure is not an issue.
- Overall in the state, the predominance of agricultural zoning and very low residential density limits the mix of housing types that are needed for economic growth and diversification. Density is very low, even in these counties’ “growth” zones; the most denser developments are only 10 units per acre, which is basically a townhome cluster. To support economic development, residential zoning needs to be broadened to allow greater density and eliminate bulk plane regulations.
- Resistance to development, coupled with very low-density zoning, drives affordable units into already dense and low income concentrated areas because a moderate level of density is key to the economic feasibility of affordable multifamily developments.

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

### **Introduction**

This section summarizes economic development and employment indicators and needs in Delaware, which informs community development needs and priorities. It draws from the most recent American Community Survey (ACS) data; analysis in the Delaware HNA; and stakeholder feedback.

### **Economic Development Market Analysis**

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

Within the non-entitlement areas of Delaware, the Business Activity table shows that the employment industries that provide the greatest share of jobs are Education and Health Care Services (22%), Retail Trade (15%), Arts, Entertainment, and Accommodation (14%), and Manufacturing (12%).

Most workers who live in non-entitlement areas of Delaware are employed in Education and Health Care Services (23%), Retail Trade (13%), Arts, Entertainment, and Accommodation (11%), and Manufacturing (9%).

Overall, the industries of workers and jobs are well-aligned in non-entitlement areas. The Jobs less Workers column of the Business Activity table suggests that there are somewhat more workers than jobs in Education and Health Care Services (1.3 percentage point difference), Professional, Scientific, and Management (1.6 percentage point difference), and Public Administration (1.5 percentage point difference). Conversely, there are more jobs than workers in Manufacturing (2 percentage point difference), Arts, Entertainment, and Accommodation (2.2 percentage point difference), and Retail Trade (1.9 percentage point difference).

The largest employment industries in all of Delaware based on annual average employment are:

- Office and Administrative Support (59,220 average annual workers—although much lower than in 2010);
- Sales and related jobs (45,600 workers);
- Food preparation and related jobs (37,890 workers);
- Followed by Transportation (34,960 workers), Business and Financial Operations (32,270), and Healthcare (30,840).

As shown in the figure titled “Employment Growth by Industry, Delaware, 2010 and 2021, compared to 2010, job growth has been strongest in Healthcare, Transportation, Business and Financial Operations, and Computer or Tech jobs. Jobs declined the most in the fields of Architecture and Engineering, Office and Administrative Support, and Production.

## Employment Growth by Industry, Delaware, 2010 and 2021

Industry	Annual Average Employment		Employment Growth	
	2010	2021	# Change	% Change
Management	17,930	20,400	2,470	14%
Business & Financial Operations	23,120	32,270	9,150	40%
Computer & Mathematical	12,080	16,730	4,650	38%
Architecture & Engineering	7,230	5,670	-1,560	-22%
Life, Physical & Social Science	5,310	5,790	480	9%
Community & Social Service	5,860	7,330	1,470	25%
Legal	4,480	5,500	1,020	23%
Educational Instruction & Library	22,810	25,840	3,030	13%
Arts, Design, Entertainment, Sports & Media	3,700	3,890	190	5%
Healthcare Practitioners & Technical	25,370	30,840	5,470	22%
Healthcare Support	10,680	18,610	7,930	74%
Protective Service	9,130	9,650	520	6%
Food Preparation & Serving Related	35,240	37,890	2,650	8%
Building & Grounds Cleaning & Maintenance	13,610	15,680	2,070	15%
Personal Care & Service	9,050	8,690	-360	-4%
Sales & Related	46,400	45,600	-800	-2%
Office & Administrative Support	70,860	59,220	-11,640	-16%
Farming, Fishing & Forestry	720	830	110	15%
Construction & Extraction	15,000	16,700	1,700	11%
Installation, Maintenance & Repair	15,270	15,680	410	3%
Production	20,790	17,830	-2,960	-14%
Transportation & Material Moving	23,100	34,960	11,860	51%
<b>Total Employment</b>	<b>397,730</b>	<b>435,600</b>	<b>37,870</b>	<b>10%</b>

Source: Delaware Department of Labor.

## 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	922	878	1%	1%	0.2%
Arts, Entertainment, Accommodations	16,796	14,931	11%	14%	2.2%
Construction	10,834	8,762	7%	8%	0.6%
Education and Health Care Services	33,857	23,929	23%	22%	-1.3%

Business by Sector	Number of Workers	Number of Jobs	Share of Workers %	Share of Jobs %	Jobs less workers %
Finance, Insurance, and Real Estate	7,915	4,654	5%	4%	-1.2%
Information	1,562	811	1%	1%	-0.3%
Manufacturing	13,755	12,668	9%	12%	2.2%
Other Services	4,222	3,003	3%	3%	-0.1%
Professional, Scientific, Management Services	8,284	4,490	6%	4%	-1.6%
Administration and Support	9,053	6,641	6%	6%	-0.1%
Public Administration	8,213	4,546	6%	4%	-1.5%
Retail Trade	18,951	16,257	13%	15%	1.9%
Transportation and Warehousing	7,263	4,605	5%	4%	-0.8%
Wholesale Trade	4,712	3,193	3%	3%	-0.3%
Total	146,339	109,368	100%	100%	0.0%

**Table 22- Business Activity**

Alternate Data Source Name:  
2022 Longitudinal Employer-Household Dynamics (LEHD)

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

Workforce housing was a key concern for stakeholders. Discussions on workforce housing mainly focused on the mismatch between wages and housing prices and proximity to jobs. Stakeholders fear that unaffordable housing will lead to an exodus of critical workforce. With an aging population, workers—specifically in health care, social services, and service industries—will be crucial for the state’s long-term sustainability.

Beach and resort workers experience greater challenges finding housing as these areas have very limited opportunities for affordable rentership. One stakeholder noted that high housing prices have segregated seasonal and year-round workers to the west side of Delaware. Because many work on the eastern side of the state, they are forced to commute, contributing to high volumes of traffic on country roads not designed for such traffic. Seasonal workers face similar housing challenges, though stakeholders identified conversion of unit into Airbnb’s and short-term rentals (STRs) as preventing seasonal workers from renting and/or occupying housing jointly.

Long commutes and traffic were contextualized in the state’s limited number of public transportation options. Stakeholders explained that many workers are forced to purchase or lease a car to travel to work, and transportation costs can have a significant impact on household costs. As one individual noted, households end up paying over 60% of their income on combined housing and transportation costs. Others emphasized the importance of expanding public transit options, describing it as one of the central components of affordable housing.

## Labor Force

Total Population in the Civilian Labor Force	181,976
Civilian Employed Population 16 years and over	172,885
Unemployment Rate	5.00%
Unemployment Rate for Ages 16-24	13.34%
Unemployment Rate for Ages 25-65	3.85%

**Table 23 - Labor Force**

Alternate Data Source Name:  
2023 5-year ACS

Occupations by Sector	Number of People
Management, business and financial	25,854
Farming, fisheries and forestry occupations	1,104
Service	32,220
Sales and office	36,401
Construction, extraction, maintenance and repair	17,624
Production, transportation and material moving	22,799

**Table 24 – Occupations by Sector**

Alternate Data Source Name:  
2023 5-year ACS

## Travel Time

Travel Time	Number	Percentage
< 30 Minutes	95,794	62%
30-59 Minutes	43,969	28%
60 or More Minutes	14,577	9%
<b>Total</b>	<b>154,340</b>	<b>100%</b>

**Table 25 - Travel Time**

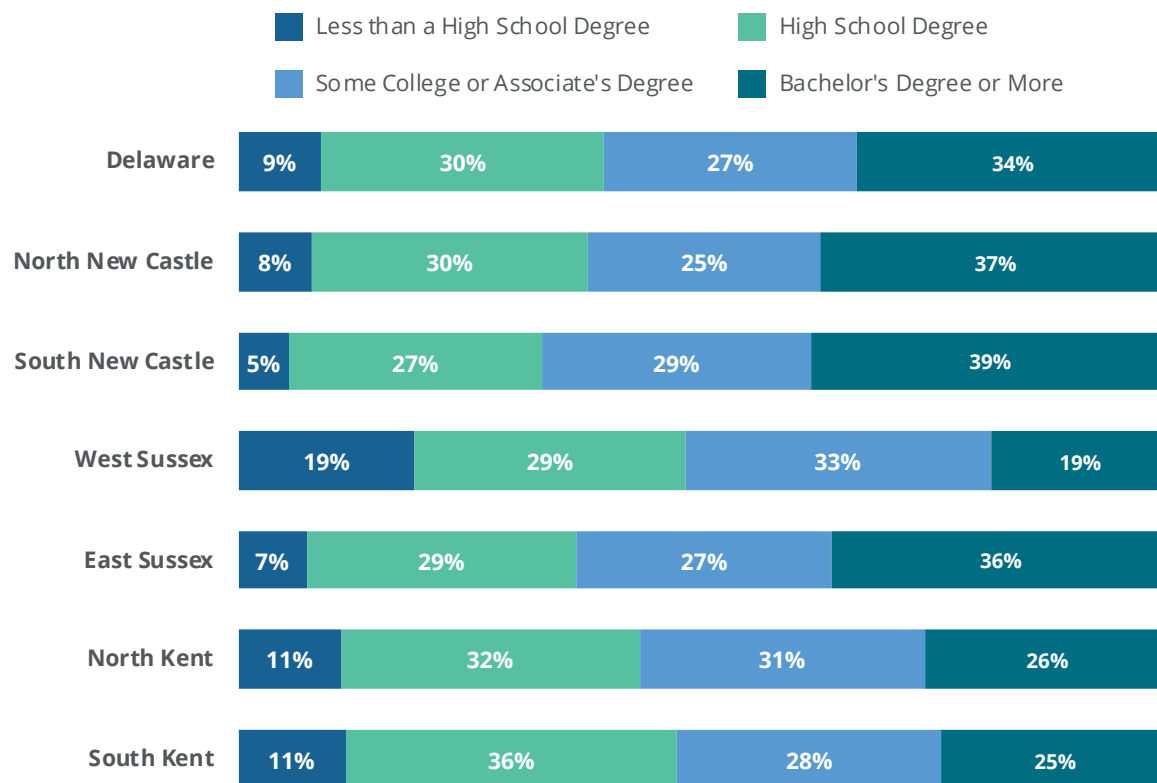
Alternate Data Source Name:  
2023 5-year ACS

## Education

In Delaware, 34% of the population holds a bachelor’s degree or higher. North New Castle County is the only market area that is slightly above the state proportion, with 37% of its population with a bachelor’s degree or higher. West Sussex has the lowest proportion of college degree holders at 19% and also has

the highest proportion of those with less than a high school degree (19%). Forty-seven percent of those in South Kent do not have an education past high school—the highest of any market area.

### Educational Attainment, Delaware and Market Areas, 2021



Note: For population 25 years and older.

Source: 2021 5-year ACS and Root Policy Research.

Educational attainment has a significant impact on earnings: residents with a graduate or professional degree make more than twice than residents with only a high school diploma.

### 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	13,397	703	7,623
High school graduate (includes equivalency)	39,130	2,394	15,255
Some college or Associate's degree	40,312	1,209	11,406
Bachelor's degree or higher	43,897	1,214	9,344

**Table 26 - Educational Attainment by Employment Status**

Alternate Data Source Name:  
2023 5-year ACS

### Educational Attainment by Age

	Age				
	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
Less than 9th grade	644	2,233	2,480	3,468	2,624
9th to 12th grade, no diploma	3,473	3,322	3,202	7,018	4,866
High school graduate, GED, or alternative	11,466	13,533	10,535	32,841	32,655
Some college, no degree	7,199	8,450	7,632	19,723	18,809
Associate's degree	1,642	4,188	3,586	10,150	8,021
Bachelor's degree	2,166	8,519	8,231	17,739	17,126
Graduate or professional degree	110	2,795	5,953	12,093	15,056

**Table 27 - Educational Attainment by Age**

Alternate Data Source Name:  
2023 5-year ACS

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

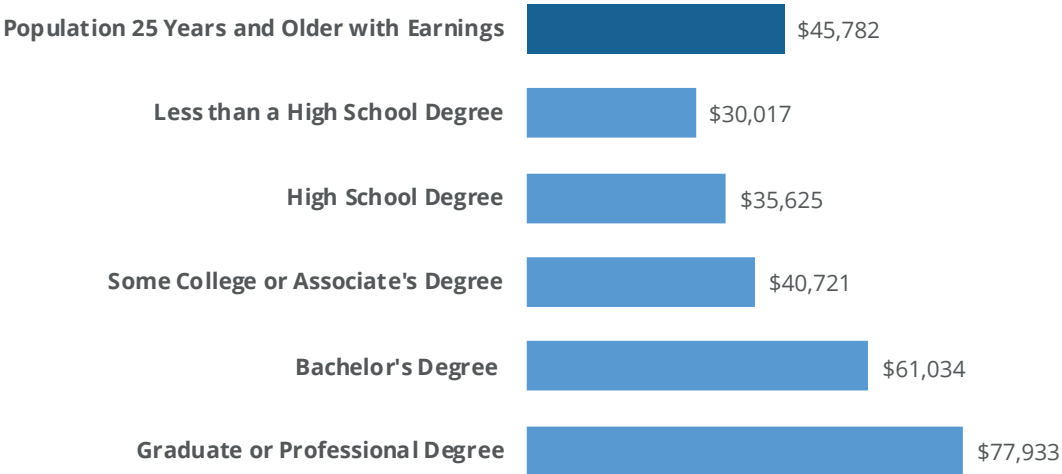
Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	\$34,353
High school graduate (includes equivalency)	\$40,051
Some college or associate’s degree	\$46,540
Bachelor's degree	\$68,099
Graduate or professional degree	\$85,974

**Table 28 – Median Earnings in the Past 12 Months**

Alternate Data Source Name:  
2023 5-year ACS

The figure titled “Earnings by Educational Attainment, Delaware, 2021” displays the median earnings by educational attainment. Median earnings increase with every level of attainment, with the largest jump in earnings from some college or associate’s degree to bachelor’s degree.

### Earnings by Educational Attainment, Delaware, 2021



Source: 2021 5-year ACS and Root Policy Research.

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

Sixty-three percent of residents in non-entitlement areas of Delaware have less than a college degree. This does align with the large Arts, Entertainment, and Accommodation and Retail Trade that correspond with the tourism industry in coastal communities. These sectors do not always require a college degree. However, Education and Health Care Service, a sector that often does require a college degree, makes up the highest proportion of jobs and according to state level data, and this sector has seen large growth since 2010. Although 29% of residents in non-entitlement areas have a bachelor’s degree or higher, more workforce training and recruitment of workers with higher levels of education may be needed to sustain this industry.

Stakeholders discussed related challenges among employers regarding the recruitment and retention of workers. This is a particular concern in Kent and Sussex counties—for example, stakeholders explained that Kent County is making efforts to expand its agriculture industry and attract more business to the area but has been unsuccessful due to the county’s limited supply of workforce housing. In Sussex County, stakeholders noted that employers are scrambling for workers which prompted one individual to emphasize the need for more education and workforce training.

Analysis within the 2023 Delaware Housing Survey shows that jobs are increasingly filled by in-commuters in areas with large employment bases. This is demonstrated by the “jobs to housing ratio”, or jobs relative to housing units. Georgetown in Sussex County, for example, has 1.5 times more jobs than workers. A high jobs-to-housing ratio indicates that workers cannot find suitable housing near their places of employment, are choosing not to live near employment centers, and/ or have split household commutes. This has consequences for recruitment and economic development of employment centers, as well as increasing household transportation costs.

**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.**

More retirees are moving to Delaware's beaches and the tourism industry continues to grow in beach towns. While these changes have brought positive change to the tourism industry, housing service workers to support businesses has been a challenge. One stakeholder noted that high housing prices have segregated seasonal and year-round workers to the west side of Delaware. Because many work on the eastern side of the state, they are forced to commute, contributing to high volumes of traffic on country roads not designed for such traffic. Seasonal workers face similar housing challenges, though stakeholders identified conversion of unit into Airbnb's and short-term rentals (STRs) as preventing seasonal workers from renting and/or occupying housing jointly.

**Describe current workforce training initiatives supported by the state. Describe how these efforts will support the state's Consolidated Plan. Describe any other state efforts to support economic growth.**

To improve access to career pathways, the state launched the Career Moves app with support from Dell Labor and the Workforce Board. The app connects residents to 250 training programs in high-demand sectors like healthcare, IT, and manufacturing. Additionally, Delaware Pathways engages over 30,000 students in career and technical education with support from vocational schools and the Delaware Center for Life Science Education and Training. In the healthcare sector, the Delaware Nurses Workforce Institute was established to address and retain healthcare workers. These efforts aim to engage employers and retain talent across all sectors.

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

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

The Delaware HNA examined where poverty and various housing needs were concentrated. For the purposes of that analysis, "concentration" means that data variables show a much higher need than in the state overall or in other counties.

In Delaware, geographic differences in housing problems include:

#### **New Castle County**

- Wilmington's concentrations of poverty are driven by limited affordable housing in other areas of the state. Publicly assisted units are concentrated in New Castle County. Kent County has a relatively equal share of publicly assisted units compared to population. Sussex County has a much lower share of publicly assisted units relative to population.
- High demand suburban markets have almost no units that accept vouchers. This has led to many renters with vouchers moving to Wilmington to find landlords that accept vouchers.
- For renters with incomes of \$35,000 and less, the cost burden is lowest when they are living in multifamily complexes with 50+ units. Such complexes are rare except in New Castle County, limiting low-income renters' affordable housing options.
- New Castle County and Wilmington were identified by stakeholders as having the greatest rehabilitation needs due to aging housing stock. Over half of the state's units with incomplete kitchen and plumbing facilities are in North New Castle.

#### **Kent County**

- Kent County experienced the highest growth in cost burdened renters between 2010 and 2021; the number of cost burdened renters grew 39%. The number of cost burdened owners declined. This could be due to conversion of formerly affordably rented units into ownership units.
- Kent County has a relatively low homeownership rate and, in the resident survey, had the highest share of renters who said they struggled to come up with a downpayment to purchase a home.

#### **Sussex County**

- Sussex County has a high concentration of seasonal and recreational units, which limits housing supply for workforce. East Sussex is home to 96% of the state's units for seasonal and recreational use.

- East Sussex contains the Census tracts with the highest concentrations of mobile homes (0.8 to 0.9 mobile homes per housing unit), while West Sussex and North New Castle (just above Middletown) also contain tracts with high concentrations of 0.3 to 0.8 mobile homes per housing unit. It is estimated that mobile homes contribute over 10% to the homeownership rate in these areas.

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

Concentrations in Delaware are related to locations of low wage jobs and access to affordable housing. Poverty is quite low in the state overall at 11% as of 2021. West Sussex has the highest poverty rate at 17%, followed by Kent County at 13%. North Castle, despite having much of the state's deeply affordable housing, has a poverty rate of 11%; South Castle's poverty rate is very low at 7%.

**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?**

New Castle County has strong growth potential due to its location, existing infrastructure, and relative affordability, especially in comparison to surrounding metropolitan areas. Strong economic growth should help produce funding needed to continue to address housing needs.

Sussex County's popularity as a vacation destination will ensure continued growth—and also pressure to provide workforce housing.

As residents move to Kent County to find relative affordability, the county's infrastructure and capacity to produce needed units will become further strained.

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

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

According to 2023 5-year ACS data, 90% of non-entitlement areas in Delaware have broadband internet. This varies by household income, where 77% of households with income less than \$20,000 have a broadband internet subscription compared to 86% of households with income between \$20,000 and \$74,999 and 96% of households with income over \$75,000. Beyond gaps in access by income, Delaware's Digital Plan outlined the need for enhanced broadband availability in rural areas. Rural areas, particularly in western Sussex County, have spotty coverage or slower internet speeds compared to more populated areas.

Delaware has made substantial progress in providing broadband access throughout the state through the Delaware Broadband Initiative. The Initiative has led the completion of a fiber line from Middletown to Georgetown and from Seaford to Lewes, undertaken the Rural Wireless Broadband Initiative, provided internet equipment and services for low-income families, and established funds for tech job training and grants to nonprofits who aim to expand internet access or literacy within their community. Additionally, Comcast, Mediacom, Breezeline Internet, and Verizon offer discounts for qualifying low-income customers across the state.

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

According to the Federal Communications Commission (FCC) database, Sussex and Kent Counties are served by at least 10 broadband providers. Viasat Inc. and Space Exploration Inc. service 100% of the counties.

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

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

According to the Delaware Emergency Management Agency (DEMA) 2024-2028 Strategic Plan, Delaware's natural hazard risks include coastal flooding, tropical cyclones, inland flooding, severe thunderstorms and tornadoes, extreme temperatures, drought, wildfires, landslides, and earthquakes. The 2021 Delaware Climate Action Plan identifies sea level rise, increased temperatures, and increased severe weather (including increased precipitation and flooding) as the most notable impacts of climate change in Delaware. Of note is that the Lewes tide gauge has experienced over a foot of sea level rise since 1900, and levels are projected to rise 9 to 23 inches by 2100. Sea level rise will potentially impact agriculture, water resources, and infrastructure.

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

Based on analysis from the DEMA Strategic Plan, Delaware Climate Action Plan and vulnerable groups identified in the Delaware HNA, the following groups may need additional resources after a disaster:

- **Low-income residents.** Residents with less savings or access to resources to prepare for or recover from disasters are more likely to be displaced and become homeless. DEMA offers recovery programs that offer temporary shelter, food, emergency supplies, and crisis counseling.
- **Older adults.** Older adults are vulnerable to disasters due to special health and mobility needs including transportation challenges, physical or mental impairments, specialized healthcare, or medications.
- **People with disabilities.** People with disabilities (physical, sensory, or mental) may have difficulty due to mobility and accessibility issues, cognitive challenges understanding instructions, and difficulty communicating.
- **School-aged students.** Students within area schools are reliant on the organization of school staff in response to an emergency. All schools in Delaware completed the Standard Response Protocol and Reunification Training with the I Love U Guys Foundation – the first state to do so.
- **English Language Learners.** The primary barriers for English Language Learners in emergency or disaster events include lack of multi-language emergency communications, cultural differences, and mistrust of government services.

To extend holistic recovery efforts across vulnerable groups, DSHA has created a Disaster Housing Task Force, through which DSHA is leading a multi-sector effort to prepare for effective and efficient post-disaster housing recovery. The effort will identify partnerships, resources, existing gaps, and collaborative opportunities relating to housing—and the effect of disasters on housing needs—across the state.

# Strategic Plan

## SP-05 Overview

### Strategic Plan Overview

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

DSHA has established the following five-year goals for the Consolidated Plan period:

- 1) Preserve and expand affordable rental housing;
- 2) Preserve homeownership housing and enable Delaware families to achieve and sustain homeownership;
- 3) Provide resources for local communities to address community development needs; and
- 4) Mitigate the risk of homelessness, and expand access to affordable, integrated, supportive housing options, including permanent supportive housing, for those experiencing and at risk of homelessness.

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

### **General Allocation Priorities**

DSHA administers the CDBG and ESG Programs for Kent and Sussex Counties, throughout Delaware on a competitive basis.

The CDBG program guidelines provide for targeting based on concentrations of substandard housing with income eligible homeowners. This allows the program to have a bigger positive impact on neighborhoods with the greatest housing needs. An equal distribution of funding between the two Counties is anticipated based on the previous years need.

DSHA anticipates that HOME Program funds will be distributed throughout the State within all Counties in Delaware. The actual commitment of HOME funds will be dependent upon an evaluation of the quality of the applications and the timing in which applications are received. It is anticipated that funds reserved for the use of CHDOs will be mostly utilized in Kent and Sussex Counties as the City of Wilmington and New Castle County also have CHDO funding available. However, the actual disbursement of CHDO funds will be based upon an evaluation of the quality of the applications and the timing in which requests for funds are received.

ESG is awarded competitively to homeless service providers based on a request for proposals. The actual commitment of ESG funds will be dependent upon an evaluation of the quality of the applications that are received. It is anticipated that funds will be equally distributed between Kent and Sussex Counties. However, the actual disbursement of ESG funds will be based upon an evaluation of the quality of the applications.

HOPWA funding is awarded to the Delaware HIV Consortium annually for a tenant-based rental assistance program operated in both Kent and Sussex Counties. Distribution of funds is determined by need using the waiting lists for each County; however it normally is distributed 60 percent in Sussex County and 40 percent in Kent County.

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

### **Priority Needs**

The State has priorities and set-asides for CDBG funding. The three priority funding categories are: Maintenance of Existing Housing, Infrastructure, and Emergency Activities.

HOME is prioritized for housing created through the Housing Development Fund and LIHTC programs. HOME may also be used for direct downpayment assistance for eligible low-income homebuyers. Moderate priority is subgrants for single family homeownership rehabilitation.

HOPWA is prioritized for rental assistance.

ESG funds are used for activities that comprehensively address the needs of people who are homeless.

## 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)	General economic conditions; market rent trends and vacancies and availability of housing affordability for <50% AMI renters.
TBRA for Non-Homeless Special Needs	General economic conditions; market rent trends and vacancies and availability of housing affordability for <50% AMI renters.
New Unit Production	Continued gaps in supply of rental units affordable to <50% AMI renters and homeownership opportunities for <100% AMI households
Rehabilitation	Demand for rehabilitation of both owner occupied and rental units is expected to continue regardless of market conditions given the very high levels of need and old housing stock
Acquisition, including preservation	Presence of vacant and underutilized properties and opportunities and funding for acquisition and redevelopment into affordable housing.

**Table 29 – Influence of Market Conditions**

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

### Introduction

HUD CDBG, HOME, ESG, HTF and HOPWA funds are leveraged by other federal and state funds. In addition to administering the HUD programs, DSHA is also Delaware's allocating agency for the Low-Income Housing Tax Credit (LIHTC) program, which provides funding for the creation and preservation of affordable rental housing. The state's housing trust fund, the Housing Development Fund (HDF), supported by annual allocations from the Delaware General Assembly, is also administered by DSHA. Finally, DSHA is also the state's housing finance agency and makes available mortgage loans, downpayment and settlement assistance, and the Delaware First Time Homebuyer Tax Credit, a mortgage credit certificate, to low- and moderate-income homebuyers.

### Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$	
CDBG	federal	Acquisition Admin and Planning Economic Development Housing Public Improvements Public Services	2,776,815	50,000	0	2,826,815	12,000,000

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$
			Annual Allocation: \$	Program Income: \$	Prior Year Resources : \$	Total: \$	
HOME	federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	3,014,372.26	200,000	0	3,214,372.26	15,000,000
HOPWA	federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services TBRA	410,445	0	0	410,445	410,445

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$
			Annual Allocation: \$	Program Income: \$	Prior Year Resources : \$	Total: \$	
ESG	federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	269,136	0	0	269,136	1,000,000
HTF	federal	Acquisition Admin and Planning Homebuyer assistance Multifamily rental new construction Multifamily rental rehab New construction for	3,134,373.2 0	100,000 0	0 0	3,234,373.2 0	15,000,000 0

**Table 30 - Anticipated Resources**

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

Anticipated leveraged funds will include:

- The Low-Income Housing Tax Credit (LIHTC). DSHA anticipates that \$3 million annually in tax credits will support multifamily new construction and rehabilitation and leverage HOME funds.
- The Housing Development Fund, a state-funded housing trust fund, supports the development and rehabilitation of affordable rental housing, homeowner rehabilitation, development of affordable homeownership units, and homelessness prevention and rapid rehousing. The HDF is estimated at \$10 million annually.

Matching requirements will be satisfied through:

Community Development Block Grant

- HUD requires a one-for-one match on CDBG funds used for state administration in excess of \$100,000. DSHA will spend the maximum allowable funds in state administration and will match the funds in excess of \$100,000 with DSHA funds. We do not anticipate using any program income for administration; therefore, it will not require a match.

DSHA's CDBG Program Guidelines require subgrantees to match their CDBG administration funds one-for-one with local administration funds. Kent and Sussex Counties will match their administration allocations, with at least those amounts in local funds.

Delaware CDBG Program Guidelines also require subgrantees to match their CDBG infrastructure project funds with minimum matching amounts that vary with the amount of CDBG funds requested. Cash matches may be provided through other sources of funding for the same activity.

The following are the CDBG infrastructure match requirements:

- Up to \$100,000 requires a 10% cash match or a 15% in-kind match;
- \$100,000 to \$200,000 requires a 15% cash match or a 20% in-kind match; and
- \$200,000+ requires a 20% cash match or a 25% in-kind match.

HOME Program

- To the extent that contributions from other resources to a development assisted with HOME funds do not meet matching requirements, DSHA will provide the remainder of the required match from non-federal sources. Contributions that are or will be counted as satisfying a matching requirement of another federal program may not be used to satisfy the matching requirement for the HOME Program.

- As required, DSHA will make match contributions to housing that qualifies as affordable housing under the HOME Program. Except where the match requirement has been reduced, DSHA will provide match funds totaling not less than 25% of the HOME funds drawn from the State of Delaware's HOME Investment Trust Fund Treasury account for the appropriate period. Funds drawn for administration and Community Housing Development Organization (CHDO) operating expenses are not required to be matched.

**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)

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

<b>Responsible Entity</b>	<b>Responsible Entity Type</b>	<b>Role</b>	<b>Geographic Area Served</b>
Delaware Department of Health and Social Services	Departments and agencies	Homelessness non-homeless special needs	State
Private Developers	Developer	Ownership Rental	State
Nonprofit Developers	Non-profit organizations	Homelessness Ownership Rental	State
Delaware Continuum of Care	Continuum of care	Homelessness Planning	State
DE HUD Entitlement Jurisdictions	Government	Homelessness non-homeless special needs Ownership Planning Rental	Jurisdiction
Kent & Sussex Counties Non-Entitlement Jurisdictions	Subrecipient	Non-homeless special needs Ownership neighborhood improvements public facilities public services	Jurisdiction
USDA Rural Development	Government	Economic Development Ownership Rental neighborhood improvements public facilities public services	Nation

**Table 31 - Institutional Delivery Structure**

## Assess of Strengths and Gaps in the Institutional Delivery System

Consulted stakeholders would like to see a better functioning service system with more a more formal, centralized model for ongoing training and education for service providers. Stakeholders feel that Delaware needs to bolster knowledge about effective services and strategies to help individuals successfully exit homelessness. Mostly, though, stakeholders advocate for increased permanent supportive housing across the state.

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

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

**Table 32 - Homeless Prevention Services Summary**

**Describe the extent to which services targeted to homeless person and persons with HIV and mainstream services, such as health, mental health and employment services are made available to and used by homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families and unaccompanied youth) and persons with HIV within the jurisdiction**

Housing Alliance Delaware (HAD) is the coordinating entity for Delaware's Continuum of Care, which oversees a centralized intake line to assist individuals and families seeking emergency shelter. The centralized intake process streamlines access to emergency shelter and resources-- individuals only need to call one number (1-833-FIND-BED). As of January 2025, Centralized Intake received calls from 1,235 households, 923 of which needed homelessness assistance resources.

The following health, mental health, and employment services are available and used by homeless individuals:

**Health services.**

- The Delaware Department of Health and Human Services (DHSS)'s Health Care Connection program connects uninsured residents with existing public programs and resources, links them with appropriate financial resources, and at-home medical care;
- Westside Family Healthcare operates in New Castle, Kent, and Sussex County. They offer social support services alongside healthcare, including a mobile van that assists homeless individuals and those living in rural areas that served 594 patients in 2023. Additionally, coordinators connect patients with food, housing, employment, and other support programs;
- Hope Medical Clinic offers free healthcare services for uninsured and homeless individuals, including primary care, dental services, chronic disease management, and mental health services. Hope Clinic is based in Dover and services individuals from throughout Kent County;
- The Division of Public Health offers health services across the state for low-income and homeless populations. Services include vaccinations, STD/ HIV testing, and other preventative health services;
- La Red Health Center offers care for uninsured individuals, particularly those working in agriculture. La Red also operates a 24/7 hotline to facilitate access to medical care.

**Mental health services.** The previously mentioned Connection Community Support Program, Westside Family Healthcare, and Hope Medical Clinic all offer mental health services to homeless individuals. Additional supports throughout the state for homeless individuals include:

- Delaware Division of Substance Abuse and Mental Health (DSAMH) offers mental health and substance use disorder services for homeless and low-income populations, referrals to shelters and community programs, 24/7 crisis intervention services for individuals experiencing a mental health crisis. According to DSAMH, 7% of people starting addiction treatment and 13% starting mental health programs are homeless;

- Projects for Assistance in Transition from Homelessness (PATH), a program through DSAMH, enrolls homeless clients through street outreach and connects clients to temporary and permanent housing, substance use treatment, mental health treatment, low-income assistance, and healthcare insurance access. In 2024, PATH served 675 persons.
- Homeless Mental Health Outreach Team (HMHOT) provides mental health outreach and care to homeless individuals. The team offers psychiatric evaluations, therapy, crisis intervention, and connections to housing and supportive services. This is part of Crisis Intervention Services that have clinics in greater Smyrna in Northern Kent County and Sussex County staffed 24/7. The team is dispatched to help de-escalate situations and connect individuals with appropriate services.

**Employment services.** Delaware offers several employment services aimed at helping homeless individuals gain job skills, find employment, and access supportive services. These programs focus on empowering individuals to become self-sufficient through training, job placement, and resources:

- Delaware Department of Labor’s Division of Employment and Training assists individuals with job training, career counseling, and employment assistance. These services are extended to those facing barriers to employment, including homelessness. Services can be found online and in-person in career centers in Dover, Newark, and Wilmington;
- Goodwill of Delaware offers employment training and placement services for homeless and low-income individuals. Goodwill of Delaware assisted 10,240 individuals with job seeking career exploration, training, and education in 2022;
- Connections Community Support Program offer job readiness programs, employment assistance, and vocational training as part of their supportive services for individuals experiencing homelessness;
- Friendship House Delaware offers employment assistance within their Empowerment Centers, including access to computers, assistance with writing resumes, and applying for jobs. They also help homeless individuals obtain birth certificates, IDs, and social security cards and assisted 601 individuals in Sussex and Kent Counties in 2024; and
- Salvation Army of Delaware offers employment training, job placement assistance, and life skills workshops through their transitional housing programs; and
- The Delaware Fatherhood Program provided by the Division of Child Support Services in Partnership with the Department of Labor provides free employment services, skills training, financial education, and peer mentorship for fathers who are unemployed and face barriers to accessing jobs, such as recent incarceration or suspended driver’s licenses.

**Resident survey perspectives.** The 2023 Delaware Housing Survey provided representative and comprehensive data on Delaware residents, including precariously housed individuals. Of these precariously housed respondents, 49% resided in New Castle County, 22% resided in Sussex County, and 28% resided in Kent County. Precariously housed individuals in New Castle County were more likely to be staying with family or friends, whereas precariously housed individuals in more rural Sussex and Kent Counties were more likely to be living out of a car / RV or staying in a motel. The difference in housing

situation marks a difference in the social safety net that is more common in urban settings. People who become homeless in denser Wilmington in New Castle County, for instance, may be physically closer or have larger social networks to stay with compared to those in rural areas. In Sussex and Kent Counties, where populations are more sparse and social networks may be more limited, motels and cars may be the first option for people experiencing homelessness who cannot access other emergency shelters.

Stakeholders who work with unhoused populations expressed the dire need for affordable units and homeless shelters across the state. Stakeholders representing rural and suburban areas noted that most rapid rehousing options were located in Wilmington, and that there need to be more options across the state to avoid people being relocated and losing community connections when they become homeless. Stakeholders noted that many lower income communities have formed informal networks to help each other out and concentrating resources in Wilmington disrupts these communities.

See MA-30 for more resources sorted by household type experiencing homelessness, including chronically homeless individuals, families with children, veterans, and unaccompanied youth.

**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**

Extensive stakeholder consultation with nonprofit executive directors, case workers, and advocates informed the identified needs of special populations.

**Seniors.** Stakeholders advocated for more resources targeted to seniors, specifically resources that help elderly persons navigate the state’s housing market and service system. Seniors aren’t sure where to go to look and they aren’t always adept at navigating search engines.

**Residents with disabilities.** Stakeholders would also like to see more services across the service spectrum for residents with disabilities. Respite care for families is also very much needed. Providers would like to see more support for individuals going through the housing process as many are not aware of the resources available to them and need help navigating such complicated processes. These challenges have been compounded by Delaware’s service system because residents need to get onto multiple waitlists for housing placement. To overcome this barrier, providers recommend designating a housing navigator position to serve adults with disabilities as they move through the housing process. While this is a preferred approach, participants acknowledged that it would be difficult to achieve because these positions are often underpaid. Other services needed to better help Delaware’s disabled population include: assistance completing housing chores (e.g., cleaning) and transportation to doctor’s appointments.

**Single parents.** Stakeholders mentioned single mothers as among the hardest populations to house and the most housing-challenged of all resident groups. This was attributed to their varied and limited sources of income—many have to rely on child support which landlords view as inconsistent income. Affordable childcare is a significant need and lack of affordable childcare prevents single parents from entering the workforce. Without support, many families are at a greater risk for homelessness or long-term housing instability.

**Youth leaving foster care.** For youth transitioning from foster care into independence, finding stable housing is a huge barrier for employment, as applicants need stable housing for work credentials. The “benefits cliff” was also mentioned; as youth go through their journey of independence, they lose some services and cost burden reshuffles toward housing. On the positive side, stakeholders noted that DSHA has a “pretty high” income threshold before benefits are lost. Stakeholders actively advocated for reforming services thresholds to reward people who are working to climb the economic ladder.

**Survivors of domestic violence.** Limited capacity and accessible resources to assist victims were identified as a challenge. Participants explained that housing placement for survivors can take up to 18 months with an additional six months to formulate a housing plan. These timelines were described as unacceptable, leaving many victims without assistance and encouraging them to stay with perpetrators. One participant noted that capacity constraints have forced survivors to work themselves into state programs rather than seeking assistance prior to crisis.

### **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**

DSHA’s current strategic plan, which carries through FY2026, dedicates several focus areas to improving institutional structure ([https://www.destatehousing.com/wp-content/uploads/2024/04/FY24-to-FY-26-DSHA-Strategic-Plan-\\_Final-1.pdf](https://www.destatehousing.com/wp-content/uploads/2024/04/FY24-to-FY-26-DSHA-Strategic-Plan-_Final-1.pdf)). Notable action items include:

- Building and diversifying community partners, including the health care industry;
- Working with the state Department of Health and Social Services to explore funding to support community-based housing services;
- Increasing the number of landlords, developers, and nonprofits who participated in and are committed partners in DSHA projects and initiatives;
- Be more targeted in bringing needed resources to specific communities.

In addition to the above action items, DSHA intends to improve housing options and variety for 30-60% AMI households; combine development funding and subsidies for permanent supportive housing (PSH) into one streamlined application; improve the connection and delivery of services in PSH units by collaborating with service providers; and develop strategic partnerships to support alternative affordable homeownership models. In 2024, DSHA achieved the goal of designing a

centralized common application for Housing Choice Vouchers to improve the operation and inspection of units in the program.

## SP-45 Goals Summary – 91.315(a)(4)

DSHA has established the following five-year goals for the Consolidated Plan period:

- Enable Delaware families to achieve and sustain homeownership (Homebuyer Assistance category);
- Preserve and expand affordable rental housing (Affordable Rental Housing);
- Preserve homeownership housing (Homeowner Rehabilitation);
- Mitigate the risk of homelessness, and expand access to affordable, integrated, supportive housing options, including permanent supportive housing, for those experiencing and at risk of homelessness (Homeless Assistance and Permanent Supportive Housing); .
- Prevent foreclosures and address impact of foreclosures (Foreclosure Prevention and Recovery); and
- Provide resources for local communities to address community development needs (Non-Housing Community Development).

The following matrix shows anticipated funding for PY2025.

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding (5 year estimate)	Goal Outcome Indicator
1	Homebuyer Assistance	2025	2029	Affordable Housing	Delaware Non-Entitlement Areas/ State of Delaware	Homebuyer Assistance	Achieved through TBA and Tax Exempt funding of \$1.8 billion (1 <sup>st</sup> mortgages) and \$46.8 million in downpayment assistance	Direct Financial Assistance to Homebuyers: 6,315 Households Assisted
2	Affordable Rental Housing	2025	2029	Affordable Housing	Delaware Non-Entitlement Areas/ State of Delaware	Affordable Rental Housing	HOME: \$15 million, which will leverage a minimum of \$15 million in LIHTC and \$2.5 million in HDF	Rental units constructed: 1,200 housing units created or preserved.

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding (5 year estimate)	Goal Outcome Indicator
3	Homeowner Rehabilitation	2025	2029	Affordable Housing	Delaware Non-Entitlement Areas/ State of Delaware	Homeowner Rehabilitation	CDBG: \$10,000,000 HOME: \$5,000,000	Homeowner Housing Rehabilitated: 1500 Household Housing Units
4	Homeless Assistance	2025	2029	Homeless	Delaware Non-Entitlement Areas/ State of Delaware	Homelessness	ESG: \$1,000,000 HDF: \$2,500,000	Rapid Rehousing: 1100 Households Assisted  Homeless Persons Overnight Shelter: 2895 Persons Assisted  Street Outreach: 1000 Persons Assisted  Homelessness Prevention: 1,550 Persons Assisted
5	Permanent Supportive Housing	2025	2029	Affordable Housing Non-Homeless Special Needs	Delaware Non-Entitlement Areas/ State of Delaware	Permanent Supportive Housing/Special Populations	HTF: \$12,000,000	Permanent Supportive Housing: 250 Household Housing Units
6	Foreclosure Prevention and Recovery	2025	2029	Affordable Housing	Delaware Non-Entitlement Areas/ State of Delaware	Foreclosure Prevention & Recovery	Delaware Emergency Mortgage: 18,750,000	

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding (5 year estimate)	Goal Outcome Indicator
7	Non-Housing Community Development	2025	2029	Non-Housing Community Development	Delaware Non-Entitlement Areas/ State of Delaware	Non-Housing Community Development	CDBG: \$3,000,000	Public Facility, Demolition, Infrastructure or Public Services Activates other than Low/Moderate Income Housing Benefit

**Table 33 – 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)**

Not applicable.

**Activities to Increase Resident Involvement**

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

No.

**Plan to remove the ‘troubled’ designation**

Not applicable.

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

### **Barriers to Affordable Housing**

The Affordable Housing Production Task Force (AHPTF) was convened in August 2024 to identify barriers to the development of affordable housing and coordinate recommendations. The AHPTF was made up of state and local officials, state agencies, housing-focused organizations, homebuilders, community members, and other representatives from the housing sector.

Barriers to addressing housing needs identified by the Task Force included:

- Community opposition to affordable housing and successful campaigns that tie more development to increased traffic. By-right zoning is critical to ensure that affordable housing is developed. As one affordable developer noted “if you can’t build by right, you look for sites of least resistance. NIMBY’s come out when zoning changes.”
- Limited funding for affordable housing and extremely limited LIHTC opportunities (3 per year);
- Short-term rentals taking private stock from market, especially in Sussex County;
- Affordable developers are frustrated over DSHA policy that developers can only have to active projects at one time and wish to see DSHA staff up to process more development deals;
- Overlapping regulations between state and local governments that make requirements hard to navigate; and
- Density allowances across the state are too low and process of getting approved is too long.

To address the housing unit shortfall identified in the Delaware HNA, the AHPTF identified the following objectives:

- Objective 1: Increase/expand funding opportunities for affordable housing;
- Objective 2: Implement local zoning reform;
- Objective 3: Streamline the approval/permitting process;
- Objective 4: Adopt a statewide building code;
- Objective 5: Strengthen comprehensive plan requirements;
- Objective 6: Provide incentives to developers to create affordable housing units;
- Objective 7: Develop the construction workforce pipeline;
- Objective 8: Assist in the purchase of manufactured home communities by homeowners;
- Objective 9: Optimize and improve the capacity of existing programs/processes.

Policies to consider included:

- Federal funding that matches the need and rise of need – the problem is too large for a state or county to take on;
- State and local housing trust funds to assist potential homebuyers with downpayments;
- Expansion of workforce housing inclusionary ordinances and density bonuses;
- Better financial and services supports for family members who are caregivers to people with disabilities;

- Increased funding and tax credits to incentivize energy efficiency;
- Incentives for ADUs and template designs for ADUs to expedite building process;
- Inventorying empty lots or buildings in small towns. Filling them in would result in more housing and walkable community;
- Source of Income (SOI) protections;
- Diverse housing options to attract people to lesser populated areas in need of revitalization, especially in Kent County;
- A state tax credit for development of affordable rental housing;
- Build connectivity between anchor institutions like healthcare and universities. For example, a hospital could work with development partners to develop around campus and address workforce needs; and
- More education campaigns to inform people potentially opposed to new development about the benefits of affordable and workforce housing.

Stakeholders interviewed for the Plan provided more detailed examples of how zoning and land use decisions create barriers to affordable housing development:

- In the unincorporated areas within New Castle County, the code prevents developing attached housing such as townhomes. There has been little effort since 2000 to address this, and it is driven by NIMBYism and resistance to diverse housing types by current owners.
- Most development proposals must go through a long and risky approval process. By-right development is very rare in unincorporated areas, including in the more urban New Castle County. Conditional use is very common.
- In rural areas, limited infrastructure (water and sewer system expansion) can be used to resist growth—even for very small developments, like group homes, where infrastructure is not an issue.
- Overall in the state, the predominance of agricultural zoning and very low residential density limits the mix of housing types that are needed for economic growth and diversification. Density is very low, even in these counties’ “growth” zones; the most denser developments are only 10 units per acre, which is basically a townhome cluster. To support economic development, residential zoning needs to be broadened to allow greater density and eliminate bulk plane regulations.
- Resistance to development, coupled with very low-density zoning, drives affordable units into already dense and low-income concentrated areas because a moderate level of density is key to the economic feasibility of affordable multifamily developments.

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

In 2023, DSHA conducted a comprehensive statewide housing needs assessment that included a review of barriers to affordable housing. The barriers identified in the HNA included:

- High downpayment requirements associated with mortgage financing due to a rise in home values;

- Lack of or a poor credit history among low income mortgage loan applicants. This is also a barrier for renters who have experienced household violence;
- Many renters who desire to become homeowners are unsure about how to start the process or become financially ready to purchase a home;
- For large families who rent, lack of appropriately-sized rental units;
- Lack of first jobs that pay a wage enabling youth transitioning into independent living (especially from foster care) to afford rental housing;
- Lack of collaboration among the state’s many housing authorities;
- Funding for more affordable housing across the housing spectrum, from permanently supportive housing to “missing middle” housing products to mixed-income rental complexes to starter homes; and
- Local zoning codes that limit or prevent development of townhomes and rowhomes—and resistance to density in general.

Addressing many of these barriers is a core function of DSHA. DSHA offers mortgage lending programs to low and moderate income renters wanting to become owners; supports homeownership counseling; incentivizes development of affordable rental housing for all types of households and families; and has taken a leadership role on improving housing authority coordination and studying zoning barriers.

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

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

Delaware’s coordinated entry system is called Centralized Intake and is administered by Housing Alliance Delaware (HAD) on behalf of the Delaware CoC. Intake Specialists make referrals to emergency shelters and Housing Specialists manage referrals to Rapid Rehousing and Permanent Supportive Housing. Individuals or families experiencing homelessness are connected to Intake or Housing Specialists by calling HAD’s hotline, going to community access sites across the state, or interacting with state outreach teams, such as Projects for Assistance in Transition from Homelessness (PATH), a program through DSAMH that enrolls homeless clients through street outreach and connects clients to temporary and permanent housing, substance use treatment, mental health treatment, low-income assistance, and healthcare insurance access. In 2024, PATH served 675 persons. There are also outreach services targeted to veterans, such as People’s Place and faith-based outreach such as Shepherd’s Office in Georgetown that provide meals and hygiene kits.

### **Addressing the emergency and transitional housing needs of homeless persons**

Intake Specialists assess emergency housing needs that are entered into Centralized Intake via the housing hotline or outreach. They then refer the client to beds that are available within shelters participating in CMIS. Housing Specialists refer clients to Permanent Housing Resources, such as Rapid Rehousing or Permanent Supportive Housing. Clients are prioritized based on severity of need, such as length of time experiencing homelessness, multiple homeless episodes, current living situation, and multiple shelter stays. Permanent Supportive Housing providers notify Housing Specialists when they have availability, and the Specialist uses their priority list to fill the vacancy. Sometimes, a case conference is initiated to ensure that a client is receiving the best shelter or housing resource available or to determine the best way to keep the client from disengaging in the process.

### **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.**

Chronically homeless individuals and families are prioritized for Rapid Rehousing and Permanent Supportive Housing opportunities by Housing Specialists. Case conferences allow providers to communicate and strategize for chronically homeless individuals with high needs and determine which services or housing type may be most useful in the transition to a more permanent housing solution. Homeless families fleeing domestic violence are referred to three domestic violence specific hotlines, two of which are bilingual, for safe shelter and tailored resources. Veterans can access housing resources through the Veteran Affairs Medical Center and can access rapid-rehousing resources through

the Supportive Services for Veteran Families (SSVF) program and HUD-VASH vouchers. Residents in Rapid Rehousing and Permanent Supportive Housing Programs receive housing stabilization services to prevent the family or individual from experiencing homelessness again.

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

**Resources for people exiting institutions.** Centralized Intake assists people who are experiencing homelessness after leaving a hospital or other institution and refers them to available shelter beds, rapid rehousing, or permanent supportive housing programs. Bayard Housing offers emergency and transitional shelter for pregnant women. The Delaware Center for Justice offers the Community Reintegration Services Program (CRSP) to adults reentering the community after incarceration. This program provides case managers that help clients access housing and employment supports.

**Resources for youth.** The People's Place in Milford provides case management, independent living preparation, skills, training for youth exiting foster care. Delaware's Department of Services for Children, Youth and Their Families coordinates with People's Place independent living services for youth exiting foster care and the department provides additional case management services for youth throughout the state in foster care. Case management and skills development courses aim to prevent youth transitioning from foster care from experiencing homelessness.

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

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

DSHA will continue to cooperate with DPH to facilitate lead-safe work practice training to contractors. Any new rehabilitation contractors will be directed to the DPH, for training in lead-safe work practices. Any individual performing lead-based paint activities in the State of Delaware must be certified by DPH. After completing an approved training course, a person wishing to be certified must submit an Application for Certification to DPH and pass the State certification (3rd party) exam. A certification fee is required, and the certification is valid for two years.

DSHA collaborates with DPH's Office of Healthy Environments on efforts to improve environmental health and safety for the residents of Delaware. Healthy Environments is an emerging trend in Public Health in the United States, as many health departments transition from a Lead Poisoning Prevention Program to a more versatile Healthy Homes Program. Increased awareness of potential hazards in the home has led to the development of programs that treat the home environment as a whole, rather than focusing on singular hazards. The link between housing and health has created a need for partnership between health and housing agencies in order to better address the needs of Delaware residents, particularly those in low- and moderate-income housing. With this in mind, DSHA and the Office of Healthy Environments will partner to support Delaware residents in improving their home environments.

Specifically, the Office of Healthy Environments and the DSHA seek to closely coordinate in the interests of meeting the needs of low- and moderate-income citizens. Through this partnership, DSHA will have a resource for training, information and educational materials for staff and residents receiving support from DSHA.

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

All Program Guidelines will continue to reference HUD's lead-based paint regulations and require all applicants to demonstrate how the rehabilitation work will be conducted in accordance with these regulations. DSHA will also require any activity funded by the HDF, HTF or HOME Program, especially acquisition/rehab activities, to conduct an Environmental Site Assessment Phase I.

Further, all covered projects and activities under ESG, HOPWA, CDBG, HOME, HTF, Public Housing and Housing Choice Voucher Programs will be administered to the applicable lead-based paint regulations. All programs will be monitored for compliance with current regulations. DSHA will monitor training and technical assistance needs relating to lead-based paint and work in conjunction with DPH to address those needs.

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

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

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

DSHA works to ensure coordination of the programs and housing offered at multiple levels. The DSHA Director and staff participate on a number of statewide committees and workgroups with the goal of better coordinating various systems and reducing barriers within our programs. These groups include: the Workforce Investment Board which creates a plan for workforce development; the Governor's Commission on Community Based Alternatives for Individuals with Disabilities which created a plan for more full inclusion of people with disabilities in Delaware's communities; the Delaware Correctional Reentry Commission, Delaware Continuum of Care, Governor's Advisory Council to the Division of Substance Abuse and Mental Health, Fair Housing Task Force, and many others.

In addition, DSHA does a number of outreach efforts to ensure that TANF case managers, Prison case managers, Probation Officers, and others are aware of and know how to access not only our services, but other housing services available.

## **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**

Monitoring standards and procedures for CDBG, HOME, ESG, HTF, CDBG-CV, ESG-CV, and HOPWA are appended to the Plan in the HUD submittal.

## Expected Resources

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

#### Introduction

The table below lists the resources anticipated to be available to assist the State fulfill its five-year Consolidated Plan housing and community development goals. It assumes the same level of funding for the block grants as in PY2024.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	federal	Acquisition Admin and Planning Economic Development Housing Public Improvements Public Services	2,776,815	50,000	0.00	2,826,815	12,000,000	Assumes annual allocation of \$2.75 million, based on PY2024 allocation.
HOME	federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	3,014,372.26	200,000	0	3,214,372.26	15,000,000	Assumes annual allocation of \$3 million, based on PY2024 allocation.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
HOPWA	federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services TBRA	410,445	0	0	410,445	410,445	Assumes annual allocation of \$400,000, based on PY2024 allocation.
ESG	federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	269,136	0	0	269,136	1,000,000	Assumes annual allocation of \$260,000, based on PY2024 allocation.
HTF	federal	Acquisition Admin and Planning Homebuyer assistance Multifamily rental new construction Multifamily rental rehab New construction for	3,134,373.20	100,000	0	3,234,373.20	15,000,000	Assumes annual allocation of \$3 million based on PY2024 allocation.

### Table 34 - Expected Resources

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

Anticipated leveraged funds will include:

- The Low-Income Housing Tax Credit (LIHTC). DSHA anticipates that \$3 million annually in tax credits will support multifamily new construction and rehabilitation and leverage HOME funds.
- The Housing Development Fund, a state-funded housing trust fund, supports the development and rehabilitation of affordable rental housing, homeowner rehabilitation, development of affordable homeownership units, and homelessness prevention and rapid rehousing. The HDF is estimated at \$10 million annually.

Matching requirements will be satisfied through:

#### Community Development Block Grant

- HUD requires a one-for-one match on CDBG funds used for state administration in excess of \$100,000. DSHA will spend the maximum allowable funds in state administration and will match the funds in excess of \$100,000 with DSHA funds. We do not anticipate using any program income for administration; therefore, it will not require a match.

DSHA's CDBG Program Guidelines require subgrantees to match their CDBG administration funds one-for-one with local administration funds. Kent and Sussex Counties will match their administration allocations, with at least those amounts in local funds.

Delaware CDBG Program Guidelines also require subgrantees to match their CDBG infrastructure project funds with minimum matching amounts that vary with the amount of CDBG funds requested. Cash matches may be provided through other sources of funding for the same activity.

The following are the CDBG infrastructure match requirements:

- Up to \$100,000 requires a 10% cash match or a 15% in-kind match;
- \$100,000 to \$200,000 requires a 15% cash match or a 20% in-kind match; and
- \$200,000+ requires a 20% cash match or a 25% in-kind match.

#### HOME Program

- To the extent that contributions from other resources to a development assisted with HOME funds do not meet matching requirements, DSHA will provide the remainder of the required match from non-federal sources. Contributions that are or will be counted as satisfying a matching requirement of another federal program may not be used to satisfy the matching requirement for the HOME Program.
- As required, DSHA will make match contributions to housing that qualifies as affordable housing under the HOME Program. Except where the match requirement has been reduced, DSHA will provide match funds totaling not less than 25% of the HOME funds drawn from the State of Delaware's HOME Investment Trust Fund Treasury account for the appropriate period. Funds drawn for administration and Community Housing Development Organization (CHDO) operating expenses are not required to be matched.

**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; 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.

## **Annual Goals and Objectives**

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

DSHA has established the following five-year goals for the Consolidated Plan period:

- 1) Preserve and expand affordable rental housing;
- 2) Preserve homeownership housing and enable Delaware families to achieve and sustain homeownership;
- 3) Provide resources for local communities to address community development needs; and
- 4) Mitigate the risk of homelessness, and expand access to affordable, integrated, supportive housing options, including permanent supportive housing, for those experiencing and at risk of homelessness.

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

### Introduction:

Allocation priorities are reflective of the needs identified in the most recent Needs Assessment, the availability and range of funding sources, and the parameters of each specific funding source.

### Funding Allocation Priorities

	Homebuyer Assistance (%)	Affordable rental housing (%)	Homeowner Rehabilitation (%)	Homeless Assistance (%)	Permanent Supportive Housing (%)	Foreclosure Prevention and Recovery (%)	Non-housing Community development (%)	COVID-19 response (%)	Total (%)
CDBG	0	0	100	0	0	0	0	0	100
HOME	0	80	20	0	0	0	0	0	100
HOPWA	0	0	0	0	100	0	0	0	100
ESG	0	0	0	100	0	0	0	0	100
HTF	0	80	0	0	20	0	0	0	100
LIHTC	0	100	0	0	0	0	0	0	100
Other Emergency Mortgage	0	0	0	0	0	100	0	0	100
Other HDF	15	75	5	5	0	0	0	0	100
Other Homebuyer assistance	100	0	0	0	0	0	0	0	100
Other Rental assistance	0	0	0	0	100	0	0	0	100
Other SRAP	0	0	0	0	100	0	0	0	100

Table 35 – Funding Allocation Priorities

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

### Introduction:

This section summarizes the Methods of Distribution (MOD) for CDBG, HOME, HTF, ESG, and HOPWA for the five-year planning period. Full MODs are appended to this Action Plan.

### Distribution Methods

<b>1</b>	<b>State Program Name:</b>	CDBG
	<b>Funding Sources:</b>	CDBG
	<b>Describe the state program addressed by the Method of Distribution.</b>	DSHA's Community Development Block Grant (CDBG) program distributes CDBG and some HOME funds to eligible units of local government for community development activities including homeowner rehabilitation, demolition, infrastructure, sewer and water hookups, and public services. HOME funds are limited to homeowner rehabilitation.
	<b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b>	DSHA provides the Application Review Panel, which is composed of persons with appropriate background and experience, the applications to evaluate. The Review Panel uses a point system with a maximum total of 100 points that may be received by an application, and with maximum total points achievable in the following categories: low- and moderate- income benefit (provided by DSHA staff) – 25 points; management capacity (provided by DSHA staff) – 5 points; distressed areas from blight & concentrated poverty– 5 points; severity of need – 15 points; holistic impact of activity – 15 points; cost reasonableness – 15 points; leveraging of other resources – 15 points; and suitability/feasibility of work plan – 5 points. The Review Panel then scores the applications and makes funding recommendations to DSHA’s Director for final approval.

<p><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></p>	<p>Potential applicants can access the Delaware CDBG Program Guidelines and Application Package on the DSHA website at: <a href="http://destatehousing.com/Landlords/dv_cdbg.php">http://destatehousing.com/Landlords/dv_cdbg.php</a></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>N/A</p>
<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>N/A</p>

<p><b>Describe how resources will be allocated among funding categories.</b></p>	<p>The State has priorities and set-asides for CDBG funding. The three priority funding categories are: Rehabilitation of Existing Housing, Infrastructure, and Emergency Activities.</p> <p>The Rehabilitation of Existing Housing priority has a set-aside of 60-90% of CDBG funds available for allocation to project activities that include: public services, rehabilitation of substandard residential properties; housing code enforcement, demolition of substandard structures; construction or rehabilitation of emergency/transitional/permanent supportive housing; relocation assistance as required under the Uniform Relocation Act, Delaware Code, and 24 CFR 570; substantial reconstruction of housing; and provision of housing-related services in conjunction with activities noted above.</p> <p>The Infrastructure priority has a set-aside of 10-40% of CDBG funds available for allocation to project activities that include: infrastructure such as the installation or improvement of water systems, sewer systems, streets, storm drainage systems, sidewalks, and all related activities; architectural/engineering studies for infrastructure; preparation of grant applications to other grantor agencies; acquisition of land for new housing development; clearance and site preparation for new housing development; installation or improvement of infrastructure benefiting service areas of at least 51% low- and moderate-income persons; and planning studies.</p> <p>The Emergency Activities (water, sewer, housing rehabilitation and demolition), which have a particular urgency has a set-aside of 0-7% of CDBG funds available for allocation to activities, excluding administrative costs.</p>
	<p>The State may supplement the CDBG scattered sites housing rehabilitation allocations with HOME housing rehabilitation funding. This is done by funding part of applicants' scattered sites housing rehabilitation activity funding requests with HOME program funds. This allows the State to use CDBG funds that would have gone towards scattered sites rehab but were replaced by HOME funds, to fund other CDBG-eligible activities, such as infrastructure.</p>

	<p><b>Describe threshold factors and grant size limits.</b></p>	<p>Within a single application or fiscal year, an applicant may seek funding for activities which address more than one community development need, as long as the total does not exceed the maximum allocation of \$1,200,000. The CDBG funds requested, either by themselves or in combination with other funds, must be sufficient to complete the proposed activities. An allocation to one community exceeding \$600,000 would have to be extremely competitive.</p>
	<p><b>What are the outcome measures expected as a result of the method of distribution?</b></p>	<p>Homeowner rehab funds will allow low-income homeowners to maintain and remain in their homes. Across all the eligible activities considered by this method of distribution, outcome measures will be:</p> <ul style="list-style-type: none"> <li>• Number of People Assisted</li> <li>• Number of Housing Units Assisted</li> </ul> <p>Number of Units Demolished: 0</p>
2	<p><b>State Program Name:</b></p>	<p>Delaware Emergency Solutions Grants (ESG) Program</p>
	<p><b>Funding Sources:</b></p>	<p>ESG</p>
	<p><b>Describe the state program addressed by the Method of Distribution.</b></p>	<p>ESG Funds will be utilized to provide funding for activities that comprehensively address the needs of people who are homeless. The statewide centralized intake system works to ensure that people who are homeless are able to access street outreach providers, emergency shelters, homeless prevention services and rapid rehousing services in Delaware. Street outreach providers, emergency shelters, homeless prevention providers and rapid rehousing providers are encouraged to develop a plan for each individual and/or family that helps households stabilize and become more self-sufficient.</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>ESG funds are distributed on a competitive basis and proposals are rated based on a weighted score of 100 points with the following criteria:</p> <p>Program Description (18 points); Demonstrated Need (14 points); Related Experience (15 points); Organizational / Financial Information (24 points); Program Outcomes (16 points); and Program Budget/Sources and Uses (13 points).</p> <p>Using these criteria, applications are reviewed and rated by a review panel comprised of professionals with knowledge and experience in homeless issues and grant management.</p>
<p><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></p>	<p>N/A</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>Applicants must be located in Kent and Sussex Counties and may be local governmental entities, nonprofit agencies, or faith-based organizations that provide direct services to homeless persons or persons at risk of becoming homeless. The funds are made available each year through a “Notice of Funding Availability”, which is posted on DSHA’s website and published in prominent newspapers statewide as well as e-mailed through our Highlights newsletter. Eligible applicants are units of general local government and private nonprofit organizations located or serving in Kent and Sussex Counties. Assistance may also be provided to religious organizations if the religious organizations agree to provide all eligible activities under this program in a manner that is free from religious influences in accordance with 24 CFR Part 576.23.</p> <p>The review panel will evaluate and rate all proposals based on the criteria listed above. The panel forwards its recommendations and comments to the DSHA Director. Past contractual performance may also be considered for respondents that have previously received funding. Final funding decisions are made by the DSHA Director.</p>

<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>N/A</p>
<p><b>Describe how resources will be allocated among funding categories.</b></p>	<p>Delaware expects to receive approximately \$269,136 in ESG funding in FY2025. Funds for the estimated allocation may be used for the following activities: Street Outreach, Emergency Shelter Activities, Homeless Prevention Activities, and Rapid Re-Housing Activities. Taking into consideration the quality and number of applications received, priority in awarding ESG funds shall be given first to applications requesting funding assistance for Street Outreach and the reimbursement of operating costs to emergency shelters. Second priority shall be given to quality proposals requesting funding assistance for eligible rapid re-housing activities and third priority shall be given to quality proposals requesting funding assistance for eligible homeless prevention activities.</p>
<p><b>Describe threshold factors and grant size limits.</b></p>	<p>Applications will be reviewed to ensure that DSHA's thresholds are met. These factors include a Non-Discrimination Policy, Environmental Review Requirements, Length of Stay policy, Family separation policy, Drug and Alcohol-Free policy, Homeless Representation and Participation on the Board, Relocation and Displacement Policy, Conflict of Interest Policy, Lead-Based Paint Requirement, and Confidentiality Requirement. Grant size limits do not apply.</p>

	<b>What are the outcome measures expected as a result of the method of distribution?</b>	The expected outcome measures that will be achieved from DSHA’s method of distribution will assist qualified homeless providers to accommodate the homeless needs of Kent and Sussex counties, provide funding for street outreach activities, rapid re-housing activities and provide emergency rental and financial assistance funding for homeless prevention activities. All recipients must report unduplicated counts of the number of homeless individuals and families assisted in the Community Homeless Management Information System (CMIS). This will continue to be required as part of the application process.
3	<b>State Program Name:</b>	HOME Program
	<b>Funding Sources:</b>	HOME
	<b>Describe the state program addressed by the Method of Distribution.</b>	<p>The distribution of annually allocated HOME Program funds will be directly administered by DSHA through the application, approval, draw, construction, and monitoring processes in place for the state's Housing Development Fund (HDF) and Low-Income Housing Tax Credit (LIHTC) programs. DSHA may also utilize HOME Program funding to provide direct down payment assistance to eligible low-income homebuyers.</p> <p>When sufficient HOME funds are available, subgrants may be made to Kent and Sussex Counties to allow HOME funds to be utilized for single- family homeowner rehabilitation through the state’s CDBG application and approval process. The counties may, via contract, administer homeowner rehabilitation projects. Any in-house application not previously approved for funding and all other applications received for the HDF and LIHTC programs may be reviewed for funding under the HOME Program. HOME funds will also be made available to eligible non- profits that are designated as Community Housing Development Organizations (CHDOs) under the Delaware HOME Program.</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>Applications for HOME Program funds for multi-family developments shall be made through a competitive process including both threshold criteria as well as scoring categories following the application and approval process in place for the HDF (Housing Development Fund) and/or LIHTC (Low-Income Housing Tax Credit) programs. The priority of the HOME funds is: to provide persons at or below 60% of Area Median Income for affordable rental housing; to provide gap financing for affordable rental housing; to construct building that provide accessibility following Universal Design, federal Fair Housing, ADA and Section 504 requirements; and to develop projects that emphasizes high energy efficiency and sustainability as well as the long-term feasibility of the proposed rental project.</p>
<p><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></p>	<p>All materials are on DSHA's website at <a href="http://www.destatehousing.com">www.destatehousing.com</a></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>N/A</p>

<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>N/A</p>
<p><b>Describe how resources will be allocated among funding categories.</b></p>	<p>Funding categories for the HOME program will follow DSHA’s QAP and/or the HDF application process. This includes funding for New Construction, Acquisition/Rehabilitation, Rental and Homeownership. Upon application submission and if projects pass the required thresholds, they will be scored and ranked. In FY2024, it is anticipated that \$3,000,000 will be allocated to the State of Delaware, of which 15% is reserved for use by CHDOs for furthering affordable housing. CHDO operating expenses up to the maximum allowable under the HUD regulations may also be considered for funding under the HOME program. Ten percent of Delaware’s HOME allocation, including program income may be used for administrative costs.</p>
<p><b>Describe threshold factors and grant size limits.</b></p>	<p>N/A</p>

	<b>What are the outcome measures expected as a result of the method of distribution?</b>	HOME funding, combined with the LIHTC Program or the HDF Program, will create additional rental housing units throughout the state. HOME funds, when used in conjunction with the HDF or LIHTC programs, will serve low-income households at or below 60% of the Area Median Income and the resulting units will remain affordable to low-income persons for at least 20 years.
4	<b>State Program Name:</b>	HOPWA
	<b>Funding Sources:</b>	HOPWA
	<b>Describe the state program addressed by the Method of Distribution.</b>	Through DSHA, HOPWA funds will be utilized to provide rental assistance to low-income people living with HIV/AIDS and their families in Kent and Sussex Counties, through a rental assistance voucher program in accordance with 24 CFR 574.300(a) & (b). The goal of this program is to address the extensive HIV/AIDS housing gap by providing long-term housing opportunities, while using those supportive services already funded by the Ryan White CARE Act, Part B which include but are not limited to: medical case management, medical care and medications, dental and eye care, transportation, food services, and counseling.
<b>Describe all of the criteria that will be used to select applications and the relative importance of these criteria.</b>	Delaware HIV Consortium Inc., as the project sponsor, will receive referrals to the program by community-based HIV/AIDS case managers.	

<p><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></p>	<p>N/A</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>N/A</p>
<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>DSHA has elected to select Delaware HIV Consortium (DHC) as the project sponsor without undertaking a competitive bid process in accordance with Title 24 CFR 574.3. DSHA will therefore, award its funding under the HOPWA grant to the Delaware HIV Consortium, the only statewide nonprofit agency that provides a tenant-based rental assistance program in Kent and Sussex Counties.</p>
<p><b>Describe how resources will be allocated among funding categories.</b></p>	<p>The State of Delaware anticipates receiving \$410,445 in HOPWA formula funds. Delaware HIV Consortium (DHC), as the project sponsor, will receive referrals to the program by community-based HIV/AIDS case managers. Categories available for funding include Tenant-Based Rental Assistance, Permanent Housing Placement, Short-Term Housing Assistance, Emergency Housing, Supportive Services and Project Sponsor Administration Costs. DSHA allocates a majority of funding towards the Tenant-Based Rental Assistance category</p>

	<p><b>Describe threshold factors and grant size limits.</b></p>	<p>Delaware HIV Consortium Inc., as the project sponsor, will provide a written application to DSHA to ensure that DSHA’s HOPWA thresholds are met. These factors include a Non-Discrimination Policy, Drug and Alcohol-Free Facilities, Conflict of Interest Policy, Lead-Based Paint Requirements, and Confidentiality requirement. Grant size limits do not apply.</p>
	<p><b>What are the outcome measures expected as a result of the method of distribution?</b></p>	<p>Delaware HIV Consortium Inc. operates Delaware’s largest HOPWA- funded program and is currently operating a tenant-based rental assistance program in Kent and Sussex Counties. DHC provides rental assistance to low-income people and their families through a rental assistance voucher program in accordance with 24 CFR 574.300(a) &amp; (b). The goal of this program is to address the extensive HIV/AIDS housing gap by providing long-term housing opportunities, while utilizing those supportive services already funded by the Ryan White CARE Act, Part B which include but are not limited to, medical case management, medical care and medications, dental and eye care, transportation, food services, and counseling. DHC anticipates assisting 35 families with Tenant-Based Rental Assistance in FY2024.</p>
<p>5</p>	<p><b>State Program Name:</b></p>	<p>National Housing Trust Fund</p>
	<p><b>Funding Sources:</b></p>	<p>HTF</p>
	<p><b>Describe the state program addressed by the Method of Distribution.</b></p>	<p>Funds will be awarded to locally driven projects that address the criteria outlined in the allocation plan, as well as the priority housing needs as identified in Delaware’s Consolidated Plan. Distribution will be made consistent with DSHA’s other affordable housing programs, including Community Development Block Grant (CDBG) program, State Housing Development Fund (HDF), HOME Investment Partnership Program (HOME), and the Low-Income Housing Tax Credit (LIHTC) program. The distribution of annually allocated NHTF funds will be directly administered by DSHA through the application, approval, draw, construction, and monitoring processes in place for the State’s HDF and LIHTC programs.</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>Eligibility to apply for NHTF will be no more restrictive than required by NHTF regulations. Eligible applicants/recipients of NHTF funds may include nonprofit and for-profit developers and public housing agencies.</p> <p>Applicants will be assessed on experience and capacity and any other criteria as applied by DSHA, which may include the following:</p> <ul style="list-style-type: none"> <li>• Applicants must make acceptable assurances to DSHA that they will comply with the requirements of the NHTF program during the entire period that begins upon selection of the applicant to receive NHTF funds and ending upon the conclusion of all NHTF-funded activities.</li> <li>• Applicants must demonstrate their ability and financial capacity to undertake, comply, and manage the eligible activity.</li> <li>• Applicants must demonstrate their familiarity with the requirements of other federal, state, or local housing programs that may be used in conjunction with NHTF funds to ensure compliance with all applicable requirements and regulations of such programs.</li> <li>• Applicants must demonstrate their experience and capacity to conduct an eligible NHTF activity as evidenced by the ability to own, construct or rehabilitate, and manage and operate affordable multifamily rental housing development.</li> <li>• Applicants must demonstrate their ability to enter a commitment for NHTF funds and undertake eligible activities in a timely manner.</li> </ul> <p><b>Priorities</b></p> <p>Applicants will be assessed on the merits of the application meeting the priority housing needs established by the State.</p> <p>Any proposed use of NHTF to further affordable housing activities for the economically disadvantaged and special population groups must be consistent with Delaware’s Consolidated Plan.</p>
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	<p>As noted in the Consolidated Plan for 2020-2024, section SP-25 Priority Needs, affordable rental housing is Delaware’s first priority need. The Delaware Housing Needs Assessment and HUD data identify a critical need to develop new affordable rental housing, preserve existing affordable rental housing, and extend affordability restrictions. The Delaware Housing Needs Assessment identified affordable rental housing as a critical need for Extremely Low and Low-Income populations throughout the state. Section SP-25 Priority Needs of the Consolidated Plan also cites Permanent Supportive Housing as a high priority need in Delaware. Additional Supportive Housing is needed for persons with Disabilities, Persons with Alcohol or Other Addictions, and Persons with HIV/AIDS and their families.</p> <p>DSHA has also identified geographic areas for targeting different types of housing investments. As the NHTF will be used for rental housing, these maps as they apply to rental housing will apply to the NHTF. The new construction and rehabilitation of affordable rental housing is incentivized in Areas of Opportunity, neutral in Stable areas, and further concentration of subsidized rental housing is not encouraged in distressed areas.</p>
<p><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></p>	<p>n/a</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>n/a</p>

<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>n/a</p>
<p><b>Describe how resources will be allocated among funding categories.</b></p>	<ol style="list-style-type: none"> <li>1. DSHA will reserve a minimum of 20% of Delaware’s 2024 NHTF allocation of \$3,000,095 for permanent supportive housing projects for chronically homeless persons with disabilities. Funding will be awarded through a request for proposal (RFP) process. If there are insufficient applicants or applicants that do not meet DSHA’s underwriting standards, DSHA NHTF funds will be directed to other NHTF eligible multifamily projects to create additional extremely low-income households. For 2024, the permanent supportive housing set-aside amount will be \$600,019.</li> <li>2. DSHA will allocate the remainder of its 2024 NHTF funds to affordable rental, multi-family projects in coordination with the HDF and LIHTC programs. HDF and NHTF may be awarded to permanent housing for special populations. For 2024, the amount available to multi-family projects will be \$2,400,076. If DSHA receives no applications for permanent supportive housing, DSHA will allocate all HTF funds to multi-family projects with units for extremely low-income households. If no applications are received for preservation without subsidy, DSHA may allocate all HTF funds to subsidized preservation projects.</li> </ol>

<p><b>Describe threshold factors and grant size limits.</b></p>	<p>The maximum per-unit subsidy limits for NHTF will be set at the Section 234 Basic Mortgage Limits established by HUD and also utilized under the HOME Program.</p> <p>Effective 01/01/2024, the following limits apply:</p> <p>0 Bedroom - \$181,488</p> <p>1 Bedroom - \$208,049</p> <p>2 Bedroom - \$252,994</p> <p>3 Bedroom - \$327,293</p> <p>4 Bedroom - \$359,263</p>
<p><b>What are the outcome measures expected as a result of the method of distribution?</b></p>	<p>This method of distribution will support Delaware’s Consolidated Plan goals to create additional affordable housing units. It is estimated that NHTF funds will assist approximately 1-2 supportive housing projects (approximately 10 units); approximately 1-2 LIHTC or HDF multifamily projects (approximately 20 units).</p>

**Table 36 - Distribution Methods by State Program**

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

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

No

**Available Grant Amounts**

N/A

**Acceptance process of applications**

N/A

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

**Will the state allow units of general local government to carry out community revitalization strategies? No**

**State’s Process and Criteria for approving local government revitalization strategies**

The State does not intend to allow units of general local government to carry out community revitalization strategies using guaranteed loan funds as described in 24 CFR part 570, subpart L.

## 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

In 2016, DSHA updated their Balanced Housing Opportunity maps using Market Valuation Analysis data from the *Delaware Housing Needs Assessment 2015 – 2020*, and new data from HUD identifying Racially/Ethnically Concentrated Areas of Poverty (R/ECAPS) and indicators of strong school proficiency. DSHA used these interactive maps to better understand the neighborhoods in Delaware and identify appropriate strategies to ensure equitable development.

- **Areas of Opportunity** are strong, high value markets, and offer economic opportunity, high performing schools, and supportive infrastructure. However, these same areas contain little or no affordable housing. New construction and preservation of affordable housing are prioritized and encouraged in these areas.
- **Stable Areas** are middle market areas where a balance of market-rate and subsidized housing is supported.
- **Distressed Areas** are highly distressed neighborhoods suffering from blight and concentrated poverty where strategies focus on stabilizing neighborhoods through increased homeownership, investment in existing homes and commercial areas, and people-based intervention strategies.

The current map, updated in 2019, is found on DSHA’s website at:  
<http://www.destatehousing.com/FormsAndInformation/datastats.php>.

Working with other jurisdictions, DSHA contracted with Reinvestment Fund to update the Market Valuation Analysis and updated the Balanced Housing Opportunity maps. An update to the overall housing needs for the State of Delaware was conducted in 2023 to provide current data on housing costs, affordability, and projected housing needs.

### Geographic Distribution

Target Area	Percentage of Funds
Delaware Non-Entitlement Areas	100
Delaware State	100

Table 37 - Geographic Distribution

### Rationale for the priorities for allocating investments geographically

100% of CDBG, ESG, and HOPWA will be used in non-entitlement areas. 100% of HOME funds will be used state-wide but primarily in non-entitlement areas. 100% of our federal and state reserves described in this plan will be used state-wide. 100% of HTF will be used state-wide.

Low Income Housing Tax Credit strongly incentivizes applications creating or preserving affordable

rental housing in Areas of Opportunity with up to 15 points awarded in the 2024 QAP.

HOME funds are used to fund gaps in LIHTC projects and thereby allocated to support the geographic objectives of LIHTC program.

State Housing Development Fund (HDF) – While it supports projects and activities state-wide, the HDF does allocate funds geographically as follows:

- Like HOME, HDF is used to fund gaps in LIHTC projects when necessary and thereby allocated to support the geographic objectives of the LIHTC program.
- HDF Homeownership Production Program prioritizes homeownership in Distressed Areas. Also, the amount of funding available per unit located in Distressed Areas is increased from \$35,000 to \$50,000.
- HDF Loans (non-LIHTC) ranks applications according to criteria. Rental applications located in Areas of Opportunity receive priority consideration.

Voucher Payment Standards have been increased in ZIP codes across Delaware that contain mostly Areas of Opportunity to help families with vouchers find housing in areas where there is less rental housing, but often higher rents. This applies to DSHA's Housing Choice Voucher program (HCV), Family Unification (FU) program, and State Rental Assistance Program (SRAP).

## 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	0
Non-Homeless	594
Special-Needs	0
Total	594

**Table 38 - One Year Goals for Affordable Housing by Support Requirement**

<b>One Year Goals for the Number of Households Supported Through</b>	
Rental Assistance	250
The Production of New Units	112
Rehab of Existing Units	232
Acquisition of Existing Units	0
Total	594

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

### **Introduction:**

As the public housing authority for Kent and Sussex Counties (excluding the City of Dover), DSHA owns and manages 290 units of public housing and 206 Rental Assistance Demonstration (RAD) LIHTC units at ten sites and administers 917 Housing Choice Vouchers (HCV) and 875 rental assistance vouchers through the State Rental Assistance Program (SRAP). A five-year physical needs assessment of the public housing sites and plans for capital expenditures are included in DSHA's annual Moving to Work (MTW) Action Plan. DSHA has a goal of converting 54 public housing sites to RAD by 2026.

Improvements and major maintenance are planned on a five-year basis, developed by considering the physical needs assessment, high-priority needs, and need for efficiency and cost-effectiveness, as well as input from residents and the public.

Cutbacks in public housing operating funds continue to be a major challenge for PHAs in Delaware, including DSHA. MTW status has allowed DSHA to use funds from Housing Choice Voucher Program Reserves to invest in capital improvement projects at its public housing sites such as replacement of heating and addition of air-conditioning systems. Both the MTW Annual Plan and Annual Reports are available on DSHA's website.

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

Public housing continues to be eligible for the Delaware LIHTC program, and the LIHTC and Housing Development Fund have provided financing for the redevelopment of several public housing sites in recent years in Wilmington and Newark.

### **DSHA Rental Assistance Demonstration (RAD) Project**

DSHA is in the process of converting all the authority's Public Housing developments to the Rental Assistance Demonstration (RAD) Program over the next five (5) years. Liberty Court was the first property converted to RAD in 2017 and was demolished and rebuilt. Construction activities ended in December 2018 and is now leased using project-based vouchers. DSHA also converted McLane Gardens, Peach Circle and Holly Square to RAD in August 2020, and renovation work is anticipated to be completed in approximately 18-19 months. Additional conversions to the RAD program in the next four years includes: Mifflin Meadows (2021-22), Clarks Corner & Laverty Lane (2022-23), Burton Village (2023-24 and Hickory Tree (2024-25). The current goal is to convert 54 public housing units to RAD by 2026.

### **Actions to encourage public housing residents to become more involved in management and participate in homeownership**

As a Moving to Work (MTW) agency, DSHA conducts an annual planning and reporting process on the program and its outcomes. This process includes citizen participation, including public hearings, which

are held at DSHA public housing sites, and release of draft plans and reports for public comment. DSHA actively seeks out resident participation in these processes, in day-to-day issues at its sites, and in the planning and delivery of community programs.

Case management to assist households to move to unassisted housing is a central part of DSHA's MTW program. This includes assessment of homeownership opportunities and referral to homeownership counseling when appropriate and when the household has identified homeownership as a goal.

Additionally, DSHA establishes escrow accounts for MTW households who are increasing their income by increased employment or education. As a household's tenant rent contribution increases, the difference is put into an escrow account and the household can access these savings when they exit the program. Since its inception in 1999, three hundred and fourteen (314) Delaware MTW households have purchased homes and 718 have either begun paying the full rent at their current unit or moved to another unit and paid the full rent. DSHA has awarded 160 educational scholarships to MTW participants.

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

Not applicable.

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

### Introduction

Annually, DSHA assists in funding the Housing Alliance Delaware (HAD), formerly the Homeless Planning Council of Delaware for its support of the CoC, HUD required CoC activities, and Delaware Community Management Information System (DE-CMIS – Delaware’s HMIS) administration. The Homeless Planning Council (HPC) has coordinated HUD applications for homeless funding for several years and in 2017 merged with another local housing agency to form Housing Alliance Delaware (HAD). This newly formed agency continues to be the lead applicant for the DE Continuum of Care (CoC), and lead agency for the CoC’s HMIS and coordinated entry systems.

In 2015, the Delaware CoC was established, encompassing stakeholders from throughout Delaware. This group, which is required by HUD for communities that receive HUD Continuum of Care funding, has a memorandum of agreement with Housing Alliance Delaware to:

- Manage the Homeless Management Information System,
- Manage the statewide coordinated entry system, and
- Coordinate the Delaware application for Continuum of Care Funding, including providing leadership on various activities required by HUD such as mandated policies and the Point-in-Time Count.

Delaware’s ESG jurisdictions have worked together and with the HAD to identify common goals, to:

- Reduce the length of time that persons are homeless Baseline: Average Length of time in emergency shelters or transitional housing for people **Benchmark:** 50 days or less
- Reduce the returns to homelessness after permanently housed Baseline after 1 year of being permanently housed: Singles in Shelter – 11%; Singles in Transitional Housing – 44%; Families in Shelter – 19%; Families in Transitional Housing – 0% **Benchmark:** No more than 10% return to homelessness within 2 years after permanently housed with rapid re-housing assistance
- Decrease the number of persons homeless Baseline: 128 families in FY2012 **Benchmarks** for Families: 100 homeless families in FY2023.

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

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

Continuum of Care and other homeless service providers work closely with community agencies that encounter unsheltered homeless persons. Most service providers coordinate with our Coordinated Assessment managed by HAD. People who are homeless can call HAD, visit a state service center or call

211 to be connected to Coordinated Assessment where their shelter needs will be assessed, and they will be referred to a site that has available space and best meets their needs. Through coordinated assessment people are referred to shelter beds, rapid rehousing, and permanent supportive housing.

Additionally, Delaware's network of Code Purple shelters has grown substantially in the past few years and awareness of Code Purple has grown significantly. Code Purple shelters often encounter persons who would otherwise be unsheltered. These shelters are purposefully low-barrier/low-demand and providers seek to build relationships with those seeking shelter in order to make referrals and connections to other services. Several street outreach programs and day centers also operate in Delaware, specifically targeting unsheltered persons.

### **Addressing the emergency shelter and transitional housing needs of homeless persons**

Delaware's network of emergency shelters and transitional housing almost universally participates in the state's Community Management Information system (CMIS). The state's CoC also launched a coordinated assessment system in 2014 and makes ongoing improvements to this system to optimize efficiency, outcomes, and quality of care for consumers.

Delaware's homeless system, providers and funders have focused on building a greater inventory of permanent housing resources – permanent supportive housing and rapid rehousing. In an effort to use shelter beds more effectively, Delaware has developed scattered-site permanent supportive housing, tenant-based rental assistance for special populations, and street outreach, prevention and rapid rehousing activities. Needs analysis suggest that Delaware has a sufficient stock of emergency shelter and transitional housing beds if people are able to move through shelters and into permanent housing in a short period of time. However, the lack of affordable housing and housing subsidies makes moving quickly through the shelter system impossible for many households. Until beds and subsidy can be expanded additional shelter beds are being created in Kent and Sussex Counties by those involved with Code Purple and other grass roots organizations. DSHA plans to continue to fund prevention programs using ESG and has expanded its state funding for rapid rehousing. DSHA is also working to create more affordable housing for extremely low-income households with high barriers to housing, using National Housing Trust Fund money along with HOME and our state Housing Development Fund (HDF). The HDF also is available to Emergency Shelter non-profits interested in building new shelters, acquiring and renovating properties to serve the homeless, or rehabilitating existing emergency shelters.

In addition to shelter-based programs, there are a significant number of non-shelter service providers that target their services to homeless persons or families. These non-shelter services include day centers, substance use treatment and counseling, mental health counseling, HIV/AIDS testing and treatment, food and clothing, case management, job training and placement, and medical care.

At the start of the COVID-19 pandemic, Delaware invested in expanded street outreach and significant expansion of non-congregate shelter for homeless households in hotels and motels. DSHA, along with the other HUD-funded jurisdictions in Delaware, was able to support this with CDBG-CV funding. In late

2020, New Castle County purchased and reopened as a shelter a large hotel in the county, now serving hundreds of individuals.

**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**

DSHA staff participate on the CoC board and continues to work with the board to improve systems and performances within the homeless community. DSHA plans to work with the CoC and other providers and funders in the upcoming year to foster systems improvements that will allow Delaware to: see a reduction in the period of time that individuals and families experience homelessness; create access to affordable housing units; and stabilize people so that they do not become homeless again.

In 2018, Delaware launched the new Home4Good funding program making available \$1.2 million in funding for homelessness activities and services. This is funded by a three-year commitment from the FHLBank Pittsburgh and leveraged by state Housing Development Fund (HDF) funding. Home4Good funding is targeted to homelessness prevention, rapid rehousing, diversion, and innovative new projects to build capacity. DSHA and the FHLBank worked together and with the CoC to structure these funding priorities around the priority activities in the Delaware CoC Action Plan to End Homelessness. During the pandemic, Home4Good funding was directed to emergency rental assistance prior to federal resources were announced, and existing grant agreements extended. Home4Good continues and will continue to support programs addressing homelessness. In FY2024, \$1.45 million will be available through the Home4Good grant program.

In addition to our involvement in the Continuum of Care and financial support of the CoC lead agency to carry out CoC support and planning, DSHA funding will specifically be available for or directly support through DSHA-operated programs:

- Rapid rehousing (ESG and Home4Good)
- Homelessness prevention and diversion (ESG and Home4Good)
- Capacity-building and new programs in the CoC (for example, legal services and associated prevention funding) (Home4Good)
- Tenant-based rental assistance for special populations, including people experiencing chronic homelessness, people with disabilities, youth exiting foster care, and family reunification (State Rental Assistance Program, VASH, Family Unification Program, Section 811 Mainstream Vouchers, Section 811 PRA Demo and LIHTC Set-Aside Units)
- Development and rehabilitation of emergency shelters, permanent supportive housing and

- transitional housing facilities (Housing Development Fund, Housing Trust Fund - PSH only)
- Emergency Rental Assistance (ERA) funding for households experiencing homelessness, with supportive services provided by the rapid rehousing agencies.

**Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs**

The Delaware State Rental Assistance Program (SRAP) is designed to serve low-income households who are eligible to receive continuing supportive services and who require affordable housing to live independently in the community. SRAP was first launched in 2011, and features rental subsidies administered by the Delaware State Housing Authority (DSHA) for populations referred by other agencies through agreements with DSHA. Once a household is housed through SRAP, case managers from DHSS, DSCYF, or an approved service provider continue to ensure that households have access to supportive services, as needed. For more on the SRAP program, please see AP-85 Other Actions.

DSHA is closely involved with the Delaware Correctional Reentry Commission, and co-chairs its Housing Subcommittee. With this subcommittee, DSHA and other agencies (Department of Corrections, Department of Health and Social Services, Housing Alliance Delaware, the Delaware Public Housing Authorities, and others) are working to improve policies and expand housing assistance capacity to improve housing outcomes for reentrants.

DSHA is also administering federal Emergency Rental Assistance (ERA) funding in Delaware and has invested in significant expansion of legal services for eviction prevention as well as Housing Stability Services targeted to help the most vulnerable households and those with other barriers to access ERA assistance. Through a network of 15 community partners throughout the state, households can get assistance submitting applications and with housing navigation and other needs. Delaware's ERA program has disbursed over \$70 million in emergency rental and utility assistance which has had a dramatic impact on reducing evictions in the state.

**AP-70 HOPWA Goals – 91.320(k)(4)**

<b>One-year goals for the number of households to be provided housing through the use of HOPWA for:</b>	
Short-term rent, mortgage, and utility assistance to prevent homelessness of the individual or family	0
Tenant-based rental assistance	30
Units provided in permanent housing facilities developed, leased, or operated with HOPWA funds	0
Units provided in transitional short-term housing facilities developed, leased, or operated with HOPWA funds	0
<b>Total</b>	<b>30</b>

## **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**

In 2023, DSHA conducted a comprehensive statewide housing needs assessment that included a review of barriers to affordable housing. The barriers identified in the HNA included:

- High downpayment requirements associated with mortgage financing due to a rise in home values;
- Lack of or a poor credit history among low income mortgage loan applicants. This is also a barrier for renters who have experienced household violence;
- Many renters who desire to become homeowners are unsure about how to start the process or become financially ready to purchase a home;
- For large families who rent, lack of appropriately-sized rental units;
- Lack of first jobs that pay a wage enabling youth transitioning into independent living (especially from foster care) to afford rental housing;
- Lack of collaboration among the state’s many housing authorities;
- Funding for more affordable housing across the housing spectrum, from permanently supportive housing to “missing middle” housing products to mixed-income rental complexes to starter homes; and
- Local zoning codes that limit or prevent development of townhomes and rowhomes—and resistance to density in general.

Addressing many of these barriers is a core function of DSHA. DSHA offers mortgage lending programs to low and moderate income renters wanting to become owners; supports homeownership counseling; incentivizes development of affordable rental housing for all types of households and families; and has taken a leadership role on improving housing authority coordination and studying zoning barriers. These actions will continue throughout the program year.

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

### **Introduction:**

DSHA continues focusing on addressing obstacles to meet underserved needs, including lingering impacts of Covid-19 and housing affordability challenges.

### **Actions planned to address obstacles to meeting underserved needs**

Securing financing is an obstacle for low-income families who desire to become homeowners and build wealth. DSHA's Kiss Your Landlord Goodbye Program offers a 30-year, fixed-rate loan with interest rates at or below the standard market rate for first-time buyers and is income-restricted. The program offers various forms of assistance depending on applicant needs, including down payment assistance and options for forgivable loans. So far, the program has helped 749 Delaware families access homeownership. Several stakeholders complimented the state on the Kiss your Landlord Goodbye program.

DSHA administers the rental assistance portion of the program by utilizing its expertise associated with the Housing Choice Voucher program. Case managers from DHSS, DSCYF, and approved community service providers leverage existing funds (such as Medicaid) to provide medical, behavioral health, personal care, or case management services to participants during their tenancy, as desired.

Additionally, the Division of Substance Abuse and Mental Health (DSAMH) has recognized SRAP as a cost-effective and efficient means of meeting its obligations to create additional units of supportive but independent housing in the community as part of its Settlement Agreement with the U.S. Department of Justice. DSAMH has directed additional funds to the SRAP program specifically to serve DSAMH clients, increasing the total number of households that can be served through the program.

### ***Delaware Section 811 PRA Demonstration Program Award***

In the summer of 2012, DSHA and the Delaware Department of Health and Social Services (DHSS) partnered to propose a Section 811 PRA Demo program in Delaware to create project-based rental assistance for people with disabilities in integrated settings with supportive services. Delaware's Section 811 PRA Demo program has further developed this established partnership by expanding the supportive housing system created with SRAP to include a stock of project-based units.

In 2013, Delaware was awarded a Section 811 PRA Demo grant of \$5.1 million, estimated to create and support 150 – 170 units of project-based rental assistance over 5 years. There are now over 100 units with Rental Assistance Contracts (RACs) with DSHA and over 50 units leased by eligible tenants. When units become available, property managers notify DSHA through an

online system. Prospective eligible tenants are then referred and apply directly to the site.

### ***Other Special Vouchers***

DSHA applied for and was awarded 50 new Delaware Section 811 Mainstream vouchers. DSHA is working with state and local partners to get the vouchers awarded to at-risk ELI homeless persons with disabilities. Through the American Rescue Plan, DSHA was awarded 40 Emergency Housing Vouchers (EHVs) and is working with the Continuum of Care and other PHAs to implement these new vouchers in Delaware.

### ***Homeownership Rehab and Emergency Repair***

As described in other areas of the plan and reflected in the Resource Allocation tables, DSHA also allocates both state and federal (CDBG and HOME) resources to rehabilitation assistance for homeowners. This encompasses both major repairs through CDBG and HOME and emergency repairs funded through state resources. All these programs allow accessibility modifications as an eligible use and indeed this is a high need and frequent use. Major accessibility modifications are more often through the major repair program, while emergency repair programs often manage smaller accessibility modifications, especially those needed urgently.

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

As described in other areas of the plan and reflected in the Resource Allocation tables, DSHA allocates both state and federal resources to maintaining affordable housing. Activities to maintain affordable owner-occupied housing include:

- Funding through the Housing Development Fund (HDF) for acquisition and rehabilitation of homes, providing emergency and larger repairs for existing homeowners;
- Grants for major rehabilitation via CDBG and HOME for existing homeowners in targeted areas;
- Assistance with emergency repairs for existing homeowners via HDF state funds;
- All these programs allow accessibility modifications as an eligible use. Major accessibility modifications are more often accomplished through the major repair program, while emergency repair programs often manage smaller accessibility modifications, especially those needed urgently; and
- Support for foreclosure prevention counseling and foreclosure prevention loans to homeowners in default.

Activities and programs to maintain affordable rental housing include:

- Set-aside in the LIHTC Qualified Allocation Plan (QAP) for rehabilitation and preservation of existing affordable rental housing, as well as the opportunity for existing unassisted housing to

be converted to LIHTC-assisted housing in the new construction set aside;

- Loans available via HOME, NHTF and the HDF for rehabilitation and preservation of existing affordable housing;
- Loans and grants available through the HDF to make energy efficiency and accessibility improvements in nonprofit-owned affordable rental housing or emergency shelters, transitional housing, or permanent supportive housing facilities; and

NHTF - as outlined in the attached NHTF FY2024 Allocation Plan, DSHA will utilize its Housing Trust Fund allocation to increase and preserve the supply of decent, safe, and sanitary affordable housing for extremely low-income (ELI) and very low-income households (VLI), including homeless families.

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

The Delaware Division of Public Health's (DPH) Lead Poisoning Prevention Program does not currently manage a HUD Lead Hazard Control Grant. The last HUD grant expired in December 2017 and resulted in 172 homes in Kent and Sussex Counties being repaired of lead paint hazards. There are no plans for the Delaware Division of Public Health to apply for another HUD Grant due to ongoing, severe staffing shortages in the Lead Poisoning Prevention Program.

These HUD Lead Hazard Control Grants are best managed by municipalities rather than the Lead Poisoning Prevention Program.

DPH will continue to reach out to municipalities in Delaware to encourage a municipality to apply for HUD Lead Hazard Control Grant funding.

The State of Delaware CDBG subgrantees use most of their CDBG funds each year for housing rehabilitation, and the Delaware State Housing Authority supplements those funds by allocating CDBG subgrantees HOME funds for additional housing rehabilitations. These two sources of rehab funding, combined, are used to rehabilitate approximately 150 units of substandard housing each year. These HUD-funded housing rehabilitations must follow State, HUD, and EPA regulations for using lead-safe work practices, and for reducing lead-based hazards. County rehab specialists, and rehab contractors, must be trained and certified in how to reduce lead-based hazards.

### **Actions planned to reduce the number of poverty-level families**

DSHA's primary mechanism for addressing the needs of poverty-level families is developing deeply subsidized rental units.

Through its role as a housing authority, DSHA administers the MTW Program, which requires residents to work or be in school in order to receive a housing subsidy. The goal is to establish positive work and budget habits over the time in the program, which will serve the family as they transition to unsubsidized housing. DSHA believes that MTW plays an important role in breaking the cycle of poverty

by providing case management services and resources that help families succeed.

DSHA has been an active participant with The Continuum of Care and Housing Alliance Delaware (HAD) and has supported its facilitation, research and advancement of Delaware's homelessness systems. HAD coordinates the DE Continuum of Care applications, manages the DE-HMIS and works to coordinate services and programs throughout the state to better meet the needs of homeless people and families, and improve the performance of the state's homeless assistance system.

DSHA's Housing Development Fund (HDF) regularly provides grants to anti-poverty activities, including security deposit loan programs to assist prospective renters to secure an apartment and build their credit, thereby preventing homelessness. DSHA's Qualified Allocation Plan (QAP) includes incentives for applicants that include appropriate social services for residents in their project plans. These services often include programs such as financial literacy, budgeting, childcare, GED and other educational opportunities, and homeownership counseling.

### **Actions planned to develop institutional structure**

DSHA will continue to foster collaboration between public and assisted housing providers, local communities, and private and governmental health, mental health, and service agencies to coordinate resources and develop consistent policies to achieve mutually beneficial goals and objectives.

- DSHA will continue to work with a strong network of partners to promote the real-time housing locator DelawareHousingSearch.org. Because of the state-wide support, this service will also be a critical disaster recovery resource for Delaware, further increasing its value as a collective resource.
- DSHA will continue to improve the coordination of efforts across agencies and communities to support strategic neighborhood revitalization, community, and downtown development initiatives such as the Downtown Development Districts and Strong Neighborhoods Housing Fund programs.
- DSHA will continue to maximize the use of the state's growth management framework to encourage local communities to include affordable housing strategies in their planning initiatives and provide technical assistance with these activities.
- Delaware will continue to improve the availability of local and DSHA information online, including housing needs and demographic data, geographic targeting for DSHA programs, and the Delaware affordable rental housing preservation inventory. The availability of consistent data supports improved coordination and planning to address affordable housing needs.

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

Over the next year, DSHA will continue its work with a wide array of other state agencies, private and faith-based housing and service providers, and housing advocates to further the priorities and goals of is

Action Plan. These will include, but are not limited to, the following:

- City of Wilmington;
- City of Dover;
- Council of State Community Development Agencies (COSDA);
- Delaware Commission of Veterans Affairs;
- Delaware Continuum of Care;
- Delaware Department of Health and Social Services;
- Delaware Department of Justice (DOJ);
- Department of Services for Children, Youth and Their Families;
- Delaware Department of Education and School Districts;
- Delaware Division of Human Relations;
- Delaware Division of Public Health (DPH);
- Delaware Division of Small Business Office;
- Department of Labor;
- Department of Natural Resources and Environmental Control;
- Department of Transportation;
- First State Community Action Agency;
- HealthBehavioral Health Planning and Advisory Council;
- Habitat for Humanity;
- Housing Alliance Delaware;
- Housing Task Force Committee;
- HUD-approved housing counseling agencies;
- Kent, Sussex and New Castle counties;
- Delaware chapter of National Association of Housing and Redevelopment Officials (NAHRO);
- National Council of State Housing Agencies (NCSHA);
- Nonprofit housing development corporations;
- Office of State Planning Coordination;
- Other public housing authorities in Delaware;
- State Historic Preservation Office;
- Strong Communities;
- Work Force Investment Board; and
- University of Delaware.

DSHA's partnerships with the Departments of Health and Social Services (DHSS) and Services for Children, Youth and their Families (DSCYF) on the State Rental Assistance Program and Section 811 PRA Demo program and with the Delaware Department of Justice on foreclosure prevention and recovery via collaborative use of Delaware's National Mortgage Settlement funds are representative of our cooperative approach to addressing challenging problems.

## Program Specific Requirements

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

#### Introduction:

#### 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	50,000
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	50,000

#### Other CDBG Requirements

1. The amount of urgent need activities	0
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**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:

Not applicable. No other forms of investment beyond those identified in Section 92.205 are planned

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:

The prorated amount of HOME Program funds in the form of second mortgage loans (or other loan positions as approved by DSHA) used for down payments and closing costs are subject to recapture when the initially assisted homebuyer sells, rents or refinances the HOME-assisted property within the recapture period set forth as shown below:

Amount of HOME Funds Recapture Period

Less than \$15,000 - 5 years

\$15,000 to \$40,000 - 10 years

Over \$40,000 - 15 years

HOME mortgage loans shall be forgiven after expiration of the loan recapture period and/or period of affordability. If the HOME-assisted property is sold, rented, or refinanced during the recapture period, the amount of the repayment required shall be prorated by the number of full years the original HOME-assisted owner occupied the property. For example, a HOME-deferred mortgage in the amount of \$20,000 would have a recapture period of 10 years. If the property was sold 3 years and six months after the recapture period started, then 30% (3 full years/10-year recapture period) of the original \$20,000 HOME loan would be forgiven making the repayment amount due \$14,000.

Where the net proceeds (the sales price of the assisted property less loan repayment of DSHA approved superior debt and closing costs) is greater than the prorated balance due under the HOME mortgage loan, the balance of the HOME prorated mortgage loan shall be repaid to DSHA. However, where the net proceeds are less than the HOME mortgage loan, the amount of the net proceeds shall be repaid to DSHA. All repaid HOME mortgage funds shall be used to support other HOME-eligible activities. These recapture provisions shall be included in the note and mortgage evidencing and securing the HOME-funded mortgage loan.

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

Not applicable. DSHA does not provide for acquisition of units with HOME funds.

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

Not applicable. DSHA does not plan to use HOME funds to refinance existing debt.

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

1. Include written standards for providing ESG assistance (may include as attachment)
  1. Using the Centralized Intake System to evaluate individuals and families applying for or receiving rapid re-housing assistance.
  2. Conducting the initial evaluation required, including verifying income to determine eligibility for individuals applying for rapid re-housing assistance.
  3. Developing individualized housing and services plan to obtain or maintain permanent housing.
  4. Developing and coordinating services for individuals and families.
  5. Providing information and referrals to other providers that assists individuals and families to overcome barriers and obtain or maintain permanent housing
  6. Monitoring and evaluating program participant progress.
  7. Conducting re-evaluations of households to assist with achieving and maintaining independent living.
  
2. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

The Coordinated Entry (CE) system in Delaware connects individuals experiencing homelessness to housing resources. It aims to reduce barriers for emergency services, including domestic violence hotlines, drop-in programs, and emergency shelters.

Delaware's statewide Centralized Intake (CI) administered by Housing Alliance Delaware (HAD), program began accepting calls on January 6, 2015. People experiencing homelessness can access housing resources by calling HAD, dialing 211, visiting a State Service Center, or going to a shelter. Staff members at HAD, 211, and State Service Centers refer individuals to the CI team. This team then contacts those who are homeless to identify the best solution for their situation. ESG-funded shelters must accept walk-ins, refer clients to CI for housing assistance, and follow ESG written standards.

They are streamlining the process of placing homeless individuals into available beds and have eliminated the waitlist for emergency shelters. The Continuum of Care (CoC) is working to enhance intake workers' ability to identify the best housing options. This includes ensuring that these options are accessible by appropriately sizing our CoC and training provider staff to utilize HMIS modules for real-time tracking of shelter and transitional bed availability. Although centralized intake has been in operation for some time, it will take many years to fully optimize the system due to the limited affordable housing options available for extremely low-income households. These households often face barriers such as criminal backgrounds, lack of stable employment opportunities, poor landlord references, and/or unfavorable credit histories.

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).

ESG funds are distributed on a competitive basis and proposals are rated based on a weighted score of 100 points with the following criteria;

Program Description (18 points), Organizational / Financial Information (24 points), Related Experience (15 points), Demonstrated Need (14 points), Program Budget/Sources and Uses (13 points), and Program Outcomes (16 points).

Using these criteria, applications are reviewed and rated by a Review Panel comprised of professionals with knowledge and experience in homeless issues and grant management. Applicants may be local governmental entities, nonprofit agencies and faith-based organizations that provide direct services to homeless persons or persons at risk of becoming homeless.

The funds are made available each year through a Notice of Funding Availability, which is emailed to interested parties and published in prominent newspapers statewide. Eligible applicants are units of general local government and private nonprofit organizations located in Kent and Sussex

Counties. Assistance may also be provided to religious organizations if the religious organizations agree to provide all eligible activities under this program in a manner that is free from religious influences in accordance to 24 CFR Part 576.23.

The review panel evaluates and rates all proposals based on the criteria listed above. The panel forwards its recommendations and comments to DSHA's Director. Final funding decisions are made by DSHA Director and at that time DSHA and the state-recipient enter into a grant agreement.

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.

DSHA will contractually require ESG state-recipients to document all consultations with homeless or formerly homeless individuals or families when making policies and decisions regarding any ESG funded activity. DSHA also requires that each non-profit include a homeless or previously homeless person on their Board of Directors.

5. Describe performance standards for evaluating ESG.

Other non-identifying information about program participants. For Domestic Violence Shelters, the state-recipients coordinate their household data directly with DSHA.

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

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

Applications submitted by eligible recipients

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

N/A

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

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

DSHA HTF Allocation Plan includes the eligibility and regulatory changes required under the revised rule. Eligibility requirements including:

- Application Process
- Allocation Process
- Eligible Costs
- Operating Costs Assistance and Reserves
- Subsidy Limits
- Periods of Affordability
- Income Targeting
- Additional Requirements including
- HUD Regulations, Subsidy Layering Review, Underwriting, Site and Neighborhood Standards, Uniform Physical Conditions Standards, Environmental Review, Uniform Relocation Act, Lead Based Paint, Section 3
- Rehab and Property Standards
- Commitment and Expenditure requirements
- Written policies, procedures, systems and DSHA reporting requirements

Financial Oversight, Asset Management and Compliance

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

DSHA has two set-asides within our HTF Allocation Plan. One is for Permanent Supportive Housing of which we have a separate annual Notice of Funding Availability Application Process.

The second Application for HTF is for multi-family projects shall be made through the application and approval process in place for the HDF and/or LIHTC programs. All applications must contain a description of the eligible activities to be conducted with HTF funds as required in 93.200. All applications must also contain certification that housing assisted with HTF funds will comply with HTF requirements.

Upon application review by DSHA staff, a panel consisting of members of DSHA Housing Development Section, Policy and Planning Section, and any other DSHA employees with applicable experience will convene. Members of the Council on Housing will also be invited to participate. The panel will discuss each application received and its preliminary ranking. A consensus of all members present will determine the final ranking of the applications, along with funding level recommendations. Applications recommended for funding will be presented to the Director of DSHA for final approval.

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

Eligibility to apply for HTF will be no more restrictive than required by HTF regulations. Eligible applicants/recipients of HTF funds may include nonprofit and for-profit developers and public housing agencies.

Applicants must meet the HTF Tax Allocation Plan, DSHA, and all requirements set forth in 24 CFR 93.2 to be eligible for funding under the Action Plan. Developments must also meet the property standards set forth in the Tax Credit Allocation Plan and in 24 CFR 93.301.

Applications will be assessed with priority given to the applicants who prove highest proficiency in the following prioritized areas:

**A. Applicant Capacity (Priority Factor: Most Important)**

Applicants will be assessed on experience and capacity and any other criteria as applied by DSHA, which may include the following:

- Applicants must make acceptable assurances to DSHA that they will comply with the requirements of the HTF program during the entire period that begins upon selection of the applicant to receive HTF funds and ending upon the conclusion of all HTF-funded activities.
- Applicants must demonstrate their ability and financial capacity to undertake, comply, and manage the eligible activity.
- Applicants must demonstrate their familiarity with the requirements of other federal, state, or local housing programs that may be used in conjunction with HTF funds to

ensure compliance with all applicable requirements and regulations of such programs.

- Applicants must demonstrate their experience and capacity to conduct an eligible HTF activity as evidenced by the ability to own, construct or rehabilitate, and manage and operate affordable multifamily rental housing development.
- Applicants must demonstrate their ability to enter into a commitment for HTF funds and undertake eligible activities in a timely manner.

#### **B. Priority Housing Needs of the State (Priority Factor: Most Important)**

Applicants will be assessed on the merits of the application meeting the priority housing needs established by the State.

Any proposed use of HTF to further affordable housing activities for the economically disadvantaged and special population groups must be consistent with Delaware Consolidated Plan.

As noted in the Consolidated Plan for 2020-2024, section SP-25 Priority Needs, affordable rental housing is Delaware first priority need. The Delaware HNA and HUD data identify a critical need to develop new affordable rental housing, preserve existing affordable rental housing, and extend affordability restrictions. The HNA identified affordable rental housing as a critical need for Extremely Low- and Low-Income populations throughout the state.

Section SP-25 Priority Needs of the Consolidated Plan also cites Permanent Supportive Housing as a high priority need in Delaware. Additional Supportive Housing is needed for persons with Mental, Physical, and Developmental Disabilities, Persons with Alcohol or Other Addictions, and Persons with HIV/AIDS and their families.

As described under III. Geographic Distribution and Diversity, DSHA has identified geographic areas for targeting different types of housing investments. As the HTF will be used for rental housing, these maps as they apply to rental housing will apply to the HTF. The new construction and rehabilitation of affordable rental housing is incentivized in Areas of Opportunity, neutral in Stable areas, and further concentration of subsidized rental housing is not encouraged in distressed areas.

#### **C. Leveraging (Priority Factor: Somewhat Important)**

Applications will be evaluated on the total sources of permanent financing, percentage of total project costs funded by HTF and DSHA sources, and the use of any other non-state or federal funding sources.

#### **D. Geographic Diversity (Priority Factor: Somewhat Important)**

HTF funds will be available to projects statewide; however, applications will be evaluated for consistency with the State certifications and compliance with the State Strategies for Policies and Spending (see Section III. Geographic Distribution and Diversity for details).

#### **E. Project-Based Rental Assistance (Priority Factor: Least Important)**

Applications will be reviewed for the extent to which the project has federal, state, or local project based rental assistance so that rents are affordable to extremely low-income families. HTF funds will be distributed consistently with DSHA other affordable housing programs and administered with the existing LIHTC and HDF programs.

#### **F. Duration of Affordability Period (Priority Factor: Least Important)**

In accordance with 24 CFR 93.302(d), all rental housing units receiving HTF funds must have an affordability period of not less than thirty (30) years. Applications may receive additional credit for showing financial feasibility of the project to extend beyond the 30-year period.

#### **G. Additional Evaluation Criteria (Priority Factor: Somewhat-Least Important)**

The following items will be taken into consideration by DSHA staff when determining the merits of an application for HTF funds:

1. Demonstrated need for the project.
2. Suitability of the project location.
3. Cost efficiency of the project.
4. Amount of loan per unit serving extremely low and very low-/low-income persons:  
Applications serving extremely low-income families will be given priority to the extent possible to comply with statutory requirements. Please note, for 2019, only applications serving extremely low-income families will be considered. Applications serving very low-income families will be considered only if allowed by statutory requirements. Such determination will be announced prior to any announcement of funding opportunity.
5. Length of payback period.
6. Position of loan and how it is secured/length of repayment.
7. Source(s) of permanent financing (if appropriate).
8. Cash and non-cash equity participation of developer.
9. Evidence that alternate sources of financing have been utilized and/or exhausted.
10. Evidence that housing will be provided in neighborhoods where there is little very low-income housing available.
11. Extent to which the proposal will assist in revitalization of deteriorating neighborhood.

12. Extent to which any current DSHA loans to the applicant or affiliated parties are in good standing.

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

HTF funds will be available to projects statewide; however, applications will be evaluated for consistency with the State certifications and compliance with the State Strategies for Policies and Spending DSHA has identified geographic areas for targeting different types of housing investments. As the HTF will be used for rental housing, these maps as they apply to rental housing will apply to the HTF. The new construction and rehabilitation of affordable rental housing is incentivized in Areas of Opportunity, neutral in Stable areas, and further concentration of subsidized rental housing is not encouraged in distressed areas.

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

Applicants will be assessed on experience and capacity and any other criteria as applied by DSHA, which may include the following:

- Applicants must make acceptable assurances to DSHA that they will comply with the requirements of the HTF program during the entire period that begins upon selection of the applicant to receive HTF funds and ending upon the conclusion of all HTF-funded activities.
- Applicants must demonstrate their ability and financial capacity to undertake, comply, and manage the eligible activity.
- Applicants must demonstrate their familiarity with the requirements of other federal, state, or local housing programs that may be used in conjunction with HTF funds to ensure compliance with all applicable requirements and regulations of such programs.
- Applicants must demonstrate their experience and capacity to conduct an eligible HTF activity as evidenced by the ability to own, construct or rehabilitate, and manage and operate affordable multifamily rental housing development.
- Applicants must demonstrate their ability to enter into a commitment for HTF funds and undertake eligible activities in a timely manner.

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

Applications will be reviewed for the extent to which the project has federal, state, or local project based rental assistance so that rents are affordable to extremely low-income families. HTF funds will be distributed consistently with DSHA other affordable housing programs and administered with the existing LIHTC and HDF programs.

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

In accordance with §93.302(d), all rental housing units receiving HTF funds must have an affordability period of not less than thirty (30) years. Applications may receive additional credit for showing financial feasibility of the project to extend beyond the 30-year period.

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

Applicants will be assessed on the merits of the application meeting the priority housing needs established by the State.

Any proposed use of HTF to further affordable housing activities for the economically disadvantaged and special population groups must be consistent with Delaware Consolidated Plan.

As noted in the Consolidated Plan for 2020-2024, section SP-25 Priority Needs, affordable rental housing is Delaware first priority need. The Delaware HNA and HUD data identify a critical need to develop new affordable rental housing, preserve existing affordable rental housing, and extend affordability restrictions. The HNA identified affordable rental housing as a critical need for Extremely Low and Low-Income populations throughout the state.

i. Describe the grantee's required priority for funding based on the extent to which the application makes use of non-federal funding sources. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Applications will be evaluated on the total sources of permanent financing, percentage of total project costs funded by HTF and DSHA sources, and the use of any other non-state or federal funding sources.

4. Does the grantee's application require the applicant to include a description of the eligible activities to be conducted with HTF funds? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

5. Does the grantee's application require that each eligible recipient certify that housing units assisted with HTF funds will comply with HTF requirements? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

**6. Performance Goals and Benchmarks.** The grantee has met the requirement to provide for performance goals and benchmarks against which the grantee will measure its progress, consistent with the grantee's goals established under 24 CFR 91.315(b)(2), by including HTF in its housing goals in the housing table on the SP-45 Goals and AP-20 Annual Goals and Objectives screens.

Yes

**7. Maximum Per-unit Development Subsidy Amount for Housing Assisted with HTF Funds.** Enter or attach the grantee's maximum per-unit development subsidy limits for housing assisted with HTF funds.

The limits must be adjusted for the number of bedrooms and the geographic location of the project. The limits must also be reasonable and based on actual costs of developing non-luxury housing in the area.

If the grantee will use existing limits developed for other federal programs such as the Low Income Housing Tax Credit (LIHTC) per unit cost limits, HOME's maximum per-unit subsidy amounts, and/or Public Housing Development Cost Limits (TDCs), it must include a description of how the HTF maximum per-unit development subsidy limits were established or a description of how existing limits developed for another program and being adopted for HTF meet the HTF requirements specified above.

The maximum per-unit subsidy limits for HTF will be set at the Section 234 Basic Mortgage Limits established by HUD and also utilized under the HOME Program.

Effective 06/04/2020, the following limits apply:

0 Bedroom - \$153,314

1 Bedroom - \$175,752

2 Bedroom - \$213,718

3 Bedroom - \$276,482

4 Bedroom - \$303,490

DSHA imposes these limits based on previous analysis and experience with LIHTC and HDF programs, including an extensive review of construction costs.

Analysis has shown that construction costs are not noticeably different between markets, nor do they vary greatly between Delaware three counties.

**8. Rehabilitation Standards.** The grantee must establish rehabilitation standards for all HTF-assisted housing rehabilitation activities that set forth the requirements that the housing must meet upon project completion. The grantee's description of its standards must be in sufficient detail to determine the required rehabilitation work including methods and materials. The standards may refer to applicable codes or they may establish requirements that exceed the minimum requirements of the codes. The grantee must attach its rehabilitation standards below.

In addition, the rehabilitation standards must address each of the following: health and safety; major systems; lead-based paint; accessibility; disaster mitigation (where relevant); state and local codes, ordinances, and zoning requirements; Uniform Physical Condition Standards; Capital Needs Assessments (if applicable); and broadband infrastructure (if applicable).

First, all buildings and projects that are newly constructed or are rehabilitated with HTF must first be built to the International Building Code adopted by the local municipality and County.

The International Building Codes enforced by each municipality and County include and address disaster mitigation.

The following building codes have been adopted by Delaware three counties:

Second, for HTF projects that will be rehabilitated, at a minimum the HUD Rehabilitation Standards - § 91.320(k)(5)(iv) and Â§ 93.301(b) will apply.

Third, all HTF projects must also meet DSHA minimum construction/ rehabilitation standards and all state and federal applicable codes. However, where DSHA minimum constructions/rehabilitation standards exceed the HUD standards, the most stringent standard will apply. (See Attachments A-D).

All applicants are responsible for complying with all building codes, rules, ordinances, and laws of all legal entities and authorities having jurisdiction over the project.

DSHA minimum construction/rehabilitation standards include additional details on what work is required, how that work should be performed (methods), and what materials should be used. DSHA minimum construction and rehabilitation standards include the following categories: health and safety; major systems; lead-based paint; accessibility; disaster mitigation; state and local codes, ordinances, and zoning requirements; and inspectable areas and observable deficiencies from HUD Uniform Physical Condition Standards (UPCS) as identified by HUD as applicable to HTF-assisted housing.

See Attachments for full rehab standard requirements

**9. Resale or Recapture Guidelines.** Below, the grantee must enter (or attach) a description of the guidelines that will be used for resale or recapture of HTF funds when used to assist first-time homebuyers. If the grantee will not use HTF funds to assist first-time homebuyers, enter "N/A".

N/A

**10. HTF Affordable Homeownership Limits.** If the grantee intends to use HTF funds for homebuyer assistance and does not use the HTF affordable homeownership limits for the area provided by HUD, it must determine 95% of the median area purchase price and set forth the information in accordance with §93.305. If the grantee will not use HTF funds to assist first-time homebuyers, enter "N/A".

Any limitation or preference must not violate nondiscrimination requirements in § 93.350, and the grantee must not limit or give preferences to students. The grantee may permit rental housing owners to limit tenants or give a preference in accordance with § 93.303(d)(3) only if such limitation or preference is described in the action plan.

N/A

**12. Refinancing of Existing Debt.** Enter or attach the grantee's refinancing guidelines below. The guidelines describe the conditions under which the grantee will refinance existing debt. The grantee's refinancing guidelines must, at minimum, demonstrate that rehabilitation is the primary eligible activity and ensure that this requirement is met by establishing a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing. If the grantee will not refinance existing debt, enter "N/A."

N/A

## **GRANTEE UNIQUE APPENDIX.**

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PUBLIC NOTICES, ESG WRITTEN STANDARDS

**PUBLIC NOTICES**

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**State of Delaware:**

**County of Kent:**

Before me, a Notary Public, for the County and State aforesaid. Tonda L. Parks, known to me to be such, who being sworn according to law deposed and says that she is the Associate Publisher of **Daily State News**, a daily newspaper published at Dover, County of Kent, and State of Delaware, and that the notice, a copy of which is hereto attached, as published in the **Daily State News** in its issue(s) of

BaytoBayNews.com: 2/19/2025  
 DSN: 2/19/2025 .




Tonda L. Parks  
 Associate Publisher  
 Independent Newsmedia Inc. USA

Sworn to and subscribed before me this 2/19/2025




Notary Public this date of 2/19/2025




**Public Hearing for 5-Year Consolidated Plan – FY 25 – FY 29N**

A Pre-Draft Public Hearing will be held to obtain the views of interested citizens on housing and community development needs for DSHA's 5-Year Consolidated Plan. Feedback provided at the hearing will be accepted and recorded. A summary of the comments will be attached to DSHA's 5-Year Consolidated Plan submitted to HUD.

DSHA will hold the pre-draft public hearing on Friday, February 28, 2025, at 12:00 PM via Microsoft Teams video call. This meeting is open to the public to comment on housing and community development needs.

Please reach out to Alexander Modeas, Delaware State Housing Authority, 18 The Green, Dover, DE 19901, or via e-mail at [Alexander.Modeas@delaware.gov](mailto:Alexander.Modeas@delaware.gov) no later than February 28, 2025, at 11:00 AM to RSVP to attend the virtual pre-draft public hearing.

If you are a person with a disability and require accommodation either in the reading of this notice or at the public hearing, DSHA will provide appropriate assistance. To schedule assistance, please call 302-739-4263, ext. 215 between the hours of 8:00 a.m. and 4:00 p.m., Monday through Friday. TTY/ASCII/VOICE/VCO users may utilize the Telecommunications Relay Service (TRS) by calling 800-676-3777.



17339 DSN 2/19/2025

Name	DELAWARE STATE HOUSING AUTHORITY
Order Number	17339
Ordered By	Alex Modeas
Order Date	2/13/2025
Description	DSHA Consolidated Plan Public Hearing Information
Number Issues	2
Pub Count	2
Ad Cost	\$115.71
First Issue	2/19/2025
Last Issue	2/19/2025
Publications	BaytoBayNews.com, DSN
Pub Dates	BaytoBayNews.com: 2/19/2025 DSN: 2/19/2025

# **ESG WRITTEN STANDARDS**

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## **Emergency Solutions Grants (ESG) Written Standards**

### **Introduction**

The Delaware State Housing Authority (DSHA) receives McKinney Vento – Emergency Solutions Grant (ESG) funds from the U.S. Department of Housing and Urban Development (HUD) and applies those funds to help individuals and families in Delaware experiencing homelessness, as well as those at risk of becoming homeless, in the areas of Street Outreach, Emergency Shelter, Rapid Re-housing, Homelessness Prevention, and a Homeless Management Information System (HMIS). All ESG-funded programs must meet the standards below, as required by federal regulation.

### **Continuum of Care**

The State of Delaware established a Continuum of Care (CoC) in 2015. The CoC is a broad-based coalition of homeless housing and service providers, people with lived experience, community members, advocates, and government representatives, working together to shape statewide planning and decision-making. The CoC, which includes representation from DSHA, is responsible for the following:

- Identify the gaps and needs of households experiencing homelessness in the State of Delaware and participate in the planning process of prioritizing local and state funding to meet these needs;
- Coordinating statewide CoC applications for CoC homeless housing and service funding including, but not limited to, the State's annual Certification of Consistency with the Consolidated Plan;
- Protecting the rights of people experiencing homelessness and implementing data-driven solutions to homelessness.
- Advocating for increased federal and state funding to meet the needs of individuals and families in the State of Delaware who are homeless or at risk of becoming homeless.
- Increasing Delaware's Supply of Supportive Housing.

The Delaware State Housing Authority is the Collaborative Applicant for Delaware's CoC as well as the ESG funding recipient. This role enables DSHA to coordinate with the CoC to form a collaborative process to identify priorities, housing needs and strategies for the State of Delaware's 5-yr Consolidated Plan.

HUD requires each CoC to establish and operate a centralized or coordinated assessment system with the goal of increasing the efficiency of local crisis response systems and improving fairness and ease of access to resources, including mainstream resources. The ESG Program regulations

require the participation of the CoC's coordinated entry process, provided that it meets HUD requirements.

### **Coordinated Entry**

HUD Notice CPD-17-01 establishes federally mandated requirements for ESG recipients and sets forth strategies for Centralized or Coordinated Entry (CE) – defined as a process to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed, referred, and connected to – housing and shelter assistance based on their strengths, goals, risks, protective factors, and other emergency needs, as required by HUD regulations.

The CE system in Delaware is a statewide initiative that connects people experiencing homelessness to available housing resources. The CE process must allow emergency services, including all domestic violence and emergency services hotlines, drop-in service programs, emergency shelters, including domestic violence shelters and other short term crisis residential programs, to operate with as few barriers to entry as possible. Additionally, persons must be able to access emergency services independent of the operating hours of the coordinated entry's intake and assessment processes.

If emergency services are funded through DSHA's ESG Program, a "no wrong door" approach in which a homeless family or individual can present at any homeless housing and service provider in the geographic area

a but is assessed using the same tool and methodology.

All ESG funded projects must follow these written standards as required under 576.400(e)(3)(iv).

### **Centralized Intake**

The Centralized Intake (CI) system is administered by Housing Alliance Delaware (HAD). The CI system is another resource that provides information and referral services to emergency shelter availability and housing assistance availability for people experiencing homelessness in Delaware. HAD is the lead agency for the Delaware CoC. The lead agency is responsible for developing or selecting a standardized tool to facilitate the assessment process that gather the information necessary to determine the severity of need and eligibility for housing and related services for individuals and households experiencing a housing crisis.

### **Homeless Categories for ESG eligibility**

#### **CATEGORY 1: Literally Homeless**

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

1. Has a primary nighttime residence that is a public or private place not meant for human habitation; **or**

2. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); **or**
3. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

#### **CATEGORY 2: Imminent Risk of Homelessness**

An individual or family who will imminently lose their primary nighttime residence, provided that:

1. Residence will be lost within 14 days of the date of application for homeless assistance;
2. No subsequent residence has been identified; *and*
3. The individual or family lacks the resources or support networks needed to obtain other permanent housing.

#### **CATEGORY 3: Homeless Under Other Federal Statutes**

Unaccompanied youth under 25 years of age, or families with Category 3 children and youth, who do not otherwise qualify as homeless under this definition, but who:

1. Are defined as homeless under the other listed federal statutes;
2. Have not had a lease, ownership interest in permanent housing during the 60 days prior to the homeless assistance application;
3. Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and
4. Can be expected to continue in such status for an extended period of time due to special needs or barriers.

#### **CATEGORY 4: Fleeing/Attempting to Flee Domestic Violence**

Any individual or family who:

1. Is fleeing, or is attempting to flee, domestic violence;
2. Has no other residence; and
3. Lacks the resources or support networks to obtain other permanent housing.

#### **Chronically Homeless**

An individual is defined by HUD as “Chronically Homeless” if they have a disability and have lived in a shelter, safe haven, or place not meant for human habitation for 12 continuous months or for 4 separate occasions in the last three years (must total 12 months). Breaks in homelessness, while the individual is residing in an institutional care facility will not count as a break in homelessness.

Additionally, an individual who is currently residing in an institutional care facility for less than 90 days and meets the above criteria for chronic homelessness may also be considered chronically homeless. Lastly, a family with an adult/minor head of household who meets the above-mentioned criteria may also be considered chronically homeless, despite changes in family composition (unless the chronically homeless head of household leaves the family).

## **ESG Program**

The Emergency Solutions Grant (ESG) Program is a federal program operated by the U.S. Department of Housing and Urban Development (HUD). It makes grants to states, local governments, and territories for the purposes of funding activities that directly serve people experiencing homelessness, including people at risk of homelessness. The program was created by the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), which amended the McKinney-Vento Homeless Assistance Act and renamed the Emergency Shelter Grants Program to the Emergency Solutions Grants Program.

ESG funds may be used for five program components: street outreach, emergency shelter, homelessness prevention, rapid re-housing assistance and HMIS; as well as administrative activities.

The ESG program provides funding to:

1. Street Outreach: engage homeless individuals and families living on the street;
2. Improve the number and quality of emergency shelter for homeless individuals and families;
3. Shelter Operations;
4. Provide essential services to shelter residents;
5. Rapidly Re-house homeless individuals and families; and
6. Prevent individuals and families from becoming homeless.

## **Homeless Management Information System (HMIS)**

Delaware's HMIS system is a computerized data collection application designed to capture participant-level information over time on the characteristics and service needs of people experiencing homelessness, while also protecting participant confidentiality. It is designed to aggregate participant-level data to generate an unduplicated count of participants serviced within a community's system of homeless services. All ESG-funded projects are required to participate in HMIS for federal reporting purposes to ensure compliance with HUD regulations. Housing Alliance Delaware is responsible for the administration of this data system. This includes providing training and technical assistance to participating housing assistance providers.

HMIS is used for ESG regular reporting to include the following:

- Annual Homeless Assessment Report
- Consolidated Annual Performance and Evaluation Report

- Housing Inventory Count
- ESG Program Performance Measures

## ESG Allocation Process

The ESG program is a competitive grant that awards funds to private nonprofit organizations, cities, and counties in the State of Delaware to provide the services necessary to help persons that are homeless or at risk of homelessness to quickly regain stability in permanent housing. The ESG program is directly administered by DSHA. DSHA delegates the implementation to state-recipients; however, as the HUD grantee for this program, DSHA is responsible for ensuring the performance and compliance of all state-recipients. If awarded, state-recipients will be notified in writing. Included with the award letter will be a Grant Agreement and a Match Certification form, which must be signed and returned within a specified time frame.

State-recipients receiving ESG funds should develop intake strategies that will ensure the success of the HEARTH Act and meet performance standards such as:

- Reducing the average length of time, a person is homeless;
- Reducing return to homelessness;
- Increasing access to permanent housing;
- Reducing the number of homeless individuals and families;
- Improving employment rate and income amounts of clients;
- Reducing first-time homelessness; and
- Preventing homelessness and achieving independent living in permanent housing for families and youth defined as homeless under other Federal programs.

## ESG Program Requirements

As a state-recipient of the ESG program, there is a responsibility to demonstrate compliance with the ESG program requirements as well as the ESG regulations in 24 CFR Part 576 listed below:

- **Initial Intake/ Engagement Assessment**-The state-recipient must conduct an initial evaluation or intake assessment to determine the eligibility of each individual or family and the types of assistance the individual or family needs.
- **Documentation of Homelessness** -Every client served with ESG funds must qualify for assistance according to HUD standards. ESG state-recipients are responsible for determining the homeless eligibility status of each household entered into their ESG program either by third-party documentation, intake worker/case manager observation or client self-certification. However, the lack of third-party documentation must not prevent an individual or household from being immediately admitted to emergency shelters, from receiving street outreach services or immediately accessing domestic violence/victim service shelter and assistance.
- **Homeless Management Information System (HMIS)**-HUD requires all ESG state-recipients to collect unduplicated client data. This is a computerized data collection tool specifically designed to capture client-level system-wide

information over time on the characteristics and service needs of men, women, and children experiencing homelessness. The system is used not only for an accurate count of the homeless in Delaware but also to assist them in getting the appropriate services faster and decrease duplicative intakes and assessments. The Statewide integrated system can track the use of services throughout Delaware by people who are homeless and can provide agencies the ability to see what services have been previously provided to help determine what referrals are needed. Participation in the HMIS is mandatory for all participants who received ESG assistance from DSHA.

*ESG-funded victim service providers are prohibited from entering data in HMIS; however, they are required to maintain a comparable database of their design which provide aggregate information and data consistent with HUD data collection requirements.*

- **Confidentiality Statement** - The statement must document that all records containing personally identifying information (as defined in HUD's standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for and/or received ESG assistance will be kept secure and confidential.
- **Case Management Documentation** - Assessing, arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability for each client. This includes:
  - Developing, securing, and coordinating services,
  - Obtaining Federal, State, and local benefits,
  - Monitoring and evaluating client progress,
  - Providing information and referrals to other providers, if applicable, and
  - Conducting re-evaluations of households to assist with achieving and maintaining independent living.
- **Housing and Services Plan** - Housing and services plan should be completed for all ESG participants that receive an initial intake evaluation. The plan is intended to be a guide for both the participant and the state-recipient. It should focus on obtaining or maintaining housing with defined goals, outcomes, and timelines. The plan should also identify needed community resources, and referrals to partner agencies, especially for mainstream benefits, budget education, and tenant education.
- **Income Determination (if applicable)** - The ESG regulations require that state-recipients will determine income eligibility by examining source documentation. All family and/or household members are included in the determination of income and recipients over the age of 18 must sign 3<sup>rd</sup> party verification forms which will allow staff to verify any income source required to determine eligibility.
- **Termination or Denial of Assistance** - ESG state-recipients may terminate assistance provided by ESG-funded activities to participants who violate program requirements. The termination must allow for the due process of the terminated participants' rights. State-recipients must have written denial, termination, and grievance policies and procedures. ESG regulations require the participant receive a copy in writing. Explanations of the policies and procedures must be provided directly to any client when denial, termination, or other action affects the client's ability to receive assistance. The notice must provide the specific reason(s) for the

action and provide a process the applicant can follow to request a review of the decision.

- **Preventing Involuntary Family Separation** - Maintaining family unity is important when homeless households with children under the age of 18 enter homeless shelters or housing. DSHA expects state-recipients to ensure homeless households with children under the age of 18 are not denied admission and are not separated.
- **Length of Stay** - State-recipients shall make every effort to ensure clients are discharged from Emergency Shelter services in accordance with their shelter policies. For Domestic Violence situations, any additional Length of Stay limitations shall be determined by the individual service provider's policies and procedures and clearly communicated to clients. Length of Stay extensions may be granted at the discretion of the shelter's case manager after discussion with the client. All Length of Stay extensions must be documented in the client's case file.
- **Coordination with Mainstream and Targeted Homeless Providers** - DSHA requires State-Recipients receiving funds through ESG to maximize the use of available Federal, State, and local mainstream resources to ensure the long-term stability of clients. Providers shall actively seek to engage in partnerships with programs and services that are targeted to address homelessness and poverty within their communities.
- **Homelessness Participation** - The state-recipient is required to provide for the participation of not less than one (1) homeless individual or formerly homeless individual on the Board of Directors or another equivalent policy-making entity, to the extent that the entity considers and makes policies and decisions regarding any facilities, services, or other assistance that receive funding under ESG. Staff members may not be substituted for Board members to meet this requirement.
- **Local Match Requirements** - State-recipients shall be required to provide matching funds in an amount at least equal to their approved ESG funding amounts for eligible program activities. Matching funds must be derived from sources other than other ESG Programs.

## **ESG Program Monitoring**

DSHA will monitor state-recipient's ESG program once every three years or more frequently at DSHA's discretion. Fiscal monitoring will be conducted annually unless an earlier review is warranted or required by ESG program rules. State-recipient will be notified thirty days in advance of the monitoring visit and informed of what documents and records will be reviewed. DSHA reserves the right to perform a desk audit in lieu of a monitoring visit. When the monitoring review is complete, DSHA will provide the state-recipient with a written monitoring report inclusive of any findings, concerns or comments. State-recipient must submit a timely corrective action to findings and failure to do so may result in the denial, withholding and/or return of ESG program funds to DSHA.