

Note to all applicants/respondents: This form was developed with Nuance, the official HUD software for the creation of HUD forms. HUD has made available instructions for downloading a free installation of a Nuance reader that allows the user to fill-in and save this form in Nuance. Please see <http://portal.hud.gov/hudportal/documents/huddoc?id=nuancereaderinstall.pdf> for the instructions. Using Nuance software is the only means of completing this form.

# Affirmative Fair Housing Marketing Plan (AFHMP) - Multifamily Housing

U.S. Department of Housing and Urban Development  
Office of Fair Housing and Equal Opportunity

OMB Approval No. 2502-0608  
(exp.02/28/2017)

1a. Grantee Name & Address (including City, County, State, Zip Code, Telephone No. & email address) 1b. Rental Assistance Contract Number

Michigan State Housing Development Authority  
735 E. Michigan Ave.  
Lansing, MI 48912

MI28RDD1301

1c. No. of Units

174

1d. Entity Responsible for conducting Outreach and Referral (check all that apply)

Grantee

Service Provider

Other (specify)

Michigan Department of Health and Human Services

Entity Name, Contact Person and Position (if known), Address (including City, County, State & Zip Code), Telephone Number & Email Address

Elizabeth Gallagher, MPA, Manager, Home and Community Based Services Section  
Bureau of Medicaid Policy and Health System Innovation  
400 S. Pine Street, 7th Floor  
Lansing, MI 48909-7979  
517-335-5068 email: gallaghere@michigan.gov

1e. If the outreach is performed by any other entity other than the Grantee, explain how the Grantee will monitor their activities to ensure compliance with affirmative fair housing outreach requirements. Enter "N/A" in the field below if not applicable.

\* (Attachment 1e)

1f. To whom in the Grantee's office should approval and other correspondence concerning this AFHMP be sent? Indicate Name, Address (including City, State & Zip Code), Telephone Number & E-Mail Address.

Kelly Rose, Chief Housing Solutions Officer  
Michigan State Housing Development Authority  
735 E. Michigan Avenue, Lansing MI 48912  
517-373-1851  
RoseK2@michigan.gov

2a. Affirmative Fair Housing Marketing Plan

Plan Type

Initial Plan

Date of the First Approved AFHMP:

Reason(s) for current update:

**2b. Outreach Start Date**

Grantees should not begin accepting applications prior to conducting the marketing and outreach activities identified in the approved AFHMP.

Date Outreach will begin (xx/xx/xxxx)

Date Grantee will begin accepting applications (xx/xx/xxxx)

Note: Only Fiscal Year 12 Demonstration Grantees are permitted to accept applications prior to conducting marketing and outreach activities identified in the approved AFHMP.

**3a. Target Areas (check one):**  Statewide  Other (specify)

**3b. Target Population(s)**

PRA funds will be utilized to serve extremely low income, at or below 30% Area Median Income (AMI), non-elderly persons with disabilities who are 18 years of age but less than 62 years of age at the time of lease up. The person with the disability must be eligible for participation in a Medicaid home and community-based, long-term services program.

The target population will include:

- People with disabilities who are living in a nursing facility or are at risk of being transitioned into a nursing facility and are eligible for a Medicaid home and community-based services program.
- People with disabilities or severe mental illness who are living the community, have an identified need for affordable and accessible housing, and are eligible for a Medicaid home and community-based services program.

The definition of Medicaid home and community-based services programs includes MI Choice Waiver, Nursing Facility Transition Program, Community Mental Health Services, MI Health Link HCBS Waiver, or Adult Home Help Program.

**3c. Is all or some of the Target Population(s) covered by a Settlement Agreement?** No  Yes

**3d. Demographics of Target Population(s)**

(check all that apply)

- White  American Indian or Alaska Native  Asian  Black or African American
- Native Hawaiian or Other Pacific Islander  Hispanic or Latino
- Families with Children (under age 18)  Other ethnic group, religion, sex, etc. (specify)

---

**3e. Data Source(s) used to obtain the demographic characteristics.**

MDHHS used the MI Choice Waiting List to obtain the demographic characteristics of people with disabilities who are living in a nursing facility or are at risk of being transitioned into a nursing facility. The MI Choice Waiver, Nursing Facility Transition Program, and MI Health Link HCBS Waiver Program serve individuals in this population.

MDHHS used the Report for Section 404 (Community Mental Health Service Programs Demographic and Cost Data FY 2014) to obtain demographic characteristics of people with disabilities or serious mental illness who are living in the community and have an identified need for affordable and accessible housing. Community Mental Health Services and the Adult Home Help Program serve individuals in this population.

---

**4a. Identify the demographic group in the target population(s) that are least likely to apply.**

- MDHHS has identified the following groups as least likely to apply:
- Persons who have a disability that impacts their ability to communicate
  - Persons with limited English proficiency

4b. For each demographic group in the target population(s) that are least likely to apply, provide a description of how the program will be marketed to eligible individuals in the target population(s).

The Grantee's outreach plan ensures that these populations will be reached and have an equal opportunity to apply for the S. 811 PRA Program.

Persons with Communication Barriers: Outreach to this population will be conducted through the MI Choice Waiver Agencies, Nursing Facility Transition Program, Community Mental Health Service Providers, Centers for Independent Living, and other community based organizations assisting individuals with housing. Michigan will use assistive technology as needed to ensure all individuals have the opportunity to learn about and participate in this program. The agencies listed above use various telephone interpretation systems as needed to overcome language barriers.

Limited English Proficiency (LEP): MDHHS requires agencies to provide assistance to accommodate persons with (LEP) with accessing services. Oral and written assistance to persons with LEP may take various forms, including hiring bilingual staff, arranging for interpreters, and translating written materials when a significant number or percentage of program beneficiaries require information in a language other than English. At a minimum, for written materials to be understandable, they must be written in plain language and in a manner that is accessible to individuals with disabilities and persons who are limited English proficient, consistent with §435.905(b) of Chapter 42 of the Code of Federal Regulations. Outreach materials will be provided in Spanish and Arabic, the language that has been identified as most common among the target populations. Materials will be translated into other languages as the need is identified by outreach staff. The MI Choice Waiver program, Habilitation Supports Waiver program, and MI Health Link HCBS Waiver program will also be able to provide interpreter services as necessary.

**5a. Fair Housing Poster**

The Fair Housing Poster must be prominently displayed in all offices/locations in which rental activity takes place (24 CFR 200.620(e)). Check below all locations where the Poster will be displayed.

Rental Office     Grantee Office     Model Unit     Other (specify)

**5b. Affirmative Fair Housing Marketing Plan**

The AFHMP must be available for public inspection at all rental offices/locations (24 CFR 200.625). Check below all locations where the AFHMP will be made available.

Rental Office     Grantee Office     Model Unit     Other (specify)

**5c. Project Owner Compliance to display Fair Housing Poster and the AFHMP**

Explain how you will ensure that every project owner will prominently display the Fair Housing Poster and AFHMP.

MSHDA will ensure that the properties with 811 units display the fair housing poster at their sites. MSHDA will reinforce this requirement in manager training and check for compliance during on-site review.

---

**6. Evaluation of Marketing Activities**

Explain the evaluation process you will use to determine whether your outreach activities have been successful in attracting individuals in the target population(s) who are least likely to apply, including who will be responsible for conducting this evaluation, when this evaluation will be conducted and how the results of this evaluation will inform future marketing activities.

The Grantee and MDHHS will evaluate the success of this outreach and marketing plan after one year from the date that the Cooperative Agreement is signed. The Grantee and MDHHS will review the demographic characteristics of program applicants and tenants at that time and compare these data with the baseline demographic data on file. If this review indicates that populations identified as least likely to apply – or other populations – are not represented in the applicant and tenant populations in percentages that are roughly equivalent to those in the baseline data, then the Grantee and MDHHS will make adjustments as need to the outreach plan. At that point, the Grantee and MDHHS will establish an ad hoc committee of services providers and service agencies to discuss the outcomes and identify potential system changes to achieve better results.

---

**7. Additional Considerations.** Is there anything else you would like to tell us about your AFHMP to help ensure that your program is marketed to eligible persons in the target population(s) who are least likely to apply for the program? Please attach additional sheets, as needed.

**8. Review and Update**

By signing this form, the grantee agrees to implement its AFHMP, and to review and update its AFHMP in accordance with the instructions to item 8 of this form in order to ensure continued compliance with HUD's Affirmative Fair Housing Marketing Regulations (see 24 CFR Part 200, Subpart M). The Grantee also certifies that training will be provided to staff/entities that provide outreach to target population(s) for the purpose of enrollment in the 811 PRA program. Training will consist of affirmative fair housing outreach requirements and the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act and the American with Disabilities Act. I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (See 18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802).

*Kelly Rose*

03/21/2016

Signature of person submitting this Plan & Date of Submission (mm/dd/yyyy)

Kelly Rose

Name (type or print)

Chief Housing Solutions Officer, Michigan State Housing Development Authority

Title & Name of Company

**For HUD-Office of Housing Use Only**

Reviewing Official:

[Empty box for Reviewing Official signature]

[Empty box for Signature & Date]

Signature & Date (mm/dd/yyyy)

Name  
(type or print)

[Empty box for Name]

Name

Title

[Empty box for Title]

**For HUD-Office of Fair Housing and Equal Opportunity Use Only**

Approval

Disapproval

[Empty box for Signature & Date]

Signature & Date (mm/dd/yyyy)

Name  
(type or print)

[Empty box for Name]

Title

[Empty box for Title]

**Affirmative Fair Housing** OMB Approval No. 25020608  
**Marketing Plan (AFHMP) - and Urban Development** (exp.02/28/2017) Office of Fair Housing  
and Equal Opportunity  
**Multifamily Housing**

**Rental Assistance Contract Number: MI28RDD1301**

\* (Attachment 1e)

**1e. If the outreach is performed by any other entity other than the Grantee, explain how the Grantee will monitor their activities to ensure compliance with affirmative fair housing outreach requirements. Enter "N/A" in the field below if not applicable.**

The Grantee has designated the Michigan Department of Health and Human Services (MDHHS) as the primary conduit for outreach and referral for the Michigan Section 811 Project Rental Assistance Program. In order to reach as many eligible persons as possible, MDHHS will coordinate with a broad range of entities who work directly with the target populations. The Grantee will serve as the clearing house for referrals from various entities, and the Grantee will coordinate with MDHHS to ensure effective outreach to these entities.

Outreach to potentially eligible persons will be provided through (1) regular case manager to client contact; (2) advocacy organizations and consumer groups; (3) services providers; (4) and other health care organizations. Outreach activities will include the distribution of information about eligibility criteria and instructions for enrollment procedures.

All eligible applicants must be referred and enrolled in the program by a case manager or supports coordinator at a service agency who has signed a Memorandum of Understanding under the 811 program. In addition to fair housing training, case managers for all service programs will receive training in 811 program requirements, enrollment procedures, unit application procedures; transition planning; and person-centered planning for community-based housing.

Annually meetings will be held with the referring service agency, MDHHS and MSHDA to review the referral and lease up process to assure that the program requirements are met.