Albany County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 52 children were newly identified with blood lead levels of 10 mcg/dL or higher in Albany County. This number represents an incidence rate of 12.3 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint hazards and removing them before children are exposed.

Program results
Between 2007 and the end of March 2013, the Albany program inspected 755 homes and identified lead-based paint hazards in 489 of these homes. Its efforts have already made 350 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families in Albany. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

1 Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 535 children lived, and it referred 770 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 1,104 children lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 89% of the units, 94% were built prior to 1940, and 87% were in multi-family buildings (63% were in 2-unit buildings).

**Housing units targeted for inspection**

Albany County has identified a specific target area—zip codes 12202, 12206, 12208, 12209 and 12210 located in the city of Albany—for its program focus. Within these zip codes, the program targets the highest-risk properties, including but not limited to homes of at-risk newborns and pregnant women; homes of resettled refugees; units where children with blood lead levels between 5–9 or 10–14 mcg/dL reside or units adjacent to them; units with a history of children with elevated blood lead levels or other units in the same building; and vacant, foreclosed properties. The program also inspects properties because of referrals from partner agencies, provider offices (OB/GYN and pediatric offices in particular) or requests from owners or tenants and units as a result of advertising (e.g., bus kiosks) or door-to-door canvassing.

**Inspection procedures**

An EPA-certified Risk Assessor from the county performs a visual inspection of painted surfaces in the individual unit, common areas, and exterior of the building and uses an XRF (X-Ray Fluorescence) machine to measure the concentration of lead on painted surfaces. The Assessor may also take soil samples or wipe surfaces to collect dust to analyze its lead concentration (dust wipes are collected after the final inspection when all hazards have been corrected at during an initial inspection only if no interior hazards are found). Residents receive educational materials and cleaning products as incentives to encourage their participation.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. Albany County works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,357 individuals on how to conduct repairs safely.
Broome County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 21 children were newly identified with blood lead levels of 10 mcg/dL or higher in Broome County. This number represents an incidence rate of 8.2 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed to them.

Program results
Between 2008 and the end of March 2013, the Broome program inspected 378 homes and identified lead-based paint hazards in 366 of these homes. Its efforts have already made 160 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

X Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 215 children lived, and it referred 476 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 518 children lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 77% of the units, 91% were built prior to 1940, and 87% were in multi-family buildings (48% were in buildings with 3 or more units).

**Housing units targeted for inspection**

Broome County’s program targets all parts of zip code 13905 that lie within the City of Binghamton. Housing units outside that area are inspected only if they are referred by the Childhood Lead Poisoning Prevention Program. The program targets the highest-risk properties, including but not limited to homes of at-risk newborns or pregnant women; units where children with blood lead levels between 5–9 or 10–14 mcg/dL reside or units adjacent to them; and vacant, foreclosed properties. The program also inspects properties because of referral from Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs or code enforcement agencies, requests from owners or tenants, and observations of deteriorated exterior paint.

**Inspection procedures**

The program’s inspection protocol consists of exterior and interior visual inspection as well as XRF (X-Ray Fluorescence) measurement of lead on painted household surfaces in some units. Inspectors also provide educational materials and incentives such as cleaning products to encourage residents’ cooperation.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2008, the program has funded training for 341 individuals on how to conduct repairs safely.
Chautauqua County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 19 children were newly identified with blood lead levels of 10 mcg/dL or higher in Chautauqua County. This number represents an incidence rate of 8.2 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed to them.

Program results
Between 2008 and the end of March 2013, the Chautauqua program inspected 401 homes and identified lead-based paint hazards in 329 of these homes. Its efforts have already made 171 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

# Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 205 children lived, and it referred 53 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 444 children lived.

The homes visited were primarily renter-occupied units in older buildings. Renters lived in 74% of the units, and 94% were built prior to 1940. The majority were either single-family homes (33%) or in 2-unit buildings (47%).

**Housing units targeted for inspection**

The program’s target area is the City of Jamestown. Within the city, the program targets the highest-risk properties, including but not limited to homes of at-risk newborns and pregnant women; units where children with blood lead levels between 5–9 or 10–14 mcg/dL reside or units adjacent to them; units with a history of children with elevated blood lead levels or other units in the same building; and vacant, foreclosed properties. The program also inspects properties because of referrals from partner agencies or code enforcement or requests from owners or tenants and units identified through door-to-door canvassing.

**Inspection procedures**

The program’s inspection protocol includes exterior and interior visual assessments and XRF (X-Ray fluorescence) measurement as well as a risk assessment. At least one wall, one window, and one door in each room are tested for lead paint using an XRF machine. The exterior and entryways are also tested with the XRF. If there is no interior lead paint but exterior lead paint is found, dust wipe samples are taken to determine if exterior dust is entering the home. The program generates a report of all areas that tested positive and sends it to the owner and/or tenant with a letter of notice and information. Inspectors also give residents educational materials and incentive packages to encourage cooperation.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2008, the program has funded training for 171 individuals on how to conduct repairs safely.
Dutchess County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 28 children were newly identified with blood lead levels of 10 mcg/dL or higher in Dutchess County. This number represents an incidence rate of 5.3 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint hazards and removing those hazards before children are exposed to them.

Program results
Between 2008 and the end of March 2013, the Dutchess program inspected 977 homes and identified lead-based paint hazards in 471 of these homes. Its efforts have already made 167 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who DirectlyBenefited from the Program

Notes:
Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 25 children lived, and it referred 41 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 82 children lived. Although the homes visited were similar in being predominantly older homes (86% were built prior to 1940), they represented a range of occupancy conditions and building types. A little over half (51%) were renter-occupied; the others were owner-occupied (17%) or vacant (32%). The majority (80%) were in multi-family buildings, while 20% were single-family units.

**Housing units targeted for inspection**

The program’s target area is that portion of the City of Poughkeepsie within the 12601 zip code.

Within this area, the program gives more emphasis to housing units that are in multi-family buildings built before 1978. Units targeted for inspection are primarily those identified by code enforcement for inspections funded or deputized by LPPP. The program also may refer properties to code enforcement for inspection on the basis of referral from community partners, requests from owners or tenants, and program staff’s observations of deteriorated exterior paint.

**Inspection procedures**

The program’s inspections are all conducted by a City of Poughkeepsie Building Inspector, who primarily uses housing complaint and building permit inspections to select residences for visual assessments. The Inspector conducts a visual inspection of all accessible interior and exterior areas and determines whether paint conditions and dust conditions are in compliance with the New York State property maintenance code. The Inspector is responsible for all follow-up inspections until compliance is met. The Dutchess County Department of Health reviews the lead dust clearance tests and notifies the City of Poughkeepsie whether the results meet current standards.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. Dutchess County works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Through a partnership with BOCES, Adult Education Program, Dutchess has been able to offer classes in English and in Spanish—reaching the growing number of Hispanic in the targeted zip code. Since 2008, the program has funded training for 475 individuals on how to conduct repairs safely. Additionally, the program has worked to develop a new course to homeowners and landlords in conducting window replacements on their own property. The first session of the newly developed Window and Door Replacement class was held at BOCES in March 2013, training 19 individuals.
Erie County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 328 children were newly identified with blood lead levels of 10 mcg/dL or higher in Erie County. This number represents an incidence rate of 17.2 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed to them.

Program results
Between 2007 and the end of March 2013, the Erie program inspected 5,603 homes and identified lead-based paint hazards in 4,212 of them. Its efforts have already made 2,319 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

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*Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.*
Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 366 children lived, and it referred 302 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 1,318 children lived.

The program visited about equal numbers of homes that were owner-occupied and renter-occupied (45% and 48% respectively) and single-family compared with multi-family (42% and 58%). Almost all (99%) were built prior to 1940.

**Housing units targeted for inspection**

Within Erie County, the program operates in census tracts and/or block groups that the Erie County Commissioner of Health has designated as an “area of high risk” within zip codes 14215, 14213, 14212, 14211, 14209, 14208, 14207 and 14201. Within the areas of high risk, individual units are identified for inspection through neighborhood surveys and through referrals indicating units in which children with blood lead levels between 5–9 or 10–14 mcg/dL (or both) reside or units adjacent to them.

**Inspection procedures**

Program staff go block-by-block surveying the building characteristics, physical condition and occupancy status of each housing unit. Staff assess the exterior of each housing structure with an XRF (X-Ray Fluorescence) machine to measure the concentration of lead on painted surfaces. In conjunction with the exterior risk assessment, staff try to identify and gain access to units where young children reside. Upon gaining access, they assess the paint condition of the interior of the dwelling unit, educate the resident about lead poisoning and ways to protect their family, determine if all children have received blood lead level testing, and provide cleaning supplies to help ensure a lead-safe environment.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,024 individuals on how to conduct repairs safely.
Monroe County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 204 children were newly identified with blood lead levels of 10 mcg/dL or higher in Monroe County. This number represents an incidence rate of 14.9 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results
Between 2007 and the end of March 2013, the Monroe program inspected 11,662 homes and identified lead-based paint hazards in 1,586 of them. It visited without inspecting an additional 635 homes. Its efforts have already made 1,164 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

*Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.*
Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 441 children lived, and it referred 456 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 1,169 children lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 96% of the units, 84% were built prior to 1940, and two-thirds of the homes were in multi-unit buildings (27% were in 2-unit buildings and 42% were buildings with 3 or more units).

**Housing units targeted for inspection**

The area of concern is the following high-risk zip codes within the City of Rochester: 14604, 14605, 14606, 14607, 14608, 14609, 14610, 14611, 14612, 14613, 14614, 14615, 14619, 14620 and 14621. Within these areas, most properties are identified and inspected by City of Rochester code enforcement officers with funding provided by the program: 93% of all properties inspected since the program began were inspected by code enforcement. Other properties are targeted for inspection by the program itself. These include homes of pregnant women, units with children with blood lead levels between 10 and 14 mcg/dL, homes of refugees, and homes of DHS clients who have children aged 6 years or younger living in a home where the City of Rochester cited interior hazards that were cleared 3 or more years ago.

**Inspection procedures**

Code enforcement officers conduct a visual inspection for deteriorated paint above de minimis levels on the interior and exterior and on bare soil if it is found. They do additional dust wipe sampling in all units that pass the initial visual inspection. At properties inspected by the program itself, EPA-certified risk assessors inspect the properties that are targeted as described above. These inspections use elevated blood lead protocols, including visual inspection and XRF (X-Ray Fluorescence) measurement of lead on painted household surfaces.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,211 individuals on how to conduct repairs safely.

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Properties found to have deteriorated paint in excess of the U.S. Department of Housing and Urban Development (HUD)’s de minimis level or bare soil within 3 ft of the house fail the visual inspection. HUD standards allow for deteriorated paint below a de minimis level of 20 ft² on any exterior surface, 2 ft² in any interior room, or 10% of any component (such as a window sill).
New York State’s Childhood Lead Poisoning Primary Prevention Program
Grantee Impact Summaries

Niagara County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 37 children were newly identified with blood lead levels of 10 mcg/dL or higher in Niagara County. This number represents an incidence rate of 9.4 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed to them.

Program results
Between 2009 and the end of March 2013, the Niagara program inspected 3,532 homes and identified lead-based paint hazards in 1,254 of them. Its efforts have already made 519 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

![Figure 1: Housing Units Inspected and Inspection Results as of March 2013](image)

Figure 2: Number of Children Who Directly Benefited from the Program

![Figure 2: Number of Children Who Directly Benefited from the Program](image)

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**Program results**

*Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.*
Since 2009, the program has worked with property owners to remove lead-paint hazards from housing units in which 224 children lived, and it referred 380 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 472 children lived.

The homes visited were primarily in older buildings: 85% were built prior to 1940. More than half (51%) of the units were owner-occupied, and the majority of homes (64%) were single-family units. About one-fourth (27%) lived in 2-unit buildings.

**Housing units targeted for inspection**

Niagara County’s program targets housing in the zip codes of 14301, 14303, 14304, and 14305 in the city of Niagara Falls, with a special emphasis on census tracts 202, 204, 205, 206, 209, 213, 212, 211; zip code 14094 in Lockport to include portions of census tracts 235, 238, 236, and 239; zip code 14120 North Tonawanda in census tract 232. Within these areas, program staff, (one Public Health Sanitarian and two Public Health Technicians) canvass the neighborhood door-to-door. If there is no answer, the staff makes an exterior visual assessment. Housing units may also be identified for inspection because they are homes of at-risk newborns or pregnant women; homes of children with elevated blood-lead levels in the past or children with current blood lead levels between 5–9 or 10–14 mcg/dL or units adjacent to them; and units referred by Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs, code enforcement agencies, or other partner agencies. The program may also inspect in response to requests from owners or tenants.

**Inspection procedures**

The program has a two-stage inspection protocol. The first inspection is a visual survey for potential lead-based paint hazards. This is an exterior visual inspection and, if possible, an interior inspection. The program sends the owner of record a notice that includes a complete list of potential hazards in the dwelling and information about the program’s incentives and educational opportunities. Compliance is voluntary at that point as no testing has been done. The letter is followed up by a telephone call within a week to ensure that a hazard removal plan is in place. If no plan is put in place or work is not completed in a timely, acceptable manner, program staff use an XRF (X-Ray Fluorescence) machine to measure the concentration of lead on painted surfaces. The program then sends a notice and demand that requires correction of all hazards identified. In some circumstances, staff also use dust wipe samples in inspections.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2009, the program has funded training for 133 individuals on how to conduct repairs safely.
New York City Department of Health and Mental Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 1,316 children were newly identified with blood lead levels of 10 mcg/dL or higher in New York City. This number represents an incidence rate of 4.0 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results
Between 2007 and the end of March 2013, the New York City program inspected 4,285 homes and identified lead-based paint hazards in 2,301 of them. It also visited an additional 181 units without conducting inspections. Its efforts have resulted in the safe remediation of lead paint hazards in 2,124 housing units (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. As needed, referrals are made to assist families who are uninsured or lack access to a medical provider. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards.

\[^{1a}\] Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 2,334 children lived, and it referred 4,466 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 4,883 children lived.

The homes visited were occupied units in older, multi-family buildings. 79% of the buildings were built prior to 1940, and 82% of the buildings had three or more units.

**Housing units targeted for inspection**

NYC Primary Prevention interventions occur city-wide and are targeted to high-risk neighborhoods, high-risk housing, and high-risk children. NYC uses six strategies to identify the specific high-risk housing units:

- inspecting homes in response to referrals from the Newborn Home Visiting Program because of peeling paint in the newborn’s home;
- inspecting in response to referrals for peeling paint in the homes of young children in the department’s Asthma Initiative;
- using the city’s blood lead registry and the birth registry to identify housing of children under 6 years of age with blood lead levels of 10–14 mcg/dL and newborns under 6 months of age living in the same building;
- identifying buildings where two or more Commissioner’s Orders for lead paint violations have been cited in at least two apartments and offering to conduct inspections in apartments where there is peeling paint and a child under 6 years of age;
- responding to tenants’ complaints of peeling paint in the apartments and common areas of residential buildings that house children less than 18 years of age and;
- responding to tenants’ complaints of peeling paint in 1–2 family homes where there is a child under six years of age.

**Inspection procedures**

Inspectional staff of EPA-certified Lead Risk Assessors perform the inspections for lead paint hazards and other environmental home health hazards using the six strategies listed above. For inspections of peeling lead paint hazards for the first four strategies, the inspector administers a lead risk assessment questionnaire, conducts a visual inspection of all painted surfaces, and then conducts XRF testing of all peeling paint and painted window sills. For unsafe work complaints, if the inspector observes uncontained paint dust and debris, the inspector takes dust wipe samples and orders the owner and the contractor to stop the work, immediately clean up and resume work using safe work practices that contain and minimize dust. In all inspections, the Primary Prevention Program provides counseling and education on lead poisoning prevention and re-inspections are conducted until violations are complied with.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. New York City works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training, delivered in English and Spanish, focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,909 individuals on how to conduct repairs safely.
Oneida County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description

Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 105 children were newly identified with blood lead levels of 10 mcg/dL or higher in Oneida County. This number represents an incidence rate of 29.1 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint hazards and removing them before children are exposed.

Program results¹

Between 2007 and the end of March 2013, the Oneida program inspected 1,701 homes and identified lead-based paint hazards in 1,284 of them. Its efforts have already made 755 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families in Oneida. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards.

Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

¹ Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
in which 825 children lived, and it referred 804 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 1,518 children lived. In addition, children who might live in or visit these units in the future benefit from having lead hazards removed.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 77% of the units, 87% were built prior to 1940, and 82% of the units were in multi-family buildings (60% were 2-unit buildings).

**Housing units targeted for inspection**

The Oneida County program targets census tracts and block groups in the 13501 and 13502 zip codes in the City of Utica. Within those areas, the program sub-targets houses with newborns and newly arrived refugees with children under age 7 as well as families with children under 6 with blood lead levels <15 mcg/dL. The program also inspects properties because of referrals from partner agencies or code enforcement or requests from owners or tenants.

Other units are identified by code enforcement agencies for their inspections funded or deputized by the program. Primary Prevention Program staff conducted a little over half (51%) of all inspections while code enforcement staff conducted the remaining inspections.

**Inspection procedures**

When inspections are conducted by program staff, the initial inspection consists of an interior and exterior visual inspection and dust wipe sampling. The inspector also completes a floor plan showing the location of hazards. In a first home visit, a home visitation worker provides extensive education on lead hazards and lead poisoning prevention and cleaning supplies. At a second visit, the worker reviews the results of the dust testing and encourages use of a HEPA vacuum until any needed remediation work can be completed.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. Oneida County works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 475 individuals on how to conduct repairs safely. This number represents trainees paid for by Primary Prevention funds; however, more students were trained in these classes overall through the program’s partnership with the Mohawk Valley Community College (MVCC). MVCC offers a variety of courses each month in multiple locations around the county to insure ease of access for contractors and rental property owners.
Onondaga County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious public health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2012, 191 children were newly identified with blood lead levels of 10 mcg/dL or higher in Onondaga County. This number represents an incidence rate of 16.6 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results
Between 2007 and the end of March 2013, the Onondaga County Health Department’s program inspected 1,644 homes and identified lead-based paint hazards in 1,494 of these homes. Its efforts have already made 872 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units, now or in the future, benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

\(^{a}\) Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit.
As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 1,099 children lived, and it referred 440 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 2,083 children lived. The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 87% of the units, 87% were built prior to 1940, and 74% of the units were in multi-family buildings (48% were buildings with 2 units).

### Housing units targeted for inspection

Onondaga County’s program targets the entire City of Syracuse, with the following zip codes designated as the highest risk areas: 13202, 13204, 13205, 13207, and 13208. The program targets the highest-risk properties, including but not limited to, homes of at-risk newborns or pregnant women; units where children with blood lead levels between 5–9 or 10–14 mcg/dL reside or units adjacent to them; units with a history of elevated blood lead cases or other units in the same building; rental units occupied by resettled refugees; and rental units occupied by DSS-funded or Section 8-funded recipients. The program also inspects properties identified in collaboration with the local LPPP, in response to referrals from Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs, other partner agencies, or code enforcement agencies; requests from owners or tenants; observations of deteriorated exterior paint; and identification through door-to-door canvassing.

### Inspection procedures

Some inspections are initiated by the program on the basis of information it already has about a unit or its residents, as noted above. For others, program staff conduct telephone surveys with a parent or caregiver to determine if the property meets risk criteria of (1) a child age 7 or under resides or regularly visits or a pregnant woman resides at the property, (2) property was built before 1960, (3) chipping and peeling paint has been observed, (4) property is located in the target area, and (5) it is a rental property. If determined eligible, an environmental team member then conducts an on-site lead hazard risk assessment.

Risk assessments consist of exterior and interior visual inspection, an XRF (X-Ray Fluorescence) measurement of the concentration of lead on painted surfaces, and dust wipe sampling. If lead-based paint hazards are confirmed by XRF testing during the inspection, the environmental team member conducts a brief lead dust cleaning demonstration and leaves a package of wet wipes with the tenant. At the discretion of the environmental inspection team, renters who are pregnant and parents of children age 7 or under may be referred to the public health education team for additional services.

### Training on lead-safe work practices

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 602 individuals on how to conduct repairs safely. This number represents formal classroom training paid for by NYSDOH Primary Prevention funding. As a result of the City of Syracuse discontinuing their free Lead Safe Work Practice training program early in 2012, CLPPPP staff are providing more detailed LSWP instruction during field visits. The total number of individualized LSWP educational contacts completed by CLPPPP Environmental Health Risk Assessors during initial inspection visits, field conferences, follow-up, pre-hearing re-check visits, and dust wipe clearance visits far exceeds the number of individuals that received formal classroom training paid for with Primary Prevention funds. Between April 1, 2012 and March 31, 2013 more than 1,300 LSWP educational contacts were completed.
Orange County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 90 children were newly identified with blood lead levels of 10 mcg/dL or higher in Orange County. This number represents an incidence rate of 11.5 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results
Between 2007 and the end of March 2013, the Orange program inspected 650 homes and identified lead-based paint hazards in 508 of them. Its efforts have already made 299 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

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all Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 400 children lived, and it referred 443 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 810 children lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 91% of the units, 91% were built prior to 1940, and 84% were in multi-family buildings (48% of units were in multi-family building with 3 or more units).

**Housing units targeted for inspection**

Orange County’s target areas are census tracts 3, 4, and 5 in the City of Newburgh and census tracts 11, 12, 15 and 151 in the City of Middletown. The program targets the highest-risk properties, including, but not limited to, homes of at-risk newborns or pregnant women; units where children with blood lead levels between 5–9 or 10–14 mcg/dL reside or units adjacent to them; units with a history of elevated blood lead cases or other units in the same building; rental units occupied by DSS-funded or Section 8-funded recipients; and vacant, foreclosed properties. The program also inspects properties because of referral from Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs, other partner agencies, or code enforcement agencies; requests from owners or tenants; observations of deteriorated exterior paint; and identification through door-to-door canvassing.

**Inspection procedures**

The risk assessment protocol consists of exterior and interior visual inspection and an XRF (X-Ray Fluorescence) measurement of the concentration of lead on painted surfaces. The program also provides educational materials and incentives to encourage residents’ participation. To obtain these inspections the program partners with many agencies and other departments, do door to door knocking, presentations at schools, health fairs, bus stops, Laundromats and many other community events (e.g., during Thanksgiving food distributions program staff inserted 1300 flyers advertising free lead inspections.)

Following property owners completing lead safe renovations, funds are used to help them complete required dust wipe clearance tests, protecting both the occupants and the property owners.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 262 individuals on how to conduct repairs safely.

The program teaches both the EPA certification class in Renovation, Repair and Painting (RRP) Rule, a “Don’t Spread the Lead” National Center for Healthy Housing Curriculum class for do it yourselfers working on their own residences. The program has also implemented a nutrition/lead safety class at local supermarkets in both Newburgh and Middletown. All students receive incentives for coming to these classes to aid them in keeping their families lead safe.
Rensselaer County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description

Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 25 children were newly identified with blood lead levels of 10 mcg/dL or higher in Rensselaer County. This number represents an incidence rate of 10.0 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results

Between 2009 and the end of March 2013, the Rensselaer program inspected 370 homes and identified lead-based paint hazards in 302 of them. Its efforts have already made 201 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

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Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2009, the program has worked with property owners to remove lead-paint hazards from housing units in which 187 children lived, and it referred 277 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 338 children lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 62% of the units, 80% were built prior to 1940, and 69% of the units were in multi-family buildings.

**Housing units targeted for inspection**

Rensselaer County’s target area is the City of Troy, including zip codes 12180 and 12182. The program defines its primary target group as residential homes within the target areas, built before 1980, with a resident child 17 years or younger, regardless of blood-lead level. It gives highest priority to homes of children with a confirmed blood lead level between 5 and 14 mcg/dL.

The program also conducts inspections in conjunction with the Childhood Lead Poisoning Prevention Program (CLPPP), in that this program inspects housing units before a child referred by CLPPP moves into it. Other units targeted for inspection include, but are not limited to, homes of at-risk newborns or pregnant women and units with a history of elevated blood lead cases or other units in the same building. The program also inspects properties because of referral from Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs, other partner agencies (e.g., inspections of units for DSS foster care placements), code enforcement agencies or other partner organizations (e.g., the Homebuyer Incentive and Rehabilitation Programs of the Troy Rehabilitation Improvement Program); requests from owners or tenants; observations of deteriorated exterior paint; and identification through door-to-door canvassing.

**Inspection procedures**

Most inspections are conducted by EPA-certified staff of the Rensselaer County Cornell Cooperative Extension under a contract with the program. The risk assessment protocol consists of exterior and interior visual inspection, an XRF (X-Ray Fluorescence) measurement of the concentration of lead on painted surfaces, dust wipe sampling, and soil sampling. The program also provides educational materials and incentives to encourage residents’ participation.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2009, the program has funded training for 717 individuals on how to conduct repairs safely.
Program description

Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 18 children were newly identified with blood lead levels of 10 mcg/dL or higher in Schenectady County. This number represents an incidence rate of 7.4 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results

Between 2008 and the end of March 2013, the Schenectady program inspected 302 homes and identified lead-based paint hazards in 264 of them. Its efforts have already made 191 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

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**Program description**

Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 18 children were newly identified with blood lead levels of 10 mcg/dL or higher in Schenectady County. This number represents an incidence rate of 7.4 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

**Program results**

Between 2008 and the end of March 2013, the Schenectady program inspected 302 homes and identified lead-based paint hazards in 264 of them. Its efforts have already made 191 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

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**Notes:**

*Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.*

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Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 272 children lived, and it referred 111 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 373 children lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 85% of the units, 74% were built prior to 1940 and 84% of them were units in multi-family buildings (71% were in 2-unit buildings).

**Housing units targeted for inspection**

Schenectady County’s program targets properties in the 12307, 12308, 12303 and 12304 zip codes within the City of Schenectady. Within those areas, the program targets the highest-risk properties, including but not limited to homes of at-risk newborns or pregnant women; units where a child with a blood lead level greater than or equal to 10 mcg/dL resides or resided in the past and now have a child age six or younger, and units adjacent to them; and rental units occupied by refugees or recipients of DSS or Section 8 housing funds. The program also inspects properties because of referral from Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs or other partner agencies and requests from owners or tenants.

**Inspection procedures**

Either the program’s EPA-certified Risk Assessors or staff members from community partner agencies (Schenectady Municipal Housing Authority’s Section 8 Program and the Community Land Trust of Schenectady) conduct the inspections. Since the program began, about half (46%) have been conducted by program staff. Regardless of which agency’s staff conduct the inspections, the protocol is the same. It consists of visual inspection as well as XRF (X-Ray Fluorescence) measurement of lead on painted surfaces. Exterior and interior painted surfaces within the unit as well as all common areas of the property are checked for lead hazards. Inspectors also provide educational materials to residents.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since 2008, the program has funded training for 578 individuals on how to conduct repairs safely.
Ulster County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 29 children were newly identified with blood lead levels of 10 mcg/dL or higher in Ulster County. This represents an incidence rate of 10.1 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results
Between April 2011 and the end of March 2013, the Ulster program inspected 65 homes. The program staff conducted 64 inspections, and an additional two were conducted by, or in cooperation with, their community partners, the Building Safety Division of the City of Kingston Fire Department and the nonprofit Rural Ulster Preservation Company (RUPCO). It referred 17 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 31 children lived. The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 89% of the units, 67% were in multi-family buildings, and 100% were built prior to 1940.

Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

Housing units targeted for inspection
Ulster County’s program targets the 12401 area code, as well as owner-occupied and rental units within all of Ulster County where children have been identified with an elevated blood lead level of 10–14 mcg/dL. Priority is given to those dwellings in which children under six years of age and pregnant women reside. Other high-risk properties identified for inspection include, but are not limited to, properties that are referred by Maternal and Child Health Home Visiting programs, other partner agencies, or code enforcement agencies; properties for which owners or tenants have requested inspections; properties that have been identified by program staff through door-to-door canvassing or observations of deteriorated paint; rental units of recipients of DSS or Section 8 funds; and housing units with a history of children with elevated blood-lead levels and other units in the same building and units in which children with blood-lead levels of 10–14 mcg/dL currently reside. Incentives are provided to enhance landlord and resident participation and cooperation.

Inspection procedures
The program employs a two-tiered strategy which includes both visual assessments as well as XRF inspections conducted by a licensed Risk Assessor. Visual and XRF inspections are conducted by program staff. Partner agencies, including the Rural Ulster Preservation Company (RUPCO) Section 8 inspectors, and the City of Kingston Fire Department code enforcement officers perform visual only inspections. When an exterior-only visual

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\*\* Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
inspection is performed, efforts are made to gain access to the building’s interior to perform XRF measurements of the concentration of lead on painted surfaces. Efforts are made to gain interior access because residents are at higher risk from interior lead hazards, than exterior ones. The program provides a free dust clearance test for compliant property owners after remediation work is completed. When the unit passes the dust clearance test, the case is closed. The program also provides residents and landlords with educational materials and incentives to encourage participation and cooperation.

**Training on lead-safe work practices**

Lead-paint dust created during renovation work can substantially increase children’s exposure to lead. The program works to address this problem by training landlords, home owners, and contractors in lead-safe work practices. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the job site after work to remove any lead-contaminated dust. Since April 2011, the program has provided training for 399 individuals. Between April 2011 and March 2012, 78 individuals were trained in 8-hour Lead Safe Work Practices classes, 58 people attended 4-hour Renovate Repair and Paint Refresher classes, 12 staff at partner agencies were trained in visual lead inspection techniques and 15 Ulster County Dept of Health staff nurses were trained to visually identify lead paint hazards on home visits. From April 2012 to the March 2013, 236 individuals have attended 8-hour Renovate Repair and Paint classes and successfully become certified EPA Lead Renovators.
Westchester County Department of Health
Childhood Lead Poisoning Primary Prevention Program Summary

Program description

Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, behavioral disorders, and other health problems. In 2008, 100 children were newly identified with blood lead levels of 10 mcg/dL or higher in Westchester County. This represents an incidence rate of 3.7 per 1,000 children tested. This program focuses on primary prevention: identifying housing with lead-based paint and removing those hazards before children are exposed.

Program results

Between 2007 and the end of March 2013, the Westchester program inspected 1,217 homes and identified lead-based paint hazards in 768 them. It visited without inspecting an additional 646 homes. Its efforts have already made 321 housing units lead-safe (see figure 1).

The program makes a significant difference in the lives of children and their families. Some children benefit directly because they live in homes in which hazards are found and removed. Others are referred for tests to determine their blood lead level and evaluate whether medical management and additional environmental intervention strategies are needed. Families also receive educational information on lead poisoning prevention and learn what they can do to protect their children from lead hazards. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed.

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Figure 1: Housing Units Inspected and Inspection Results as of March 2013

Figure 2: Number of Children Who Directly Benefited from the Program

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Note: Includes exterior-only activities, interior-only activities and activities that address both the interior and exterior of a unit. As an example, some units inspected and/or cleared may not have undergone an interior assessment and exterior activities in multi-unit buildings may reflect either a single unit or an entire building.
Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 213 children lived, and it referred 221 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 993 children lived.

The homes visited were primarily renter-occupied units in multi-family buildings. Renters lived in 85% of the units, and 86% of the units were in buildings with 3 or more units. About half of the units (49%) were built prior to 1940, and an additional 27% were built between 1940 and 1960.

**Housing units targeted for inspection**

Westchester County’s program targets zip codes 10701 and 10705 in Yonkers; 10550 in the City of Mount Vernon; 10801 in the City of New Rochelle; and 10606 in the City of White Plains.

The program focuses its efforts on housing units that have a history of a child residing in it with a blood lead level at or above 10 mcg/dL and other housing units in the same building. Other high-risk properties identified for inspection include, but are not limited to, properties that are vacant and foreclosed; that are referred by Healthy Neighborhoods Program and/or Maternal and Child Health Home Visiting programs, other partner agencies, or code enforcement agencies; for which owners or tenants have requested inspections; and that have been identified by program staff through door-to-door canvassing or observations of deteriorated paint. The program also provides follow-up inspections, which include educational materials, to residences at which a child’s blood-lead level test result was 10–14 mcg/dL. It also provides incentives to residents to encourage participation in the inspections and follow up.

**Assessment procedures**

A routine assessment includes a visual assessment on the interior of the dwelling unit, plus the building’s common areas and exterior, as is indicated “accessible” to children. If chipping and peeling paint hazards are observed, the Risk Assessor performs an assessment using the XRF (X-Ray Fluorescence) instrument to measure the concentration of lead on painted surfaces. If the home has a child with a Blood Lead Level of 10–14 ug/dL, the Assessor takes dust wipe and water samples, if no lead-based paint hazard is found using the XRF.

**Training on lead-safe work practices**

In 2009 and 2010, the Westchester County Lead Primary Prevention Program conducted a Lead-Safe Work Practices Program that trained landlords, home owners, contractors, and realtors in lead safe work practices. With the advent of the EPA’s RRP requirement in October of 2010, attendance to this class dropped off significantly to the point where the class had to be eliminated. Subsequent to that, however, the Primary Prevention Program has produced 3 lists of RRP certified contractors in the County: one for the Southeastern part of the County, one for the Southwestern part of the County, and one for the Northern part of the County. These lists are arranged so that the geographical area covered by these listings overlaps slightly, making full coverage for contractor listings available to a resident in any part of the County. The Program also provides a list of EPA certified trainers so that landlords and homeowners can get themselves or their crews RRP trained.