

National Center for Healthy Housing

New York State's Childhood Lead Poisoning Primary Prevention Program

GRANTEE IMPACT SUMMARIES

October 2007-March 2012

Prepared for the New York State Department of Health
Bureau of Community Environmental Health and Food Protection
Contract #C027566

Draft: May 1, 2013

Albany County Department of Health Childhood Lead 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 2012, the Albany program inspected 574 homes and identified lead-based paint hazards in 374 of these homes. Its efforts have already made 242 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.

Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 353 children lived, and it referred 581 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 852 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

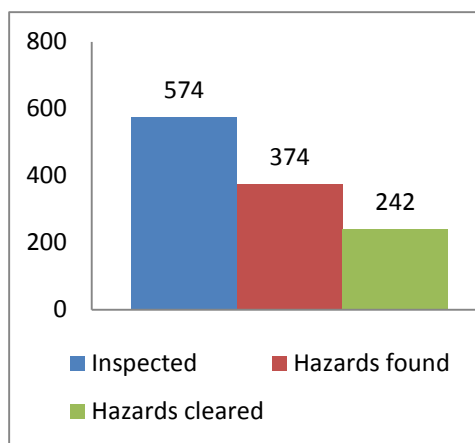
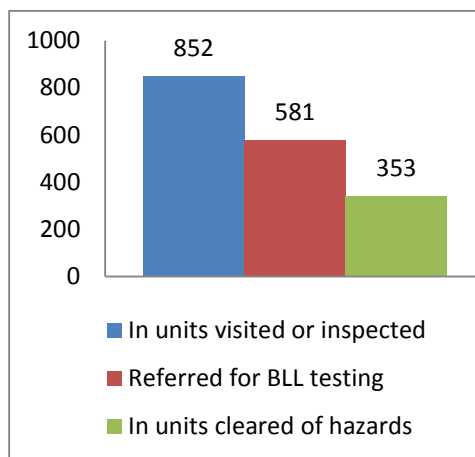


Fig. 2. Number of Children Who Directly Benefited from the Program



The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 90% of the units, 91% were built prior to 1940, and 88% were in multi-family buildings (65% 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 or requests from owners or tenants and units identified through 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. 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 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 2012, the Broome program inspected 270 homes and identified lead-based paint hazards in 258 of these homes. Its efforts have already made 72 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.

Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 109 children lived, and it referred 287 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 333 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

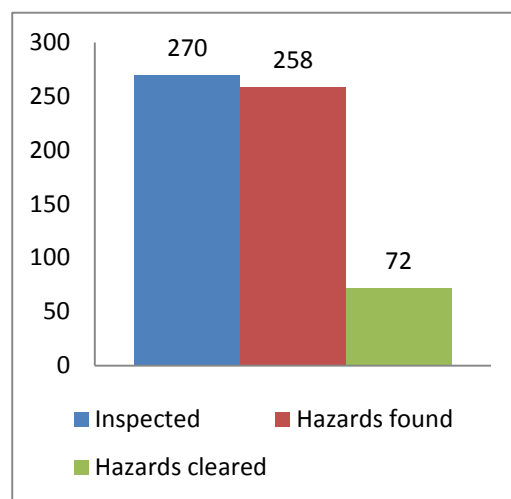
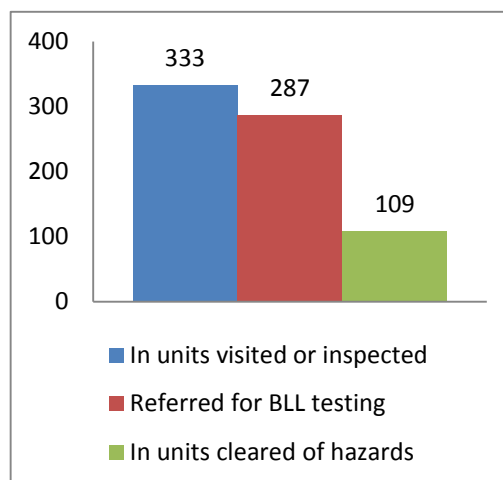


Fig. 2. Number of Children Who Directly Benefited from the Program



The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 73% of the units, 89% were built prior to 1940, and 88% were in multi-family buildings (51% 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 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 2012, the Chautauqua program inspected 267 homes and identified lead-based paint hazards in 242 of these homes. Its efforts have already made 126 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.

Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 151 children lived, and it referred 41 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 349 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

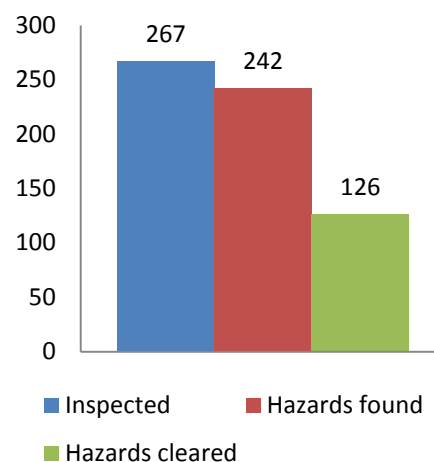
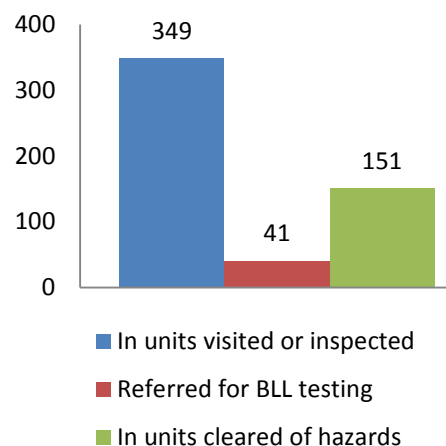


Fig. 2. Number of Children Who Directly Benefited from the Program



The homes visited were primarily renter-occupied units in older buildings. Renters lived in 72% of the units, and 93% were built prior to 1940. The majority were either single-family homes (38%) or in 2-unit buildings (43%).

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 Primary Prevention Program Summary

Program description

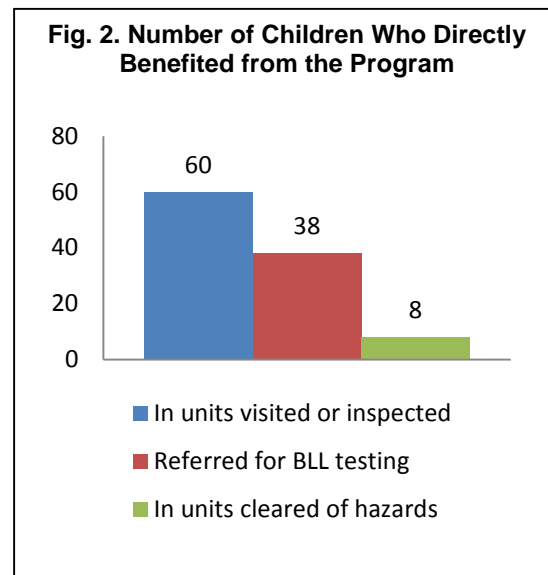
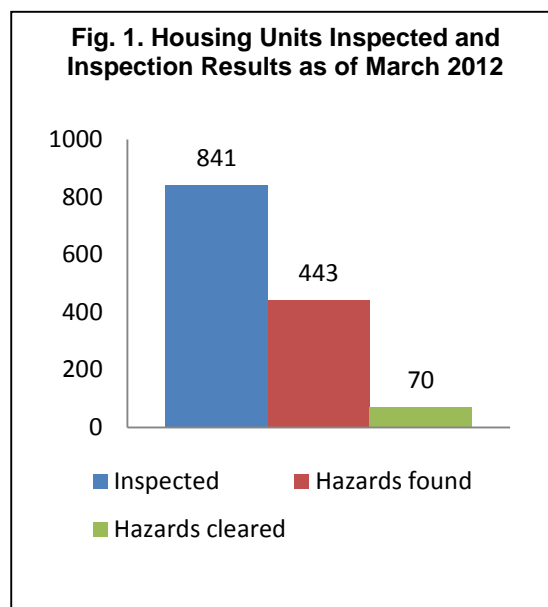
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, 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 2012, the Dutchess program inspected 841 homes and identified lead-based paint hazards in 443 of these homes. Its efforts have already made 70 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.

Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 8 children lived, and it referred 38 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 60 children lived. Although the homes visited were similar in being predominantly older homes (89% were built prior to



1940), they represented a range of occupancy conditions and building types. Nearly half (45%) were renter-occupied; the others were owner-occupied (19%) or vacant (36%). The majority (78%) were in multi-family buildings, while 22% 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. Since 2008, the program has funded training for 475 individuals on how to conduct repairs safely.

Erie County Department of Health Childhood Lead 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 2012, the Erie program inspected 3,917 homes and identified lead-based paint hazards in 3,007 of them. Its efforts have already made 1,538 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.

Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 267 children lived, and it referred 226 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 926 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

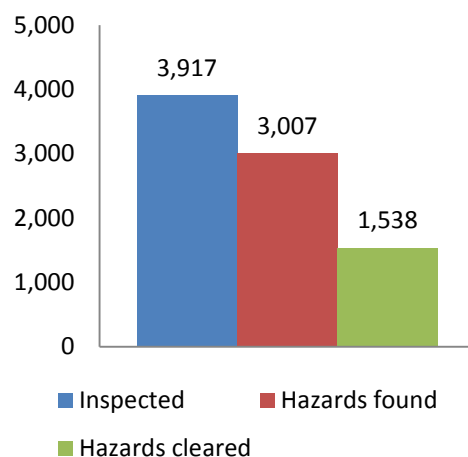
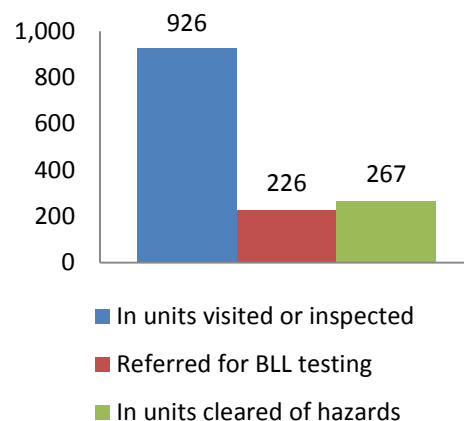


Fig. 2. Number of Children Who Directly Benefited from the Program



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 (44% and 56%). Almost all (98%) were built prior to 1940.

Housing units targeted for inspection

Within Erie County, the program operates in those areas within the zip codes 14215, 14213, 14212, 14211, 14209, 14208, 14207 and 14201 that the Erie County Commissioner of Health has designated as an “area of high risk.” 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 Primary Prevention Program Summary

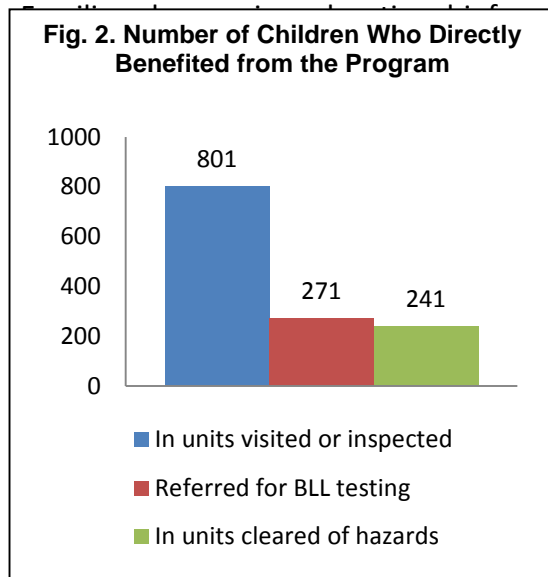
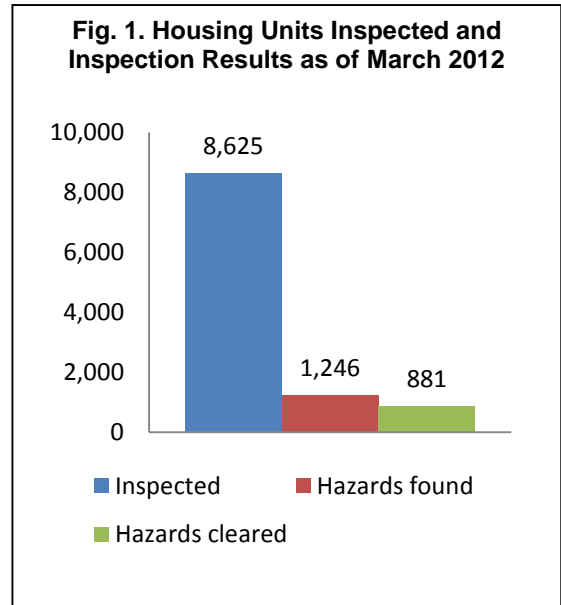
Program description

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 2012, the Monroe program inspected 8,625 homes and identified lead-based paint hazards in 1,246 of them. It visited without inspecting an additional 630 homes. Its efforts have already made 881 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.



ation on lead
ey can do to
. In addition,
o might live in
from having
property
m housing
eferred
levels
pected
ren lived.

The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in

95% of the units, 84% were built prior to 1940, and two-thirds of the homes were in multi-unit buildings (28% were in 2-unit buildings and 40% 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

Program Contact: Dawn Hyde, Associate Public Health Sanitarian | Phone: 585-753-5579 | E-Mail: dhyde@monroecounty.gov

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 and adjacent units, homes of refugees, and licensed group family day care homes and family day care homes.

Inspection procedures

Code enforcement officers conduct a visual inspection for deteriorated paint above de minimis¹ 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.

¹ 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).

Niagara County Department of Health Childhood Lead Primary Prevention Program Summary

Program description

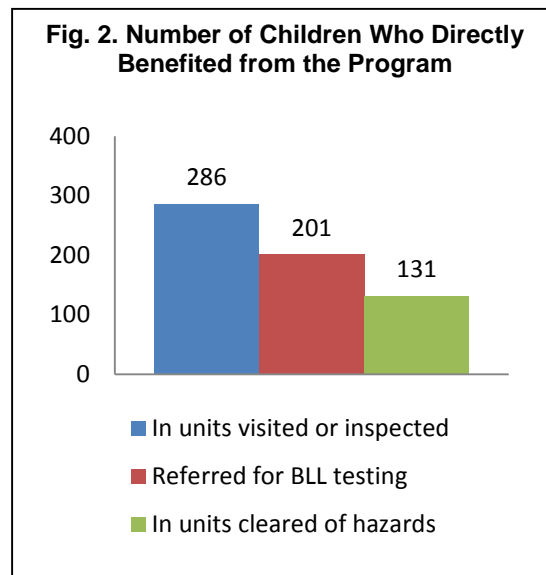
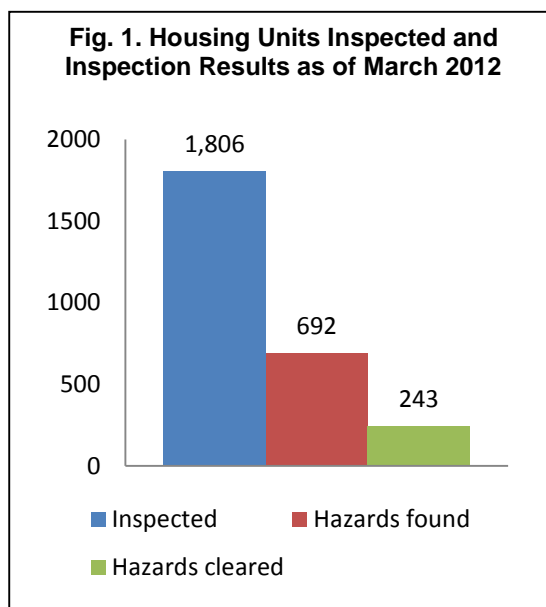
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, 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 2012, the Niagara program inspected 1,806 homes and identified lead-based paint hazards in 692 of them. Its efforts have already made 243 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.

Since 2009, the program has worked with property owners to remove lead-paint hazards from housing units in which 131 children lived, and it referred 201 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 286 children lived.



The homes visited were primarily in older buildings: 78% were built prior to 1940. More than half (51%) of the units were owner-occupied, and the majority of homes (63%) were single-family units. About one-fourth (26%) lived in 2-unit buildings.

Housing units targeted for inspection

Niagara County's program targets housing in the zip codes of 14301, 14303, and 14305 in the city of Niagara Falls, with a special emphasis on census tracts 202, 204, 205, 206, 209, 213, 212, 211. Within these areas, program staff (one Public Health Sanitarian and an Environmental Health Aide) canvass the neighborhood door-to-door. If there is no answer, staff make 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.

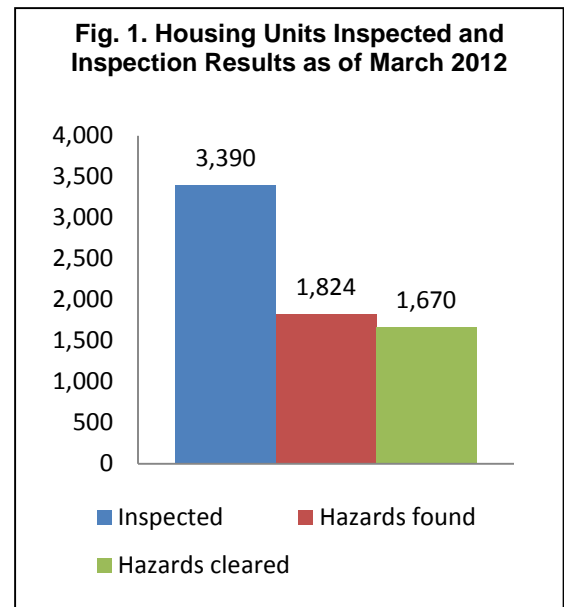
Training on lead-safe work practices

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 Primary Prevention Program Summary

Program description

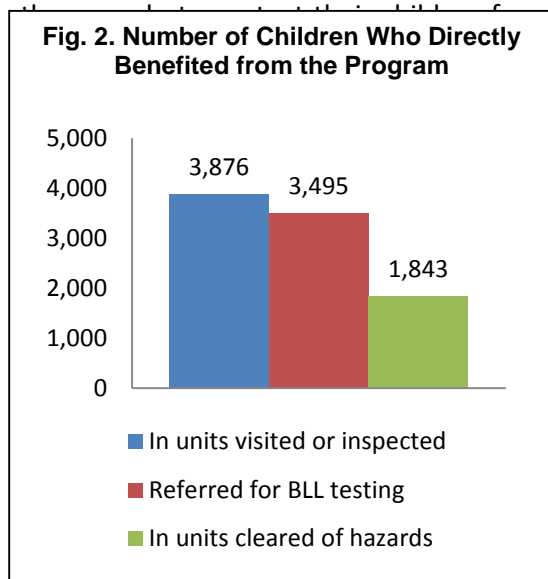
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, 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 2012, the New York City program inspected 3,390 homes and identified lead-based paint hazards in 1,824 of them. It also visited an additional 161 units without conducting inspections. Its efforts have resulted in the safe remediation of lead paint hazards in 1,670 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. Families also receive educational information on lead poisoning prevention and learn what



lead hazards. children who benefit from

property housing referred levels cted ren lived.

older, multi- ngs were built three or more

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 3 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 the Orders have been closed for over a year and, in a building-wide canvass of those buildings, offering to conduct inspections in apartments where there is peeling paint and a child under 6 years of age;
- conducting inspections in the apartments of buildings that are being screened for forgivable loans from the HUD Lead Hazard Control grant; and
- responding to tenants’ complaints of work that has disturbed painted surfaces and generated uncontained paint dust and debris in the apartments and common areas of residential buildings that house children less than 18 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, regardless of condition. For apartments in buildings being screened for forgivable loans from the HUD Lead Hazard Control grant, the inspector conducts a visual inspection for peeling paint and takes dust wipe samples. For complaints of work on painted surfaces which generated uncontained paint dust and debris, the inspector takes dust wipe samples and orders the owner and the contractor to immediately correct the practices which are creating the hazards or to stop work. 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 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 Primary Prevention Program Summary

Program description

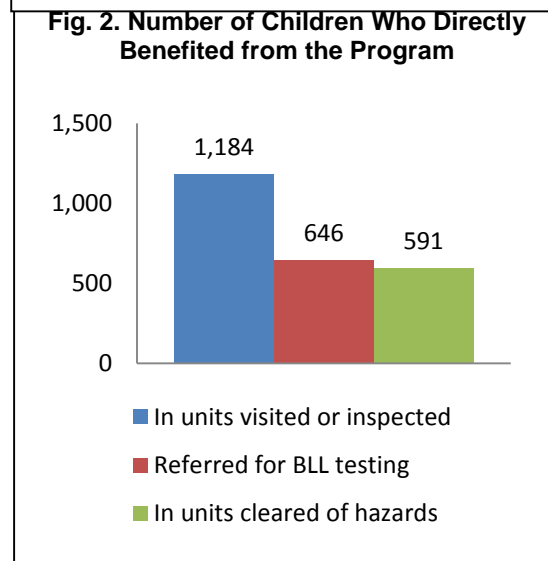
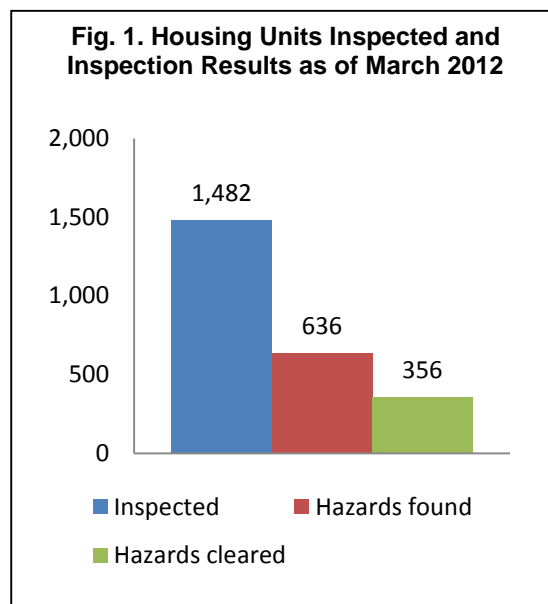
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, 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 results

Between 2007 and the end of March 2012, the Oneida program inspected 1,482 homes and identified lead-based paint hazards in 636 of them. Its efforts have already made 356 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 in which 591 children lived, and it referred 646 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 1,184 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 76% of the units, 87% were built prior to 1940, and 81% 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 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, 125 children were newly identified with blood lead levels of 10 mcg/dL or higher in Onondaga County. This number represents an incidence rate of 11.6 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 2012, the Onondaga program inspected 1,272 homes and identified lead-based paint hazards in 1,182 of these homes. Its efforts have already made 771 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.

Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 964 children lived, and it referred 273 children for tests of their blood lead levels (see figure 2). The program inspected housing units in which a total of 1,550 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

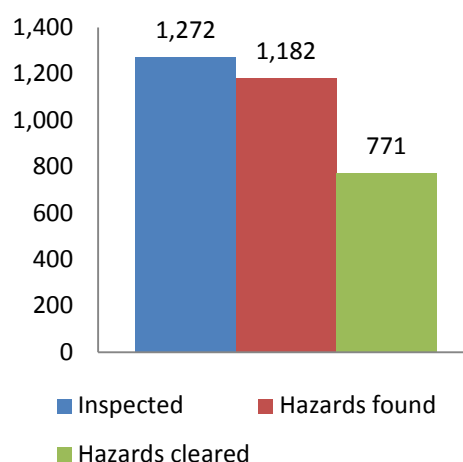
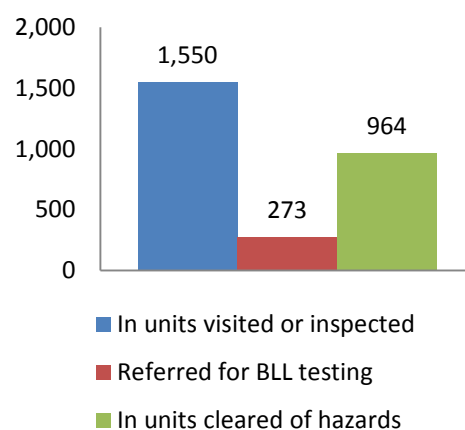


Fig. 2. Number of Children Who Directly Benefited from the Program



The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 88% of the units, 88% were built prior to 1940, and 75% of the units were in multi-family buildings (49% 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, 13023, 13204, 13205, 13207, 13208, 13210 and 13224. 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 or DSS-funded or Section 8-funded recipients; and properties that have been cited at least twice in the past and still have the potential for recurrent lead hazards. 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

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 6 or under resides or regularly visits or a pregnant woman resides at the property, (2) property was built before 1950, (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, 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 infants under 6 months of age 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.

Orange County Department of Health Childhood Lead 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 2012, the Orange program inspected 510 homes and identified lead-based paint hazards in 373 of them. Its efforts have already made 122 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.

Since 2007, the program has worked with property owners to remove lead-paint hazards from housing units in which 174 children lived, and it referred 366 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 674 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

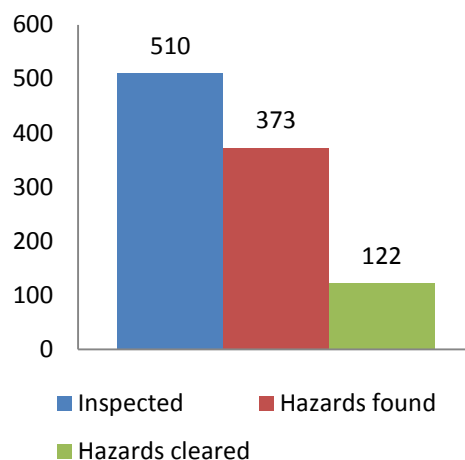
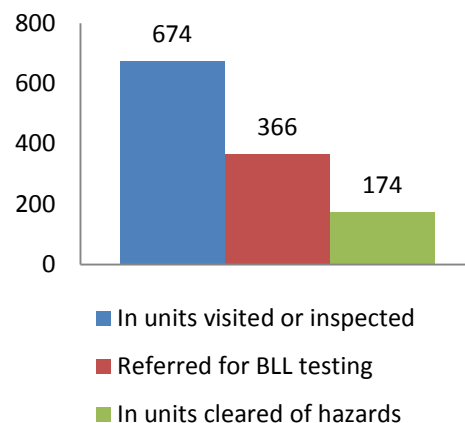


Fig. 2. Number of Children Who Directly Benefited from the Program



The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 90% of the units, 89% were built prior to 1940, and 85% were in multi-family buildings (50% 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, and 14 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.

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.

Rensselaer County Department of Health Childhood Lead Primary Prevention Program Summary

Program description

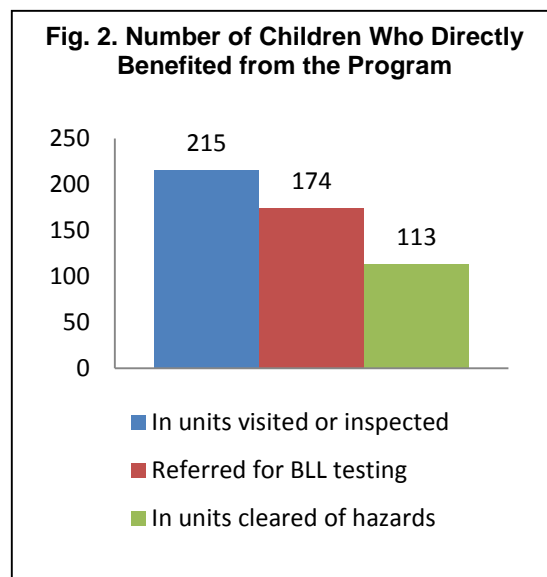
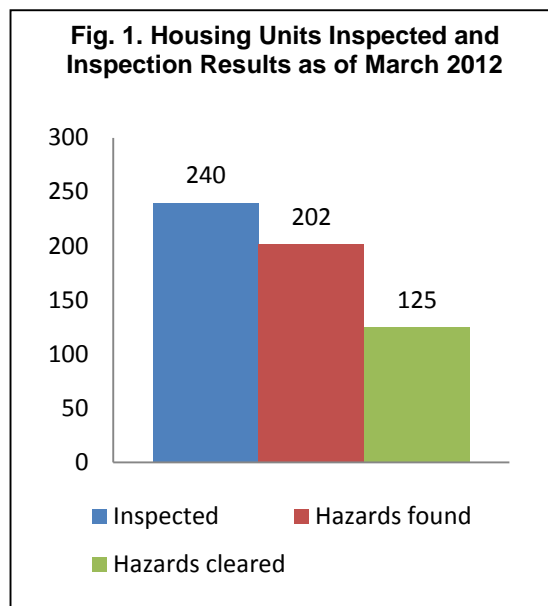
Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger. Lead exposure can result in neurological damage, including intellectual impairment, developmental delays, learning disabilities, memory loss, hearing problems, attention deficits, hyperactivity, 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 2012, the Rensselaer program inspected 240 homes and identified lead-based paint hazards in 202 of them. Its efforts have already made 125 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..

Since 2009, the program has worked with property owners to remove lead-paint hazards from housing units in which 113 children lived, and it referred 174 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 215 children lived.



The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 60% of the units, 84% were built prior to 1940, and 68% 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, or code enforcement agencies; 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.

Schenectady County Department of Health Childhood Lead 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, 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 2012, the Schenectady program inspected 215 homes and identified lead-based paint hazards in 179 of them. Its efforts have already made 110 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.

Since 2008, the program has worked with property owners to remove lead-paint hazards from housing units in which 151 children lived, and it referred 85 children for tests of their blood lead levels (see figure 2). The program visited or inspected housing units in which a total of 285 children lived.

Fig. 1. Housing Units Inspected and Inspection Results as of March 2012

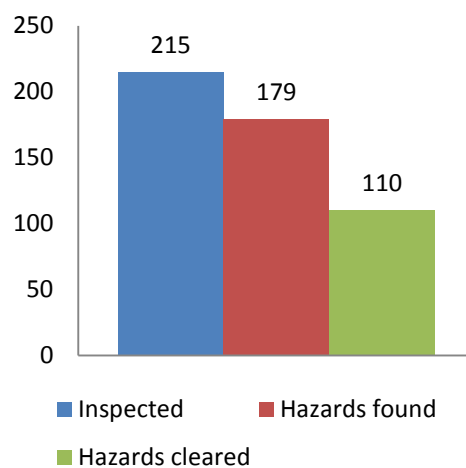
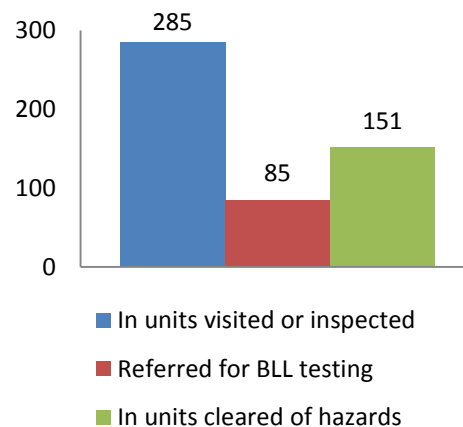


Fig. 2. Number of Children Who Directly Benefited from the Program



The homes visited were primarily renter-occupied units in older, multi-family buildings. Renters lived in 88% of the units, 67% were built prior to 1940 and 84% of them were units in multi-family buildings (72% 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 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 2012, the Ulster program inspected 23 homes. The program staff conducted 21 inspections, and 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 7 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 8 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, with a focus on Midtown Kingston, 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. Some housing units are also inspected at the initiative of code enforcement or other agencies that are deputized by the program.

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 inspections are conducted by program staff, the Rural Ulster Preservation Company (RUPCO) Section 8 inspector, and by the program's primary partner agency, the City of Kingston Fire Department. If hazards are found in the visual inspection, the program issues a Notice and Information to owners of dwelling units, which is very similar to the Notice and Demand but with voluntary compliance. If property owners are compliant, the program gives them a free dust clearance test after the work is completed. When the unit passes the dust clearance test, the case is closed. If property owners fail to respond to the Notice and Information, deviate from the approved work plan, or fail to use lead-safe work practices, the program issues a Notice and Demand, and a Risk Assessor conducts a full lead-based paint inspection with XRF measurement of the concentration of lead on painted surfaces. The program also gives residents educational materials and incentives for 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 2011, the program funded training for 161 individuals on how to conduct repairs safely.

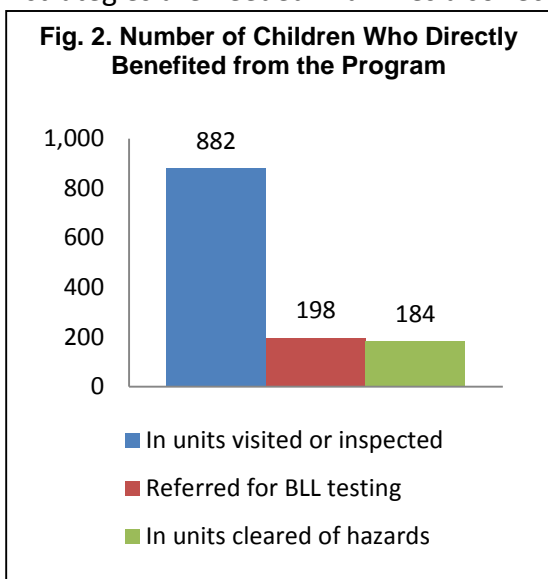
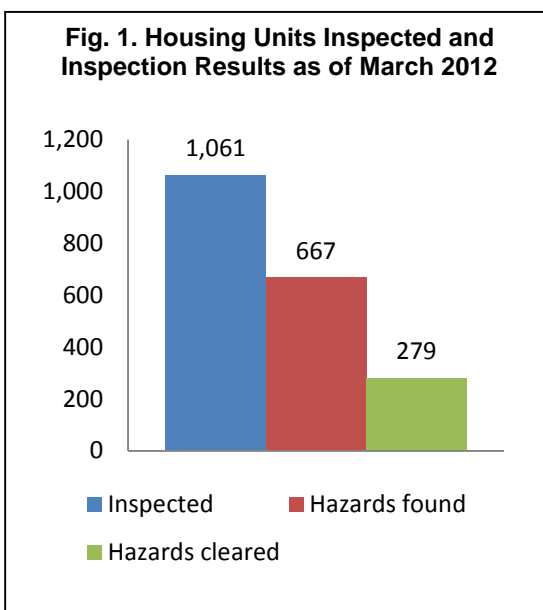
Westchester County Department of Health Childhood Lead Primary Prevention Program Summary

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.

Between 2007 and the end of March 2012, the Westchester program inspected 1,061 homes and identified lead-based paint hazards in 667 them. It visited without inspecting an additional 646 homes. Its efforts have already made 279 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



ing
to protect
ion,
o might live
t from
h property
m housing
eferred
levels
pected
dren lived.

Program results

The homes visited were primarily renter-occupied units in multi-family buildings. Renters lived in 84% of the units, and 87% of the units were in buildings with 3 or more units. About half of the units (47%) were built prior to 1940, and an additional 24% 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.

Inspection procedures

A routine inspection includes a visual inspection for chipping and peeling paint hazards on the exterior and interior of the dwelling unit and the building's common areas. If chipping and peeling paint hazards are observed, the Risk Assessor performs an inspection using the XRF (X-Ray Fluorescence) machine to measure the concentration of lead on painted surfaces. If the home has a child with blood lead level of 10-14 mcg/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

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 113 individuals on how to conduct repairs safely.